

The Vital Role of Pharmacists in Assisting Patients through Effective Counselling

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Review Article

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ABSTRACT

The practise of pharmacy and the idea of pharmacological treatment are both rapidly changing all around the world. Additionally, because of his technical and professional understanding, the pharmacist's role in advocating rational and cautious use of medicine is becoming more crucial. It is well established that patients who are knowledgeable about their drugs and how to take them obtain safe and effective treatment, effective medical care. In addition to the many technical tasks carried out behind the counter, therapeutic pharmacists frequently meet with patients and help with clinical therapies. Giving the patient or their representative a medicine kit alone is insufficient; also, the right medication must be given to the right person with the right information. Helping a client see everything clearly, possibly from a different perspective. To achieve good change and build a trustworthy relationship, the client may benefit from focusing on feelings, experiences, or behaviour. Effective counselling requires confidentiality.

Keywords: Patient counselling; Attitude and behavior; Privacy and confidentiality; Counselling aids

INTRODUCTION

When we are summoned to the counselling area, a fresh scenario comes to light that needs to be carefully examined in order to deliver useful knowledge. We must watch the patient's nonverbal clues as we approach the counter to identify any barriers to communication that must be removed. A pharmacist who wants to provide counselling services in a clinical context must overcome a number of obstacles [1]. Some obstacles are patient-centred, such as coaching the carer rather than the patient, a poor level of education, and the patient's challenging physical condition. While some are institution-specific, such as delays in discharge orders or invasions of privacy, and can be prevented by careful adherence to procedures. It is essential to remove the obstacles a pharmacist faces in communicating with the patient in order to offer a framework for guaranteeing medication adherence and the best therapeutic efficacy [2]. A good pharmacist consultation makes all the difference in whether a pharmacotherapeutic outcome is favourable or negative. Though each pharmacist has their own style of counselling a client, they all must adhere to a few basic principles, such as making an introduction, using the patient's information to identify the correct patient, making the patient feel comfortable while maintaining their privacy, and answering any questions they may have [3].

Counselling for patient's goal

The patient needs to be aware of how important medication is to his entire health. It's important to establish a business relationship that enables continuing interaction and consultation. It's critical that individuals have a better understanding of how to manage the adverse effects and drug interactions associated with prescription medications. The patient develops into a knowledgeable, effective, and active participant during disease treatment and self-care management. Avoiding medication interactions and potentially dangerous drug responses is important, and the pharmacist should be regarded as a specialist in pharmaceutical care.

Potential pharmacist benefits

You are seen as having a greater professional position by patients and other healthcare professionals making an essential element of patient care that can't be replaced by staff or technology. Higher levels of job satisfaction as a result of improved patient outcomes. A service that improves the patient's experience in any way. Revenue is generated when clients pay for counselling services; it is currently small but growing. The patient should be able to: Explain how an effective counselling contact explains why a prescription medicine is helpful for maintaining or enhancing wellness. Accept the healthcare provider's assistance in establishing a rapport and providing the foundation for continuous participation and dialogue. Become more capable of making well-informed choices regarding medication compliance and adherence. Enhance your stress management strategies [4].

Pharmacist characteristics

Pay close attention as you are being counselled. The pharmacist must focus intently on the patient and monitor both verbal and nonverbal cues.

Behavior: The pharmacist can evaluate the patient's understanding of their condition and medications based on this.

Be flexible: The pharmacist needs to be flexible in order to give recommendations and information that are tailored to the unique needs and capacities of each patient.

Demonstrate empathy: The pharmacist should make an effort to comprehend the patient's suffering and predicament as if it were his or her own issue.

Show compassion: Pharmacies shouldn't judge a patient's behaviour based on their illness or the group they are a part of.

Show compassion: During counselling sessions, clients may act irrationally, irritably, or aggressively. The pharmacist needs to respect the patient's feelings.

Speak confidently: The patient acceptance of the pharmacist's suggestions will rise if the pharmacist speaks confidently^[4].

LITERATURE REVIEW

Patient counselling obstacles

Thoughts regarding emotions: Patients who have had a mental change as a result of disease anxiety, unexpected costs, interruptions at work or in their business, etc. Other factors include not knowing what to expect with this new symptom or illness, depending on medical professionals for the best care and on family for assistance with daily tasks, being afraid of change and death, experiencing pain and discomfort, not having privacy during physical examinations, and losing one's sense of self as a healthy person (which sounds strange but is mostly true).

When people gain social support, they are more likely to trust them or treat them favourably^[5].

The pharmacy setting: Many neighbourhood pharmacies lack a separate space where the pharmacist and the patient can speak privately. In addition to a lack of privacy, pharmacists frequently encounter other challenges to effective patient interaction, such as a lack of encouraging individuals.

