

THERAPEUTIC EDUCATION OF PATIENTS

Barcelona, March 26-28, 2014

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“Nothing to disclose”



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What do patients usually ask
you about **medications**?



Do you usually explore
patients' concern/knowledge
about prescribed medications?

How do you do it?

Do you usually provide your patients with any answer or explanation?

How do you do it?



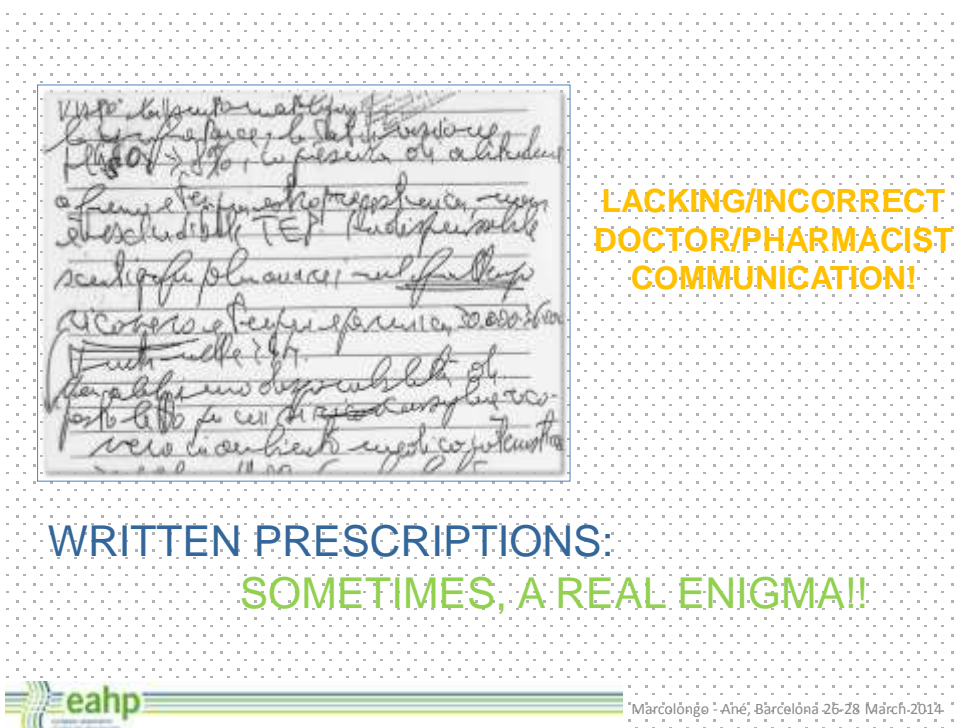
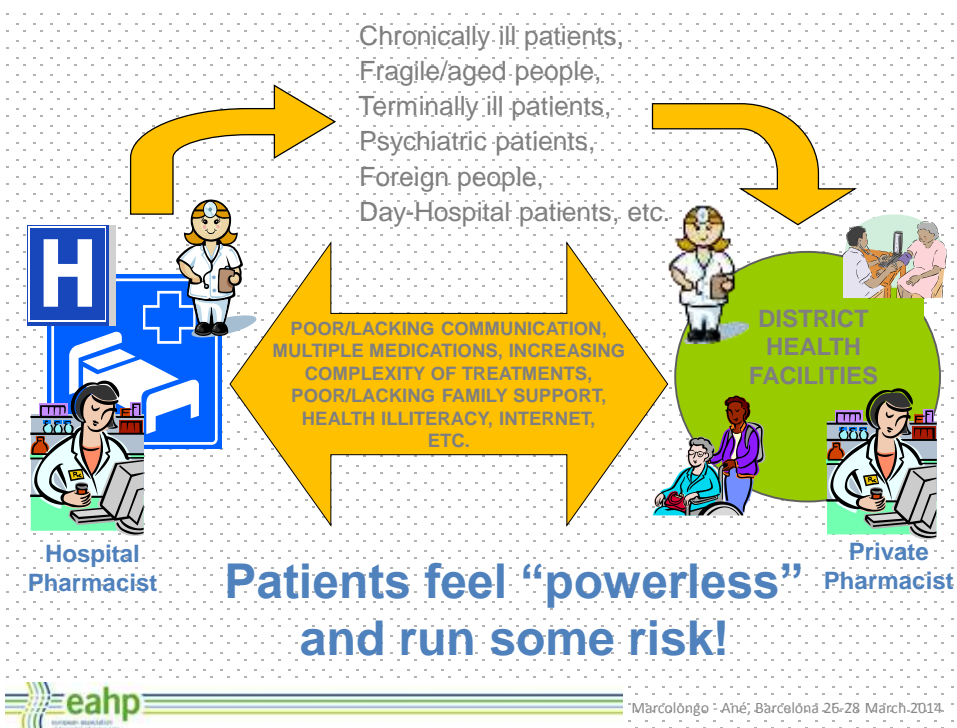
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Do you usually assess what patients understand or retain of your answers?

