

International Conference on
CLINICAL PHARMACY

&

International Conference on
BIOCONTROL, BIOSTIMULANTS & MICROBIOME

September 06-07, 2018 | Zurich, Switzerland

Impact of pharmacists interventions on the management of patients with type 2 diabetes mellitus; A systematic review**Labib Al-Musawe**
University of Lisbon, Portugal

Background: Pharmacists gaining increasing role in Type II Diabetes mellitus (T2DM) management services through collaborative practice with healthcare professionals.

Aim: To assess the Pharmacists' interventions' in management of T2DM and to address the effects of these interventions on different health outcomes

Method: Studies were identified by electronically searching the PUBMED/MEDLINE, NHS evidence, Science Direct, Pharmacy Abstracts, Web of Science, ClinicalTrials.gov, Trip Database, International Pharmacy Abstracts and Cochrane Library of Clinical Trials. Randomized controlled trials, including participants whom received direct care from the pharmacists, reporting one or more of the following main outcomes: a) Clinical outcomes, b) Patients' related outcomes, c) Healthcare Service Utilization

Results: 33 studies were included 4,952 T2DM patients, were conducted in different healthcare settings. Comparing to control groups, pharmacists groups showed significant reduction in mean change of HbA1c in twenty-four studies (-0.4% to - 2.5%) vs. (+0.43% to -1.6%), Systolic blood

pressure in Fifteen studies (-20.09 mm/hg to +0.8 mm/hg) vs. (-4.4 mm/hg to +5.75 mm/hg), while Diastolic Blood pressure in twelve studies (-8.9mm/hg to +0.5mm/hg) vs. (-3.95mm/hg to +18mm/hg), Low-density lipoprotein in twelve studies (-23.20mg/dl to +1.16mg/dl) vs. (-21.65 to +5.02), high-density lipoprotein in seven studies (-5.8mg/dl to +10.44mg/dl) vs. (-2.8mg/dl to +3.48mg/dl), Total Cholesterol eleven studies (-30.54mg/dl to +8.5mg/dl) vs. (-20.10mg/dl to +3.86mg/dl) and Triglyceride in eight studies (-44.28mg/dl to +19.48mg/dl) vs. (-19.48mg/dl to +30.11mg/dl) respectively. Also it showed reduction in cardiovascular disease risk, improvement in medication adherence through decrease in self-reported non-adherence and improving in refill rate and overall health related quality of life. Improvement in patients' knowledge and highly satisfaction rate (50-100%), high capability of identifying and resolving various drug therapy problems and considered as cost-effective.

Conclusion: These findings support the importance of pharmacists' interventions as they have pivotal impact on improving different health outcomes in T2DM patients'.

Biography

Labib AL-Musawe is pursuing PhD in Pharmacoepidemiology at University of Lisbon, seeking PhD Degree. He has more than six years' experience in pharmaceutical field. He worked as Risk management officer for Celgene hematological products through implementing safety program, also served as Senior in charge Pharmacist for chain pharmacy called Pharmacy one and Clinical pharmacist at Private Hospital. He holds a Master's degree in Clinical pharmacy from University of Jordan and Bachelor degree in pharmacy from Philadelphia University.

labibalmosawy@yahoo.com

Notes: