

Evaluating the effects of a pharmacist-led intervention program on blood pressure control within an employer sponsored healthcare clinic

INTRODUCTION

- Since 2000-2010, blood pressure control increased from 31% nationally to 50%. This is attributed to increased hypertension awareness, appropriate treatment, and achieving target blood pressure ¹
- Blood pressure control, however, is lower among Hispanics and patients <40 years old ¹
- Only 50.1% of patients diagnosed with hypertension are controlled on their current therapy and 51% remain adherent to long term therapy ¹⁻²
- The Stemilt Clinic is an employer sponsored healthcare clinic that serves the needs of the Stemilt Grower employee workforce and their families
- Approximately 32% of all prescriptions dispensed to Stemilt workers are for anti-hypertensives
- Stemilt employs approximately 1800+, including a large, young, Hispanic population, a group at high risk for lower blood pressure control
- Intervention population demographics include:

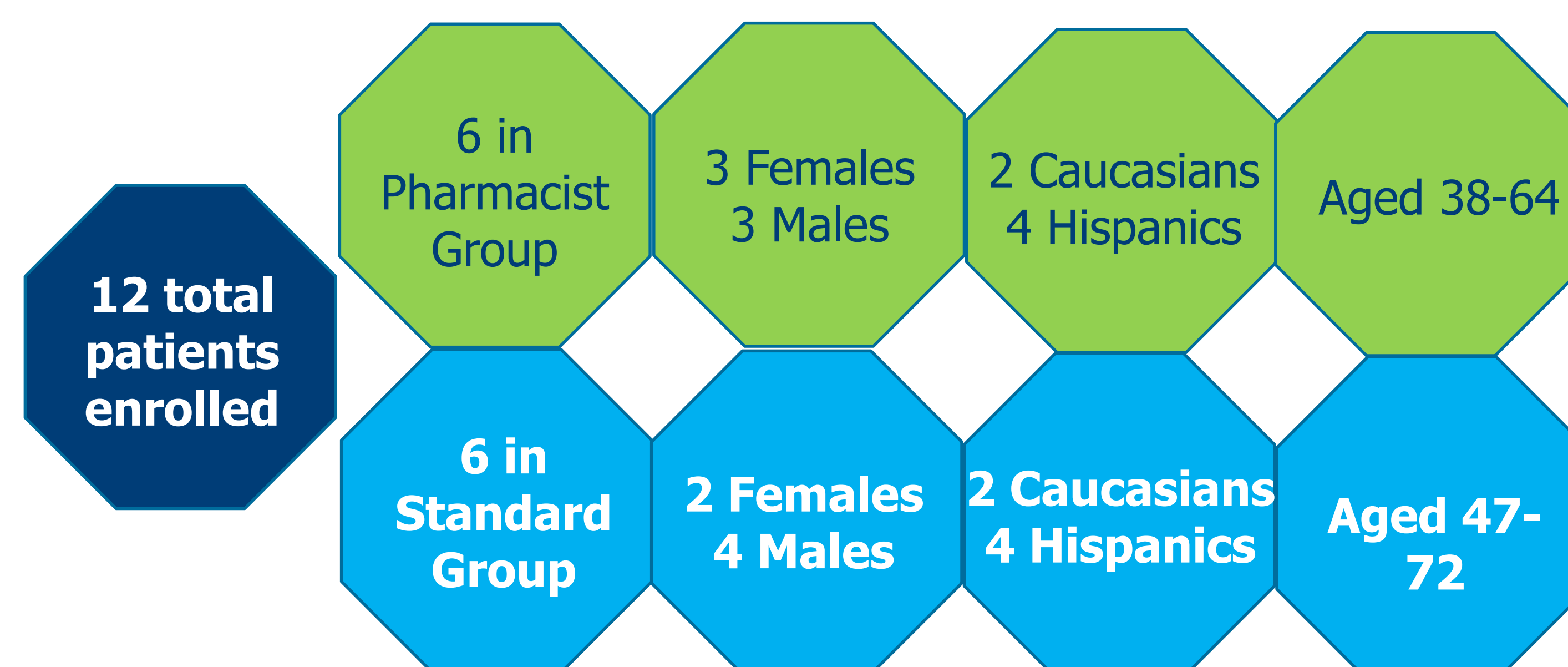


FIGURE 1: Baseline population demographics (n=12).

