ARE WE GETTING THE BIG PICTURE? PHARMACISTS’ UNDERSTANDING OF RISK FACTORS AND ABSOLUTE RISK IN SCREENING AND MONITORING

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Objective
To identify pharmacists’ educational needs for monitoring people’s risk factors and absolute cardiovascular disease (CVD) risk.

Method
Three vignette case studies asking pharmacists to describe advice to people without known CVD and their clinical reasoning were designed. Vignettes described people presenting for total cholesterol (TC) and blood pressure testing at a pharmacy and were sent to the work email address of 329 practicing community pharmacists. Cases provided necessary information for absolute CVD risk assessment. Open-ended responses in the advice and reasoning sections were analysed using content analysis. The coding framework assessed the appropriateness of advice and underlying reasoning in decision making.

Rationale in each vignette

| Vignette 1 | Screening a client with recommended TC level and a moderate (13%) CVD* risk estimate (smoker). |
| Vignette 2 | Screening a client with elevated TC level and a low (4%) CVD* risk estimate. |
| Vignette 3 | Monitoring a patient with known and treated CV risk factors and insignificant increase in TC levels. |

Table 1: Vignettes’ rationale
*Absolute CVD risk was not presented with vignette

Results
Twenty-nine pharmacists returned complete responses to all vignettes. Pharmacists provided appropriate advice in regards to lifestyle measures. Pharmacists seemed to focus on isolated risk factors, e.g. TC or smoking, instead of assessing overall CVD risk in the context of the case person’s age, gender and smoking status. None explicitly based their recommendations on application of a risk calculator. Their reasoning showed an anchoring on isolated risk factors, particularly TC levels, which resulted in inappropriate recommendations of referral and pharmacotherapy when correlated to actual absolute CVD risk.

Conclusion
When screening and monitoring people with risk factors for cardiovascular or metabolic illnesses future and practicing pharmacists may benefit from educational strategies which support their decision making skills in overall risk assessment.

Graph 1: Advice recommendations

Graph 2: Reasons of Advice