

## A Review on Patient Counselling

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### Abstract

While the drugs have the capacity to enhance health , they all have the potential to harm if prescribed inappropriately. Due to this ,reason it is recommended that Healthcare professionals who prescribes medications should exercise counseling. Pharmacists have major role text line the use of medications in right way . The rational use of drugs are determined by the pharmacists. To know the use of drugs , patients must be educated by the pharmacists through this patient counselling .Patient counselling is the guidance provided to the patient by pharmacists about the right use of medicines .Main goal of patient counselling is the rational use of medicines .Hence it shows patient counselling improves therapeutic efficacy.

**Key Words:** Patient counseling , communication skills , patient counselling techniques ,barriers , Pharmacist , Rational use.

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### I. Introduction

Safe and effective drug therapy depends on patient being well informed about their medication. Health Care is provided in India at primary , secondary, tertiary Health Care level and at each level most patients receive medication as part of their treatment due to heavy patient load , many prescribers have little time to explain the proper use of medication to their patient .

The goal of all communication is proper understanding . Patient counselling is the guidance provided to the patient by the pharmacists about the right use of medicines. It is instructing the patient about various aspects of medicines like route of administration ,duration of drug ,contraindications ,precautions ,common side effects , storage and disease conditions .

Patient counselling is one of the major duty of a pharmacists other than dispensing of drug.

### Definition

Patient counselling refers to the process of providing information advice and assistance to help patient use there medication appropriately. The information and advice is given by the pharmacist directly to the patient or to the patient's representative and may also include information about the patient's illness or recommended lifestyle changes .The information is usually given verbally , but may be supplemented with written material.<sup>(1)</sup>

### Objectives:

- ❖ Patient should recognize the importance of medication for his well- being .
- ❖ A working relationship for continuous interaction and consultation should be established.
- ❖ Potential for decreased health care costs due to appropriate use of medications and prevention of adverse effects. (2)

### Benefits:

#### Benefits to pharmacists:

- Enhanced professional studies in the view of patients and other health care providers.
  - Establishment of an essential component of patient care that cannot be replaced by technicians .
  - Enhanced job satisfaction through improving patient outcomes .
  - A value added service to offer patients.
  - Review generation through payment for connecting services limited at present but growing.
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It is expected that, as a result of a properly conducted counselling interaction, the patient will:

- Recognize why a prescribed medication is helpful maintaining prescribed promoting well being.
- Accept the support health care professional in establishing working relationship and foundation for continue interaction and consultation.
- Developed the ability to make more appropriate medication related decisions concerning compliance or adherence.
- Improve coping strategies to deal with medications side effects and drug interaction.
- Becomes a more informed efficient, active Participants in disease treatment and self care management.
- Show motivation towards. Taking medications to improve his other health status.
- Patient understanding of strategies to deal with medications side effects and drug interactions should be improved.
- Patient becomes as informed efficient and active participant in disease treatment and self care management.
- The pharmacist should be perceived as a professional who offer pharmaceutical care.
- Drug interactions and adverse drug reactions should be perceived.

**Benefits to Patient:**

- Improved therapeutic outcomes and decreased adverse effects.
- Improved patient adherence to the treatment plan.
- Decreased medication errors and misuse.
- Enhanced patient self management by involving the Patient in designing the therapeutic plan.<sup>(2)</sup>

**Qualities of Pharmacists:**

1. Be a good listener:

Counseling is an interactive process. The pharmacist must listen attentively to the patient and observe both verbal and non – verbal.

2. Behaviour:

This gives pharmacist an opportunity to assess the patient’s knowledge about their disease and medications.

3. Be flexible:

The pharmacist should be flexible and provide advice and information which is tailored to the individual patient’s needs and capabilities.

4. Be empathetic:

The pharmacist should try to understand the patient’s personal suffering and situation as if the problem was his or her own.

5. Be non judge mental :

The pharmacies should not judge the behaviour of the patient based on their illness or the group he or her belongs to.

6. Be tolerant:

During the course of counselling patient maybe become agitated, unreasonable or hostile. The pharmacist should acknowledge the patient’s feelings and be tolerant of these.

7. Communicate confidently :

The pharmacist should speak confidently as this will improve the patients acceptance of the pharmacist’s advice.<sup>(2)</sup>

Communication skills of Pharmacist for Effective **Counseling**:

The the counselling process uses verbal and non-verbal communication skills.

