PROMOTING QUALITY USE OF MEDICINE IN CHRONIC RESPIRATORY DISEASES IN VIETNAM: THE ROLE OF PHARMACISTS

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I confirm that Tu Son Nguyen contributed designing studies, collecting and analysing data, writing and editing manuscripts to the paper/publication entitled:

- 1. Pharmacist's training to improve inhaler technique of patients with COPD in Vietnam. (Published in Int J. of Chronic Obstructive Pulmonary Disease, 2018. 13: p. 1863-1872)
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- **3.** Effectiveness of a short training program for community pharmacists to improve knowledge and practice of asthma counselling A simulated patient study. (Published in Respiratory Medicine, 2018. 144: p.50-60)

Prof. Shu Chuen Li

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Chapter 5. Tu Son Nguyen, Thi Lien Huong Nguyen, Thi Thuy Van Pham, Thi Bich Thao Cao, Van Khai Nguyen, Susan Hua, Shu Chuen Li, Effectiveness of a short training program for community pharmacists to improve knowledge and practice of asthma counselling - A simulated patient study. Respiratory Medicine, 2018. 144: p. 50-60. (doi: 10.1016/j.rmed.2018.10.003.)

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GLOSSARY OF ABBREVIATIONS AND ACRONYMS

ADR Adverse drug reactions

COPD Chronic Obstructive Pulmonary Disease

DALY Disability Adjusted Life Years

DPI Dry powder inhalers

DUE Drug use evaluation

EQ-5D-5L EuroQol - 5 Dimensions – 5 Levels

FIP International Pharmaceutical Federation

GDP Gross Domestic Product

GOLD Global Initiative for Chronic Obstructive Lung Disease

GPP Good Pharmacy Practice

HRQL Health Related Quality of Life

MDI Metered dose inhalers

MMAS Morisky Medication Adherence Scale

MoH Ministry of Health

NCD Non-communicable Diseases

QALY Quality Adjusted Life Year

QoL Quality of Life

TDM Therapeutic drug monitoring

VAS Visual Analog Scale

WHO World Health Organization

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ABSTRACT

Nowadays, the role of pharmacists has evolved to become health care providers of pharmaceutical care services that incorporates patient-orientated and product-orientated services. They not only work together with other health care providers, but also with patients in order to achieve positive outcomes for their therapeutic management. However, in Vietnam and other developing countries, both community and hospital pharmacists are still substantially under-utilised for patient care compared against the pharmaceutical care model of practice. How to improve the contribution of pharmacists in health care is still a tough question that need to be answered, especially in Vietnam with a rising number of better-qualified pharmacists as well as a shortage in other health care human resources, such as doctors and nurses.

At the same time, non-communicable diseases are becoming a major public health issue putting a heavy burden on society and the economy of Vietnam. Of these diseases, prevention and treatment of COPD and asthma is contributing to several problems including increasing number of patients, high rate of non-adherence to therapy in patients, and a low proportion of patients using inhalers correctly. Therefore, in exploring how to increase the role of hospital pharmacists in Vietnam, our study has chosen inhaler technique and medication adherence to demonstrate the role of hospital pharmacists' interventions in the management of COPD and asthma. Our findings showed that hospital pharmacists can teach COPD patients to improve their inhaler technique and counsel patients to improve adherence in a very efficient manner. The pharmacist-led programs also showed positive impact on patients' quality of life.

How to improve pharmacists' contribution to management of asthma in the community setting is another issue that needs to be addressed. Literature showed that a continuing education program is a key strategy for the community pharmacy sector to assist in improving the management of asthma in developing countries like Vietnam. Our present study developed and

evaluated an educational program for community pharmacists and evaluated its effectiveness with the simulated patient method. The study demonstrated that our training program was highly effective in equipping community pharmacists with the necessary knowledge and practical skills to counsel asthmatic patients about the management of their condition and medications. It is suggested that such education programs should be promptly implemented and made compulsory for community pharmacists in Vietnam to improve the quality of counselling for patients with asthma and other non-communicable diseases.

Overall, our studies demonstrated that with proper encouragement and simple continued professional education, both hospital and community pharmacists can expand their role to contribute to better management of asthma and COPD in Vietnam. This model may produce the same positive outcomes in other chronic diseases and should be considered by the relevant authorities in Vietnam and other developing countries.