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Integrating “Personality” into Psychopharmacotherapy Instruction in a Pharmacy Curriculum

David Fuentes
Pacific University

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Integrating “Personality” into Psychopharmacotherapy Instruction in a Pharmacy Curriculum

Abstract
BACKGROUND: Recent survey results found that course content for psycho-pharmacotherapy across various schools of pharmacy focused mainly on depression, schizophrenia, general anxiety and bipolar disorders. In order to meet the demands of patient populations with co-morbid and pervasive personality disorders (PD), it may behoove pharmacy faculty to integrate PD into the curriculum using story-line case scenarios and group activities including PD.

OBJECTIVE: Patient cases and creative group assignments featuring patients with various integrated medical co-morbidities, psychiatric diagnoses, PD, functional / social stressors, and education/prognostic information were used to increase students’ exposure to, and knowledge of, PD.

METHODS: Students were exposed to story-line cases in lecture and given instructions on how to create a patient case addressing components of the five different axes used in psychiatry: Axis I (major psychiatric presentations); Axis II (PD); Axis III (medical diagnoses); Axis IV (functional limitations and stressors); and, Axis V (score for Global Assessment of Functioning) as part of a longitudinal group project.

RESULTS: Students were assessed using questions focusing on the domains of: commonly taught psychiatric topics; communication and health literacy; and, PD.

Disciplines
Pharmacy and Pharmaceutical Sciences

Comments
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Integrating “Personality” into Psychopharmacotherapy

Introduction

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Methods

• Students were presented with story-line case scenarios featuring patients based on faculty member’s psychiatric practice experience and assigned to create their own cases.

• The group assignment challenged them to use at least the following to create a patient case to present to their peers:
  A. One Axis I Disorder (example: Bipolar Disorder II)
  B. One Axis II Disorder (example: Histrionic personality)
  C. Three Axis III Disorders (examples: Hypertension, Diabetes Mellitus type II, HIV infection)
  D. One Axis IV (example: legal stressors)
  E. One comment on Axis V (discussing global functioning - ability to care for self independently)

• Students were given an instruction template useful in integrating the following into their patient cases:
  A. Chief Complaint
  B. History of Present Illness
  C. Past Medical History
  D. Meds Prior to Admission
  E. Allergies / Intolerances
  F. Medication Use History
  G. Labs / Objective data
  H. Comments on Pt Goals
  I. Comment on Pt Education
  J. Comment on Pt Adherence

• Students presented their cases to their colleagues and the professor with the goal of discussing treatment possibilities and took an all-inclusive course exam.

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Discussion

• Integrating PD and rarer topics e.g., anorexia nervosa, malingering, factitious disorders, somatization disorders, sociopathic disorders, and hypochondriasis, was possible in a 6-day (36-hour) psycho-pharmacotherapy course using patient case scenarios, and group projects.

• The total time dedicated to these topics < 8 hours (22%) of the entire course.

• Students achieved an aggregate average of >89.5% competency in both PD and traditional areas assessed in pharmacy education. Samples of assessment questions consistent with each area are shown below (Table 2).

Conclusions

• The top 25% of the class consistently achieved a greater average performance score on all questions on the assessment compared to their cohorts at the bottom 25% of the class.

• All student groups (n = 14) correctly integrated Axis II personality disorders and rarer conditions in their patient case (similar to the one show here).

• Including PD does not have to compromise, and may even help solidify, interest and learning in topics presented in a psychiatric pharmacy course.

Future Implications: Students may use the knowledge of, and exposure to, PD in a psycho-pharmacotherapy course as a foundation to help them approach the changing role of the pharmacist in psychiatric practice areas and meet knowledge requirements for psychiatric specialty board certification in the future.

Contact Information

David G. Fuentes, PharmD BCPP CGP
Pacific University Oregon
Assistant Professor
dfuentes@pacificu.edu