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Abstract accepted for oral presentation

PERFORMANCE OF THE MEDICATION ADHERENCE UNIVERSAL QUESTIONNAIRE (MAUQ) IN PATIENTS UNDER ORAL ANTINEOPLASTIC MEDICATION

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Background The Medication Adherence Universal Questionnaire (MAUQ) (available at www.mauq.org) was created as a universal instrument to assess, not only the level of medication adherence, but also the weight of four different factors that influence adherence: Positive attitude towards health care and medication, Lack of discipline, Aversion toward medication, and Active coping with health problems. MUAQ was initially tested in general population attended in primary care centers.
Purpose To evaluate MAUQ performance in cancer patients attended in the outpatient pharmacy of a district hospital.
Method Patients treated with oral antineoplastic drugs dispensed in the outpatient pharmacy of a district hospital in Portugal were included for the study (Jan-2023 — Jun-2023). The cross-cultural adapted versions of two instruments, the MAUQ and the specific part of the Beliefs about Medicines Questionnaire (BMQ-specific), were applied (administered by trained pharmacists) to the patients during their visit to the outpatient pharmacy to obtain the anti-cancer treatment. Overall scores of the two instruments, as well as the scores of the four domains of the MAUQ and the two components of the BMQ-specific (i.e., necessities and concerns) were calculated. Pearson's correlations between the scores (overall and domain) of the two instruments were calculated. Also, to evaluate the concordance with the original MAUQ structure, a confirmatory factor analysis (CFA) using a bifactor model was conducted. The study was approved by the HGSO ethics committee (145/2022).
Findings A total of 100 patients, with a mean age of 56.9 years (SD 11.7), being 73% females, were included. Mean MAUQ score was 85.7 (SD 11.3) with a median of 86 points (out of 112). Necessities component of the BMQ-specific showed a correlation (r=0.497) with MAUQ Positive attitude towards health care and medication domain, and moderate (r=0.341) with the MAUQ overall score. Concerns component of the BMS-specific correlated (r=-0.583) with the MAUQ Lack of discipline domains and the MAUQ score (r=0.443), and in a weaker way (r=-0.219) with MAUQ Aversion toward medication domain. The subtraction between BMQ-specific necessities and concerns components correlated with all the MAUQ domains except the Active coping with health problems and the overall MAUQ score. The CFA showed a good fit with the original MAUQ structure (CFI = 0,993; RMSEAs = 0,015 [CI 0,000−0,057]).
Conclusion The MAUQ demonstrated an adequate performance in cancer patients under oral antineoplastic medication, with discriminant power among the four components that influence non-adherent behaviors.

Abstract accepted for oral presentation

MALNUTRITION AND ADHERENCE TO ORAL NUTRITIONAL SUPPLEMENTS: A PILOT SUPPORT PROGRAMME IN PORTUGUESE COMMUNITY PHARMACIES

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Background Malnutrition affects thousands of people and costs the Portuguese National Healthcare Service more than 225 million euros every year. Treating malnutrition is a priority for health professionals, and community pharmacies have a role in counseling and supporting adherence to treatment for malnourished people taking Oral Nutritional Supplements (ONS).
Purpose To characterize participants and evaluate the impact on symptoms and perceived quality of life of a pharmacy service designed to support people who present symptoms of malnutrition and take ONS, promoting adherence to treatment and referring to another healthcare professional when needed.
Method A literature review was conducted to define the appropriate interventions to support malnourished people in the community pharmacy setting. Participants were identified based on the presence of signs/symptoms of malnutrition or when filling a prescription for ONS. The service consisted of an initial assessment (t0) and two follow-up contacts (by phone or face-to-face), 2 (t1) and 4 weeks (t2) after t0. These contacts focused on promoting adherence to treatment and evaluate the perceived evolution of symptoms using Likert-scales.10 pharmacies received training to provide the service, and standardized data collection forms were used for each contact. Patient registration, task scheduling and surveys were made available through the Salesforce Health Cloud® platform.
Findings From November 2023 through February 2024, 51 patients were enrolled in the programme. The majority were between 71 and 90 years old (n=41;80,4%) and female (n=34;66,7%). At t0, the top 3 signs/symptoms identified were decreased muscle mass (58.8%), lack of appetite (56.9%) and decreased muscle strength (49.0%). For 56.9%, it was their first-time taking ONS. Follow-up contacts at t2 were concluded for 47 patients, of which 19,1% eventually suspended or did not start treatment. At t1, 67,3% of participants reported feeling better, and at t2, it was 87,2%. The perceived negative impact of symptoms on quality-of-life, using a 3-point Likert scale, decreases - at t0, 27 participants (52,9%) reported that the symptoms greatly affected their quality of life, compared to 8 (17,0%) at t2. Regarding the impact of the program on the management of malnutrition, on a scale of 1-10, where 1 is "No Impact" and 10 is "Quite an Impact", on average, participants rated it at 8.6. Overall, there were 16 referrals to physicians and 2 to nutritionists.
Conclusion Carrying out a tailored service in community pharmacies to promote adherence and support people taking ONS for malnutrition is perceived by participants as relevant, and may contribute to improve health indicators.