PRIMARY OBJECTIVE

- To evaluate the effect of a pharmacist-led intervention on blood pressure control by month 3 versus conventional physician follow-up

SECONDARY OBJECTIVES

- To assess medication adherence rates utilizing proportion of days covered (PDC)
- To evaluate the appropriateness of antihypertensive therapy based on JNC8 guidelines

METHODS

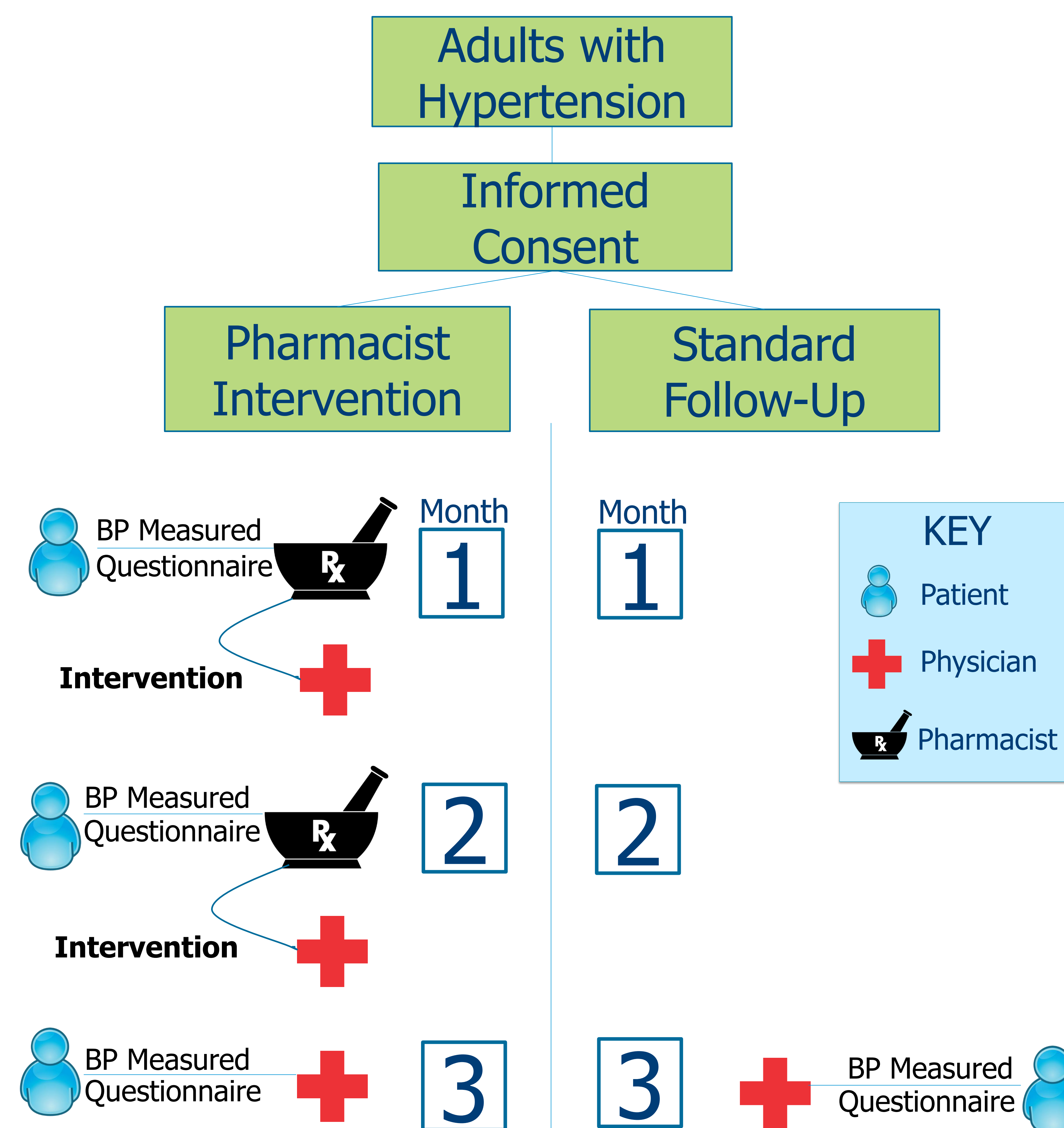


FIGURE 2: Work flow of a pharmacist-led intervention in the clinic.

