Want to do more for patients with skin problems but lack training? Read on...

There is no doubt that community pharmacists can make an important contribution to the care of patients with skin diseases. But, in order to define this role more clearly, information is needed about skin problems community pharmacists commonly see, explains Rod Tucker.

A recent report on a healthcare needs assessment for skin diseases describes the extent of skin disease in the UK and the role of different healthcare professionals in the management of such patients. The report by consultant dermatologist Julia Schofield shows that skin problems are extremely common and estimates that, in general practice, around 24 per cent of the population (13 million people) seek medical advice for a skin problem every year. For a typical GP, this means about 630 consultations per year.

Furthermore, only 6.1 per cent of people (0.8 million) are referred to specialist services. The report also describes consumer surveys that provide insight into the prevalence of skin problems in primary care. One study in 1997 found that, in adults, the second most commonly reported ailments in the preceding two weeks were for skin problems (20.5 per cent) and this figure rose to 34 per cent for children.

A second study in 2005 found that 54 per cent of people said that they had suffered from a skin condition in the previous 12 months. In addition, the survey reported that 69 per cent of people with a skin problem self-care. This large degree of self-care is also reflected by increased sales of over-the-counter medicines for skin conditions, which have increased year-on-year from 2001–07 and currently represent 18 per cent of all OTC sales.

The report comments on how community pharmacists are an important first point of contact for patients with skin diseases and offer a range of services that are potentially beneficial, a view shared by the All-Party Parliamentary Group on Skin and the Skin Care Campaign. Important services provided by pharmacists include advice on self-care, appropriate use of prescription medicines and medicines use reviews. Furthermore, with more pharmacists training to become prescribers and additional treatments for skin problems switched from prescription-only to pharmacy status, the report suggests a greater opportunity for pharmacists to treat more skin conditions.

What is the evidence for the role of community pharmacists in the management of patients with skin diseases? Unfortunately, the report could only find one small study, with 19 pharmacies from 2006 that looked at the range of skin diseases seen by pharmacists. This found that the most common skin problems encountered were head lice (16 per cent), insect bites (13 per cent) and dry skin (10 per cent). The study also found that 58 per cent of pharmacists rated themselves at over 80 per cent (using a visual analogue scale) in their level of confidence in dealing with patients with skin problems.

The report makes two recommendations related to pharmacists. The first is that pharmacists need training in the management of minor skin problems to provide better information to patients who self-treat and clear guidance about when to refer patients to other services. The second relates to pharmacists who wish to undergo further training and accreditation in dealing with patients with skin problems.

There is no doubt that community pharmacists can make an important contribution to the care of patients with skin diseases, a role recognised and supported by other health professionals. However, in order define this role more clearly and, if necessary, to develop pharmacist involvement further, it is necessary to know more about the skin problems which are commonly seen and the level to which pharmacists currently engage with patients who present with a skin problem. Unfortunately, little is known about this area and I am currently conducting a national study to try to answer some of these questions. The study is funded by the Pharmacy Practice Research Trust and will involve the distribution of a self-completion questionnaire to a random sample of over 3,000 community pharmacies. I would be grateful if those pharmacists who receive a questionnaire could help me in this study to capture the views of the profession. Given the potentially large number of patients with skin problems, I believe that, as front-line health professionals, pharmacists should ultimately be able to offer services for these patients, perhaps along the lines of a locally enhanced service. The first step in this process is an exploration of the current levels of provision and the views of pharmacists towards such a greater role. I hope pharmacists can help me in this pursuit.

References

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