Depressed patients can gain from directed MURs

Pharmacists in Bristol have been offering directed medicines use reviews to patients taking antidepressants. Nicola Cree talks to them about the service.

One in five people in the UK suffer from depression according to information from Depression Alliance. Following National Institute for Health and Clinical Excellence guidance on the management of depression issued in 2009, pharmacists at NHS Bristol decided to instigate a directed medicines use review for people taking antidepressant medicines.

The primary care trust believed that patients on antidepressants “were possibly not getting the advice, information and support that that kind of long-term condition really deserved and it wasn’t really observed in the same way that diabetes, heart failure or blood pressure were,” says Haider Al-Shamary, locality pharmaceutical adviser, South Bristol.

Around a third of Bristol pharmacies now have their resident pharmacists trained to offer the service. An educational evening and pack was provided by the PCT and supported by an unconditional grant from Lundbeck. The evening consisted of talks on the treatment and management of patients with depression, along with training on how to conduct the MUR for these patients.

The pack contained a copy of local prescribing guidelines for the area, guidelines on undertaking an MUR and information on side effects caused by antidepressant medicines, as well as information on how pharmacists can help manage these symptoms before the patient returns to his or her doctor.

In addition to offering advice on medicines, pharmacists can also advise patients to seek advice from Rightsteps, a confidential psychological therapies service.

Working together

The aim is to encourage GPs to refer patients to pharmacists for an MUR, says Mr Al-Shamary. By enabling clinicians, pharmacists and patients to work together, the PCT hopes to tackle problems regarding concordance and adherence, he says.

The PCT has developed a leaflet for GPs to give to patients when prescribing an antidepressant for them. The leaflet provides information on antidepressants and contains a form for patients to complete if they would like to have an MUR. MURs can be conducted by telephone or in the pharmacy and take around 15 minutes. Pharmacists are paid the same rate as they would be for a standard MUR.

Mr Al-Shamary admits that the PCT faced a challenge about initiating the service because GPs believed they offered all the information needed by patients. However, in one of the first MURs that Rav Singh, pharmacist manager at Lloydpharmacy in Fishponds Road in Bristol, conducted he identified a patient who thought they had been provided with all the information by the GP, but as the consultation went on it emerged that he had forgotten or not taken in all the information the GP had provided. “He entered the conversation thinking ‘I don’t see the benefit of this’... and left thinking that it was worthwhile,” he says.

Another memorable patient for Mr Singh is one who reported feeling drowsy and suffering from gastrointestinal side effects on citalopram 40mg once daily. He arranged with the GP to split the dose to twice daily and the patient has since told him that she is now feeling the benefits of the treatment and not suffering from the side effects.

Initial results

In the first 10 weeks of offering the service, pharmacists in nine pharmacies conducted 149 MURs, initiating them when a patient presented with a prescription. Of the MURs, 54 were for patients who were starting their first course of an antidepressant, and 91 were for those already taking antidepressant medicines.

The pharmacists found that only 37 per cent of the patients newly started on an antidepressant had received printed information about their medicines from their GP. In addition, only 32 per cent of those already taking medicines had received printed information.

Pharmacists identified 11 patients who needed referral to their GP — four for drug interactions, five for side effects and two for both. In addition to those referred to their GP another 26 patients were recorded as suffering from side effects. Three patients were identified as not taking their antidepressant properly (one was among those referred to their GP because of side effects). The trust is now considering the use of follow-up directed MURs to encourage adherence to antidepressant medicines in the longer term.

THE MUR

- Establish what antidepressant the patient has been prescribed and any other medicines
- Establish if this is the patient’s first course of treatment
- Establish what information their GP has given them
- Establish if the patient is experiencing any side effects
- Assess adherence
- Check the patient’s understanding of treatment warnings regarding alcohol intake and driving

(Barbara Helgason/Dreamstime.com)