Types of verbal communication

i. Language

ii. Tone

iii. Volume

iv. Speed

i. Language:

When speaking to patients, use simple language and avoid unnecessary medical terminology. If possible, speak the patient’s own language.

ii. Tone:

During counselling that tone of our voice has a great impact on patient understanding. Changes in the level and range of pitch convey information about the feelings and attitude of the person speaking. When the counselling, the tone of the voice should be caring and reassuring.

iii. Volume:

Many people speak with wide variations in volume, depending on the situation, and where and to whom they are speaking. Ideally, counselling should be conducted in a quiet private setting where it is unnecessary to raise one's own voice. Although it may be necessary to speak more loudly to patients with a hearing problem, most deaf patients gain more benefit if the speaker moves closer and directs their voice towards the patient's ear.

iv. Speed:

The clarity of our communication depends on our rate of speech. Patients may be reluctant to interact with a pharmacist who speaks quickly because they feel the pharmacist is too busy. This may happen if the pharmacist is nervous or is uncertain about the information being given. In contrast, a person who speaks too slowly may lose the interest of the listener.

Types of Non verbal communication :

- a. Proximity
- b. Eye contact
- c. Facial expression

a. Proximity

This refers to the distance that people maintain between themselves during the counselling process. This space has been classified into four zones:

- ❖ Intimate : 45 cm or less
- ❖ Personal : 45cm to 1.2 m
- ❖ Social : 1.2 to 3.6m
- ❖ Public: >3.6m.

Generally, counsellors and health care professionals use intimate or personal proximities.

b. Eye contact:

The amount that people look at one another during conversation varies depending on whether they are speaking or listening. Listeners look at the speaker more often and for longer periods of time. For cultural or personal reasons such as timidity, sadness or depression, some people may avoid looking into the counsellor's eyes.

c. Facial Expressions :

These can be used during counselling to demonstrate empathy towards the patient. Head movements such as nodding, hand gestures and body posture also can be used to advantage.<sup>(1)</sup>

**Steps during patient counseling:**

Counseling is a two way communication process, and interaction between the patient and pharmacist is essential for counseling to be effective.

Step:1:- Preparing for the session

- Counseling develops upon the knowledge and skills of the counsellor.
- Pharmacist should know as much as possible about the patient treatment details.
- In community pharmacy the source of information includes patient and prescription or a record of previous dispensing.
- If the pharmacist is unfamiliar about drug which is received from the patient, go for drug information reference.
- Before counseling, you have to consider about mental physical status.

Step:2:- Opening for the session :

- The pharmacist should introduce himself or herself to the patient and treat them by name.
- It is best to use title such as Mr, Mrs, Miss, eg:- hello Mr, any name, my name is x and I am your clinical pharmacist.
- I would like to tell about the medication.
- Do you have a few minutes to spend with me.
- Pharmacist gather information from the patient disease, medication.

Step:3:-Counseling content:

- Name and strength of medication.
- The reason why it has been prescribed, or how it works.
- How to take the medication.
- Expected duration of treatment.
- Expected benefit of treatment.
- Possible adverse effects.
- Possible medication or dietary interaction.
- Storage recommendation

- Minimum duration required to show therapeutic benefit.
- Step:4:-Closing the session:
- Before closing the session , it is essential to check patient understanding.
  - This can be achieved by feedback question , such as can you remember what is this medication is for ?
  - Or how long should you take this medication ?
  - Ask the patient about any doubt.
  - Before final closure and if time permits , summarize the main point in logical order.
  - Other information may relevant include previous drug allergies , past medication history, personal habit such as diet, smoking, alcohol consumption etc.
  - Use open ended question , such as what did your doctor tell you about your illness?, what do you know about your disease , can you tell me about the symptoms etc.
  - During counselling, the pharmacist should avoid asking question directly in embarrassing way.
  - What to do if a dose is missed.
  - Special monitoring requirements for eg: blood test.<sup>(3)</sup>

**Barriers of patient counseling :**<sup>[1]</sup>

Patient counseling may not take place in community pharmacies due to various reasons, known as barriers. These barriers are classified as

- Patient based barriers
- Provider based barriers
- System based barriers

**Patient based barriers :**

In India , many patients are unaware that pharmacists may provide counselling and generally ask their prescriber about medication use. Gender and language differences may also inhibit patients from asking the pharmacist about medication use information.

