

# Medication review by community pharmacists, general practitioners and nurses in the province of Luxembourg : an integrated approach

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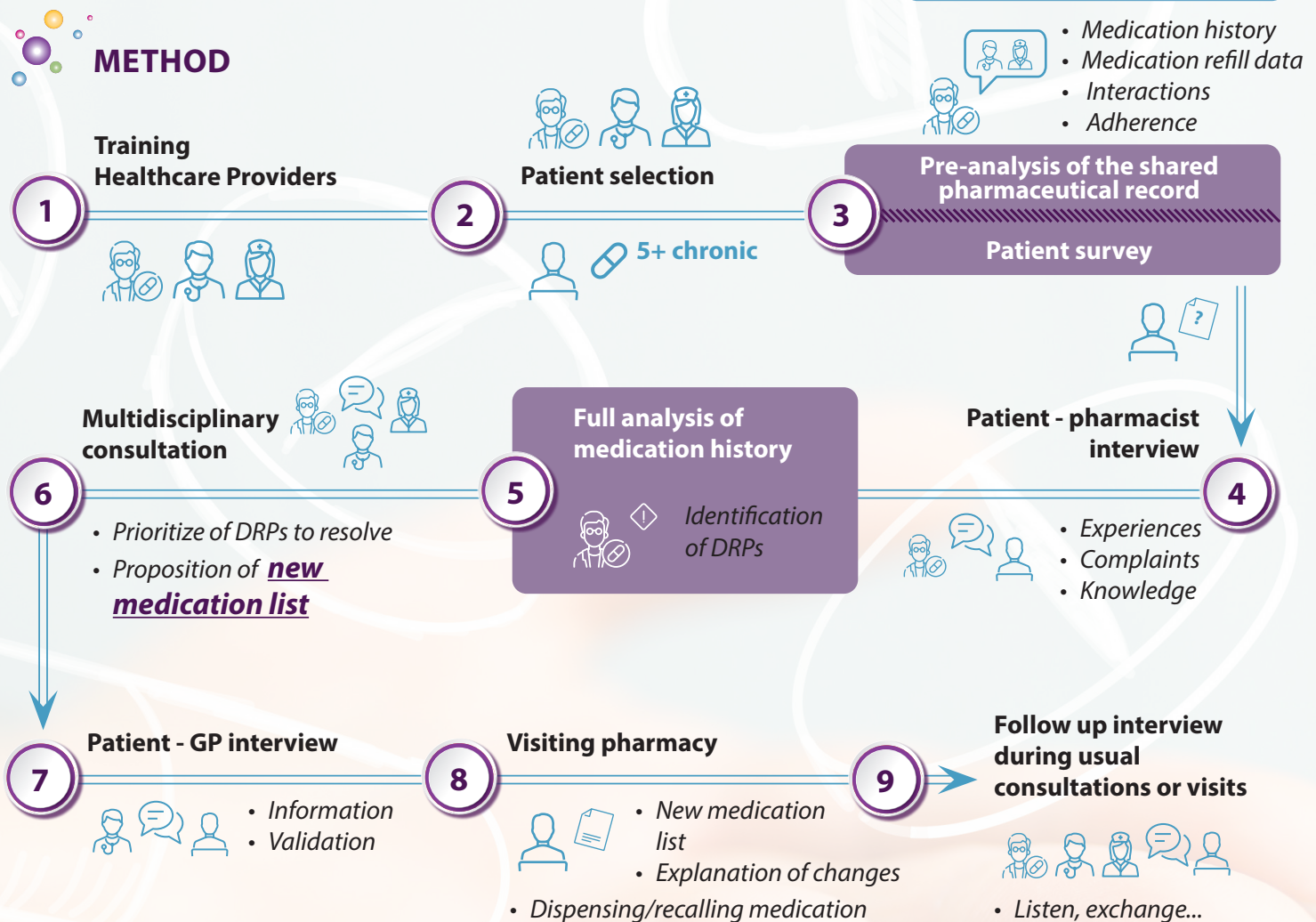
## INTRODUCTION

Patients with multiple chronic conditions receive usually medicines to treat each of them. This situation, known as polypharmacy, places general practitioner alone in the face of complex management issues of the prescription and facing the issue of deprescribing (drug withdrawal). Drug-related problems (DRP) are responsible for 5–17% of acute hospitalizations and by interfering with desired health outcomes, they pose both health and economic problems. A paradigm shift in healthcare policy is needed.

## AIM OF CHANGE

To assess the feasibility and impact of MR in the care pathway of a chronically ill patient through an integrated polymedication management involving the general practitioner, the family pharmacist and the home care nurse, with the patient and the caregiver at the centre of this pathway.

## METHOD



## CONCLUSION

The integration of care is facilitated by a streamlined organization of work and a common vision of care. The co-creation process has already led to quality networking and the organization of multidisciplinary meetings with shared experience. A MR is a promising service to proactively detect DRP, to support evidence-based medication use and to provide individualized counselling to polymedicated patients. However, the effect is reduced if this isn't done in a multidisciplinary setting.

