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SUPERVISED CONSUMPTION OF MEDICINES

Your health challenge

- 1 in 11 adults have taken an illegal drug in the past year¹
- Hospital admissions due to poisoning by illegal drugs have increase by 77% since 2003/04¹
- The UK has among the highest prevalence rates of longer term illegal drug use in the European Union¹

Fact: There were 1,957 deaths related to misuse of illegal drugs in England in 2013¹

How can community pharmacies help?

For some medicines it can be in the patient's interest to make sure the dose is taken by the person for whom it was intended. Pharmacists can supervise the consumption of a prescribed medicine when the patient comes to collect it.

While most examples of supervised consumption include methadone and other medicines used in the management of substance misuse, the service can also be used to help patients with mental health conditions or diagnosed with tuberculosis.

Pharmacy teams can offer a non-judgmental, confidential service and are able to provide support and advice, including referral to specialist centres if appropriate.

Results from studies of supervised methadone have included:

- 90% of specialist prescribers and 79% of GPs prescribe supervised methadone;²
- 28% of drug users knew people not prescribed methadone who had died from using street methadone;² and
- the overdose deaths per daily dispensed dose index decreased approximately fourfold in both England and Scotland coinciding with the introduction of supervised consumption³





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What the experts say

"Patients find it really useful to be able to access their medicine in a local pharmacy as this saves them long journeys to treatment centres. The confidentiality in the pharmacy and the ability to use the consultation room means they don't feel any different to other patients. Pharmacies help to take the stigma out of drug treatment."

Carol Trower, Chief Executive Officer, Thames Valley LPC

"The pharmacy service supports substance misusers with their recovery whilst giving assurance that a professional service is being provided."

Ian Wootton, Commissioning Manager (Substance Misuse), West Berkshire Council

"Community pharmacy teams can build a relationship with the service user which aids trust and compliance, ensuring they are supported in their treatment. We would recommend the service to other local commissioners because it is effective, efficient and equitable!" Emma Wilson, Public Health Dorset

^{1.} Statistics on Drugs Misuse: England, 2014 (HSCIC)

Supervised methadone in Staffordshire and Shropshire: A study of factors associated with key outcome variables, National Treatment Agency for Substance Misuse (2007)
 Impact of supervision of methadone consumption on deaths related to

^{3.} Impact of supervision of methadone consumption on deaths related to methadone overdose (1993-2008), BMJ (2010)

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Potential benefits of a community pharmacy supervised consumption service

1. Reducing the burden on other NHS providers

Supervision of consumption by an appropriate professional provides the best guarantee that a medicine is being taken as directed. Using a community pharmacy service can help ensure that regular contact with a healthcare professional is maintained whilst taking the burden off GPs.

2. Prevent prescribed medicines entering the illegal drugs market

Some patients receiving treatment for drug dependence may attempt to sell their prescribed medicine on the illegal drugs market; a supervised consumption service can reduce this risk as the patient must consume their medicine in the pharmacy. Not only will this support the patient's treatment plan and reduce diversion onto the illegal drugs market, it will also help reduce wastage by ensuring NHS providers are not prescribing medicines which are not being used by the patient.

3. Reducing the risk of accidental overdose, including by children

The risk of accidental overdose is a concern, particularly for children living with rehabilitating drug users, and services like supervised consumption can help support the rehabilitation process by helping users to stick with their treatment plan whilst keeping dangerous drugs outside the home.

4. More accessibility in socially disadvantaged areas

Community pharmacies are accessible to vulnerable patients and populations, with many located in socially disadvantaged areas (over 99% of people living in areas of the highest deprivation are within a 20 minute walk of a community pharmacy⁴). This means they can more easily provide support for some groups of people who are unable to access, or uncomfortable accessing, other health services.

How might your local service work?

National guidelines⁵ recommend that patients being newly prescribed methadone or buprenorphine should be required to take their daily doses under the direct supervision of an appropriate professional for around three months, subject to assessment.

Commissioners could recommend that prescribers request supervised consumption for medicines such as methadone, buprenorphine, naltrexone, disulfiram or any other prescribed items.

NHS North East London and the City has a service for direct observance of those undertaking treatment for tuberculosis as tackling this disease requires full compliance from patients.

Some existing local services permit pharmacy staff other than the pharmacist to supervise consumption of these medicines which can help spread the workload across the whole pharmacy team.

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Frequent contact between pharmacist and patient following on from supervised consumption means that pharmacists are well placed to monitor patient health and give appropriate advice. This might take the form of promoting safer drug use practices by providing information on harm reduction strategies or complementing existing drug and alcohol services by referring patients to other agencies where further support services are available.

In addition to providing appropriate support and advice to substance misusers, trained pharmacy teams can communicate any non-attendance or other non-adherence to the treatment programme to the appropriate care coordinator. Action can then be taken if there are concerns about the patient's mental, physical or emotional health when visiting the pharmacy.

Commissioners may also decide to incorporate extra dimensions, such as East Sussex County Council's inclusion of an alcohol breath test, which can further assist in increasing the chances of a successful outcome from the patient's treatment.

^{4.} The positive pharmacy care law: an area-level analysis of the relationship between community pharmacy distribution, urbanity and social deprivation in England, BMJ Open, August 201420

^{5.} Drug misuse and dependence: guidelines on clinical management, Department of Health (1999)