

ASTHMA PROGRAMME FOR PHARMACIES



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The goal of the Asthma programme for pharmacies is to promote successful treatment of asthma and chronic obstructive pulmonary disease with counselling available at the pharmacies. The programme also takes into consideration the fact that a good treatment of other atopic diseases is a prerequisite for good control of asthma. Counselling is used to ensure the success of pharmacotherapy. At the same time, the patient is encouraged to make lifestyle changes that improve the control of the disease and functional capability, such as increasing physical exercise and quitting smoking.

Patients with long-term medicine treatment often have more contacts with the pharmacy than other health care facilities: for example, a patient with asthma makes approximately a million pharmacy visits merely for the asthma medication. Therefore, pharmacies have good opportunities and also a statutory obligation to guide the patients towards the correct use of their medication. Each visit at the pharmacy offers a natural opportunity for questions and discussions about the pharmacotherapy, for defining the success of the treatment and for supporting the adherence to treatment.

The asthma programme for pharmacies is strongly directed at local multi-professional co-cooperation. The good guidance and counselling provided for the patient are best guaranteed by increasing co-operation between pharmacies and other health-care providers and by clarifying the principles of division of related tasks.

The initial years and management of the asthma programme for pharmacies

The asthma programme for pharmacies was launched in 1997 as a part of **National asthma programme**, which ran between 1994 and 2004. The programme, launched by the Ministry of Social Affairs and Health, had a goal of enhancing the treatment of asthma and, in particular, to lessening the severity degree of the disease. When assessing the accomplishments of the programme, it was stated that the pharmacies had taken good care of their task defined in the programme and that they had brought a significant additional resource.

In 2008, the **National allergy programme** was launched. It is an implementation plan to decrease the disadvantages caused by allergy and asthma and to increase the population's tolerance. **Filha ry, The Organisation for Respiratory Health in Finland, Allergy and Asthma Federation and Finnish Central Organisation for Skin**

Patients are strongly committed to the realisation of the programme, started by the current National Institute for Health and Welfare, at the time known as National Public Health Institute. The allergy programme has been rolled out to pharmacies utilising the structures of the asthma programme for pharmacies. The asthma programme for pharmacies has also been expanded to cover other atopic diseases, in addition to asthma.

The Association of Finnish pharmacies manages the asthma programme for pharmacies and co-operates with background organisations of national programmes. The Association of Finnish pharmacies maintains the asthma contact person registry, keeps the pharmacies up to date on topical subjects, organises training courses and participates in planning them. The Association of Finnish pharmacies collects information from pharmacies participating in the programme, in order to monitor and assess the operations. It also participates in research related to the assessment of national background programmes.

Recommendations for pharmacies

The asthma programme for pharmacies defines guidelines and goals for the role and operation of the pharmacies. Based on them, the actual operational methods and models are created locally.

The pharmacies participating in the programme must have the following:

- Asthma contact person (at least one)
- Demo inhalers and other demo devices, such as autoinjectors for the first-aid of anaphylaxis
- Up-to-date information sources to support the professionals (print and online)
- Material available for the customers to support the treatment (print and online)



The pharmacies promote the successful treatment of respiratory diseases and allergy health together with other health care operators and organisations.

Asthma contact persons in pharmacies

The pharmacies participating in the asthma programme for pharmacies appoint at least one pharmacist or qualified chemist from their staff to operate as the asthma contact person. The contact person is responsible for the local realisation of the programme together with the pharmacy's management.

The tasks of the contact person:

LEARNING about the treatment of asthma, chronic obstructive pulmonary disease and atopic diseases and how to support quitting smoking; maintaining the competence.

SHARING INFORMATION in the work community via in-service training and other methods and to ensure the sufficient level of competence of the entire pharmaceutical staff in the treatment of the above-mentioned diseases and the usage guidance for medicines administered by inhalation.

COOPERATING with other health care providers and patient associations and to operating as a link between the pharmacy and other local actors.

