SITUATIONAL DIAGNOSIS FOR PHARMACEUTICAL CARE IN THE PAIN CONTROL SERVICE AT A FEDERAL INSTITUTE IN RIO DE JANEIRO

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Introduction

During the life cycle, pain is an occasionally inevitable experience and can be characterized by complexity in treatment. Such a condition can be measured, assessed, and treated in various ways by various healthcare professionals.^{1,2} Pharmacists are healthcare professionals capable of making a positive impact on the pharmacological treatment of patients with chronic diseases who require a healthcare team's support. Their role involves promoting the patient's health and safety during the treatment period.^{3,4} This study aims to propose and design a Pharmaceutical Care service in the Pain Management and Control Area (also referred to as the Pain Clinic) at the National Institute of Traumatology Jamil Haddad (INTO).

Material and Methods

This is a descriptive and observational cross-sectional study. The study involves a situational diagnosis through the collection of data from an opinion questionnaire administered to pharmacists (who are not integrated into the pain control service team) and other healthcare professionals who are part of the Pain Management and Control Area team for the observational phase of multidisciplinary healthcare practices in the sector. Approval number CAAE: 70415323.7.3001.5273.

Results and Discussion

Based on the responses to the questionnaire from the pharmacists (n = 12), the following results were obtained: (25%) of the pharmacists have some experience as clinical pharmacists, and of these, (66.7%) have more than three years of experience in the field. (41.7%) believe that at least one pharmacist should be involved in such activities, (41.7%) consider that ideally there should be at least two pharmacists, and (16.6%) expressed the opinion that there should be more than three. Among the activities that pharmacists consider most important to perform in the department, the following results were achieved: (37%) for pharmacotherapeutic follow-up/monitoring, (33.3%) for therapeutic drug monitoring, (18.5%) for medication reconciliation, and (11.1%) for medication therapy review. When asked if a future role for pharmacists in the department could improve treatment adherence, the results were as follows: (75%) yes, (8.3%) no, and (16.7%) indifferent. Regarding the patient profiles that should receive greater attention from pharmacists, (50%) consider patients on polypharmacy, (33.3%) consider elderly patients, and 16.7% consider patients using potentially dangerous medications. When asked about the importance of the pharmacist's role in this field, (41.7%) consider it "very important," and (58.3%) consider it "important."

According to the opinions of other healthcare professionals (n = 4), including doctors, nurses, psychologists, and physiotherapists, all of them unanimously believe that the pharmacist's inclusion in the multidisciplinary team of the department is a significant asset to the hospital's healthcare service. Half of the professionals suggest that a minimum of two pharmacists would be necessary, while the other half believes that at least one pharmacist would suffice. A majority, (75%), consider performing pharmacotherapeutic follow-up as the most crucial activity, and all unanimously agree that the

pharmacist's involvement would enhance medication adherence. While (50%) attribute non-adherence to the number of medications in use, (75%) point to adverse drug reactions as the most influential factor. Additionally, (50%) cite the cost of traveling to the hospital as a contributing factor, with the remaining (50%) emphasizing patients' health beliefs, lifestyle habits, and cultural factors. Lastly, (75%) advocate for increased pharmacist attention to patients using polypharmacy.

Kulkamp, Barbosa, and Bianchini⁵, report in their study that by providing information on the rational use of opioid medications and pain control, it is possible to reduce prejudices, fears, misconceptions, and other limiting obstacles.

Furthermore, age, genetics, gender, and comorbidities that impact renal or hepatic function play fundamental roles in the outcome of analgesic treatment.⁶ Therefore, to effectively address pain and understand the complexity of pharmacotherapeutic treatment with analgesics, it is essential to have a cohesive multidisciplinary healthcare team, in which the pharmacist's contribution can be valuable in various activities.

Conclusion

The research in question allowed us to demonstrate that both the team of pharmacists and the Pain Clinic team believe that the role of the pharmacist would result in improvements in the quality of services provided by the team. This professional would be capable of assisting in increasing medication adherence, promoting health, and ensuring the safety of patient treatment, as well as providing support to other healthcare professionals regarding medication-related issues and how to manage them.

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