

# PHARMACISTS PLAY A KEY ROLE IN REDUCING CARDIOVASCULAR (CV) RISK

## The R<sub>x</sub>EACH Study<sup>1</sup>

(The Alberta Vascular Risk Reduction Community Pharmacy Project)

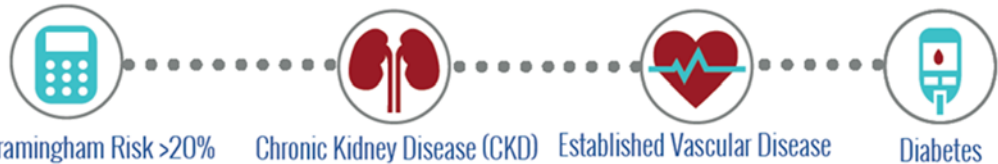


CV Disease (CVD) is the leading cause of death worldwide, accounting for 1/3 of total deaths. It is one of the leading causes of death in Canada.

The R<sub>x</sub>EACH study evaluated the effect of a community pharmacy-based case finding and intervention program on estimated CV risk in patients at high risk for CV events.

### The R<sub>x</sub>EACH study

56 Pharmacies enrolled 723 participants at high risk for CVD with:



For every 6 people screened 1 person was found to have previously unrecognized CKD<sup>3</sup>

Participants were randomized into 2 groups...

353 participants received pharmacist and physician usual care



370 participants received the pharmacist intervention which was composed of:



Patient assessment



Education about risk  
([www.Bit.ly/RxEACHeducation](http://www.Bit.ly/RxEACHeducation))



Lab assessment



Treatment recommendations, prescription adaptation, prescribing



Individual CV Risk Calculation  
([www.Bit.ly/RxEACHriskcal](http://www.Bit.ly/RxEACHriskcal))

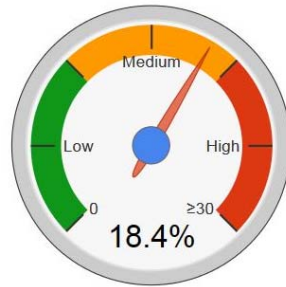


Regular follow-up every 3-4 weeks for 3 months

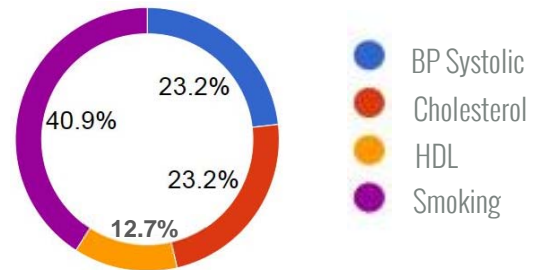
◆ The Rx EACH Cardiovascular Risk Calculator

CV Risk

Risk for a major CV event (heart attack, stroke, death) in the next 10 years



Risk Factor Contribution



After 3 months the 370 participants who received the intervention had:

21% greater reduction in their risk for CV events\*



0.20 mmol/L greater reduction in LDL cholesterol\*



9.37 mm Hg greater reduction in systolic blood pressure\*



0.92% greater improvement in glycemic control\*



20% greater reduction in tobacco use\*



\* When compared to usual physician and pharmacist care



**R<sub>x</sub> EACH WORKS!**

Pharmacists with an expanded scope of practice play a key role in lowering CV risk and can have major public health impact.

Patients are very supportive of pharmacists expanded scope of practice, allowing timely access to a trusted professional<sup>2</sup>.

Pharmacists are encouraged to advance their practice, and practice to their full scope.

Policy changes are recommended to include CKD as a reimbursable condition on the chronic disease list for the Comprehensive Annual Care Plans (ICD-9 585).

You can help lower your patients' CV Risk by implementing Rx EACH in your practice. Please contact Yazid Al Hamarneh for more information [Yazid.alhamarneh@ualberta.ca](mailto:Yazid.alhamarneh@ualberta.ca)

References



1. The Effectiveness of Pharmacist Interventions on Cardiovascular Risk. The Multi-center Randomized Controlled Rx EACH Trial. Tsuyuki RT et al. JACC. 2016;67:2846-54
2. Patient, family physician and community pharmacist perspectives on expanded scope of practice: a qualitative study. Donald M. et al. CMAJ Open. 2017 (5)1:E205-12
3. Community pharmacist targeted screening for chronic kidney disease. Hamarneh Al et al. CPJ DOI: 10.1177/1715163515618421 (2015)

Resources



4. CKD Pathway ([www.ckdpathway.ca/aboutwhoandhowtotest/](http://www.ckdpathway.ca/aboutwhoandhowtotest/))
5. Rx EACH web page ([www.epicore.ualberta.ca/home/category/impactoutreach/](http://www.epicore.ualberta.ca/home/category/impactoutreach/))
6. Rx EACH CV Risk Calculator ([www.epicore.ualberta.ca/rxeach/](http://www.epicore.ualberta.ca/rxeach/))

