

Barriers of Pharmaceutical Care in Community Pharmacies

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DESCRIPTION

Health care is a professional sport that began in the 1980s and is the result of profound changes in the American healthcare system due to the economic crisis. The first definition of pharmaceutical care came from Strand and Hepler: "Responsible supply of drugs to achieve clear results that improve the quality of life of the patient". The goal is to achieve reasonable and evidence-based drug treatment that is good for all patients and society.

In recent decades, pharmaceutical practice and managed care systems have gradually increased significantly; Pharmacists are embracing innovative patient care strategies such as The Pharmaceutical Care Practice (PCP). This approach has attracted worldwide attention and its philosophy has become the pharmacy's primary mission. Pharmaceutical Nursing Practice (PCP) requires that physicians not only dispense medications, but also take responsibility for improving the quality of patient treatment. In this "drug care" model, pharmacists make treatment decisions based on the best medical interests of the patient to achieve clear results and improve the patient's quality of life (QoL).

Since pharmacy services are results-oriented and have a completion process, pharmacists must acquire skills, qualifications, and abilities to overcome the challenges posed by this responsibility. In our environment, a major setback in the practice of pharmaceutical care is the lack of clear standards that pharmacists must follow in their daily practice. Research has been conducted to determine the challenges that community and hospital pharmacies face in developed countries in implementing pharmaceutical care.

Pharmacy practice is primarily focused on traditional distribution activities. Consultations from pharmacists and

patients are generally limited to the dosage and frequency of their purchases. Sometimes, at the request of the patient, the pharmacist will advise the patient on adverse reactions and the interaction of the drug with other drugs. Private pharmacies rarely conduct patient drug review and treatment management. A 2011 study of UAE community pharmacies aimed at exploring the positive results of active pharmacist consultation showed that pharmacists recognize that effective consultation will increase their sales and improve their pharmacy's reputation. However, another study conducted in 2012 showed that most pharmacies did not provide enhanced professional services.

The concept of pharmaceutical care is spreading throughout the pharmaceutical industry, but most of it has not yet been implemented. According to reports, pharmacists recognize many obstacles to the implementation of pharmaceutical care in various ways. These barriers have been found to differ between different countries. Time and money are the main obstacles to the implementation of pharmaceutical care in European countries and the United States. But in most other countries, barriers related to the provision of pharmaceutical services reported by community pharmacists include lack of funding, difficulty in obtaining patient clinical and laboratory data, lack of clinical knowledge and motivation, lack of time and private consultation areas, and very little funding. Incentives and low expectations in the pharmaceutical industry.

As Strand endorsed in 1998, pharmaceutical care is a professional-driven service, demonstrating that pharmacists' barriers to perception are very important in service implementation. According to the pharmacists' responses to the patient factors part, the pharmacists did not seem to feel any obstacles to the implementation of their services, because the patient's prescription was easy to assess and the patient agreed to their interview without objection.

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