

In the age of 'DrGoogle' are medicines information services still relevant?

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Background

Despite ubiquitous use of the internet, point-of-care information, web-based applications and clinical decision support systems, healthcare professionals often encounter clinical questions for which appropriate patient-centred answers are not available.¹⁻³ Larger hospitals with increased patient complexity and an expectation of decreased length of stay, increases the stress and organisational demand to locate information to enable timely and appropriate patient treatment. A medicines information (MI) pharmacist has the skills to provide specialised high quality clinical information combining literature evaluation, interpretation and professional judgement to answer patient-centred questions in a timely manner.

With greater access to electronic resources, financial and organisational constraints have decreased the number of MI services operating in Australia. In the absence of an MI service, clinicians' questions may go unanswered or receive suboptimal answers.

Aim

To examine pharmacists' perceptions of the use and impact of a dedicated medicines information (MI) service on patient care and safety.

Methods

Pharmacists working in a large metropolitan teaching hospital were invited to anonymously complete a paper-based questionnaire exploring their perceptions and use of the hospital's MI service. The questionnaire was developed by a team of pharmacists in collaboration with a local university, comprised of Likert-style and multiple choice questions. Data were entered in a Microsoft Excel Spreadsheet and descriptive statistics analysed.

Results

In total 86% (n = 42/49) of pharmacists at work during the 2 day survey timeframe completed the questionnaire.

A large proportion of respondents, 40% (n = 17) had more than 10 years hospital pharmacy experience, followed by 30% (n = 13) with 3-5 years' experience.

Most of the pharmacists surveyed, 86% (n = 36) had used the MI service in the past year. More than half of the respondents, 52% (n = 22) were rotational ward pharmacists.

From over 20 MI enquiry types/subject areas, the most common enquiry types were:

- drug administration (e.g. routes, method, or compatibility)
- assistance with guidelines, procedures or protocols
- storage or stability
- renal or liver impairment dosage adjustments
- appropriateness of a medication for an indication

83% of respondents strongly agreed or agreed that the MI service was useful to them. The main reasons why the pharmacists used the service were:

- not being able to locate required information (76%, n = 37)
- reassurance of clinical reasoning/decision making (72%, n = 30)
- expertise of specialist MI pharmacists (72%, n = 30)
- saves them time (62%, n = 26)
- MI pharmacists improved the pharmacists' knowledge and skills about patient safety or quality use of medicines (50%, n = 21)

Note: multiple responses allowed

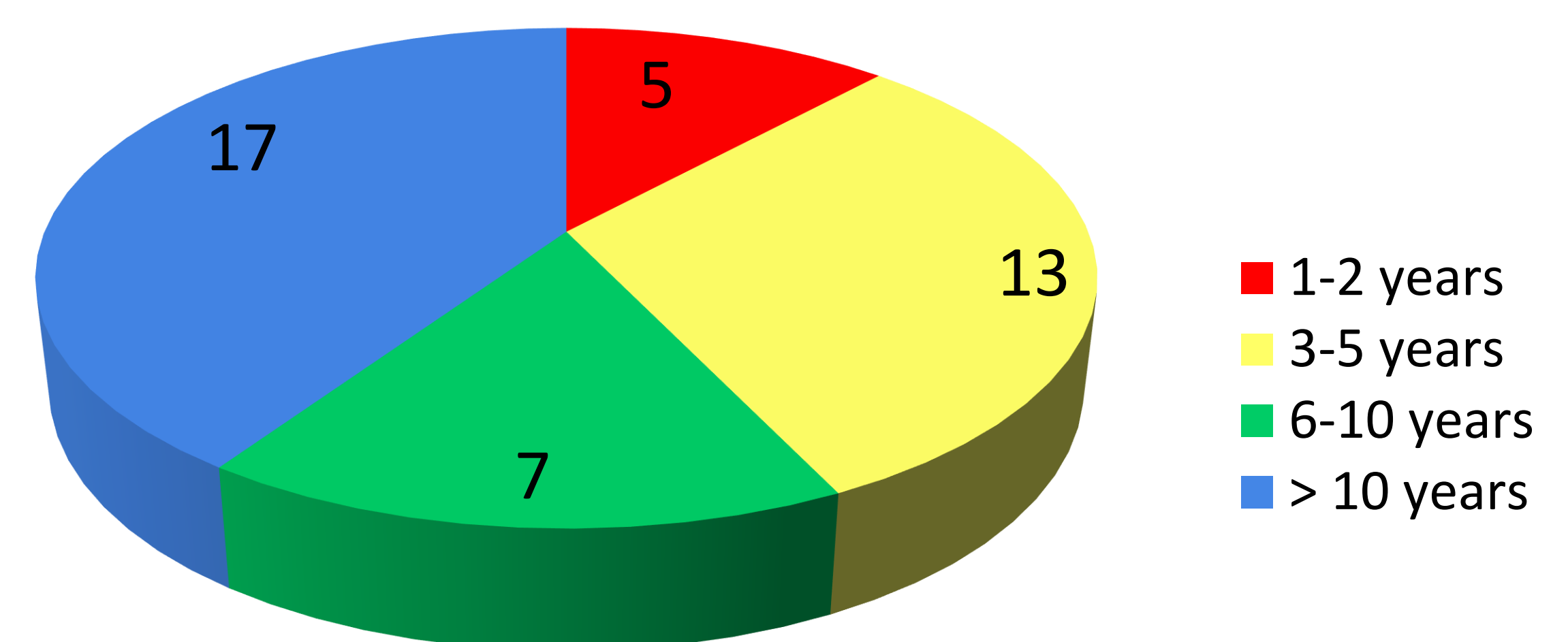
Almost all of the respondents (98%, n = 41) reported that the information provided by the MI service had a **positive impact on patient care and safety**. Similarly, 95%, (n = 40) stated that the MI service plays an **essential** role within the hospital.

