HYPERTENSION

Benefit of pharmacists prescribing antihypertensive medication

Multiple studies have shown a benefit of pharmacist-based intervention in the management of patients with hypertension; however, the assessed interventions have mostly involved patient education, monitoring and adjustment of medication, and recommendations to physicians. A new trial has now shown benefit of pharmacists being able to independently prescribe drug therapy to individuals with hypertension.

Patients randomly assigned to the 'enhanced pharmacist care' group (n = 181) received pharmacist assessment of, and counselling about, cardiovascular risk and blood-pressure (BP) control; review of antihypertensive medication; and prescribing and/or titrating of drug therapy, as deemed necessary. The patients' primary care physicians were notified of all assessment results and changes to their patients' drug therapy. Pharmacists provided education and BP measurement to the patients assigned to the 'usual care'

group (n = 67), and recommended they see their physician for further treatment.

Although the mean systolic BP in both groups decreased during the 6 months of follow-up, BP reductions were greater in the 'enhanced pharmacist care' group (difference of 6.6/3.2 mmHg). The proportion of patients achieving target BP was also greater in the 'enhanced pharmacist care' group (OR 2.32,95% CI 1.17-4.15, P=0.02). On the basis of their findings, the investigators believe that "policymakers should consider an expanded role for pharmacists, including prescribing, to address the burden of hypertension".

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Original article Tsuyuki, R. T. et al. A randomized trial of the effect of pharmacist prescribing on improving blood pressure in the community: the Alberta clinical trial in optimizing hypertension (RxACTION). *Circulation* doi:10.1161/CIRCULATIONAHA.115.015464