DATA

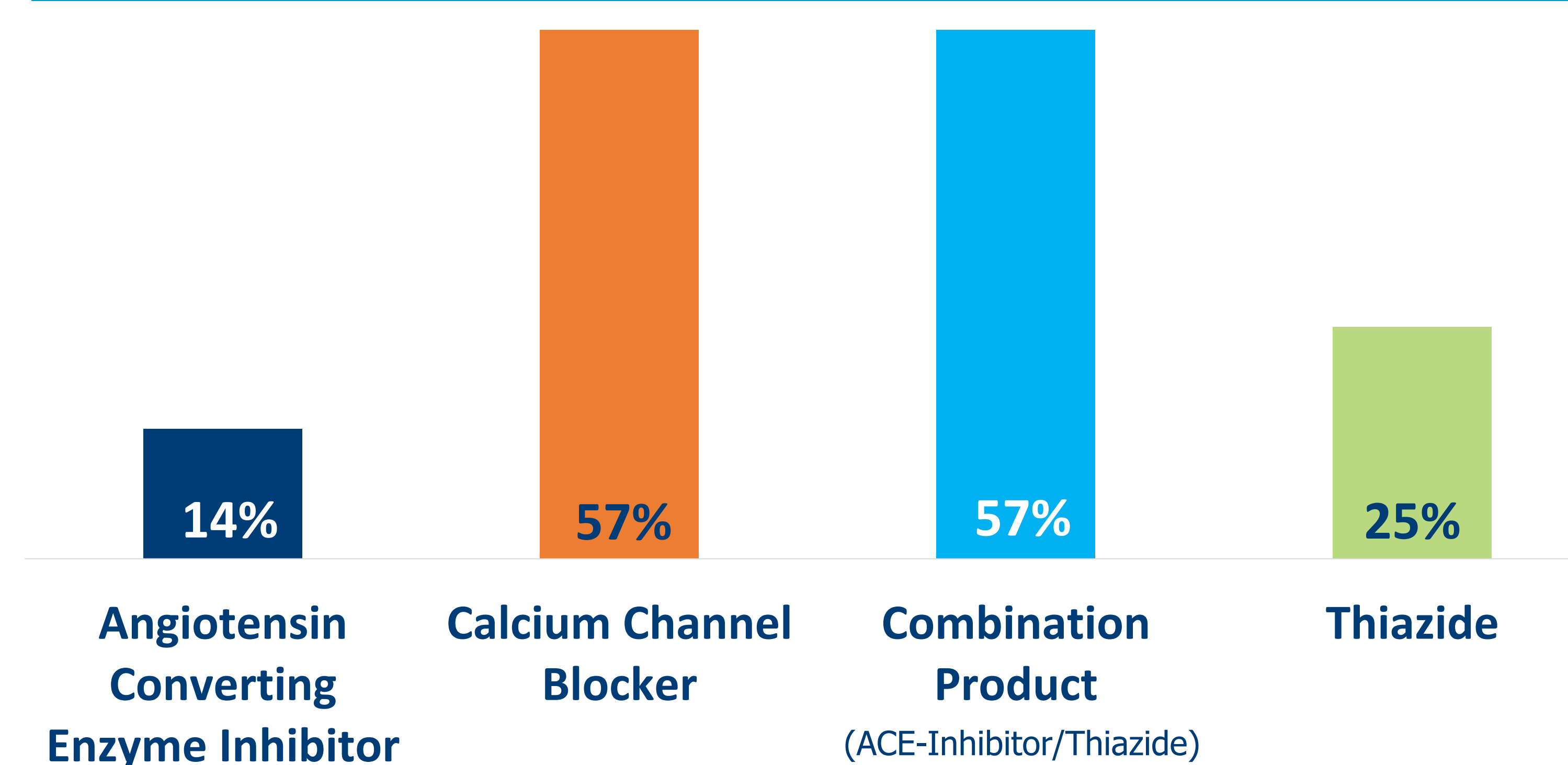


FIGURE 3*: Distribution of prescriptions at the Stemilt Clinic.
*Classes not listed in this figure have not been dispensed to enrolled patients.

	Mean Blood Pressure	95% Confidence Interval
PHARMACIST GROUP		
Systolic	152 mmHg	140-164 mmHg
Diastolic	85 mmHg	69-101 mmHg
STANDARD GROUP		
Systolic	144 mmHg	137-151 mmHg
Diastolic	83 mmHg	71-95 mmHg

TABLE 1: Blood pressure prior to enrollment (n=12).