Pharmacist's comments

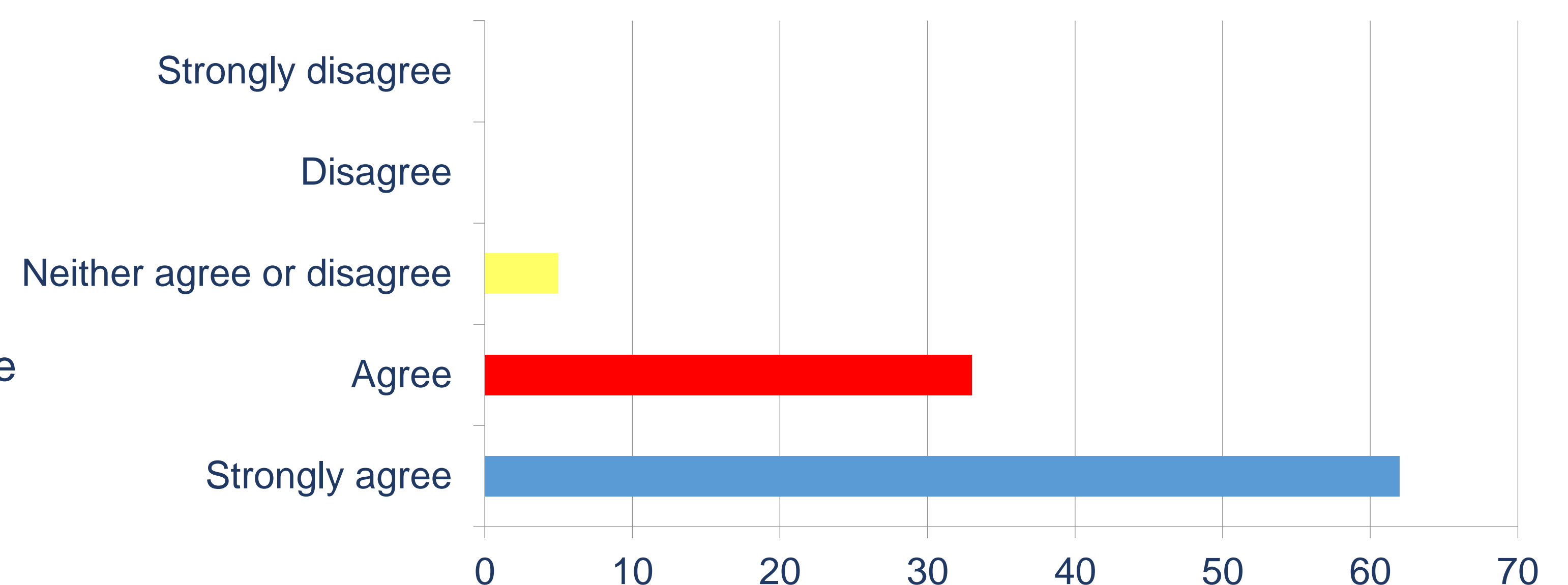
'The MI service **absolutely** has a **positive impact** on patient care and safety.'

'The MI service **saves me time**. It would take me a long time if I didn't know the best source of information.'

Hospital pharmacy experience (years)



The MI Service plays an essential role within Westmead hospital (%)



Conclusion

In times of readily available clinical information resources, MI services are still perceived as essential, having a positive impact on patient care and safety.

The accurate and comprehensive documentation of all enquiries in a local database also provides a legal record and a rich time-saving resource for future enquiries. This documentation and expert support assists in lightening the load for pharmacists by saving them time.

Recent reductions in the availability of MI services nationally may have significant implications for the quality of patient care and medication safety. Reductions in availability of MI services may also have implications for pharmacists' practice and other healthcare practitioners. Results of this survey will inform future broader research and surveys.

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