

ANALYSIS OF TRENDS IN THE PHARMACEUTICAL CARE AND PHARMACY SERVICES IN DIFFERENT COUNTRIES

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Although the main role of pharmacists is to supply and dispense medicines, they are increasingly providing direct care to patients, both in community pharmacies and as part of integrated health care provider teams. Community pharmacists have been pursuing additional complementary roles over the last 50 years. International Pharmaceutical Federation emphasizes the need to expand the role of community pharmacists to support healthcare systems.

The purpose of this work is to analyze the contribution of pharmacists in improving health and well-being and range of pharmacy services in different countries. Pharmacy services, that are beyond the medication supply role, may be classified into categories adapted from the Kaiser pyramid care model:

- dispensing related services to promote access to medicines: night services; emergency or urgent supply of prescription-only medicines without prescription; repeat dispensing of chronic long-term medications; generic substitution; refusal to dispense due to safety reasons; home delivery;

- health promotion and disease prevention services: handling and disposal of expired or unwanted medicines; needle and syringe exchange; pharmacy travel health; pharmacist-delivered vaccination; weight management; smoking cessation; health education;

- screening and referral services: common ailment management schemes; screening individuals at-risk not on medication; pharmacovigilance for medicines under additional monitoring; scheduling visits / exams; delivery of reports, referral to other healthcare providers;

- disease management services: administering injectable medicines (including antibiotics); directly observed treatment/ supervised consumption of medicines, first time dispensing intervention (e.g. new medicines service); instruction on use of therapeutic, self-monitoring device or medical aid, therapeutic adherence support, teleconsultations by pharmacists, chronic disease management;

- individual case management services (dose administration; aid medication review; home or nursing home medication review; medication reconciliation; therapeutic substitution; deprescribing; integrated care pathways / protocols or quality circles in place with primary care; high-cost therapy dispensing and management; galenic formulation.

In 2015, 17 Sustainable Development Goals were adopted by the United Nations as a universal call to action to end poverty, protect the planet and ensure that, by 2030, all people enjoy peace and prosperity. Goal 3 «Good health and well-being» includes 13 targets. Target 3.1 was defined as to reduce maternal mortality. Severe anaemia during or post pregnancy doubles the risk of maternal death. In Tanzania, pharmacies help reduce risk by providing iron supplements. These can sometimes be cheaper than free supplements from government clinics when costs of transport and time spent at a clinic are considered. Target 3.2 is to end all preventable death under 5 years of age. In South Africa, pharmacists administer childhood vaccinations, such as for polio and measles, under an expanded programme on immunisation.

Target 3.3 is to fight communicable diseases. In Brazil, pharmacists are preventing HIV infections by prescribing antiretrovirals for pre- and post-exposure prophylaxis. As partners in India's tuberculosis control programme, pharmacists provide screening, referral, and directly observed treatment; improving patients' health and helping to stop the spread of tuberculosis. Target 3.4 is to reduce mortality from non-communicable disease and promote mental health. In Switzerland, community pharmacies give access to stool tests, advise on results, and refer to a physician when needed. One six-week campaign in more than 600

pharmacies detected 58 cases of colon cancer and 368 cases of advanced adenoma. In Lebanon, pharmacists care for diabetes patients through therapy management. They run diabetes awareness campaigns, distributing information, measuring blood glucose and making referrals where needed. In Canada, through a specialised service, pharmacists help mental health patients with medicines as well as support their communication with healthcare providers and navigation of the mental health system.

Target 3.5 is to prevent and treat substance abuse. In Kyrgyzstan, pharmacists supply naloxone to prevent deaths from opioid overdose. Target 3.6 is to reduce road injuries and death. Some medicines more than double the risk of traffic accidents. In different countries, pharmacists educate patients on risks of driving impairment. Target 3.7 is universal access to sexual and reproductive care, family planning and education. Pharmacists widen access to reproductive health services, including counselling and education. In the USA, some pharmacists are prescribing hormonal (including emergency) contraception. Target 3.8 is to achieve universal health coverage. Portugal's government made use of the country's pharmacy network to bring COVID infections under control. 12.1 million COVID tests were performed in pharmacies between November 2020 and April 2022. Target 3.9 is to reduce illnesses and death from hazardous chemicals and pollution. In Sweden, 90 % of patients are prescribed a dry powder inhaler instead of a metered dose inhaler, reducing greenhouse gases emissions.

Target 3.A is to implement the World Health Organisation framework convention on tobacco control. In Thailand, pharmacists provide smoking cessation services. One study showed that 29 % of patients receiving this service reported abstinence at 30 days. Target 3.B is to support research, development and universal access to affordable vaccines and medicines. Pharmacy has supported the regulatory approval of single-tablet combination products for nucleoside reverse transcriptase inhibitors and protease inhibitor backbone regimens to improve patient adherence — a major breakthrough in HIV therapy. Target 3.C is to increase health financing

and support health workforce in developing countries. More than 2,100 pharmacy schools across the globe provide undergraduate training and continuing pharmacy and pharmaceutical sciences education. Target 3.D is to improve early warning systems for global health risks. This target is related to the need for pharmacists to be prepared for future pandemics.

Thus, the role of pharmacists goes far beyond dispensing of medicines. There is every reason to predict the further growth of pharmacists' role in the health care system.

АНАЛІЗ КОМПЛЕКСУ ЗАХОДІВ, ЯКІ СПРЯМОВУЄ ВООЗ НА БОРОТЬБУ З ВІЛ-ІНФІКУВАННЯМ НАСЕЛЕННЯ У СВІТІ

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Серед проблем міжнародного масштабу ВІЛ-інфікування населення, особливо у країнах з низькими доходами населення займає особливе значення. Протягом декілька десятиліть міжнародна спільнота займається координацією зусиль, що спрямовані на запобігання розповсюдженню ВІЛ у світі.

Мета дослідження – здійснити аналіз комплексу заходів, які спрямовує ВООЗ на боротьбу зі ВІЧ-інфікуванням населення у різних країнах світу.

ВООЗ розпочала боротьбу з ВІЛ у далекому 1987 р., коли вперше була представлена сама назва «Вірус імунодефіциту людини». 1988 р. ВООЗ оголосила про проголошення 1 грудня Всесвітнім днем боротьби зі СНІДом. Вже 1990 р. було опубліковано перше клінічне керівництво з лікування ВІЛ-позитивних людей та хворих на СНІД. Саме цього року особливу увагу національних систем охорони здоров'я (ОЗ) було привернуто до проблеми поширення ВІЛ від матері до дитини та розроблено програму «ВІЛ та жінки». Вже через рік у 1991 р. кількість країн, які приєдналися до вирішення проблем