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## CONFERENCE ABSTRACT

### **Integrating Comprehensive Medication Management services at the primary care level-experiences from the pilot project at the county Health centre Zagreb Centre** ICIC20 Virtual Conference – September 2020

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#### ***Introduction***

Croatia is among the EU Member States with the highest expenditure on medical goods, mainly pharmaceuticals, amounting to 28.5%, compared to an EU average of 18.5%. In addition, a continuous increase in the prevalence of chronic medical conditions with the accompanying polypharmacy has been noted. Hence, chronic patients are at an increased risk of experiencing drug therapy problems (DTPs), thus adding substantial costs to the health care system and exceeding the amount spent on the medications themselves.

#### ***Short description of practice change implemented***

To ensure patients' optimal medication use and improve their clinical outcomes, a comprehensive and systematic management of medications is deemed crucial. Comprehensive Medication Management (CMM) services, officially recognized by the Federal Government of the USA in 2003 (MMA 2003), address this problem. Collaborative practice between pharmacists and general practitioners (GPs), together with patients' active participation in the definition of treatment regimens, plays an important role in the effectiveness of CMM services.

#### ***Aim***

The primary aim of this study is to describe the newly implemented practice management system of CMM services at the county health centre in Croatia.

Targeted population and stakeholders

- patients who have not reached or are not maintaining the intended therapy goal
- patients who are experiencing adverse effects from their medications
- patients who have difficulty understanding and following their medication regimen
- patients in need of preventive therapy
- patients who are frequently readmitted to the hospital

#### ***Timeline***

2016 - 2018 Components of the practice management system adapted to Croatian primary health care setting

2017- The work flow of the patient care process specific for Croatian primary care level defined

2018- Pharmacotherapy counselling service, located in the county health centre, Health Centre Zagreb-Centre, established and started with its work

### ***Highlights (innovation, Impact and outcomes)***

At least one DTP was identified in 81 (96.2%) patients, of which 30.2% had 4 or more DTPs. The most prevalent DTP was "Needs additional therapy" (26.1%), with "Untreated condition" being the most common cause. The second most frequent DTP category was "Dosage too low" (24.5%), followed by "Unnecessary drug therapy" (12.4%) and "Dosage too high" (11.6%).

### ***Comments on sustainability***

As this is a pilot-project, sustainability of the service has not yet been ensured.

### ***Comments on transferability***

Components of the practice management system and protocol on the workflow of the patient care process specific for Croatian primary care level are available to all primary care units in Croatia.

### ***Conclusions (comprising key findings)***

A new pharmacist-led service was successfully piloted and introduced at the Croatian primary health care clinic.

### ***Discussions***

A deeper understanding of work processes and resources needed for initial implementation of CMM were of paramount importance for successful introduction of CMM within a primary care setting.

### ***Lessons learned***

Challenges encountered throughout the process of initial implementation of CMM services were detected; they should be tackled for full implementation of CMM services and need to be taken into consideration in future implementation of this service in other health care settings.