

# The Bridging the Gap between Physical and Mental Illness in Community Pharmacy (*PharMIbridge*) Randomised Controlled Trial

## Contacts:

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## General overview of service and the main components of the service:

Severe and Persistent Mental Illness (SPMI) refers to any mental illness that has a continuous and significant effect on a person's daily life, such as schizophrenia, severe and recurrent depression, and bipolar disorder. In Australia, there are an estimated 9,000 premature deaths annually amongst people living with SPMI. However, this mortality is generally due to health conditions experienced by the general population, such as cardiovascular and respiratory diseases. Urgent attention is therefore required to address associated physical health concerns of this vulnerable population.

Medications are a common treatment option for managing mental and physical illnesses, which are mostly obtained from community pharmacies. Pharmacists, as accessible health professionals, are well positioned to improve mental health and associated physical healthcare, resolve any associated medication-related problems, including medication adherence, and signpost consumers to other health professionals and services.

The *PharMIbridge* Randomised Controlled Trial (RCT) will test the effectiveness of an individualised, pharmacist-led support service (*PharMIbridge* intervention) for people living with SPMI, compared to a standard in-pharmacy medication review service (MedsCheck). A MedsCheck involves a pharmacist reviewing a consumer's medication to improve medication use and address any medication-related questions, with a report sent to and/or discussed with the consumer's GP. Consumer participants will be provided with one of these services depending on the study arm that the community pharmacy is randomised into.

The *PharMIbridge* intervention involves an in-depth medicine support service delivered over six-months that is goal-oriented, flexible and individualised. The *PharMIbridge* intervention aims to identify and address problems relating to psychotropic medication use or physical and psychological health concerns. Pharmacists will work collaboratively with a participant's nominated health care professional/s and will regularly update them on progress throughout the six-month intervention period.

After enrolment in the *PharMIbridge* intervention, consumer participants will complete some forms about their health, medicines and how they are feeling. The pharmacist will then get to know the consumer participant and talk about any problems, questions or concerns about medication and mental and physical health. By working together, some goals will be set to get the best out of consumer participants' medication and physical and mental health, and plans to achieve these goals. The pharmacist will provide a summary of what was discussed and share this information with other nominated members of the participant's health care team, such as the GP, psychiatrist or case manager.

The consumer participant and the pharmacist will work together on the goals and plans. After six-months, the pharmacist will assist the consumer participant to complete some forms about their health, medicines, how they are feeling, and their experience with the *PharMIbridge* intervention. Consumer participants will also be invited to talk with researchers about their research experiences.

### **Aims/objectives**

*PharMIbridge* aims to support people living with SPMI such as schizophrenia, bipolar disorder or major depression to improve their physical and mental health. The trial will assess changes in psychotropic medication adherence, as well as health outcomes, including quality of life, physical health and psychological wellbeing of people living with SPMI.

### **Participant demographic**

Adults (16 years and over) currently using and have used at least an antipsychotic or mood stabiliser medication for at least six months, continuously, for the treatment of SPMI (e.g. schizophrenia, bipolar disorder, major depression).

Community pharmacies located in the ACT, Gippsland (VIC), Hunter New England and Northern Sydney (NSW) will be eligible to participate in the RCT.

### **Staff involved in delivering the service by discipline or health professional group**

- Pharmacists

### **Outcome measures include:**

- Medication adherence (as measured by self-report and PBS data)
- Health outcomes including quality of life, physical health and psychological wellbeing
- Community pharmacists' confidence, knowledge and ability to address the medication-related and physical health care needs of people living with SPMI; and,
- Health care service acceptability, utilisation and cost-effectiveness

### **Other comments / potential new initiatives**

The RCT will establish Mental Health Friendly Pharmacies with staff trained in Mental Health First Aid. The RCT findings will be used to inform a more widespread implementation of person-centred service models for people living with SPMI within the primary healthcare sector. This RCT is funded by the Australian Government Department of Health as part of the Sixth Community Pharmacy Agreement.