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PATIENT PACKS

Clear benefits for patient safety and better use of pharmacy resources — the Royal Pharmaceutical Society’s view

By Kailas Mahadevaiah

According to European Directive (92/27), which came into force on 1 January 1994, all prescribed tablets should be dispensed in clearly labelled original “patient packs”, complete with a patient information leaflet. The directive contains requirements for the labelling of medicines, and guidance on the format and content of patient information leaflets. Those who supply a medicine are responsible for providing this information.

Dispensing patient packs increases patient safety. A complete patient pack ensures that a sealed and properly labelled pack enclosing a patient information leaflet is supplied to the patient. It allows patients to recognise their medicines more easily and be in possession of the required information concerning their medication. The supply of whole patient packs negates the need for blister strips to be cut. Cut blister strips contain sharp edges that are a risk to patients. Smaller sections of cut blister strips can be difficult for patients to remove tablets from and are more easily mixed with other medication or lost. Cutting blister strips can also cause the batch number and expiry date to be removed from the strip making any audit trail impossible. Patient packs remove the necessity for pharmacists, or their support staff, to transfer medicines between containers thus reducing the risk of a dispensing error.

Patient packs generally allow easier recognition of medicines for patients and pharmacists. This improved recognition depends heavily on the design of the pack. The design should present the relevant information clearly, legibly and without ambiguity. It should not rely solely on colour or symbols to differentiate such factors as strength or form. The design should take into account the various orientations that the medicine may be stored in the dispensary. The design also needs to consider any possible similarities with other patient packs that may cause confusion. There should be space incorporated on the patient pack for the dispensing label and in future, a barcode or some alternate system of recognition. This improved recognition of medicines by patients reduces the possibility that they will make errors when taking their medicines. It allows patients to understand their medicines better and, therefore, take them more effectively.

Patients want and should be encouraged to take to take a greater interest and responsibility in the management of their health care. The profession has worked hard to move away from a focus on patient compliance to developing patient concordance. By supplying more information and guidance to patients rather than just instructions, patients are able to make better informed decisions on whether, and how they take their medicines. The patient information leaflet and the information on the packaging are a tool for pharmacists to use in this process. Pharmacists should be aware of information that is not contained in patient information leaflets such as the benefits of the treatment, alternate treatments or the benefit/risk ratio of not taking the treatment. These are important aspects to consider in the counselling of patients.

Pharmacists will also need to be innovative in dealing with sealed packs, e.g., encouraging patients to open a pack in the pharmacy for a first supply of medicine so that they may access the patient information leaflet.

Patient packs make it easier for other health care professionals to recognise patients’ medicines. This is an important aid for health professionals involved in the care of patients in their homes. It can also be important for health professionals involved in secondary care. There are a number of initiatives under way in secondary care that would benefit from the greater use of patient packs. Many hospitals are moving towards a system of using a patient’s own medicines when they are on wards. Patient packs allow pharmacists to assess a patient’s medication on admission more easily. They also aid nurses in helping patients take their medicines during their time in hospital. Another initiative in secondary care is the provision of a 28-day supply of discharge medicines to patients to help in their transfer to primary care. Both of the above initiatives lead to greater convenience for patients and reduced costs to the local health economy.

Another area of increased convenience for patients is the provision of repeat dispensing from pharmacies. The NHS plans for pharmacy want pharmacists to take on a greater role in management of this service. A repeat dispensing service would be more efficient and easier to administer if dispensing took place at monthly intervals using patient packs containing a quantity designed for this purpose.

Repeat dispensing is one of the many new services that the NHS plans envision pharmacists delivering in the future. To undertake these services, pharmacy resources will need to be used more efficiently in order increase the time available for new services. Dispensing medicines in patient packs is a more efficient process and should allow the safer use of pharmacy support staff in the dispensing process. An alternate method to create time for pharmacists has been the automation of the dispensing process. Automated dispensing relies on the use of patient packs and its introduction in pharmacies will be constrained if a large proportion of dispensed items remain outside the method of patient pack supply.

Supply of medicines via patient packs would negate the need for government proposals to photocopy patient information leaflets so as to comply with EU Directive (92/27). Photocopying patient information leaflets carries the risk that an incorrect patient information leaflet may be given to a patient or that the patient information leaflet may not be the latest version. Photocopying or downloading patient information leaflets also places a burden on pharmacy resources, especially in time.

It is estimated that 30 per cent of medicines in the United Kingdom may currently be dispensed without a patient information leaflet or not in a patient pack. The UK is unique among European Union member states in that medicine packs have to be split or that a bulk supply has to be used in meeting prescription requirements. There is a clear benefit to patients from the ending of this practice, both in terms of patient safety and the better use of pharmacy resources. The Royal Pharmaceutical Society would therefore support moves towards patient pack dispensing.

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