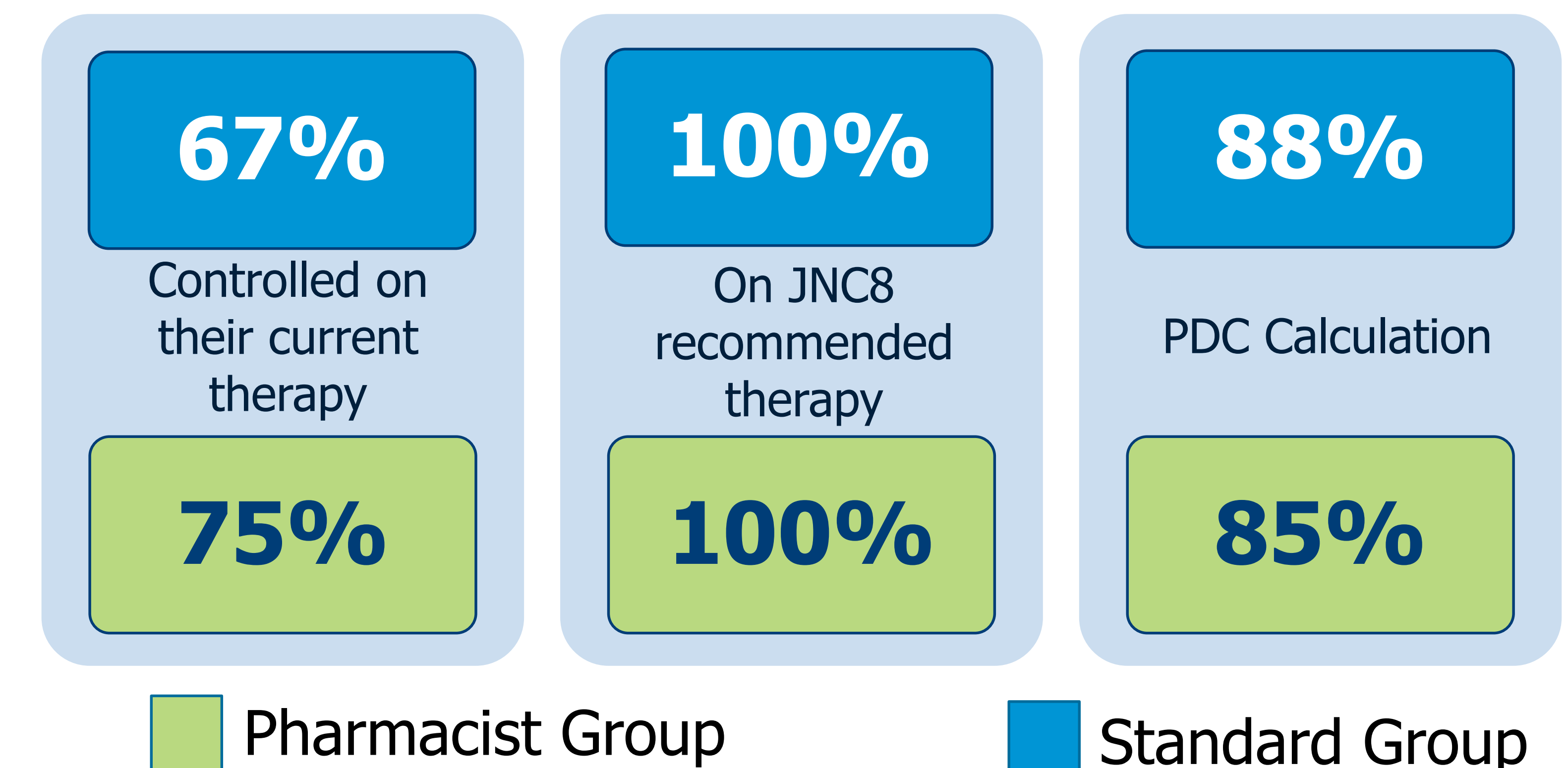


FIGURE 4: Summary of baseline data in enrolled patients (n=12).

DISCUSSION

Currently, the enrolled population has higher medication adherence rates and greater blood pressure control than the national average, despite the risk factors that are present.

Confluence Health greatly encourages family practice physicians to adhere to national guidelines, and the benefits of prescribing appropriate pharmacologic agents are seen. Prior to the study intervention, many of these patients were controlled at baseline, and were prescribed appropriate therapy.

While the preliminary assessments indicate small margins for improvement in blood pressure control, the results of the study will guide integration of a clinical pharmacist within this primary care clinic.

REFERENCES

1. Egan BM, et al. US Trends in Prevalence, Awareness, Treatment, and Control of Hypertension, 1988-2008. *JAMA*. 2010; 303(20): 2043-2050.
2. Centers for Disease Control (CDC). Medication Adherence. 2013. Accessed online Sept 15, 2015.
3. American Heart Association (AHA). Why Blood Pressure Matters. 2014. Accessed online Nov 16, 2015.