

Abstract: Poster Presentation

Serena Rix ^{1,3}, Braiden Helluc ², Sharon Marsh ³

Alberta Community Pharmacists: Perceptions of Palliative Care

Introduction: There is a perception that there is an increased desire for palliative care patients to remain at home as long as possible. If true, there is an increasing need for community pharmacists to be involved throughout the disease trajectory.

Method: Ethics approval was obtained. We developed a 10-minute survey aimed at community pharmacists in Alberta to determine their level of comfort in providing service to this distinct patient population. The survey was distributed through the Alberta College of Pharmacists newsletter as a web link to Survey Monkey. It consisted of 8 questions (some multi-part). Free-text comments were collected and pharmacist concerns were classified into 7 themes.

Results: There were 47 responses, of which 42 were complete. Of the complete responses, 72% were practicing in an urban setting, with an roughly equal range of in practice. Over 50% stated they had no education palliative care.

Whilst almost 70% of responders reported being comfortable or very comfortable with using opioids for pain control, only 30% of responders were comfortable or very comfortable with the use of corticosteroids for cancer-related issues, and even fewer, 26%, were comfortable or very comfortable with using neuroleptics for delirium, anxiety and/or nausea. Further, a mere 14% were comfortable or very comfortable discussing options for loss of appetite at end of life.

Encouragingly, 55% of responders were very interested in providing palliative care in the community, and 65% were very interested in receiving more education in palliative care. Accredited courses would be appreciated.

Barriers to providing good palliative care were identified as the need for specialized equipment to produce injectable products and the cost involved must be transferred to the patient unless government agrees to subsidize these services. This model is pharmaco-economically viable as patient remain in community and do not occupy costly and much-needed hospital beds. Adherence to USP 797 was also recognized as an issue.

Other concerns included the need for improved educational material, funding concerns, training to deal with emotions around palliative care and frequent medication shortages, particularly injectables.

Conclusions: Survey results will be used to determine the need for, and optimum content of educational courses and clinical decision support tools to aid community pharmacists in excelling in the delivery of at-home care to palliative patients. We are currently looking for potential partners to help us develop and provide these products and services.

1. Covenant Health
2. Alberta Health Services
3. University of Alberta