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Pharmaceutical care in Poland, the USA and the UK

Abstract

This study delves into the evolution and current state of pharmaceutical care in Poland, the United States, and the United Kingdom, highlighting similarities and differences in their approaches, regulations, and outcomes. Beginning with the legal frameworks governing pharmaceutical care, the analysis explores the progression of pharmaceutical services in each country over the past decade, emphasizing the focus on patient-centered care, evidence-based practices, and regulatory oversight. Key components of pharmaceutical care, such as medication management, adherence initiatives, and technological advancements, are examined within the context of each nation's healthcare system. While all three countries prioritize patient well-being and accessibility to pharmaceutical services, variations emerge in government involvement, healthcare professional collaboration, pharmaceutical industry influence, medication accessibility, and cultural factors. Policymakers and healthcare practitioners seeking to enhance pharmaceutical care globally must acknowledge these distinctions to tailor interventions effectively.

Keywords: medication management service, the Patient-Centered Approach, rational drug usage, Pharmaceutical Care Practice, pharmacist's contribution, healthcare outcome.

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Pharmaceutical care in Poland, the USA and the UK

The concept of pharmaceutical care appeared in the Polish legal system on April 20, 2007 in the Regulation of the Minister of Health of March 22, 2007, amending the regulation on continuous training of pharmacists employed in pharmacies and pharmaceutical wholesalers [1]. Pharmaceutical care was defined as the pharmacist's participation in ensuring the proper course of pharmacotherapy aimed at curing, eliminating or alleviating the symptoms of a disease, suspending or delaying a pathological process or preventing a disease. Including care in a legal act merely of the rank of regulation, and additionally only concerning the improvement of professional qualifications, meant that it had no practical meaning for patients.

This regulation had no real impact on improving the health or safety of the patient, in the sense that it referred only to the professional qualifications of pharmacists rather than to the provision of care directly to patients. Thus, these guidelines prepared pharmacists to provide care but did not give them any powers to provide care. Besides, in this approach, pharmaceutical care was limited to pharmacotherapy only [2]. On April 3, 2008, due to the Act on Pharmaceutical Chambers amendment, this concept entered the legal order in the Act of statutory rank.

By the introduced legal definition, providing pharmaceutical care was treated as a pharmaceutical service consisting of a documented process in which a pharmacist cooperated with the patient and doctor. It can be said it was great progress. The concept was introduced into a statutory act, and the definition was oriented directly to the patient. However, the Act did not

specify what activities fall within the scope of pharmaceutical care. In practice, care was either not used at all or was rarely used due to the lack of regulations and guidelines [3]. There are no regulations on access to patients' medical records, no regulations on how to keep pharmaceutical care records, no procedures for pharmacist-doctor interactions, no financing of this type of service from public funds, no recognition of the right to consult a pharmacist as a patient's right, and finally, the danger of certain pharmaceutical care practices being considered unauthorized pharmacy advertising.

On the basis of Regulations of the Minister of Health from 27.10.2015, teams for pharmaceutical care were established to develop and implement a pharmaceutical care model. The last one in July 2020 (by order of July 8, 2020); its purpose was to determine the subject and scope of pharmaceutical care to be provided in public pharmacies and to develop a detailed concept for its implementation, analysis of the need to carry out a pharmaceutical care pilot, and if such a need is found – developing a clear concept for its implementation and determining the source, rules and mode of financing care and possible pilotage [4]. The Team completed its work in December 2020. At the outset, the Team reviewed pharmaceutical services provided in pharmacies in 32 countries associated with PGEU, including those in Poland already being implemented and those to be introduced.

Pharmaceutical care in Poland

Throughout the last decade, pharmacological care has grown in popularity in Poland. The provision of healthcare

services goes beyond the traditional role of a pharmacist as a distributor of medications. In Poland, where the concept has received significant attention, several pharmacies now provide services meant to enhance patient outcomes. This essay will investigate the present state of pharmaceutical therapy in Poland [5]. Compared to other European countries, pharmaceutical practices are not widely practiced in Poland. However, it has gained enormous momentum throughout the years. In addition to dispensing medications, modern pharmacists are also responsible for advising patients, reviewing their medications, and monitoring their health. This has improved patient outcomes, lowered healthcare costs, and increased patient satisfaction.

In Poland, introducing medication treatment management (MTM) services represents one of the most significant advances in pharmaceutical care [6]. These services include comprehensively examining a patient's pharmaceutical regimen to identify potential medication interactions, side effects, and other health issues. The pharmacist then works with the patient's healthcare provider to make any necessary adjustments to the patient's medication regimen to get the best possible outcomes.