- There is a huge workload and backlog.
- Those who are awaiting the filling of their prescriptions or assistance from a pharmacist.
- Incoming calls and requests for information or help from co-workers.
- Inadequate computer hardware, software, and services, as well as interns and other staff
- Preparing for new consulting positions^[6].

Pharmacist's attitude and conduct during patient counselling

A primary activity of a pharmacist is Patient Counselling (PC). It could be as simple as giving a medication's dosing instructions or it could involve offering lifestyle and other health-related advice. A pharmacist is responsible for making sure the patient comprehends the instructions and uses the medications correctly. The first step is to inform the patients of the directions listed on the medicine labels^[7].

The pharmacy should always be open so that the right information may be given. PC aids in lowering both drug-related issues and non-adherence to medication. The patient's satisfaction is an additional benefit. As a result, patients can utilise their drugs with greater assurance. For a PC to be productive, good communication skills are required.

Face expression and eye movement are part of (NVC). When someone asks you a question, don't roll your eyes. Understanding what the patient is saying also requires active listening. The pharmacist should discuss topics like: (a) Why the drug is prescribed, (b) How it works, (c) Dose and frequency, (d) Treatment goals, (e) Adverse drug responses and how to manage them, (f) Drug-Related Issues when counsels the patient [8]. Communication with patients who are nearing the end of their lives: Unless they seem uninterested, we shouldn't avoid talking to them. When speaking with elderly patients, keep in mind that their grasping capacity is lower than that of younger patients. They might also experience issues including decreased eyesight, hearing, etc. counselling should be conducted properly as a result [7].

Communicating with patients that are mentally ill. Communication with these patients might be challenging. OEQs will be more successful if they are open-ended. Patients who are mentally ill could have trouble understanding their treatments. As a result, the information should be provided to them in full [7]. Diabetic patient communication: Due to recently developed diabetic treatments, pharmacists are able to provide patients with a wide range of information. They can inform the patients about how to use monitoring devices properly, how to screen for drug interactions, and other pertinent information. The levels of the patient's blood glucose can even be checked by the pharmacist.

They can also provide details on how to administer insulin. When communicating with children, remember to (a) use simple sentences, (b) inquire about their inquiries, (c) ask OEQ, and (d) remember that NVC is crucial, so be mindful of your body language, tone of voice, and other cues [7]. In addition to these, the pharmacist needs to possess the knowledge and abilities needed to deliver quality PC. They ought to be aware of the patient's culture, beliefs on health, attitudes, etc. OEQ and effective listening are critical abilities for information gathering. The pharmacist can provide the right information to fulfil the patient's needs by evaluating the patient's cognitive capabilities, learning style, pace, and physical condition [8]. According to a survey conducted in Karnataka, professional satisfaction (43%) and patient happiness (32%), as well as sales growth (8%) and improved patient compliance (7.5%), are the key reasons why pharmacists provide PC [5]. However, pharmacists did face certain challenges, such as patients' unsatisfactory responses (82%), pharmacists' inadequate knowledge and confidence (78%), insufficient professional training programmes (75%), and doctors' dispensing (72%) [9].

Programs for continuing pharmacy education aid in the professional development of pharmacists. According to a study conducted in Ethiopia, patients who are more informed about their drugs are more likely to adhere to drug therapy, which leads to more successful patient-provider communication. The respondents were unable to counsel their patients due to a lack of expertise and confidence.

Difficulties in patient counselling

First, we must determine any obstacles that will need to be removed, such as linguistic, literate, and ideological ones. To meet the demands of each patient, we should quickly dynamically update our OEQ and drug information.

Barrier based on a pharmacist: Language barrier the medium of conversation is a significant issue when speaking with patients because we want to make sure that the information we provide is accurate and that their questions are answered in a way that is appropriate. While using a family member as a translator can be useful, there is a greater risk of information being misinterpreted. A technician may assist the pharmacist if the patient is at ease, creating a three-way interaction. A pharmacist should keep up with current information to eliminate pharmacist-based barriers, which are just as important as communication skills [10].

Patient-based obstruction

Patient reluctance: Patients occasionally experience some reluctance for reasons such as "An elderly man with erectile problems may feel uncomfortable speaking to a women pharmacist." As a result, we must attend to each patient's needs. Allowing a patient to wait in the therapy room for more than a few minutes will undermine their sense of security and privacy [10]. For a patient with speech or hearing impairment, several assistance, such as pictograms and hearing aids, must be employed. To get through all of these obstacles, we also need to provide a space where we may address client misunderstandings and offer extra counselling advice tailored to the patient's individual needs.