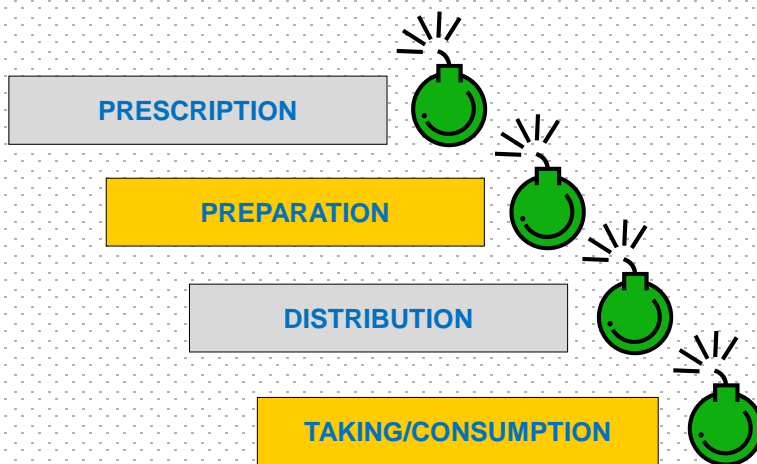
How do you do it?



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CRITICAL POINTS OF MEDICATION CHAIN



O. M. S.



IN WESTERN COUNTRIES:

**8 OUT OF 10 NON-HOSPITALIZED PATIENTS
HAVE A CHRONIC OR A LONG TIME DISEASE**

**LESS THEN 50% OF THEM OBSERVE
MEDICAL PRESCRIPTION!!**

THE COST OF MEDICINES NON-ADHERENCE IN ENGLAND

*Pharmacy Magazine, p. 25, April 2012**

**ESTIMATED COST OF WASTED DISPENSED MEDICINES
EVERY YEAR: ABOUT 300M POUNDS,**

**APPROXIMATELY 1 EVERY 25 POUNDS SPENT ON
PRESCRIPTION**

AROUND 0.3 PER CENT OF TOTAL NHS EXPENSE

*York Health Economic Consortium and the School of Pharmacy, University of London, 2010.



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IN ITALY,

**4 OUT OF 10 HOME ACCIDENTS ARE LINKED TO
MEDICATION ERRORS**

Osservatorio farmaci & salute, Movimento consumatori (ITALY)

**EVERY DAY, IN ITALY, OVER 400 HOSPITAL ADMISSIONS
ARE CONSEQUENCE OF MEDICATION ERRORS**

Istituto Mario Negri

**IN 2005, 52.613 ADVERSE REACTIONS TO MEDICATIONS HAVE BEEN
REPORTED IN ITALY; 4.672 OF THEM WERE ATTRIBUTED TO ERRORS
SUCH AS:**

- ❖ **WRONG DOSE (27%)**
- ❖ **WRONG MEDICATION (22%),**

Italian Clinical Risk Management Society

BUT THERE ARE ALSO:

