



**Management of uncontrolled
type 2 diabetes with or
without CHD and/or
hypertension**

by a pharmacist prescriber

Project Team

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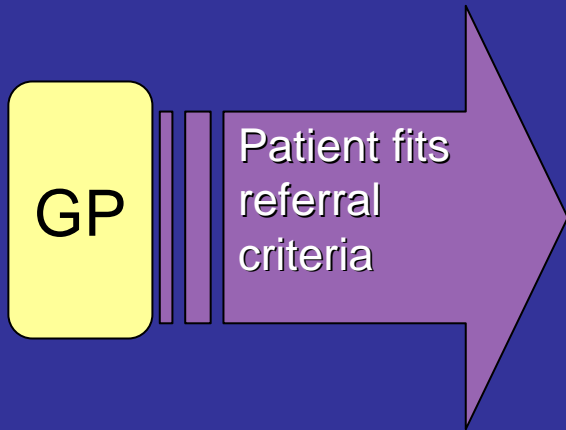
Diabetes Consultant, Leicester Royal
Infirmary

Description of the project (LCWPCT)

- Provision of a pharmacist prescriber led clinic
- 1 pharmacist prescriber
- 4 GP practices in LCWPCT
- Clinic session once a week
- 10 months duration
- Patients selected by GP/Practice Nurse

Patient criteria

- Management of patients with:
 - HbA1c > 8% on diet alone
 - HbA1c > 7.4% on oral medication
 - Total cholesterol > 5.0mmol/l (no CHD)
 - Total cholesterol >4.0 mmol/l (CHD present)
 - Blood pressure > 145/85
 - Blood pressure >135/75 (renal disease present)

