

Delivery of Clinical Pharmacist Services (CPS) into a High Risk OB/GYNE (HROBG) Clinic

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Abstract

Methods: The HROBG clinic was developed and integrated within existing HIV clinics to promote women's health screening and prenatal care in patients. The HROBG clinic sees approximately 30 pregnant women annually. The number of HIV pregnant women and their complexity of care provided have increased over the years; therefore CPS was incorporated into the clinic. A multidisciplinary team (MDT) approach is used, consisting of physicians (Infectious Diseases, and Obstetrics/Gynecology), nurses, research personnel, a clinical pharmacist, a social worker, and patient advocates. CPS was developed to promote patient education, monitor adherence and antiretroviral therapy (ART). CPS also helps with ART management by reviewing resistance testing, assisting with selection of ART, managing adverse drug reactions and drug interactions, and evaluating safety during pregnancy and the need for Therapeutic Drug Monitoring. CPS also helps ensure access to medications by coordinating AIDS Drug Assistance Program (ADAP) medications and refills. Additionally, a subset of patients will have routine visits for pillboxes as part of a formal adherence program. Pharmacists are actively involved in a weekly MDT conference where patient's records are reviewed and therapeutic recommendations are made.

Conclusion: The incorporation of CPS into the HROBG clinic has been well accepted by both the care providers and the patients in an era of increasing complexity of care. The CPS in HROBG clinic will be collecting data to support continued inclusion into the clinics

Objectives

To describe CPS developed and provided in a High-Risk OB/GYNE clinic.

Description of Clinic

The University of Illinois HIV/AIDS Project is based in the Section of Infectious Diseases of the University of Illinois Hospital and Clinics, and is a component of the University of Illinois Medical Center located on Chicago's near west side.

The University Medical Center is state funded, and maintains a proactive position to provide health care to the underserved.

Due to the complexity of HIV, a multi-disciplinary team approach is used, including the following:

- Physicians (Infectious Diseases, Obstetrics/Gynecology)
- Nurses
- Pharmacists
- Nutritionists, Social workers, Case managers, and Patient advocates
- Research Personnel

Demographics

Number of patients seen by CPS since Dec 2004 to present: 61

Race:

African American: 74%

Latino: 16%

Caucasian: 10%

Risk Factor: Heterosexual: 92%

Average age: 28

Diagnosed during pregnancy: 55%

Description of Clinical Pharmacy Services:

CPS consist of:

- Infectious-diseases trained pharmacist
- present during OB/GYNE clinic
- present during weekly case conference
- available via pager/cell phone at all times

Services Provided include:

- Patient education
- Recommend treatment regimens based on resistance testing
- Evaluate safety in pregnancy and Therapeutic Drug Monitoring
- Monitor adherence and antiretroviral therapy
- Manage Adverse Drug Reactions, drug-drug interactions
- Coordinate ADAP medications and refills
- Facilitate access to medications
- Post-partum Continuity of Care

Adherence

As we know, adherence is of utmost importance in HIV treatment. CPS promote adherence by

- Facilitating medication delivery to clinic;
- Offering appointments for weekly or monthly pillbox visits
- Authorizing and coordinate refills
- Continuity of Care between OB/GYNE service to Infectious Diseases

Conclusion

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