*oversight, omission, carelessness, misunderstanding, auto-medication,
wrong ingestion, multi drug and conflicting treatments, old age, cognitive
impairment, illiteracy, linguistic barriers, suicide attempts, etc.*



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SOME DIFFICULTIES OF PHARMACIST'S REAL LIFE:

- OLD PEOPLE
- CAREGIVERS
- FOREIGN PATIENTS
- ADOLESCENTS/CHILDREN AND THEIR PARENTS
- GENERIC MEDICATIONS
- UNCLEAR OR CONFLICTING PRESCRIPTIONS

BUT ALSO:

- TIME SHORTAGE/TOO MANY PEOPLE TO ATTEND
- LACKING DOCTOR-PHARMACIST COMMUNICATION
- THE PLACE OF PHARMACIST IN CLINICAL SETTINGS
- AKNOWLEDGEMENT OF INSTITUTIONAL PATIENT EDUCATION ACTIVITY (!?), ETC.



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What do patients usually ask for?

EMPATHETIC LISTENING, FEELING SAFE AND CONFIDENT

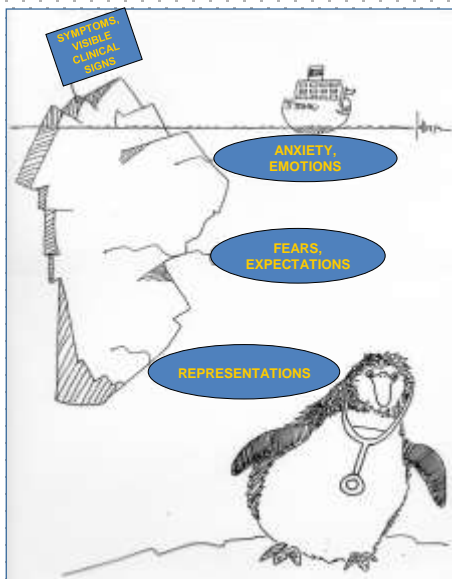
UNDERSTANDABLE ANSWERS

COHERENT, CLEAR AND FEASIBLE PRESCRIPTIONS

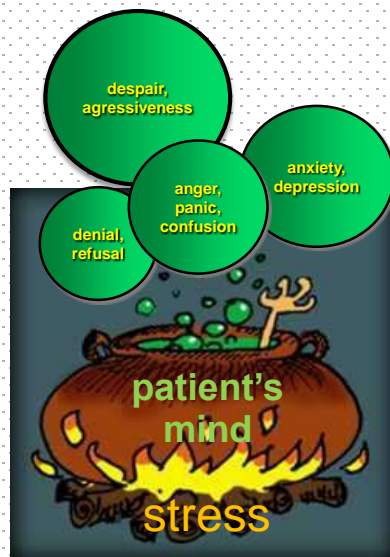
TO KEEP THE RIGHT OF ULTIMATE DECISION



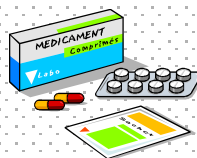
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“BEHIND” THE PATIENT



INTERNET DRIVEN MENTAL REPRESENTATIONS OF PATIENTS

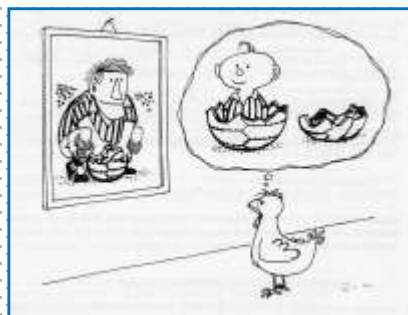


GENERIC MEDICATIONS ...

Nothing about me without me.

Valerie Billingham,

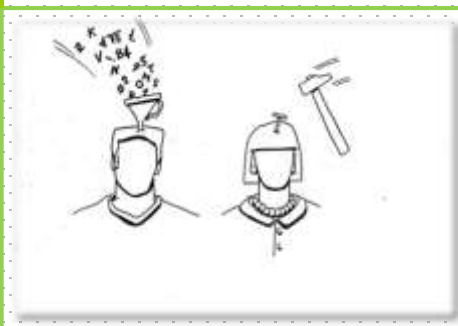
Through the Patient's Eyes.





