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Clinical Pharmacist Improves Diabetes Patients' HbA1c Levels and Lowers Blood Pressure, Hospitalizations, ER Visits, Study Finds

A clinical pharmacist counseling type 2 diabetes patients improved patients' HbA1c levels, lowered patients' blood pressure, and reduced hospitalizations and emergency room visits, according to a case study published in the February 15, 2010, *American Journal of Health-System Pharmacy*.¹

The Polk County Pharmacist Intervention Model, over one year, led to a 9% relative improvement in patients' HbA1c levels, a 30% reduction in all-cause hospitalizations, and a 24% reduction in all-cause emergency room visits, the study found. The model, implemented in February 2005, provided medication and disease counseling by a clinical pharmacist to diabetes patients in Polk County, Fla., who were employees, dependents, and retirees of the county government.

Program participants had six, 30-minute visits with the clinical pharmacist. Patients also received copayment waivers for disease-related medications, supplies, and nonprescription products. Patients were required to sign an agreement to comply with program rules and were terminated from the program if they did not. There were 564 patients enrolled in the program, with 477 patients who remained enrolled at the end of the program's first year.

The study is available at

<http://www.ashp.org/DocLibrary/AJHP/InterventionModelType2Diabetes.aspx>

1. Iyer R, Coderre P, McKelvey T et al. An employer-based, pharmacist intervention model for patients with type 2 diabetes. *Am J Health-Syst Pharm*. 2010; 67:312-15.

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ASHP Health Policy Alerts are synopses of new studies highlighting the medication-use process in health care, especially studies assessing contemporary pharmacists' role in improving medication-use outcomes. The American Society of Health-System Pharmacists encourages recipients to keep a copy of this synopsis for future reference.