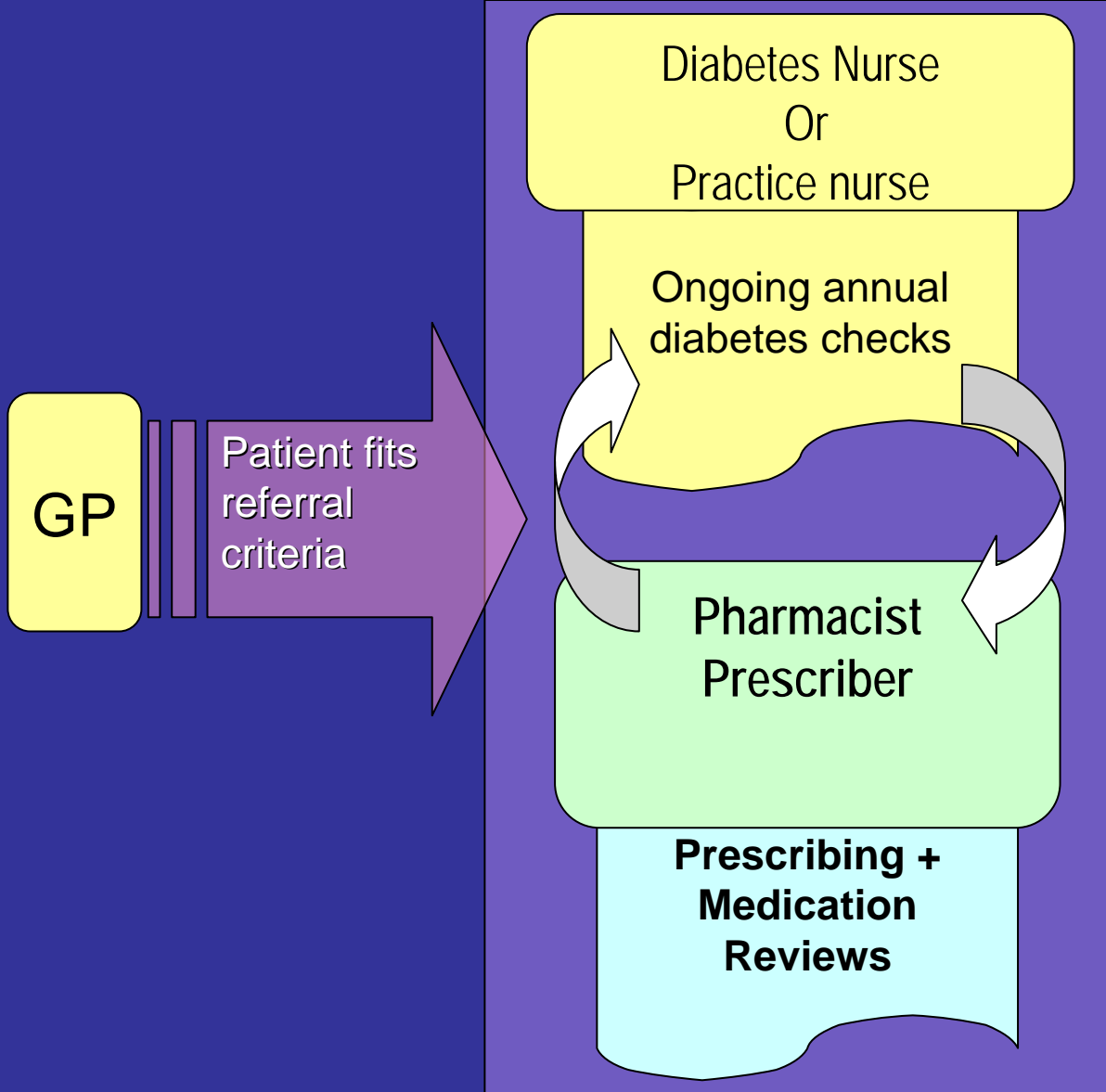


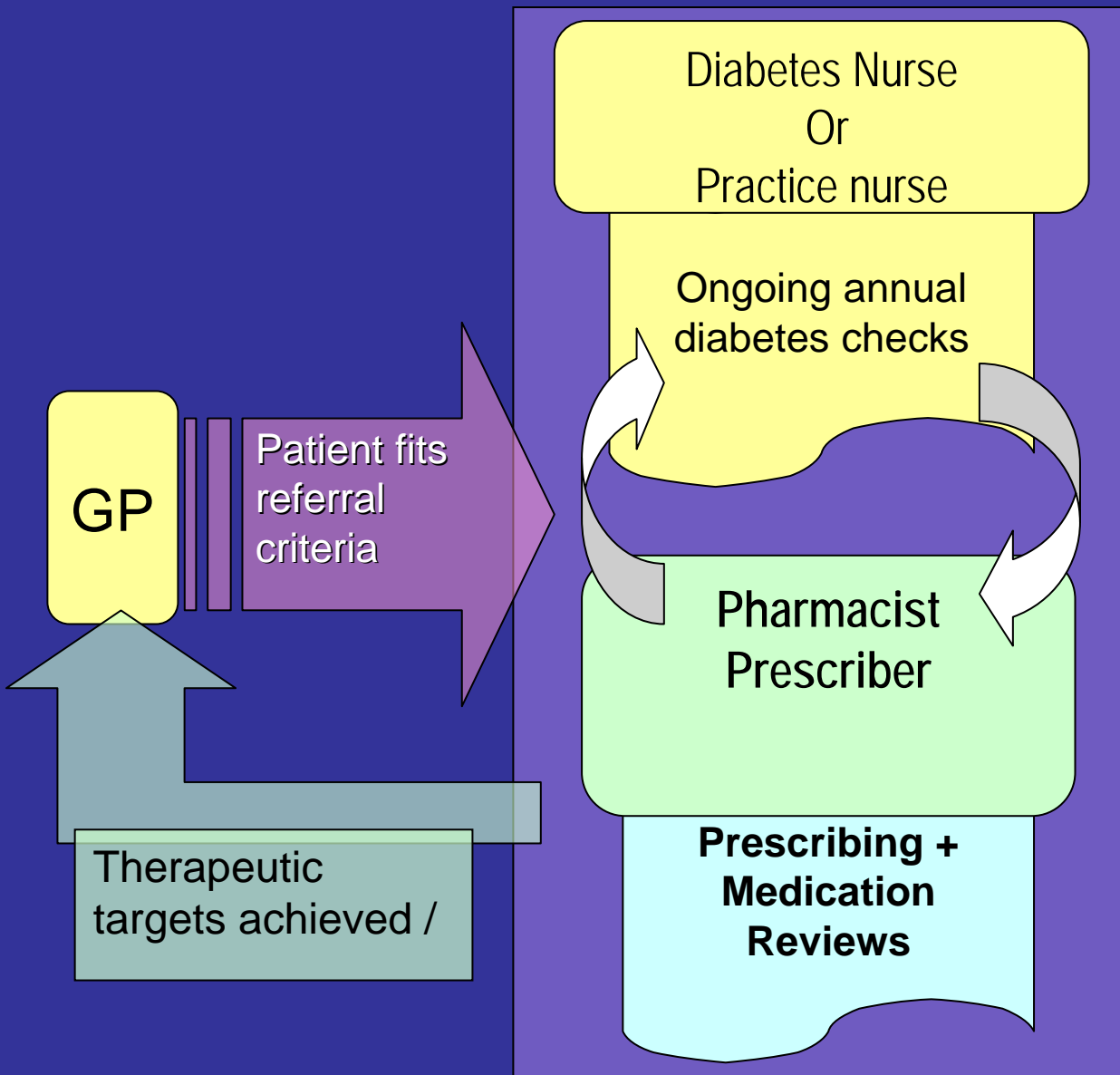
GP

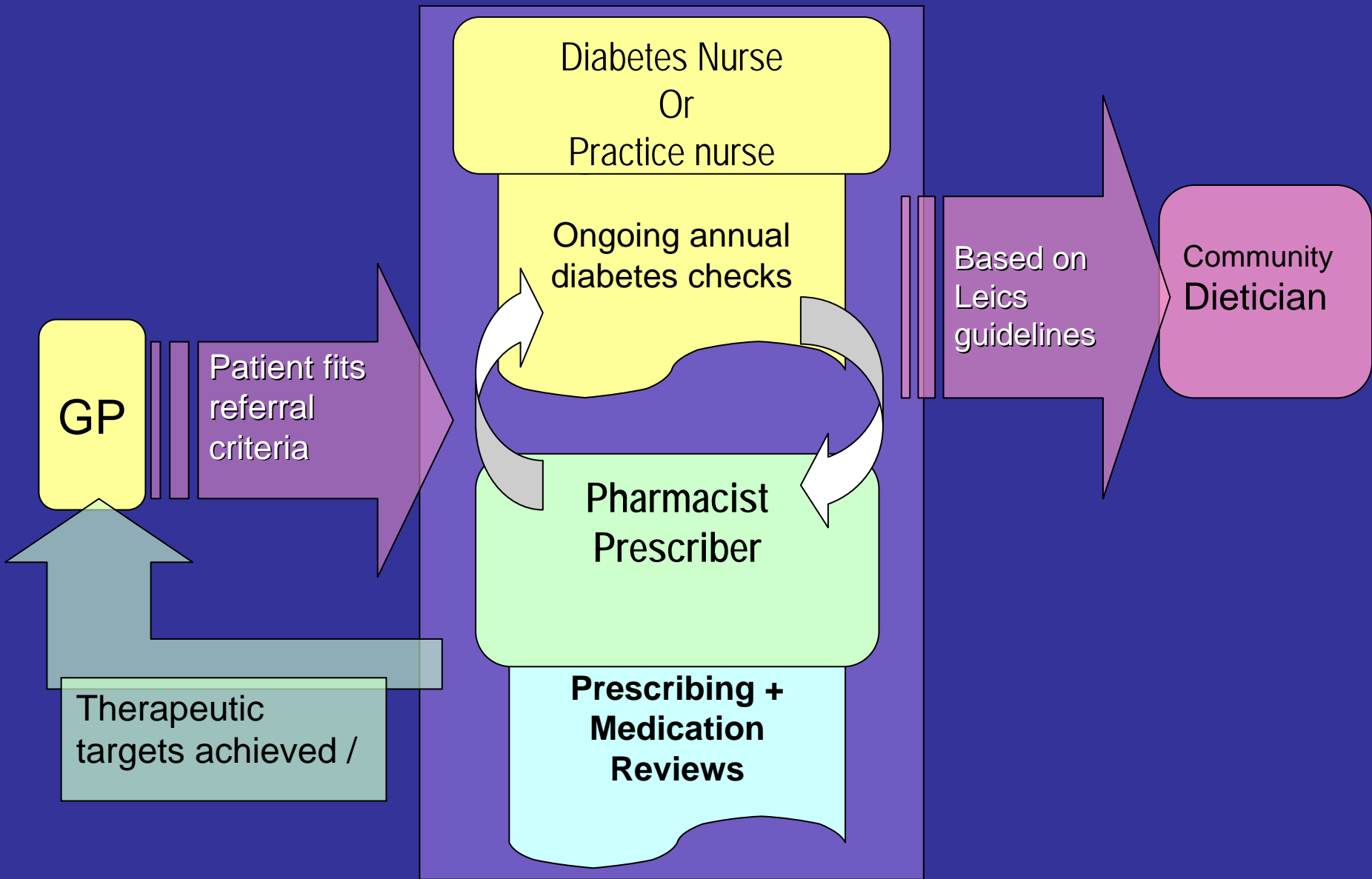
Patient fits
referral
criteria

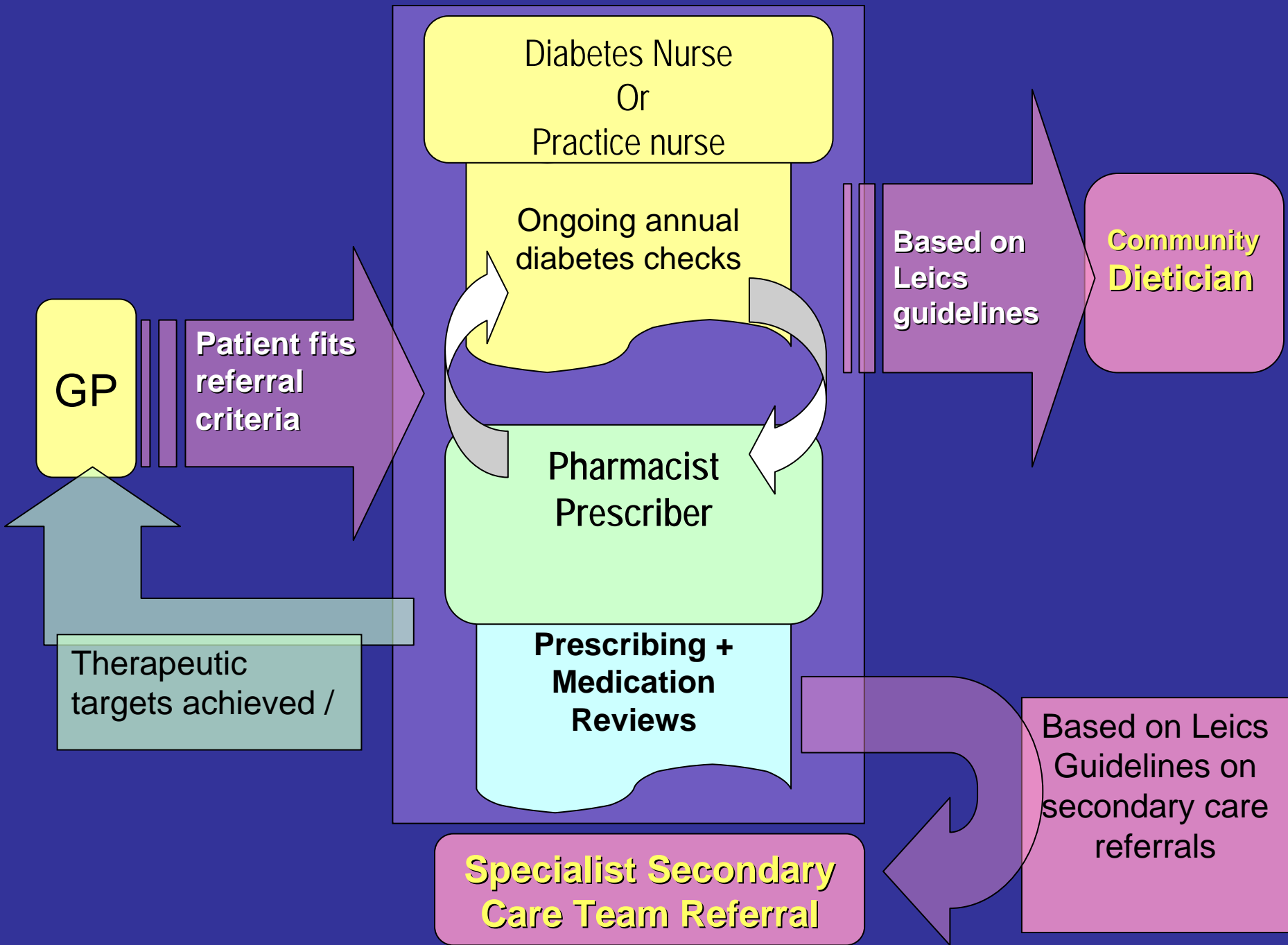
Pharmacist
Prescriber

**Prescribing +
Medication
Reviews**









GP

Patient fits referral criteria

Diabetes Nurse
Or
Practice nurse

Ongoing annual diabetes checks

Pharmacist
Prescriber

Prescribing +
Medication
Reviews

Based on
Leics
guidelines

Community
Dietician

Therapeutic
targets achieved /

Based on Leics
Guidelines on
secondary care
referrals

Specialist Secondary
Care Team Referral

Why was it undertaken

- To demonstrate that pharmacist prescribers can be integrated as part of a multidisciplinary team in the management of chronic disease
- Help reduce pressure on GP's
- Help achieve NSF and nGMS targets for patient care