**ONEWAY
INFORMATION...**

**...CANNOT
EMPOWER PATIENTS!**



**TO PROMOTE
BEHAVIOURAL CHANGE AND
EMPOWERMENT IN PATIENTS**

**WE MUST GO
BEYOND BARE INFORMATION**

**BY
TEACHING/TRAINING THEM**

**TO BECOME AWARE OF WHAT THEY ACTUALLY NEED
TO SELFMANAGE THEIR DISEASE AND TREATMENT**

THERAPEUTIC PATIENT EDUCATION (TPE)

EMPOWERS patients and their families to:

understand (Knowledge - Awareness)
illness and its treatment

carry out (Know-how – Self-management)
therapy in a correct and safe way

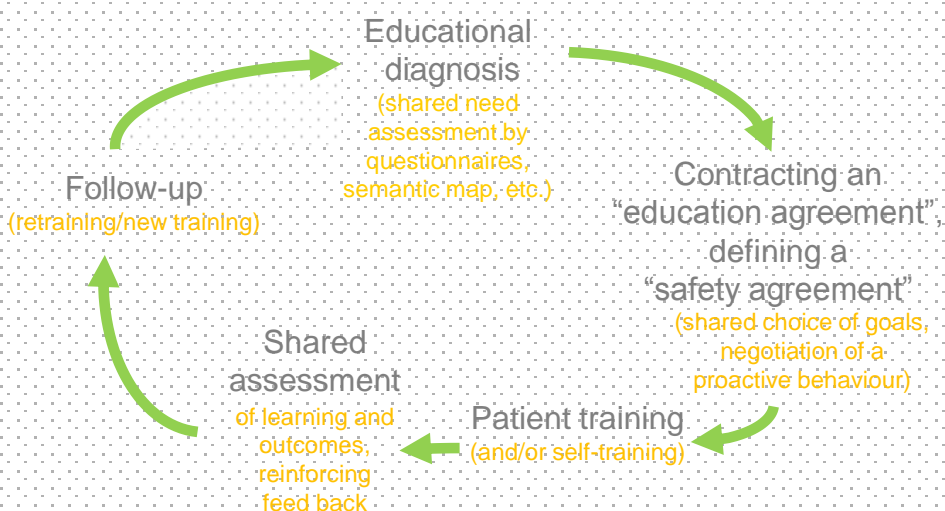
adopt (Attitude – Self-confidence)
a safe and healthy behaviour

preserve and improve (Motivation - Change)
health and quality of life



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TPE: A SHARED AND SYSTEMATIC APPROACH TO LEARNING / EDUCATION



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TPE: some educational techniques/approaches

1 - Individual TPE

(motivational interview, semantic mapping, mentoring, counseling, coaching in person, by telephone, by internet, etc.)

2 - Small groups TPE sessions:

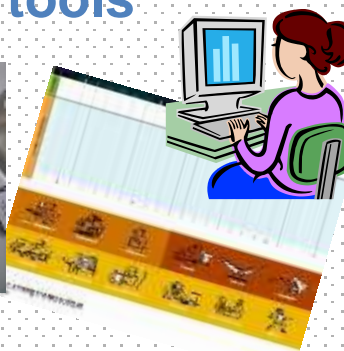
- ✓ Key-words, brainstorming
- ✓ Collective conceptual mapping
- ✓ Focus group
- ✓ Video
- ✓ Role playing
- ✓ Collective games
- ✓ etc.

3 - Family based TPE

4 - Community based (summer camps, health residencies, etc.)

5 - Tablet/smartphone/computer app (serious games)

TPE: some teaching tools



photo, images, video, written memo or summary, therapeutic plan, practical examples, teaching cards, pedagogical questioning, computer/smartphone/tablet app, etc.

How can the pharmacist participate in TPE?

