

Give us a seat at the primary care table, pharmacists ask

Canadian pharmacists want to be paid for providing in-depth counselling to consumers. But if they are paid for the service, typically at a rate of \$90 per hour, where will the money come from?

The Canadian Pharmacists Association (CPhA) says it has some ideas about potential funding sources for its proposed “wellness program”: the public purse, private insurance and consumers’ pockets.

In June, CPhA President Ron Elliott met with Roy Romanow, head of the Commission on the Future of Health Care in Canada, to discuss the program and other issues. The association is also consulting with provincial ministers of health and insurance companies.

“This is not the same as counselling involving a prescription,” Elliott told *CMAJ*. During the 30-to-40 minute wellness sessions, pharmacists would review medications being taken, discuss disease management and teach people to use devices such as inhalers and blood glucose meters.

In the long run, says Elliott, a pharmacist-run wellness program would save money. “If a pharmacist can help the patient understand more clearly, there will be fewer visits to the emergency room and to the physician’s office. Everyone wins.”

A CPhA report presented to Human Resources Development Canada in May determined that pharmacy is evolving toward “a more clinical role that emphasizes pharmacists’ knowledge of pharmacology to improve patient health outcomes, and away from simple assurance that the drug dispensed is what the doctor ordered.” It urges a “collaborative overlap” between physicians and pharmacists, arguing that this would result in better patient outcomes and lower costs.

Elliott says pharmacists are the most accessible primary health care provider and they are largely an untapped source of advice. He says the major barrier to this expanded role is the current fee structure used to compensate community pharmacists. “Patients tell us that their doctors don’t have the time to explain,” says Elliott, a pharmacist in St. Thomas, Ont. “Because of this they come to see us with a shoebox full of meds they don’t understand.”



Taking the counselling message to the streets

He thinks the wellness program proposed by the CPhA would be most useful for people with chronic health conditions. No studies specifically demonstrate that this type of program is needed, but Health Canada reports that 19% to 28% of hospital admissions for patients over age 50 are due to medication problems. Several Canadian pharmacists already offer counselling services, and Elliott says some insurers cover the cost because the counselling “helps get people back to work more quickly.” In BC, women who have access to emergency contraceptive pills directly from specially certified community pharmacists pay a \$25 consultation fee for professional services, in addition to the drug cost and dispensing fee. In Ontario, a new provincially funded antismoking campaign pays pharmacists for providing counselling. — *Barbara Sibbald, CMAJ*

ON THE NET

Putting a human face on neurologic illness

Neurologic diseases can have a huge impact on patients and those around them.

A new Web site (www.thebrainmatters.org) has recognized this by bringing together a collection of online resources for the general public. And its bona fides are solid — it was created by the American Academy of Neurology Education and Research Foundation (www.aan.com) in an attempt to simplify and organize useful online information.

The site is laid out around 7 major neurologic disorders: stroke, migraine, epilepsy, Alzheimer’s disease, multiple sclerosis, brain injury and Parkinson’s disease. Each segment contains links to peer-reviewed resources on that topic and includes a general link to PubMed, which provides access to more than 11 million citations.



One unique feature of *The Brain Matters!* is that it offers profiles of patients living with neurologic disease. For newly diagnosed patients and their loved ones, this may be one of its most useful characteristics.

In the Alzheimer’s section visitors can read about the real-life experience of Sharon Washington, whose 79-year-old mother was recently diagnosed with that disease. “My mother went from being very independent,” she says, “to being unable to make decisions. Now life is very limited for both of us.”

In the section on migraine, a mother describes how her 7-year-old daughter had trouble convincing her that her headaches were real. “Here was this little girl, in second grade, coming and telling me she had a bad headache. Her head hurt. I’d think, ‘Oh, maybe it’s something else. Maybe it’s an excuse so she doesn’t have to be outside or do her homework.’”

Dealing with a newly diagnosed neurologic disease is frightening and confusing for most patients. Celebrity patients like Canadian actor Michael J. Fox have helped to give these diseases a public face. Now, physicians can recommend a site that will also help patients and their caregivers come to grips with their new reality. — *Michael O’Reilly, mike@oreilly.net*