In Poland, medication adherence is another crucial aspect of pharmacological therapy. According to research, up to fifty per cent of patients in Poland are non-adherent to their prescribed medications. Nowadays, pharmacists work directly with patients to improve adherence by providing education and counselling on the importance of taking prescription drugs as prescribed. Pharmacists are crucial in enhancing public health and avoiding disease in Poland. They engage in health promotion efforts, such as vaccination campaigns, smoking cessation programs, and other measures to lessen the national sickness load. Pharmacists frequently participate in screening programs, such as cholesterol and blood pressure checks, in order to identify persons at risk for acquiring chronic diseases.

Pharmaceutical care in the USA

Pharmaceutical care is one of the essential components of the healthcare system in the US. Pharmaceutical care includes prescription delivery, drug education, and counselling to ensure patients understand how to take their medications safely and effectively. In the United States, pharmaceutical care is governed by several federal and state statutes. The effectiveness and safety of pharmaceutical products are evaluated by the Food and Drug Administration (FDA).

The FDA ensures that every pharmaceutical product sold in the United States is safe and effective for its intended use. In addition to federal law, state rules govern the pharmacy profession and pharmacological therapy. Each state has a pharmacy practice act specifying the rules and regulations governing the pharmacy profession. State pharmacy practice laws define the scope of practice for pharmacy technicians, pharmacists and pharmacy personnel. Pharmacists are very critical in the healthcare system in the US. They are responsible for ensuring patients get the correct prescription and dosage, maintaining pharmaceutical therapy, and providing drug education and counselling. In addition, pharmacists are accountable for ensuring that patients understand the adverse effects of their medications and how to manage them.

Considering the importance of pharmaceutical care in healthcare, healthcare practitioners confront several obstacles while offering this service. A further difficulty is the lack of competent pharmacists. The need for pharmaceutical care services is increasing, yet insufficient pharmacists supply this demand. Opioid abuse has resulted in a considerable rise in opioid-related mortality, underscoring the need for improved pharmaceutical care services to address this problem.

Possibilities within pharmaceutical care

There are chances for pharmaceutical treatment to enhance healthcare outcomes in the United States despite these obstacles. Using technology to improve pharmaceutical care services is an opportunity. Electronic health records (EHRs) may assist pharmacists in monitoring medication treatment and identifying possible drug interactions or adverse reactions. Moreover, tele pharmacy services may increase access to pharmaceutical treatment in impoverished communities.

Pharmaceutical care in the UK

Pharmaceutical care is patient-focused since it entails providing services such as medication review, medication management, and patient education to guarantee the best possible outcomes from pharmacological therapy [7]. Pharmaceutical care has been a crucial aspect of healthcare in the United Kingdom for decades. Its significance will only increase as the population ages and the incidence of chronic diseases rises.

Research shows that pharmacological treatment improves the outcomes of the patient. The pharmaceutical processes involve rectifying medical errors and drug interactions [8]. The chances of medical errors are increasing decreasing with the proper administration of drugs. Good pharmaceutical attention leads to minimizing hospitalizations and expensive treatment.

In addition, chronic diseases in the United Kingdom demand pharmacological therapy owing to the necessity of taking prescription drugs as instructed. Due to the prevalence of chronic illnesses, including diabetes, cardiovascular disease, and asthma, this function is relevant to the United Kingdom. By aiding patients in better understanding and managing their diseases, pharmacists may enhance health outcomes and quality of life by offering services for pharmacological medication management.

As the population ages and the frequency of chronic illnesses increases, the significance of pharmaceutical care in the United Kingdom will only expand. To satisfy the demands of patients, pharmacists will need to continue expanding their services and collaborating closely with other healthcare professionals to ensure that patients get the best possible treatment [9]. Using technology is a promising development area for pharmaceutical care services. Pharmacists can provide virtual medication reviews and management services as more patients get used to telehealth technology. This would make it simpler for people to obtain treatment in the comfort of their homes.

Comparison of pharmaceutical care in Poland, the \overline{US} and the \overline{UK}

Similarities

Regarding pharmaceutical care, Poland, the United Kingdom, and the United States all share similar objectives and approaches. Regarding pharmaceutical care, the following qualities are shared by the three nations. First, Patient-centered care and the deployment of tailored medication management services are emphasized in all three nations [10]. This involves educating and advising patients about their drugs, how to take them, and any potential adverse effects. Patients are informed on how to follow the medication given to them by a pharmacist.

