FZZ-P7 UNAPREĐENJE ISHODA LEČENJA PACIJENATA SA HIPERTENZIJOM KROZ STANDARDIZOVANO SAVETOVANJE U JAVNOJ APOTECI

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Hipertenzija je vodeći javnozdravstveni izazov gde nizak stepen adherence i nepravilna samokontrola krvnog pritiska utiču na neuspeh terapije. Cilj rada bio je procena uticaja standardizovane usluge „Savetnik za hipertenziju" Farmaceutske komore Srbije na promenu zdravstvenog ponašanja pacijenata. Prospektivna pre-posle analiza sprovedena je na uzorku od 100 pacijenata (53,4±8,3 godine; 51% muškaraca) iz Šapca i okoline. Komorbiditeti su uključivali dislipidemiju (42%), dijabetes tip 2 (24%) i respiratorne bolesti (12%). U terapiji su dominirali ACE inhibitori samostalno ili u kombinacijama (64%) i ARB antagonisti (28%). Implementirani su svi koraciji usluge koji su obuhvatili savetovanje o pravilnoj upotrebi terapije, samokontrolu i tehniku merenja krvnog pritiska, kao i nefarmakološke mere. Intervencija farmaceuta je obuhvatila 20-to minutno savetovanje pacijenta, izradu personalizovanog plana primene lekova, edukaciju o samokontroli i tehnici merenja krvnog pritiska, životnim navikama. Kontrolno savetovanje je sprovedeno nakon 4 nedelje. Pre intervencije, zaboravnost je zabeležena kod 48% pacijenata, samoinicijativno propuštanje lekova kod 34%, nepravilna tehnika merenja krvnog pritiska kod 68%, a neadekvatne životne navike kod 68% pacijenata. Nakon intervencije, kod 84% pacijenata ostvaren je pozitivan pomak u namanje jednom aspektu. Zaboravnost je smanjena na 14% (p<0,01), a samoinicijativno propuštanje doze leka na 6% (p<0,01). Udeo pacijenata sa adekvatnim životnim navikama porastao je sa 32% na 66% (p<0,01). Pravilna tehnika merenja porasla je sa 32% na 78% (p<0,001), a vođenje dnevnika sa 18% na 65% (p<0,001). Krvni pritisak je smanjen za prosečno 6,4/3,8 mmHg (p<0,05). Rezultati ukazuju na potencijalnu korist standardizovane farmaceutske usluge u unapređenju stepena adherence, pravilne samokontrole krvnog pritiska i usvajanja nefarmakoloških mera kod pacijenata sa hipertenzijom, čime se podržava aktivnija uloga farmaceuta u kontroli bolesti.

FZZ-P7 IMPROVING TREATMENT OUTCOMES IN PATIENTS WITH HYPERTENSION THROUGH STANDARDIZED COUNSELING IN A COMMUNITY PHARMACY

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Hypertension remains a major public health challenge, with poor medication adherence and inadequate blood pressure self-monitoring contributing to suboptimal treatment outcomes. This study aimed to evaluate the impact of the standardized pharmaceutical service "Hypertension Counselling" developed by the Pharmaceutical Chamber of Serbia. A prospective pre–post analysis was conducted in 100 patients (mean age 53.4 ± 8.3 years; 51% males) from Šabac and the surrounding area. Comorbidities included dyslipidaemia (42%), type 2 diabetes mellitus (24%), and respiratory diseases (12%). The most frequently prescribed antihypertensive therapies were ACE inhibitors (64%) and ARBs (28%). The service included pharmacist-led counselling on medication use, blood pressure self-monitoring, measurement technique, and lifestyle modifications. The intervention consisted of a 20-minute counselling session, development of an individualized medication-use plan, and education on self-monitoring and healthy lifestyle practices, followed by a 4-week follow-up. At baseline, medication forgetfulness was reported in 48% of patients, intentional medication omission in 34%, incorrect blood pressure measurement technique in 68%, and inadequate lifestyle habits in 68%. After the intervention, 84% of patients improved in at least one assessed parameter. Medication forgetfulness decreased to 14% (p<0.01), and intentional medication omission to 6% (p<0.01). The proportion of patients with adequate lifestyle habits increased from 32% to 66% (p<0.01). Correct blood pressure measurement technique improved from 32% to 78% (p<0.001), and regular blood pressure diary keeping from 18% to 65% (p< .001). Mean blood pressure decreased by 6.4/3.8 mmHg (p<0.05). These findings suggest that standardized pharmaceutical services may support improved medication adherence, self-monitoring practices, and lifestyle modifications, reinforcing the role of pharmacists in hypertension management.

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