**Table 1. Possible Barriers to the Effective Consultation of Patients With Mental Illness**

<b>Pharmacist-Related Factors</b>
<ul style="list-style-type: none"> <li>• Lack of knowledge about the condition</li> <li>• Limited information about the patient</li> <li>• Lack of confidence or skill</li> <li>• Attitudes and beliefs of the pharmacist</li> <li>• Discomfort in discussing mental health issues</li> <li>• Pharmacist's job or professional role expectations</li> <li>• Business motives of pharmacists</li> <li>• Uncertainty about conducting counseling for family members and caregivers</li> <li>• Need to provide counseling to family members and caregivers only</li> <li>• Poor understanding of communication goals</li> <li>• Pharmacists' expectations regarding patient adherence to health advice or patient outcomes</li> <li>• Pharmacists' personal fear of legal liability or litigation</li> </ul>
<b>Patient-Related Factors</b>
<ul style="list-style-type: none"> <li>• Patients not willing to communicate</li> <li>• Patient perception about the role of pharmacists</li> <li>• Not interested in receiving medication counseling</li> <li>• Symptoms of disorder means the patient is not able to understand information</li> <li>• Side effects of drug means the patient is not able to understand information</li> <li>• Medication already familiar to the patient</li> </ul>
<b>Health System-Related Factors</b>
<ul style="list-style-type: none"> <li>• Lack of privacy in community pharmacies</li> <li>• Lack of time</li> <li>• Role of physician to provide information about medications</li> <li>• Pharmacists not having access to the patient's full medical history</li> <li>• Poor communication between pharmacists and physicians</li> <li>• Poor communication between physicians and patients</li> <li>• The high cost of prescription drugs</li> </ul>
<b>Social or Cultural Factors</b>
<ul style="list-style-type: none"> <li>• Stigma surrounding mental disorders</li> <li>• Language barriers</li> <li>• Cultural barriers</li> </ul>

Provider based barriers:

Many pharmacists lack the confidence to counsel patients due to lack of knowledge and counselling skills. A heavy patient load for prescription filling is also an important barrier in many practice situations.

System based barriers:

In India , counseling is not a mandatory legal requirements and officially pharmacists are not entitled to charge for dispensing or for the information provided to patients . These factors act as regulatory and financial disincentives to providing a counselling services. Lack of privacy in many busy community and hospital pharmacies can also be a problem.<sup>(1)</sup>

**Strategies to overcome barriers:**

To overcome the patient based barriers , following strategies can be implemented.

- Using multi media materials
- Pictograms
- Oral and written information
- Compliance aids
- Follow up schedules
- Audio visual tapes
- Tailoring prescription instructions.(4)

**Techniques of counselling :**

Several techniques can be adopted for effective counselling .some of them include providing written information to the patient and the use of an individual materials .The use of various compliance aids include labelling , medication , drug remainder chart and providing special medication containers and caps can also be adopted . The United states Pharmacopoeia (USP). Medication counselling behavior guidelines divide medication counselling into the following four stages.

Stage – 1:

Medication information transfer , during which there is a monologue by the pharmacist providing basic, brief information about the safe and proper use of medicine.

Stage -2:

Medication information and exchange , during which the pharmacist answers questions and provide detailed information adopted to the patient's situations.

Stage – 3:

Medication education , during which the pharmacist provides comprehensive information regarding the proper use of medicines in a collaborative , interacting learning experience.

Stage – 4:

Medication counselling during which the pharmacist and patient have a detailed discussion intending to give the patient guidance that enhances problem solving skills and assists with proper management of medical conditions and effective use of medication.<sup>(7)</sup>

**Patients who should always be counselled(8), (9)**

1. Confused patients and their caregivers .
2. Patients who are sight or hearing impaired.
3. Patients with poor literacy .
4. Patients whose profile shows a change in medications.
5. Patients receiving medication with special storage requirements, complicated direction.
6. Children and parents receiving medication.
7. New patients, or those receiving a medication for the first time ( transfer prescription).

**Patients who should be counselled at certain intervals:**

1. Prescription , monitoring , aim to maximize drug efficiency , minimize drug toxicity and promote cost effectiveness.
2. Therapeutic drug monitoring of drug with narrow therapeutic index .
3. Drug information service
4. Patient service
5. Improving patient compliance collecting past medical history.

## Pharmacist Roles



assess that The patients have sufficient:

- > **understanding**
- > **Knowledge**
- > **skill**

to follow their pharmaco-therapeutic regimens and monitoring plans.



seek **ways to motivate** patients to:

- > learn about their treatment
- > be active partners in their care.

### Role of pharmacist (10)(11)

- ❖ Prescription , monitoring , aim to maximize drug efficiency , minimize drug toxicity and promote cost effectiveness.
- ❖ Therapeutic drug monitoring of drug with narrow therapeutic index.
- ❖ Drug information service
- ❖ Patient service
- ❖ Improving patient compliance collecting past medical history.

## II. Conclusion

At last we can say that , patient counselling is good communication between patient and pharmacist. Patient counselling is considered as connecting link between patient and pharmacist. Patient counselling can aid in the maintain and providing rational use of medications by patients.

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