1. Understanding the patient: his/her knowledges, representations, fears, wishes,...
2. Elaborating a specific therapeutic plan negotiated with the patient, his/her habits,...
3. Assessing with the patient what he/she understood and give him/her some take home messages.
4. Assessing with the patient what he/she really does at home.

1/ Understanding the patient:

1. Need to create a self-confident atmosphere

→ Active listening, open questions: some examples

What do you understand about what happened to you?

Which perception do you get about what happen to you?

How do you feel the risk of your illness?

How do you feel the needs of the treatment?

Their benefits?

How do you feel benefits & disadvantages
of your treatment?

1/ Understanding the patient:

2. What does the patient know?



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1/ Understanding the patient:

2. What does the patient know about generics?

Hôpital Nord Laënnec Pharmacie

Hôpital St Jacques Laboratoire Santé publique


Generics

INFO or INTOX ?

Side effects are more frequent with a generic rather than a princeps.

N°2

This sentence is true or false.



Example of **question** cards.

Card Game

I
N
F
O
/
I
N
T
O
X

Hôpital Nord Laënnec Pharmacie


Hôpital St Jacques Laboratoire Santé publique

Generics

Question: Side effects are more frequent with a generic rather than a princeps.

A generic has the same active principles composition than the princeps. Side effects are similar with same frequency. Excipients used (other components as active substance) could be different. You could be allergic to any of the components included in generics or princeps.

N°2



Example of **answer** cards.

1/ Understanding the patient:

3. What is the patient used to do?

The chart displays a 24-hour cycle. The top row is numbered 1 to 24. Below this, there are two rows of icons representing activities and medication times. The first row includes Breakfast, Lunch, Appetizer, Wake-up, Rest, and Bed-down. The second row includes Work, Spare-time, Spare-time, Work, Spare-time, and Sport.

2/ Elaborating a specific therapeutic plan

1. What is it for? How to take the treatment despite habits & constraints (life/treatment/illness)?

NAME	GENERIC	Wake-up	Breakfast	Lunch	Evening	Bed-down	WARNING / INFORMATIONS
IMMUNOSUPPRESSOR							
Cellcept® 1	Prednisone	1			1		1 hour before meal, no grapefruit juice, regular time
Cellcept® 0.75	Eucaliptus				1		1 hour before meal, no grapefruit juice, regular time
Cellcept® 5	Prednisone		2				take it during meal, regular time
ANTI-INFECTIOUS							
Bactrim® 400	Trimethoprim-sulfamethoxazole		1/4				antibiotic, to protect from infectious disease, during meal
CARDIAC TREATMENT							
Taher® 20	Atorvastatin				1		take it during meal, cholesterol treatment
Cardic® 75	Ac. Acetylsalicylique		1				take it during meal, blood thinner
Rivast® 75	clopidogrel		1				take it with a whole water glass, blood thinner
OTHER TREATMENT							
Spécialdiète 5	lactic acid		1				vitaminic complement

Concili: you have to drink at least 2 liter of water per day, be regular in your drugs time taking, to follow a diete no much salted, neither sugar and low fat. You have to do a regular sport activity. In case of doubt, just ask to your doctor or your pharmacist.

2/ Elaborating a specific therapeutic plan

2. Exploring patients' knowledge about side effects. Which one did they already get?

Which one could they get?

- What happens to you?
- With the treatment which drug is allowed, which one isn't?



Developped by GSK – Alliance Médica – Temps Clair.

- How did you manage them? Did it work or not?
Next time will you do the same?...



Developped by GSK – Alliance Médica – Temps Clair.

3/ Assessing with the patient what he/she understood and providing him/her with some easy take-home messages.

Let him/her explain what he/she is going to do.
Let him/her show you how he/she will use the medical disposable items...



Pharmacie Hôpital Antoine Béclière
Hôpitaux Universitaires Paris-Sud (APHP)

What you have to know about generics:
www.afssaps.fr on feb 12th 2014.

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4/ Assessing with the patient what he/she really does at home.

- True-false Quiz, self-administered quiz
- Therapeutic plan
- Narrative,...

