

Assisting The Patient's Satisfaction at Anticoagulation Clinic During (Covid-19 Outbreak Period) Crises; The Impact of Pharmacist Role on Patient's Outcomes

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BACKGROUND:

As part of continuous development and efforts in Saudi Arabia to prevent transmission of the novel coronavirus infection and ensure patients' safety, the healthcare system started to minimize patients visits to hospitals. Patients on warfarin therapy need close monitoring to help prevent serious side effects while maximizing effective treatment. As an initiative, establishment of the emergency pharmacist- managed anticoagulation clinic in the restricted areas was performed in Al Qatif City to manage warfarin doses according to patient's INR, facilitate the availability of medication and ensure the safety of patients on warfarin.

OBJECTIVE:

Our study is aiming to assess adherence, and satisfaction in all patients on warfarin therapy followed by the emergency anticoagulation service during COVID-19 outbreak.

METHODS:

The study identified 70 patients at SBCC "Saud Al Babtain Cardiac Center" who visited the emergency anticoagulation clinic in Qatif Hospital during COVID-19 outbreak on the period between March 9 – April 26, 2020. The study included patients aged 18 years old and above who are on warfarin therapy for follow-up visit on an observational prospective study using validated questioner from three parts (Kansas City Cardiomyopathy Questionnaire (KCCQ), Minnesota Living with Heart Failure Questionnaire, and Morisky Medication Adherence scale (MMAS)). Participants were advised to respond to the study questionnaire that

assess the following variables; INR compliance and management, Safety precautions for infection control practices, Management of medication, Trust of the point of care and Clinic accessibility and services provided.

RESULTS:

70 patients (47.1% aged 30 to 50, 44.3% aged 50 to 70, 61.4% female, 100% Saudi and with 42.8% visited the remote anticoagulant clinic at least 3 times in the study period) were included in the study and their responses to study questionnaire were collected. 61.5% of patients received medicinal reconciliation based on their INR level. Majority of patients reported strongly agree or agree that they are adopting the provided service rather than regular hospital visits (84.3%), the service helped them to stabilize their INR within target range (95.7%), the infection control measures that were taken during clinic visit was assuring their safety (97.2%). Moreover, 91.4% of patients reported that they are trusting the point of care in the clinic and 91.5% were satisfied with the instructions provided by the anticoagulant clinical pharmacist. Most of patients advised to implement the provided service for other cardiac patients and to make benefit of it for other specialties as well with 95.7% and 92.9% respectively.

CONCLUSION:

This study provides evidence that support pharmacist role in improving patients' outcomes during COVID19 period. Remote anticoagulation clinic provided alternative solution for follow up with cardiac patients that has potential impact on medication management and patients' satisfaction.

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