



Exploring the value of clinical pharmacy services for patients with diabetes in underserved settings

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INTRODUCTION

Studies have shown that pharmacists can have a significant impact in diabetes medication management (Smith M, 2009). Pharmacist-based services within ambulatory and community pharmacy settings have resulted in clinical benefits, such as improvement in blood glucose control, cost savings, and decreased hospital admissions (Campbell RK, 2002). Yet, there is little known about how pharmacists can best provide medication therapy management (MTM) or meet the medication-related needs of patients with diabetes in underserved settings.

METHODS

Inclusion criteria

- Men and women > 18 years of age
- Current A1C > 7%
- Current patient at the Birmingham Free Clinic (BFC) or UPMC Matilda Theiss Health Center (MTHC)

Participant recruitment

- Interview participants were identified by the clinical care team and referred to study investigator

Individual interviews

- Semi-structured interview content
 - Caring for diabetes
 - Medicine-taking behavior for diabetes
 - Interaction with pharmacists
 - Role of pharmacist
- Recorded and transcribed
- Conducted until thematic saturation occurred
- Demographic survey administered: age, gender, race, education status

Project exempted by University of Pittsburgh IRB

Analysis:

Thematic analysis conducted

PRELIMINARY RESULTS

Demographics		
	BFC (n=15)	MTHC (n=14)
Age (yrs)	47 ± 8.8	52 ± 15.9
A1C (%)	9.8 ± 2.2	12.6 ± 2.2
Gender		
Male	13 (87%)	6 (43%)
Female	2 (13%)	8 (57%)
Race		
African American	8 (53.3%)	13 (93%)
Caucasian	6 (40%)	1 (7%)
Latino	1 (6.7%)	0
Education Level		
Some High School	4 (26.7%)	0
High School Diploma/GED	7 (46.7%)	6 (43%)
Some college	0	3 (21.4%)
Associate degree	2 (13.3%)	2 (14.3%)
Bachelor degree	2 (13.3%)	2 (14.3%)
Graduate/ Professional Degree	0	1 (7%)

PRELIMINARY RESULTS

Challenges to self-management of diabetes

Blood sugar testing: *"That's the only thing that I gotta get more disciplined with is checking my sugar because I don't check it like I should...that's 10 times worse than taking insulin."*

Complications: *"It's part of the effects of it, and that's the neuropathy, that's the hardest thing to deal with...it's a progressive thing and it is progressing, which is very worrisome."*

Exercise routine: *"I need to exercise more. It's just so hard for me to get into good habits."*

Cost of medicine: *"Affording the medicines is the hardest, not taking it, but affording it."*

Interaction with pharmacist

"They explain medication and side effects if there is any. They go through the whole thing with you every month."

"They keep me alive. Literally, they keep me from going into bad health, losing eye sight, they keep me alive."

Personal relationship with pharmacist

"Because they make sure, they care about you, they care about your well-being...they've known me for 3 years. I've been coming to the same pharmacist for 3 years."

CONCLUSIONS

These results will better inform pharmacists in underserved settings about the needs of diabetes patients in these communities. They may also help to guide implementation of future interventions and development of programs that are aligned with the needs of this patient population.