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Catching the low-hanging fruit in medicines optimisation

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Medicines optimisation

1. Patient experience

Shared decision-making

Supporting patients

Adherence to medicines

2. Safety

Safe and secure use of medicines

Avoid adverse drug events

Avoid adverse drug reactions

3. Effectiveness and cost-effectiveness

Evidence based-practice

Decisions transparent and robust

Decisions in accordance with the NHS Constitution

Discontinuation of medicines no longer required or deemed not cost-effective

4. Integrate medicines optimisation in routine practice

How to best to achieve medicines optimisation?

Guidelines

appropriate prescribing

correct administration

Record keeping

Monitoring

Generics

correct prescribing

reconciliation & discharge

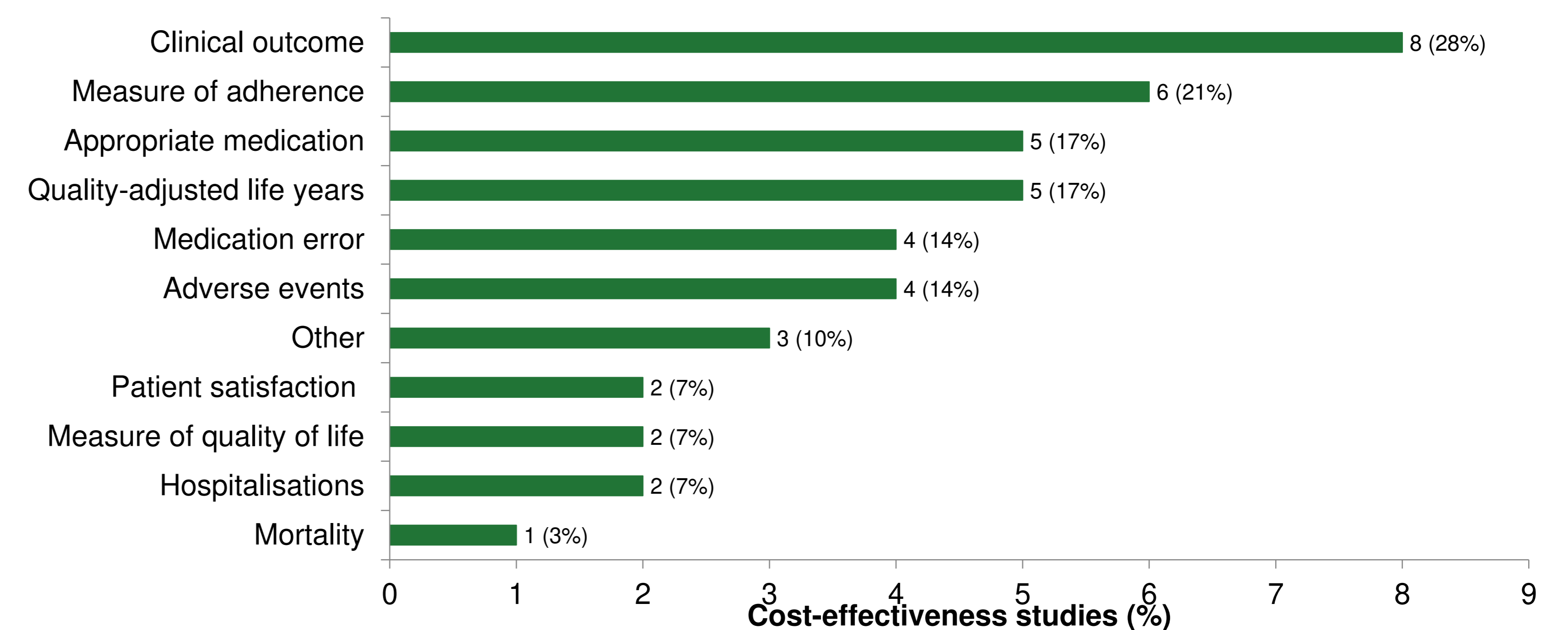