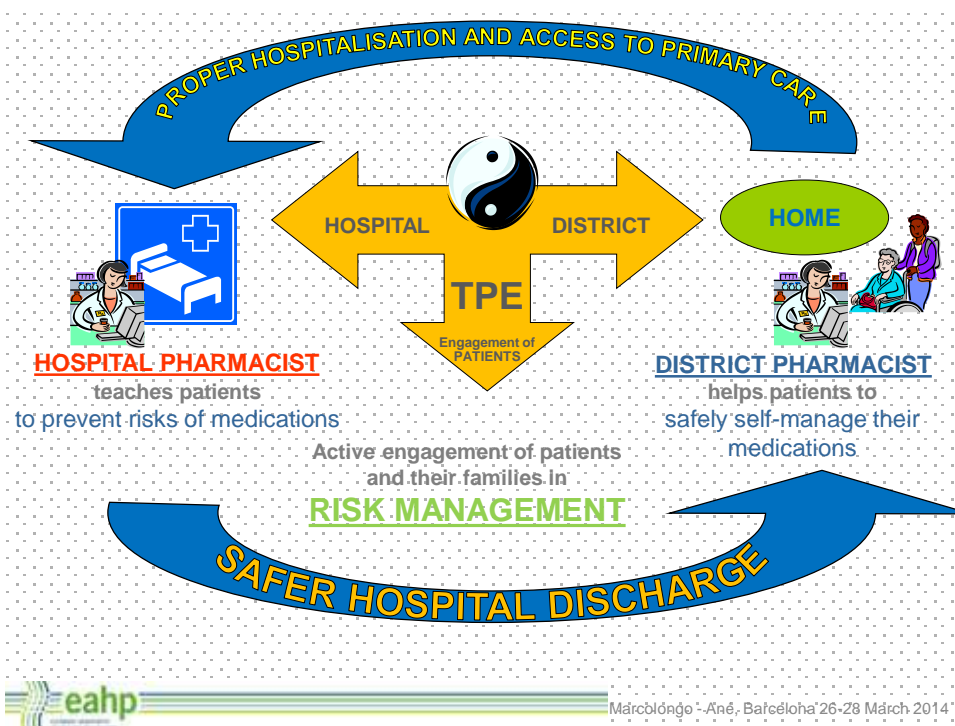
a) Plasmids are found in bacterial cells.	<input type="radio"/> True <input type="radio"/> False
b) The gene for production of insulin is placed in human DNA.	<input type="radio"/> True <input type="radio"/> False
c) Some bacteria naturally produce insulin.	<input type="radio"/> True <input type="radio"/> False
d) Enzymes are used to remove the human gene for insulin.	<input type="radio"/> True <input type="radio"/> False
e) A large amount of insulin can be produced by bacteria.	<input type="radio"/> True <input type="radio"/> False

4/ Assessing with the patient what he/she really does at home.

- True-false Quiz, self-administered quiz
- Therapeutic plan
- Narrative,...

It's important to carry out a « shared » assessment

- | | |
|---|--|
| a) Plasmids are found in bacterial cells. | <input type="radio"/> True <input type="radio"/> False |
| b) The gene for production of insulin is placed in human DNA. | <input type="radio"/> True <input type="radio"/> False |
| c) Some bacteria naturally produce insulin. | <input type="radio"/> True <input type="radio"/> False |
| d) Enzymes are used to remove the human gene for insulin. | <input type="radio"/> True <input type="radio"/> False |
| e) A large amount of insulin can be produced by bacteria. | <input type="radio"/> True <input type="radio"/> False |



SOME CRUCIAL QUESTIONS to be addressed

- Which place for the pharmacist in TPE?
- Which place for the pharmacist in a TPE team?
- Which educational tools for the pharmacist?
- Which is the better way to train pharmacists to TPE?
- Which TPE strategy to target patient's risks?
- Which TPE strategy for generic drugs?
- Which TPE strategy to improve patient's adherence?
- Which TPE strategy for different groups of patients?
- Which incentive/acknowledgement for TPE activity?



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