

Novel role of a Clinical Pharmacist in Postpartum Contraception Service Provision in Qatar; Patient Acceptability and Utility

Yehia El Khawly¹, Morounfolu Thompson², Eman Alhmoud¹ , Sanaa Al Hassan² ,
Rasha El Enany¹,Lolwa Al Ansari ² ,Amna Tellisi² ,Houssam Afify²

مستشفى الوكرة
Al Wakra Hospital

عضو في مجموعة حمد الطبية
A Member of Hamad Medical Corporation



Background

- Unintended pregnancies are a significant public health problem with adverse effects on birth spacing, maternal child health and pregnancy outcomes. Immediate postpartum contraception has been shown to reduce unintended pregnancies and optimize inter-pregnancy interval (IPI). IPIs below 18 months are associated with more adverse outcomes, therefore immediate initiation of postpartum contraception prior to hospital discharge is recommended.
- Postpartum contraception enables better optimization of maternal health before the next pregnancy. A joint in-patient postpartum contraception counselling service was piloted at AWH by the clinical pharmacy and obstetric departments. Comprehensive counselling was given to women intending to breast-feed, on the options, pros and cons, safety profiles, and utility of postpartum contraception.
- The proposed advantages of a combined service provision led by a clinical pharmacist from the patients’ viewpoint included; the most up-to-date information on the various contraceptive options, dealing with missed doses, adverse effects and drug interactions and therefore, improved adherence.

Objectives

- The aims were to assess the acceptability, patient involvement, patient satisfaction and utility of clinical pharmacist-led inpatient immediate postpartum contraception counselling, working with obstetric ward specialist physicians and nurses to provide comprehensive and excellent care.

Methods

- A questionnaire survey was undertaken to assess patient satisfaction with pharmacist–led postpartum contraceptive counselling. • Patient enrolment was open to all intended breast-feeding mothers and entirely voluntary. • Participant’s responses were measured using a 5-point Likert scale. • Data was analyzed using descriptive statistics and frequency distribution.

Results

- 100 postnatal inpatient volunteering women were recruited for the study, and all completed the survey. Based on survey results 100% of the patients agreed that all the clinical pharmacist’s communication was clear and understandable.
- In addition, 99%of the women agreed that the healthcare professionals answered their questions regarding contraception.
- Most of the patients agreed that the clinical pharmacist explained all birth control options (non-hormonal, hormonal, and lactational amenorrhea methods), discussed possible side effects (99%), and was helpful in guiding them to choose a suited contraceptive method (98%).
- Overall, the clinical pharmacist had a positive impact (97% agreed) on patients in selecting their contraceptive method.

	Strongly Disagree	Disagree	Not sure	Agree	Strongly Agree
The Clinical Pharmacist communication was clear.	☐	☐	☐	☐	☐
The Clinical Pharmacist attitude was appropriate and treated me respectfully.	☐	☐	☐	☐	☐
The nurse was very cordial, cooperative, and informative offering me the service.	☐	☐	☐	☐	☐
The Clinical pharmacist answered any questions I had regarding contraception.	☐	☐	☐	☐	☐
The clinical pharmacist listened carefully to all my concerns.	☐	☐	☐	☐	☐
The Clinical Pharmacist explained all birth control options and helped guide me in choosing a suitable contraceptive method.	☐	☐	☐	☐	☐
The clinical pharmacist explained all possible side effects of the birth control options.	☐	☐	☐	☐	☐
The clinical pharmacist was knowledgeable about Women's health.	☐	☐	☐	☐	☐
The room where the counselling session took place was appropriate and the services were confidential.	☐	☐	☐	☐	☐
Counseling before leaving the hospital was better for me, rather than having a later visit/appointment after discharge	☐	☐	☐	☐	☐
The overall performance of the Clinical Pharmacist exceeded my expectations and met my satisfaction.	☐	☐	☐	☐	☐
I'm now familiar with the different contraceptive methods and feel confident of the birth control option I've selected.	☐	☐	☐	☐	☐
I feel comfortable with the service and will recommend it to family and friends.	☐	☐	☐	☐	☐

