OBJECTIVES: To determine the change in patients’ knowledge about their disease and treatment, (2) to assess the percent change in values of glycated hemoglobin (HbA1c) and change in blood pressure in mmHg, and (3) to evaluate adherence status, measured through pill counts. METHODS: A prospective study was conducted using patients with a diagnosis of both T2DM and hypertension at Arauco hospital in Arauco, Chile. Each patient had three interviews over a period of six months. The study incorporated a tailored pharmacotherapeutic intervention plan that included written and oral information regarding their condition and treatment. To determine treatment adherence, a pill count method was performed during each interview. Change in patient adherence and knowledge of the diseases and treatments was assessed using the Fisher exact test. The difference in HbA1c and blood pressure between the initial and final visit was evaluated using Student’s t-test. Analyses were performed using SPSS version 17. RESULTS: A total of 50 patients were selected, of whom 33 (66%) were female. At the beginning of the period, 30% of patients were found to be adherent. At the end of the study, this number had increased to 66% (p-value < 0.001). After the completion of the interviews, significant decreases were observed for HbA1c (p-value < 0.001), and systolic blood pressure (p-value < 0.001). Systolic blood pressure decreases were observed for females in terms of both HbA1c (0.63%, p-value = 0.003) and systolic blood pressure (17 mmHg, p-value < 0.001). CONCLUSIONS: A pharmacotherapeutic intervention plan based on improved patient adherence and knowledge and implemented for patients with chronic conditions, such as T2DM and hypertension, has had a positive impact on therapeutic outcomes.

OBJECTIVES: The aim of the study is to develop and validate a decision aid (DA) for Arabic depressed patients. METHODS: A six-page DA booklet developed by Agency for Health Care Research and Quality (AHRQ) was adapted and translated to Arabic using Brisling’s back translation method. The work of Al-Muhtaseb was followed to Arabic DA based on IPDAS criteria for depressed patients. Future research needed on MD’s, Riyadh, Saudi Arabia; Universiti Sains Malaysia, Penang, Malaysia.

CONCLUSIONS: Up to our knowledge we developed and validated the first Arabic DA based on IPDAS criteria for depressed patients. Future research needed to assess the effectiveness of this DA on depressed patient involvement in SDM.

OBJECTIVES: The normal life of patients is seriously affected by diabetes Mellitus (DM). According to Diabetes Atlas it is estimated that 61.3 million people live with diabetes in India (2011 estimates) and 7.7 million pre-diabetics. The objective of this study was to evaluate the impact of clinical pharmacist intervention by counselling on medication adherence and quality of life of diabetic patients. METHODS: The study sample was extracted from a reputed diabetic clinic of Warangal, India over a period of six months. About 175 patients diagnosed with diabetes were recruited and were randomized for the control and intervention group. Quality of Life of patients was assessed using 19 domain Audit of Diabetes Dependent Quality of Life (ADDQoL) questionnaires and medication adherence was assessed using weighted 8-item adherence questionnaire. 41% for patients in the control group were administered at baseline and subsequent four follow-ups each of one month duration. Test group patients administered with structured patient education by using various counselling aids on monthly basis and controlled group patients were provided usual care and were subjected to the usual treatment.

The study reveals that there is a highest impact of patient education on working life, physical activity, financial condition and their freedom to eat and drink followed by other quality of life domains in diabetic patients. The mean fasting blood sugar and post prandial blood sugar values of each phase were correlated and was