Second, regarding pharmacological treatment, all three nations greatly focus on evidence-based practice [11]. This demonstrates that medical professionals depend on scientific evidence to guide their drug management choices and seek to provide patients with the most effective therapies. Unless a drug is proven right for use, it is never administered to patients by pharmacists.

Third, all three countries must meet professional credentials and practice standards [12]. Providers of pharmaceutical care services are required in all three nations to possess certain professional qualifications and abide by specific codes of conduct. This ensures that patients get high-quality treatment and that physicians are responsible for their conduct.

Fourth, each nation has regulatory authorities that oversee the supply of pharmaceutical care services. These organizations work to guarantee that medical practitioners adhere to certain practice standards and that patients get safe and effective treatment. All hospitals have to abide by these standards.

Fifth, all three nations endeavour to make pharmaceutical care services available and inexpensive to all patients [13]. This necessitates offering medication management services in several locations, such as local pharmacies, hospitals, and clinics. Also, various initiatives have been developed to assist patients who struggle to pay for medications.

Lastly, regarding pharmaceutical treatment, the three nations are also enthusiastic about technological advances. Providing remote medication management services through electronic health records and telemedicine [14]. While there are variations between the Polish, British, and American pharmaceutical care systems, there are also numerous parallels. All three nations prioritize patient-centered care, emphasizing evidence-based practice, require healthcare professionals to meet certain qualifications and adhere to certain standards, provide regulatory oversight, make pharmaceutical care services accessible and affordable to patients, and embrace technology. Governments and medical professionals attempting to enhance pharmaceutical care services worldwide must acknowledge these similarities.

Differences

Government engagement in providing and regulating pharmacological care services is one of the most notable differences between the three countries. The Polish government has opted for a more direct approach, mandating that all pharmacists provide pharmacological care services. This suggests that pharmaceutical therapy is seen as a government-provided public good. The National Health Service (NHS) provides health-care services, including pharmaceutical care, in the United Kingdom. Private providers offer most healthcare services in the United States, while private pharmacies provide most pharmaceutical care services.

Another noteworthy difference is the degree of collaboration amongst healthcare professionals in each country. Pharmacists collaborate closely with doctors and nurses in the United Kingdom to offer comprehensive treatment [15]. This suggests that patients get coordinated care from many healthcare professionals. In the United States, there is teamwork among healthcare experts, but there is also a significant focus on business and profit, which may often clash with patient-centered care aims. The level of cooperation between healthcare providers in Poland varies depending on the context in which treatment is provided.

The pharmaceutical industry's influence is an additional difference between the three countries. In the United States, there is concern surrounding the pharmaceutical industry's influence on healthcare choices, which may lead to overprescription and abuse of particular pharmaceuticals [16]. Another issue is the high cost of pharmaceuticals, which might make them expensive for many people. While the pharmaceutical business is prominent in the United Kingdom and Poland, concerns about its effect on healthcare choices are less prevalent. Medication accessibility is an additional contrast between the three countries. Finally, cultural and sociological differences across the three countries may impact the provision of pharmacological care services [17]. In Poland, for example, there is a substantial culture of self-medication, which may discourage people from getting therapy when required. The United Kingdom has a strong cultural expectation that all patients should get free healthcare, making it difficult to fund pharmaceutical care services [18]. In the United States, there is a large emphasis on individual responsibility for healthcare, which may make it difficult to treat the poor.

Despite similarities, there are major differences in the pharmaceutical care systems of Poland, the United Kingdom, and the United States [19]. There are differences in the role of the government, the degree of collaboration amongst healthcare professionals, the influence of the pharmaceutical industry, the availability of medication, and cultural and socioeconomic factors. Policymakers and healthcare professionals aiming to improve pharmaceutical care services internationally must recognize these disparities.

CONCLUSION

In conclusion, the pharmaceutical care systems of Poland, the United Kingdom, and the United States contain both parallels and distinctions. All three nations have rules to assure the safety and effectiveness of pharmaceuticals, and all need pharmacists to finish a four-year degree program and pass a state test to be licensed. Nonetheless, there are notable distinctions between the systems, such as pharmacists in the United Kingdom are not permitted to prescribe pharmaceuticals, although, in Poland and the United States, they are. Also, in the United States, the scope of practice and kinds of services given by pharmacists may vary by state.

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