

FOCUS ON RESEARCH

A FEASIBILITY STUDY FOR A FUTURE ECONOMIC EVALUATION OF INSTALMENT DISPENSING FOR NEWLY PRESCRIBED MEDICINES

Researchers

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Aim

The research question was: Is it feasible to conduct a full scale randomised controlled trial and economic evaluation of the introduction of instalment dispensing? i.e. dispensing of a set quantity of medicines in more than one instalment.

Project Outline/Methodology

Patients who received a new prescription of more than three weeks duration were recruited to the study. Eligible patients received an 'instalment study' prescription from the GP containing the instruction "if randomised to the research project, dispense 14 days supply and the remainder if tolerated". Patients presenting an 'instalment study' prescription in one of the participating pharmacies had their consent obtained by the pharmacist and were randomised to control group or intervention group. Patients randomised to the intervention group were dispensed the first instalment of their prescription; patients randomised to the control group received the full quantity of the prescription as per normal practice. The patients in the intervention group were asked to return to the pharmacy after two weeks for assessment and further supply of medicine if appropriate.

All patients completed a baseline Quality of Life questionnaire, and postal follow-up questionnaire at one month. A randomly selected 50% sample also completed a duplicate questionnaire at three months to test the most appropriate follow-up period. The questionnaire assessed patient satisfaction with the service they had received, explored their use of medicines, and collected quality of life and cost data. A sub-sample of medical records of participating patients was reviewed by the researcher to validate selected self-reported data in the questionnaire. A small number of subjects were also interviewed by telephone. All GPs and pharmacists completed a postal questionnaire to assess professional experience of, and satisfaction with, intervention. Feedback focus groups with GPs, and telephone interviews with pharmacists, were also conducted. All study prescriptions were

categorised by drug type, and analyses of prescribed and dispensed drug costs carried out.

Key Results

In total, 363 patients were recruited and 204 entered the study 152 patients returned the baseline questionnaire (74.5%). The recruitment process worked well, but delaying the consent process until the patient attended to the pharmacy may have resulted in early reduction of patient numbers. All patients interviewed reported a good level of understanding of the study and GPs and pharmacists had no difficulty completing the patient logs and clinical record. The baseline questionnaire response rates were good, and although the one and three month questionnaire response rates were lower, they were still satisfactory. Both professionals and patients liked the instalment dispensing method. Professionals felt it resulted in some increased workload; this was partly due to the research components of the study. The savings on drug costs were 7% of the total prescribed cost in the intervention group.

Conclusions

Professionals and patients would like to see an expansion of the instalment dispensing scheme and the economic analysis of this feasibility study suggests that it could produce significant savings in the general practice drug bill.

What does this study add to the field?

This feasibility study has confirmed earlier pilot findings suggesting that this method of initiating a repeat prescription produced savings in drug expenditures.

Implications for Practice or Policy

This service could be locally commissioned and recommended to prescribers and pharmacists once fully tested.

Where to next?

A larger study should be conducted to confirm the generalisability of the findings nationally.

Further details from:

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