Outcomes: preliminary analysis

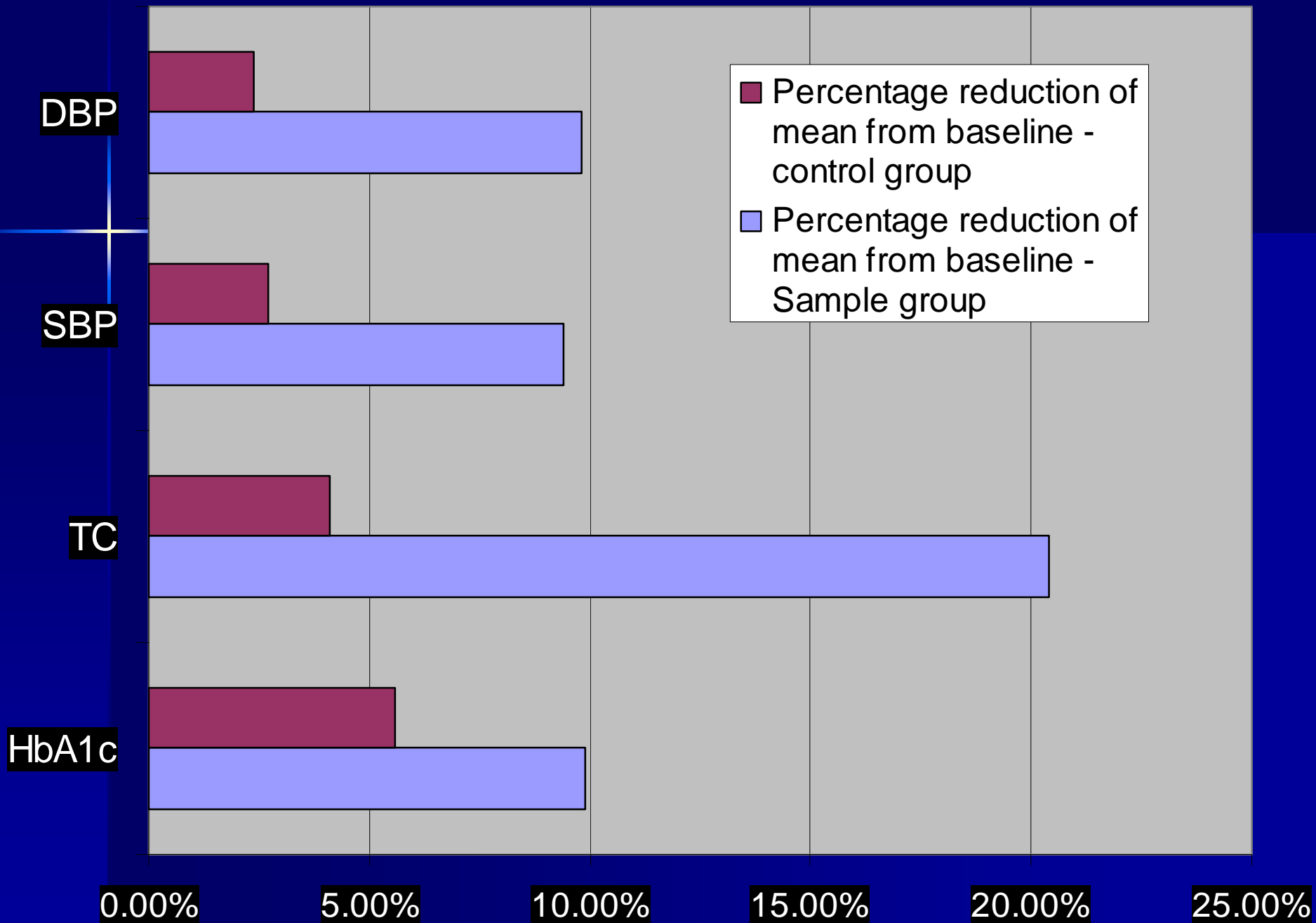
- 71 patients managed

LCW PCT – 4 GP practices – 10-month data

Biochemical marker	Sample group			
	HbA1c	TC	SBP	DBP
Mean at baseline	8.1	4.9	146.8	77.8
Mean end of project	7.3	3.9	133	70.2
Mean reduction from baseline	-0.8	-1	-13.8	-7.6
Percentage reduction	-9.9%	-20.4%	-9.4%	-9.8%

LCW PCT – 4 GP practices – 10-month data

	Control Group B			
Biochemical marker	HbA1c	TC	SBP	DBP
Mean at baseline	9	4.9	140.2	79.9
Mean end of project	8.5	4.7	136.4	78
Mean reduction from baseline	-0.5	-0.2	-3.8	-1.9
Percentage reduction	-5.6%	-4.1%	-2.7%	-2.4%



H&B PCT – Project team

- Kim Dunn Head of Meds Management
- Mohammed Ibrahim Prescriber
- Altaz Dhanani Prescriber
- Prad Savania Prescriber

Outcomes: preliminary analysis

- 121 patients managed

Outcomes: H&B PCT – 3 GP practices (6-month data)

Biochemical marker	Mean at baseline	Mean at end of project	Percentage reduction
HbA1c (%)	7.63 (5.6 – 12.8)	6.77 (5.3-9.1)	11.3%
Systolic BP (mmHg)	147 (113-190)	133 (110-169)	9.5%
Diastolic BP (mmHg)	81 (60-107)	77 (57-97)	4.9%
Total Cholesterol (mmol/l)	4.4 (3.3-6.9)	4.0 (3.2-5.2)	10%

Summary

- Results indicate measurable improvements in:
 - patient care
- Project showed that pharmacist prescribers can be integrated into the primary care team

Summary

- This project was a small pilot study
- Further studies should be conducted with larger patient numbers and more pharmacist prescribers across a wider range of diseases

Challenges faced

- Acceptance by other health professionals
 - GP's
 - Nurses
 - Secondary care specialist team

Challenges faced

- Acceptance by patients
 - Not a real problem
 - All patients accepted service

Challenges faced

- Clinical management plan
 - Difficult to produce a robust CMP to include all scenario's
- IP status, reduces hindrances and allows efficient care

Challenges faced

■ CPD

- No specific CPD was available initially
- Situation is now improving and local NMP networks have been formed

Finally

- Still only at the very early stages of Pharmacists prescribing
- Greater acceptance of pharmacist prescribing within the healthcare community
- Need to establish robust models of care to utilise this additional healthcare resource fully

Questions....