Figure 1.Patient Satisfaction Questionnaire

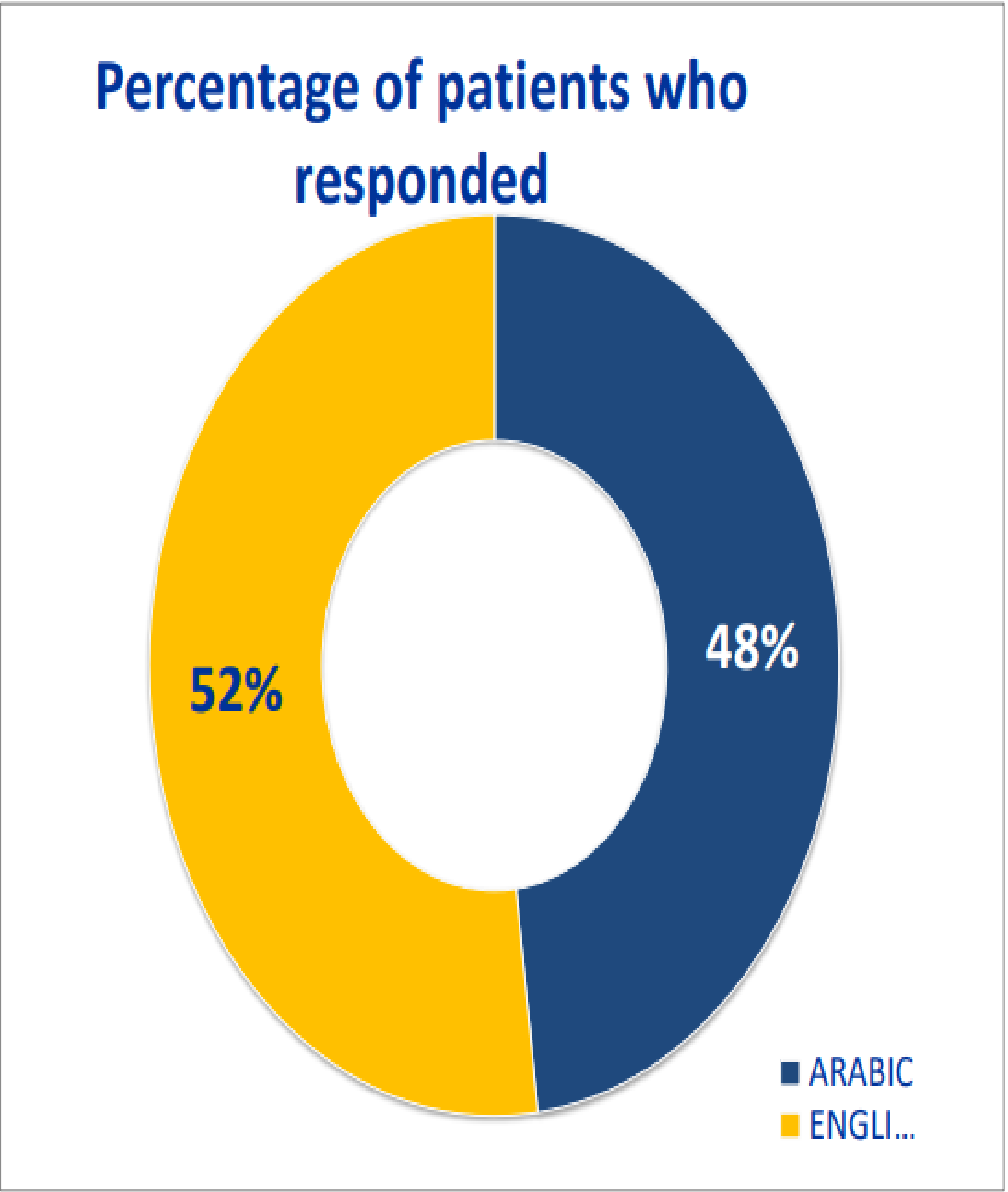


Figure 2. Patient Distribution

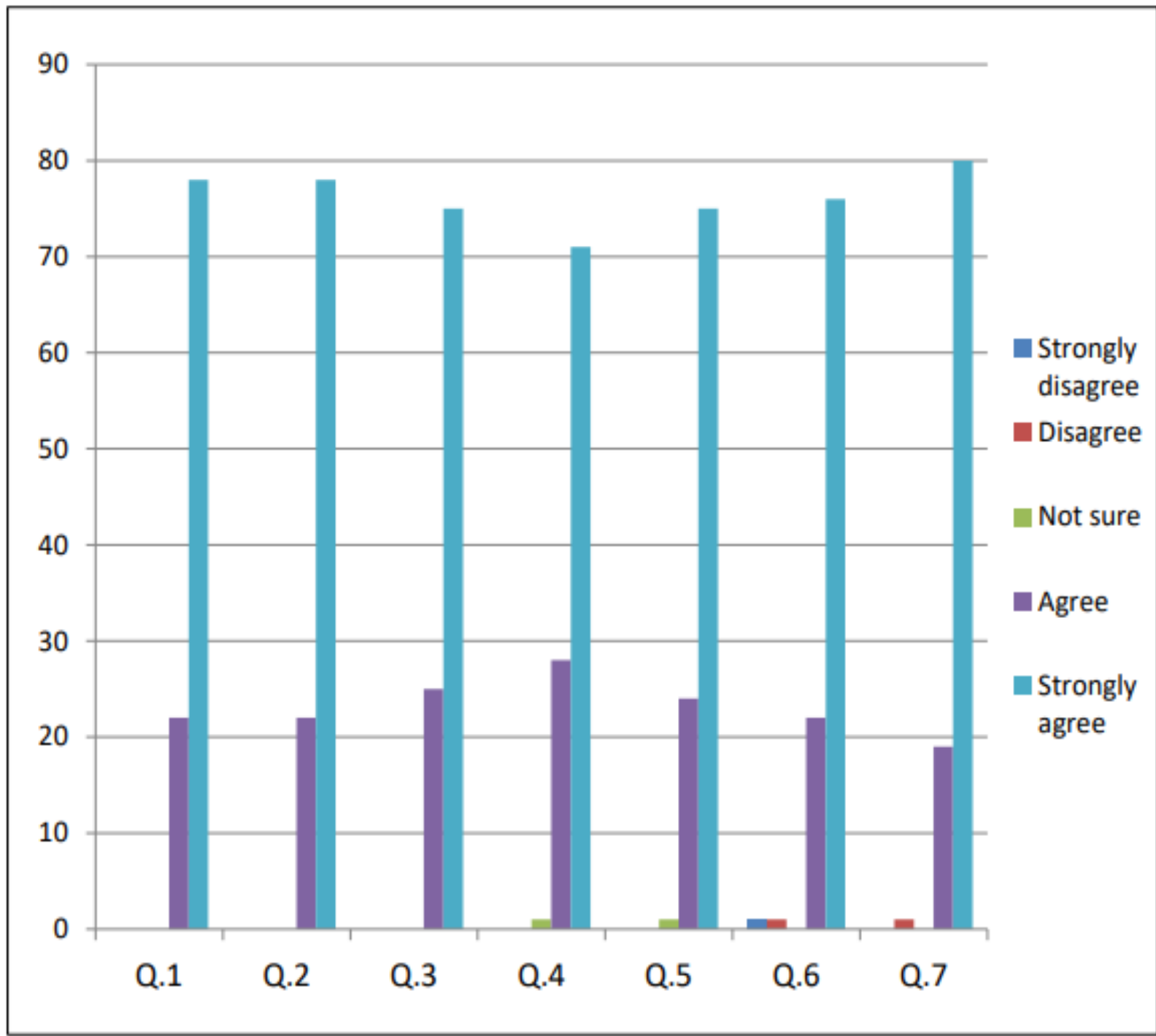


Figure 3. Patients’ responses to Q.1-7

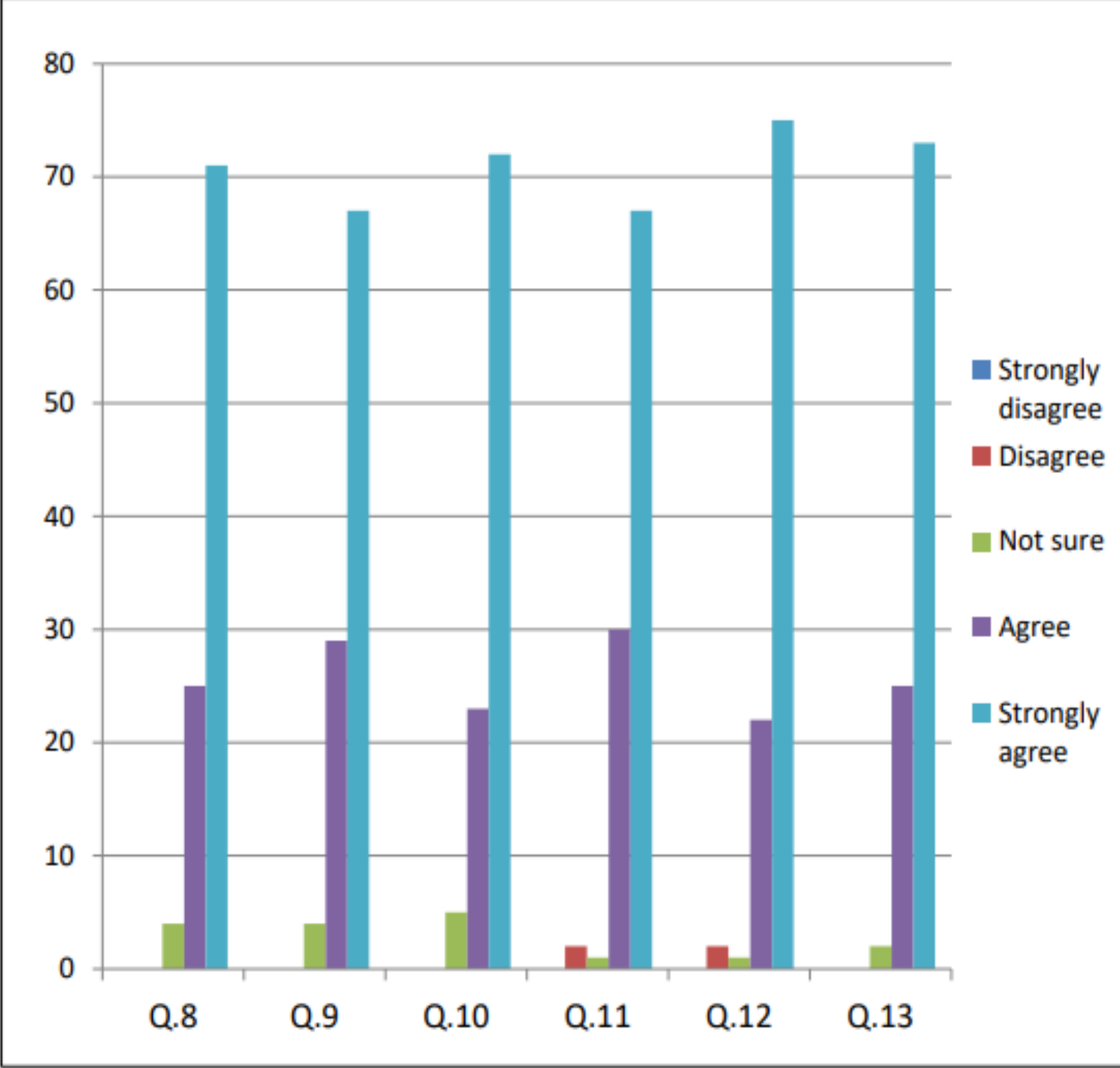


Figure 4. Patients’ responses to Q.8-13

Conclusions

- The results of this study confirm the important contributions of clinical pharmacist-led inpatient counselling to postpartum contraceptive patient care as part of a multi-professional provider service. Participating inpatients concluded that preparatory counselling by a clinical pharmacist enhanced their postpartum contraceptive knowledge and experience.
- This could be a significant future role of clinical pharmacists with scope for further expansion of clinical pharmacist-provided services in family planning.

References

- Yazdkhasti M, et al. Unintended pregnancy and its adverse social and economic consequences on health systems. Iranian journal of public health. 2015 Jan;44(1):12.
- Shachar BZ, Lyell DJ. Interpregnancy interval and obstetrical complications. UpToDate. [Updated on Mar 2017].
- RCOG. Best practice in postpartum family planning. Best Practice Paper No. 1. June 2015

Author Affiliations:

- Pharmacy Department, Al Wakra Hospital, HMC.
- Obstetrics and Gynecology Department, Al Wakra Hospital,HMC.