Examples of topics to be discussed/agreed together:

- Local treatment guidelines, operational methods and care pathways
- Supporting the success of pharmacotherapy and follow-up
- Procedures in patient-specific problem situations
- The principles of the renewal of prescriptions when the request is sent from the pharmacy
- When is the customer referred to see a doctor or a nurse
- Encouragement to quit smoking and to become more physically active
- Distributing material to support the treatment
- Sharing information about the local patient association's activities
- Organising common training, theme weeks and campaigns

Local co-operation

The foundation for operation is the co-operation between the pharmacy and other health care providers. The goal is to obtain a durable cooperation model. The operational methods vary depending on the size of the municipality, the structure of the health services offered, the operation of patient organisations and the willingness for cooperation of different parties.

The patient associations are also a natural cooperation partner when implementing the asthma programme for pharmacies. By meeting with different operators and getting to know their tasks and the range of available services, it is easier to chart out how the municipality has organised the prevention, treatment and rehabilitation of diseases, tobacco withdrawal and support for physical exercise.

When local operational models and division of tasks are agreed upon, the consistency and extensiveness of information provided to the patient can be ensured. The asthma contact person or the contact persons of local pharmacies together can be the initiators in the co-operation.

Lifestyle guidance

The pharmacies have, annually, approximately 50 million customer contacts, also reaching those persons who do not use other health care services. This makes it possible to initiate lifestyle changes extensively with small interventions.

The lifestyle guidance related to the asthma programme for the pharmacies supports, in particular, quitting smoking and starting a more physically active life, if the person is not yet sufficiently active for their health. The pharmacy can be used for gathering centralised information about support groups for lifestyle changes operating in the region, peer group activities and other services where the customers can be referred to, if necessary. The asthma programme

for pharmacies highlights that, in particular, the persons with asthma and chronic obstructive pulmonary disease must be asked about their smoking habits and offered support for quitting.

A good physical condition decreases the tendency for asthma symptoms, and physical activity is directly connected to the operational ability of a person with chronic obstructive pulmonary disease. The pharmacies are a natural environment for encouraging the customer to increase physical activity, and for sharing information about the local sport guidance and services.

Supporting successful pharmacotherapy

Inhaled medicines form the foundation for the treatment of asthma and COPD. The administration technique plays a crucial role for the treatment success. A wrong inhalation technique could also result in, apart from unnecessary expenses for both the individual and the society, bad control of the disease and even an escalation of the disease. The patients unfamiliar with the **different modes of action and the principles of correct use** are prone to problems in carrying out the medicine treatment. The asthma programme for pharmacies also pays attention to the counselling of pharmacotherapy for allergic rhinitis, atopic eczema and anaphylaxis attack patients.

The goal is to customise the medicine counselling individually on the basis of the customer's needs. In particular, when the patient is starting new medicine



treatment, the basic information about the medicine use are covered. Also those who have used the medication for a longer time often need a repetition of the information and support in the successful pharmacotherapy from the pharmacy. In addition to medicine counselling, part of the pharmacies offer special services, such as **checking the inhalation therapy or comprehensive pharmacy asthma service**.

When the medicines are delivered, any other medication used by the customer is taken into account in order to notice problems. The customer's lung disease is also taken into account when selecting self-care medication (such as cough medicine or pain-relieving medicine). In addition to medicine counselling, information about non-drug treatment methods is provided.

PHARMACY'S TASKS IN THE ASTHMA PROGRAMME

MEDICINE COUNSELLING

- Counselling related to the pharmacotherapy and the motivation for the correct use of medication.
- Revisions and precisions of the basic characteristics of asthma medicines, in particular the difference between medicines treating the disease or those treating the symptoms.
- Guidance on using inhaled medication and the instruments used.
- Recognising exacerbation periods of the disease and revising the self-care principles.
- Following the implementation of pharmacotherapy, recognising possible problems and solving them together with the customer and the doctor in charge.
- Recognising the patients in need of more efficient treatment and referring them to treatment.
- Giving guidance in self-care and taking the disease and regular medication into account when selecting a suitable self-care product.

LIFESTYLE

- Encouragement to quit smoking.
- Highlighting the significance of physical exercise in the treatment of respiratory disease and the maintenance of operational capability.
- Supporting lifestyle changes and sharing information about local activities.

CO-OPERATION

- Agreeing about local operational methods, together with other health care providers and organisations.
- Distributing material about the disease and its treatment and sharing information about the activities of local organisations.