Know-it-all: Some patients may choose to forego counselling sessions on the grounds that the information in the leaflet is sufficient and they can read it, they don't have time, they are employed as healthcare professionals, etc. A community pharmacist, however, might have two or three crucial counselling points for each medicine at his fingertips. He or she can do this by using phrases such, "I just wanted to check that you were aware of." Making sure all patients are aware of their ailment and the goal of treatment is the greatest method to ensure that they all adhere to the recommended course of action and obtain the best therapeutic result possible [10].

Succession in obstacles

Several characteristics should be noted in order to obtain a good counselling section, including:

Establish trust: The pharmacist should show a sincere interest in the treatment of the patient. By properly introducing the patient and smiling when they are greeted at the beginning of the session, the patient is more likely to feel comfortable disclosing all relevant information about their prior medical and drug histories [10].

Participation of the patient: The pharmacist should encourage the patient to actively participate by posing questions. They must to assess the patient's comprehension of pharmacological therapy and adjust the counselling as necessary [10].

NVC: It's critical that the pharmacist is aware of the NVC, such as keeping eye contact and a favourable facial expression that benefits the patient [10]. In order to foster clear interactive communication, it is crucial to listen to the patient's wants, concerns, and questions. Passive listening can be used by responding with a nod of the head and phrases like "sure, go on." OEQ questions can help you learn more, and the pharmacist should explain why they are asking so that they don't annoy the patient [10].

Maintain objectivity: Pharmacists should be careful to prevent their ethical or religious convictions from interfering with patient counselling. He needs to exercise caution when speaking in an unjudgemental manner. Empathy is defined as the ability to perceive and experience things from another person's point of view. Use this ability to motivate the sufferer. To achieve the best treatment outcome, remind the patient to take their medication as prescribed [9]. Assure total secrecy and uphold privacy to help the patient feel at ease discussing private medical problems [10].

Counselling aids

When the patient receives the information verbally, there is a possibility that the patient will eventually forget it. To aid with patient counselling, numerous teaching and educational tools have been created. If the information is given in written form,

the patient can read it whenever they have free time and whenever they need it. Medication cards can be a helpful tool, especially for people who take prescriptions regularly. A long-term medicine list for patients is contained in a medication card. Presented in a way that is simple for the patient to understand, a medication card is a written overview of a patient's medications. Both handwritten and computer-generated cards are acceptable.

Once a patient receives a card, they can use it to help them organise their at-home medication habits and to show other healthcare professionals. When the pharmaceutical regimen is altered, it is crucial to update the card. Consumer product information, also known as PIL, is information created by medicine manufacturers for their drugs. PILs are written informational leaflets that describe a patient's ailment and how it is treated, including drugs and necessary lifestyle modifications. Printed information can help people grasp and accept treatment recommendations better than spoken guidance alone.

It is acceptable to use handwritten or computer-generated cards. A patient can use the card they receive to keep track of their at-home medication routines and to show other medical personnel. Updating the card is essential whenever the medication regimen changes. PIL, or consumer product information, is data produced by pharmaceutical companies for their products. PILs are written informational booklets that outline a patient's condition and the methods used to treat it, including any medications and required lifestyle changes. Written information is more easily understood and accepted by patients than verbal advice alone. Written material is to be viewed as an addition to spoken counselling rather than as a substitute for it. Pharmacists can create beneficial PIL by utilising their understanding of medicines and the local tongue.

DISCUSSION

Satara and Sangali district conducted one analysis to gauge the effect on PC based on knowledge, attitudes, and practise. Samples showed that they provided counselling services using verbal, written, and audiovisual approaches, although almost 46.56% of respondents used a combination of verbal and written methods. While 16.93% of respondents indicated they were not utilising any aid, 51.32% and 7.41% of respondents indicated they utilised posters and pictograms for PC, respectively. Additionally, the combined use of multiple methods did not differ much from other methods. Written material is to be viewed as an addition to spoken counselling rather than as a substitute for it. Pharmacists can create beneficial PIL by utilising their understanding of medicines and the local tongue.

CONCLUSION

The pharmacist should be on hand to assist the customer in choosing an OTC medication, provide non-pharmacological therapy, or refer the customer to a doctor. Additionally, pharmacists teach patients when to seek medical attention, how to treat themselves in an emergency, and when diagnostic testing are necessary. So long as the counselling process is effectively maintained, patients' comprehension, compliance, and pharmacists' sense of fulfilment at work all improve. It also strengthens the bond between doctors, patients, and pharmacists. It gives them something to turn to if they forget whatever they've heard. Video, graphic, and other tool utilisation could be beneficial to counselling. Pharmacists have embraced a variety of counselling tools, including posters, computer-generated booklets, pictograms, and telephone systems. Computer-assisted counselling is still relatively unknown in the nation. One might anticipate effective counselling and patient adherence by utilising new strategies.

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