

# Medicines Optimisation Briefing

**This medicines optimisation briefing focuses on patients' eye health and is designed for pharmacy professionals in any sector to use in their practice.**

## Patient experience

*I'm worried about losing my sight and would like to chat with you about my current treatment and my concerns about driving. I want to know how to use my eye drops correctly and how long I need to use them for. I want to know which eye drops I can use with my contact lenses.*

### Steps you can take:

- Ask patients what they already know and what they would like help with; involve them in decision making as they are the experts in their own health
- Explore patients' feelings, beliefs and understanding about their eye health and medicines
- Work with patients to fit administration times into their routine
- Advise patients they should not drive if they are concerned about their sight and signpost them appropriately.

## Evidence – is the medicine appropriate?

*Eye conditions may be short or long term and may improve, be stable, deteriorate or require surgery. Correct and regular use of eye medicines is important in all of these situations to prevent complications and vision loss.*

### Steps you can take:

- Ask patients what they are using their eye medicines for, how they use them and how long they will be using them. If they don't already know the answer to these questions find out for them and let them know
- Find out if patients understand the consequences of not using their eye medicines correctly
- Ask patients who is checking their eye health and how often and follow up if the interval between checks seems inappropriate
- When you sell over the counter (OTC) medicines for eye conditions make sure patients know who to contact and what to look out for if their eye health does not improve or worsens.

The four principles of medicines optimisation\* describe how healthcare professionals can enable patients to improve their quality of life and outcomes from medicines use by having a sustained focus on the need to optimise patients' medicines.

\* [www.rpharms.com/medicines-safety/medicines-optimisation.asp](http://www.rpharms.com/medicines-safety/medicines-optimisation.asp)

## Safe and effective

*It can be hard for patients to use their eye medicines correctly and in the right order. Advise them to leave five minutes before using a second drop and use viscous preparations such as gels or ointments last. If a patient's sight or eye symptoms change they should seek advice from you or another healthcare professional.*

### Steps you can take:

- Ask patients to demonstrate their eye drop administration technique, enquire whether they are having any problems or experiencing any local side effects such as stinging or irritation or systemic effects such as shortness of breath and discuss with the prescriber as appropriate
- Help patients and carers to remember the correct method and order of administration of their eye medicines
- Encourage patients to check with you if they have any concerns about different brands or changes in the appearance of their eye medicines
- Offer to provide large print labels, patient information leaflets, administration charts, visual and tactile aids to people who need them
- Check for interactions with systemic medicines.

## Medicines optimisation as part of routine practice

*People often visit the pharmacy to collect long term eye preparations or with an acute eye problem. Are you confident in identifying minor or more serious eye problems? People often misunderstand how to use their eye medicines or have their drops instilled by someone else so you have plenty of opportunities to help.*

### Steps you can take:

- You have a key role in improving patient outcomes; you may see them more frequently than any other health professional so ask patients how they are getting on with their treatment and if they have any questions or problems
- For patients receiving long term treatment use the PMR to see if they are collecting their eye medicines regularly as this may highlight people you can help
- Make sure you are confident in explaining the correct administration technique of all eye preparations and have knowledge and supplies of devices that could help with this
- Discuss with your local optometrist how you can work together effectively to manage minor eye diseases and support each other's healthcare messages
- Participate in eye health awareness campaigns.

## Case studies

**Jean Simms, a 68 year old lady, comes to collect her prescription for antidepressants which she is receiving for the first time. On counselling her you notice she is struggling to read the small print on the label and information leaflet. She says failing sight is to be expected as you get older.**

You look at her PMR and notice she recently collected dressings after a fall. It is important to think holistically as her fall and low mood may be linked to her failing sight. You speak to Jean about her eye sight and ask her when her last eye test was and whether there is any history of visual impairment in her family – she says she can't remember. You remind her that it is really important to get her eyes checked as there could be a simple solution to improve her failing eye sight and that eye tests are free for her age group. In the short term you offer to give her larger print labels and information leaflets so she can read about her new medicine.

**Lakshman Das is a visually impaired 74 year old man who has been using eye drops for the past 30 years to control his glaucoma.**

During a consultation Lakshman tells you that he is frustrated that some of the different bottles he receives do not fit his eye drop administration aid. You explain that the new bottle contains the same medicine but is from a different manufacturer and you understand how frustrating this must be. You check which administration aid is correct for these drops and ask Lakshman to demonstrate his administration technique with the new aid. You confirm his understanding of the frequency of drops, correct storage and length of use once the bottle is opened. You remind him, if he holds a driving licence, he has a legal responsibility to inform the Driver and Vehicle Licensing Agency (DVLA) he has glaucoma. You finish the consultation by offering large print labels, information leaflets and signposting for further support if required.

### Lifestyle messages

- Offer smoking cessation advice
- Encourage patients to follow a healthy diet and to stay hydrated
- Offer appropriate advice on avoiding excessive sun exposure.

### Where's the evidence?

- College of Optometrists [www.college-optometrists.org](http://www.college-optometrists.org)
- NICE [www.nice.org.uk](http://www.nice.org.uk)
- UK Ophthalmic Pharmacy Group [www.rpharms.com/clinical-and-pharmacy-practice/uk-ophthalmic-pharmacy-group.asp](http://www.rpharms.com/clinical-and-pharmacy-practice/uk-ophthalmic-pharmacy-group.asp)
- Your local specialist eye department.

### Signposting patients

- Eye Care Trust [www.eyecaretrust.org.uk](http://www.eyecaretrust.org.uk)
- International Glaucoma Association [www.glaucoma-association.com](http://www.glaucoma-association.com)
- Macular Society [www.macularsociety.org](http://www.macularsociety.org)
- NHS Choices <http://www.nhs.uk/Livewell/Eyehealth/Pages/Eyehealthhome.aspx>
- Seeability [www.seeability.org](http://www.seeability.org)
- Vision 2020 [www.vision2020uk.org.uk](http://www.vision2020uk.org.uk)

### Where can I learn more about this?

CPPE learning programmes [www.cppe.ac.uk](http://www.cppe.ac.uk)

The Royal Pharmaceutical Society [www.rpharms.com](http://www.rpharms.com)

Clinical Knowledge Summaries <http://cks.nice.org.uk>

