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Chapter-5

Patient Counselling

- Definition and benefits of patient counselling
- Stages of patient counselling Introduction, counselling content, counselling process and closing the counselling session
- Barriers to effective counseling Types and strategies to overcome the barriers
- Patient counselling points for chronic diseases/disorders Hypertension, Diabetes, Asthma, Tuberculosis, Chronic obstructive pulmonary disease and AIDS.
- Patient Package Inserts Definition, importance and benefits, Scenarios of PPI use in India and other countries.
- Patient Information leaflets Definition and uses

Patient counseling:

- Patient counseling is defined to the process of providing information, advice and assistance to help patients use their medications.
- Counseling patients regarding their medications is an important responsibility for pharmacists and an excellent learning opportunity for students.
- Pharmacists are often the only health care providers focusing patient education on medication: how to take it, what to expect, and side effects and drug interactions.
- Many pharmacists have been trained to use a counseling method developed by the Indian Health Service (IHS).

Benefits of patient counselling

- Pharmacist provide effective dose on their patient information.
- The pharmacist has immense responsibility in counseling the patients with chronic illness.
- Drug interactions and adverse drug reactions should be prevented.
- Build a therapeutic alliance with patients to meet mutually understood goals of therapy.
- Patient becomes an informed, efficient and active participant in disease treatment and self-care management.
- The pharmacist should be perceived as a professional who offers pharmaceutical care.

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Stages of patient counselling:

Stage 1: Introduction (Counselling content)

- Introduce your self
- Review patients medication record
- Explain the purpose and importance of the counseling of the counseling
- Obtain medication history interview Eg: allergies previous incidences
- Obtain drug related information such as allergies, use of herbals etc.
- Assess the patients understanding of the reasons for therapy
- Assess any actual and / or potential concerns or problems of importance to the patient.

Stage 2: Present Patient Condition:

Personal assessment:

- Name, Age of patient
- Assess the patients mental ability to understand the current Eg: Black box warnings
- Sensory and physical status
- Cognitive abilities
- Willingness of the patient to use medication.

Clinical assessment:

- How to use the medication
- Attitude towards medication u
- Possible barriers of the
- Patient –Non-adherence
- Willingness of the patient

Stage 3: Closing the counselling session

- Verify the patient's understanding by means of feedback.
- Summarize by emphasizing key points.
- Give an opportunity to the patient to put forward any concerns.
- Help the patient to plain follow-up.

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Barriers to effective counseling - Types and strategies to overcome the barriers

The data was collected by adding a question about the existence and nature of counseling barriers, if they exist, to the standard patient counseling form used by pharmacists.

Type of Barriers to effective counseling

Effective patient counseling in community pharmacy is a difficult task, due to the following barriers.

- 1. Pharmacist related barriers
- 2. Patient related barriers
- 3. System related barriers

1. Pharmacist Related Barriers

- Lack of knowledge about patient
- Lack of knowledge about patient's disease condition
- Lack of confidence or skill
- Attitude and beliefs of pharmacist
- Age difference
- Religious difference

2. Patient Related Barriers

- Lack of trust
- Lack of knowledge of non-verbal communication
- Cultural/religion beliefs
- Poor listening
- Lack of time
- Information overload
- Physical /mental status
- Emotions

3. System Related Barriers

- Lack of pharmacists in a pharmacy.
- Lack of time.
- Pharmacist not having access to the patients full medication history
- Poor communication between pharmacists and physician.

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Strategies to overcome the barriers

Barriers to communication can be overcome by:

- Body language
- Motivate the receiver
- Checking whether it is a good time and place to communicate with the patient
- Being clear and using language that the patient understands
- Communicating one thing at a time
- Respecting a patient's desire to not communicate
- Checking that the patient has understood you correctly
- Communicating in a location that is free of distractions
- Acknowledging any emotional responses the patient has to what you have said.

Patient counselling points for chronic diseases/disorders -Hypertension, Diabetes, Asthma, Tuberculosis, Chronic obstructive pulmonary disease and AIDS.

Hypertension— It is the clinical condition, in which more blood pressure observed in the blood vessels which leads to hemorrhagic and other disease condition. During patients counselling it is managed by the-

- Pharmacological management.
- Non pharmacological management.

Diabetes— Diabetes mellitus is the group of metabolic disorders sharing the common feature of hyperglycemia. Hyperglycemia in diabetes results from defects in insulin secretion, insulin action or both. The chronic hyperglycemia and attendant metabolic dysregulation may be associated with secondary damage in multiple organ systems, especially the kidney, eyes, nerves, and blood vessels. During patients counselling it is managed by the-

- **Pharmacological management** Biphasic insulin, teneligliptin, albiglutide, metformin, voglibose, bromocriptine.
- Non pharmacological management.
 - ➤ Make the diet plan because, in diabetes condition sugar level maintenance is the major task.
 - Avoid the any type of injury.
 - ➤ More hunger and thrust is the common condition in the diabetes so, availability of things is very important.

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- Exercise and yoga are regular require because it help in the metabolism (BMR) process of the body and maintain the glucose level.
- > Try to avoid the stress and depression and visit those places where we feel happy and pleasant.