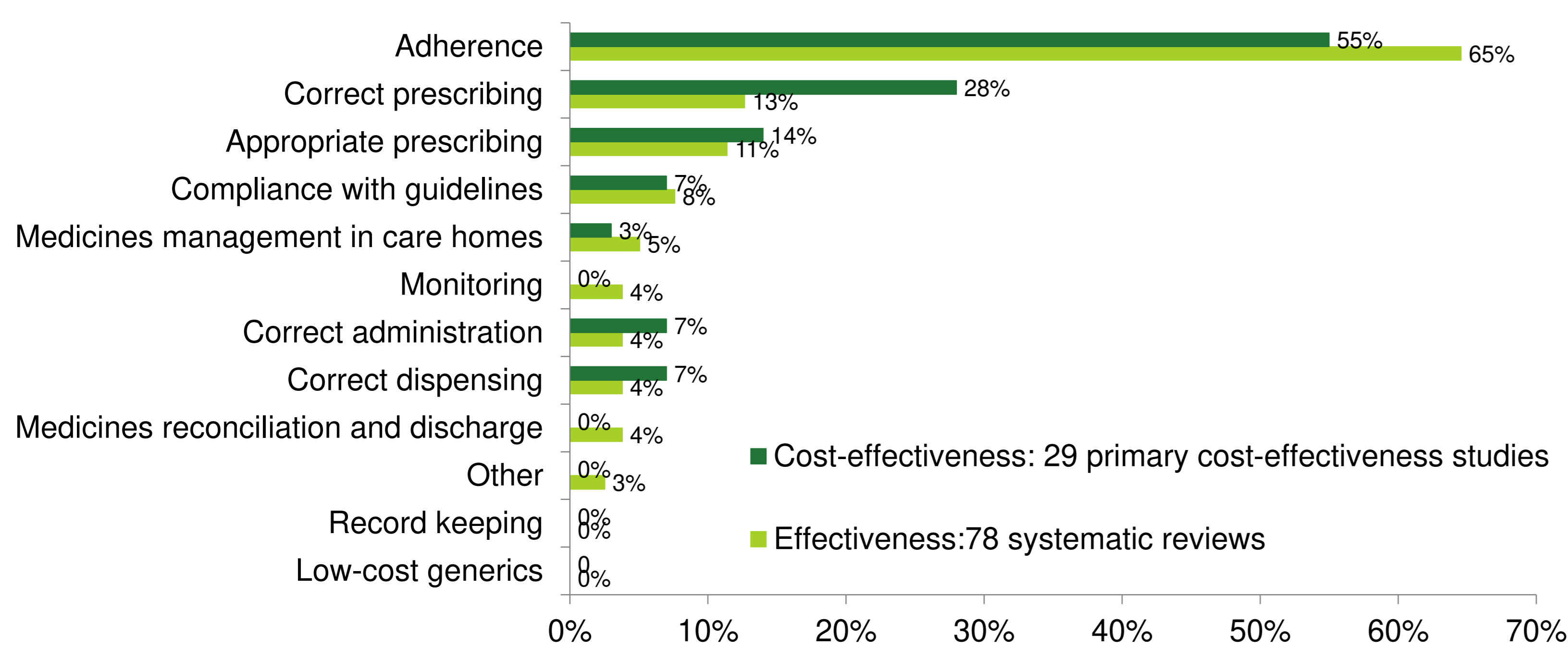
correct dispensing

adherence

Better health outcomes

Savings ~ \$500 million/year

Evidence on effectiveness and cost-effectiveness of interventions



Conclusions

- Research has evaluated interventions on one particular stage of the medicines pathway
- Process outcomes are often used rather than end outcomes (health outcomes, costs)
- Remains unclear:
 - Which aspect of suboptimal use of medicines is a key driver of costs and health loss
 - Which stage of the medicines pathway is more likely to benefit from intervention

Directions for future research

- Decision analytic modelling of the full medicines pathway
 - To evaluate which aspects of suboptimal medicines use have the most impact
 - To indicate where an intervention could provide the greatest benefits
 - To estimate the how much to invest in improving the pathway