

CT PHARMACIST P_RN LINK

2017 American Diabetes Association (ADA) Guideline Overview

Every January, the ADA release its *Standards of Medical Care in Diabetes* published in its journal, *Diabetes Care*. Below you will find some of the key points:

- For many non-pregnant adults, an A1c goal of < 7% is reasonable. A more stringent (< 6.5%) or less stringent goal (< 8%) may be reasonable based on specific patient factors.
 - Metformin remains the mainstay of treatment, unless contraindicated or intolerant.
 - Figure 8.1 (p. S66) and Table 8.1 (p.S68-70) provide guidance on medication treatment options.
- Blood pressure goal is < 140/90 mmHg. Treatment options include thiazide-like diuretics, ACE-inhibitors, ARBs, or dihydropyridine CCBs.
- Cholesterol treatment with a statin is warranted in many patients with diabetes. (See the “Lipid Management” table on p.S79 for details.)
- Patients should receive immunizations (annual influenza, PCV 13, PPSV 23, and Hepatitis B) as warranted.
- Patients should complete eye, foot, and renal assessments for monitoring and prevention of complications.
- Support patient behavior change by:
 - Encouraging patients to engage in healthy lifestyle choices, such as healthy eating, physical activity, tobacco cessation, weight management, and stress management.
 - Self-management (medication adherence and self-monitoring of blood glucose and blood pressure, as warranted)

A pdf of the guidelines can be found at:

http://professional.diabetes.org/sites/professional.diabetes.org/files/media/dc_40_s1_final.pdf

Please remember that Marissa is available as a resource via phone or e-mail.

FEBRUARY 2017

Looking for Community Pharmacist Partners

Know of another community pharmacist who wants to expand their practice and engage patients through providing MTM?

We are expanding our network of pharmacists!

Please e-mail Tom or Marissa with the name and contact information of your colleague(s), so we can discuss our partnership opportunity with them.

Noteworthy

The UConn School of Pharmacy is in the midst of a national search for a Medication Management and Safety pharmacist faculty member. This faculty member will be integral in optimizing the PRISM health services research initiative and expanding our existing community pharmacy practice network.

Please share recent accomplishments and noteworthy information with Marissa (marissa.salvo@uconn.edu).

Want to learn more about the PRISM initiative and listen to its webinars?

Visit:

<http://pharmacy.uconn.edu/research/centers-collaboratives/prism/>

Needed: *Your* Update

Please e-mail Tom and Marissa by **March 31st** with an update on your patient enrollment and visit progress, including the following:

- How many initial patient visits were completed
- How many initial visits are scheduled in the coming weeks (through the end of December)
- How many patients have completed at least 1 follow up visit (i.e. 2 visits to date)
- If any patients completed more than 2 follow-up visits, specify for each patient which visit was completed (3rd and/or 4th)

Please continue submitting your de-identified patient data!

Research Team

Primary Investigators

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Pharmacy Students

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Contributing to the Advancement of Pharmacy Practice

Laks Pudipeddi and Frank Boskello had their work “Assessing the Potential Role of the Community Pharmacist in Lowering Blood Pressure in Underserved Communities” presented as a poster at the 2016 American Society of Health-System Pharmacists’ (ASHP) Midyear Meeting in Las Vegas, NV

Objective: Investigate how community pharmacists can engage underserved populations to help lower blood pressure through various services including patient outreach, blood pressure monitoring, and medication therapy management (MTM).

Methods:

- Fliers were created and attached to prescription bags containing anti-hypertension medications, encouraging patients to speak with the pharmacist.
- Using a computer database screening, patients on antihypertensive medications were contacted by phone to discuss blood pressure (BP) control and medication use. Pharmacy students under pharmacist supervision conducted readings and MTM sessions.

Results:

- 254 fliers were distributed.
- Of the 387 phone calls initiated, 50 patients were successfully reached; of which, 16 patients came to the pharmacy for an MTM session.
- 17 drug therapy problems were identified in 9 out of 16 patients.
- Additionally, 19 interventions were made during the MTM sessions.

Conclusions:

- Initiating phone calls to hypertensive patients and attaching fliers to prescription bags can open discussions regarding BP management.
- Engaging patients through MTM allows pharmacists to identify and intervene on drug therapy problems, including barriers to adherence, side effects, and issues regarding medication safety and efficacy.

We’d love to hear what works for *YOU* in implementing MTM!