Asthma—Asthma is a condition in which our airways become narrow, swell up and become more glandular (produce extra mucus). This can make breathing difficult and trigger coughing, a whistling sound (wheezing) when we breathe out and shortness of breath. During patients counselling it is managed by the-

- **Pharmacological management** Salbutamol, salmeterol, ipratropium, glycopyrrolate bromide and combination of drugs used (albuterol + ipratropium)
- Non pharmacological management.
 - Avoid the allergen which is responsible for the allergic condition.
 - Avoid the smoking, drinking, chewing and risks factors which is responsible for other disease manifestations.
 - Regular uses of home remedies and natural products in the daily life.
 - > Follow/doing the regular pranayama, yoga, exercise etc. to increase the lung capacity or health.
 - > Sometime diets plan also required to manage the disease so, always follow the rules and regulation which are regulated by our government.

Tuberculosis— It is a potentially fatal contagious disease that can affect almost any part of the body but is mainly an infection of the lungs (formation of tubercles or granulomas in the lungs), it is caused by the mycobacterium tuberculosis. During patients counselling it is managed by the-

- **Pharmacological management** Rifampicin, pyrazinamide, isoniazid, streptomycin, ethambutol, Salbutamol, salmeterol, ipratropium, glycopyrrolate bromide and combination of drugs used (albuterol + ipratropium)
- Non pharmacological management.
 - Avoid the allergen which is responsible for the allergic condition.
 - Avoid the smoking, drinking, chewing and risks factors which is responsible for other disease manifestations.
 - Regular uses of home remedies and natural products in the daily life.
 - Follow/doing the regular pranayama, yoga, exercise etc. to increase the lung capacity or health.
 - Sometime diets plan also required to manage the disease so, always follow the rules and regulation which are regulated by our government.

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COPD— COPD (Chronic obstructive pulmonary disease) is a multifactorial entity with a wide range of clinical manifestations and leading cause of morbidity and mortality globally. It is characterized by progressive, partially reversible airflow obstruction and lungs hyperinflation with significant extra pulmonary manifestations and comorbid conditions. During patients counselling it is managed by the-

- **Pharmacological management** Salbutamol, salmeterol, ipratropium, glycopyrrolate bromide and combination of drugs used (albuterol + ipratropium).
- Non pharmacological management.
 - Avoid the allergen which is responsible for the allergic condition.
 - Avoid the smoking, drinking, chewing and risks factors which is responsible for other disease manifestations.
 - Regular uses of home remedies and natural products in the daily life.
 - ➤ Follow/doing the regular pranayama, yoga, exercise etc. to increase the lung capacity or health.
 - Sometime diets plan also required to manage the disease so, always follow the rules and regulation which are regulated by our government.

AIDS— HIV (Human deficiency virus) is the virus that is responsible for causing acquired immune deficiency syndrome (AIDS). Virus destroys or impairs cells of the immune system and progressively destroys the body ability to fight against any upcoming or present disease. During patient counselling it is managed by the-

- **Pharmacological management** Lamivudine, zidovudine, indinavir, efavirenz, nevirapine, stavudine, ritonavir, abacavir, according to the condition combination types of drugs also used as.
- Non pharmacological management—
 - Avoid usages of used needle and equipment's.
 - Make the diet chart and take the proper and nutritious food.
 - Practice the regular exercise, yoga and meditation.
 - Uses the contraceptive method (condoms) to avoid the risks of AIDS.
 - Avoid the bad habits like smoking, alcohol etc.
 - Consults the Doctor/RMP regularly and follow their instructions.

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Patient Package Inserts - Definition, importance and benefits, Scenarios of PPI use in India and other countries.

- The concept of a Patient-oriented package insert is already in practice in the United States (since 1968; known as the 'Patient Package Insert') and in the European Union (known as 'Patient information leaflets')
- This document is written in a non-technical manner, and contains specific information about the drug, how it should be used and how it works.
- It also contains information regarding any possible safety concerns or precautions necessary when taking the drug.
- A patient package insert or medication guide is a document provided along with a prescription medication to provide additional information about that drug.
- By providing this information to the patient there is an expectation of improved therapeutic
 outcomes by improving compliance and helping the patient to avoid some potential errors from
 medication misuse.

Importance and benefits:

- A benefit message in a patient package insert on knowledge about medicines and on subjective benefit/risk perception.
- To provide information for its safe and effective use.
- For providing essential drug information for patients taking over-the-counter as well as prescription-only medications.
- The PPI should increase patient's awareness of medication-related issues, contribute to the safe and correct use of the medication, and help in the success of the treatment plan.

Scenarios of Patient Package Inserts (PPI) use in India and other countries

- The primary source of drug information is a package insert (PI).
- It is a printed leaflet that contains information based on regulatory guidelines for the safe and effective use of a drug.
- It is also known as prescription drug label or prescribing information.
- A good PI contains approved, essential, and accurate information about the drug.
- It is written in a language that is not promotional, false, or misleading.
- In India, the regularity authority is Ministry of Health and Family Welfare, Government of India. The pharmaceutical companies submit the full prescribing information as a part of the new drug application for marketing. This information should be according to the Section 6.2 and 6.3 of Schedule D, 1940 Act.
- The application is approved by the regularity authorities, the information is accompanied with the drug in the package.
- United States-Food and Drug Administration and European Medicines Agency amend their regulations governing the content and format of labeling for drug products from time to time.

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Patient Information leaflets - Definition and uses

Definition:

• A patient information leaflet is a technical document included in every medicine package to offer written information about the medication.

Or

• Patient information leaflets (PILs) are leaflets containing specific information about medical conditions, doses, side effects that packed with medicines to give the user information about the product.

Uses:

- Patient medication information leaflet (PMIL) is very important source of information for every patient.
- Little is known whether patients read the PMILs, what are their opinions about PMILs and whether they are satisfied with PMILs in current format.

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