

A patient-centred Framework for Pharmacist-led Atrial Fibrillation Better Care: The Pharm-ABC Study

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Atrial fibrillation (AF) is a common cardiac arrhythmia that affects approximately 33 million people worldwide. AF is associated with significant morbidity and mortality, including a fivefold increased risk of stroke, heart failure, and other cardiovascular complications[1]. They also face significantly higher mortality rates (25% vs. 8.7%) and greater functional disability from stroke complications compared to those without AF[2]. Despite advances in pharmacological therapy, the management of AF remains challenging due to its complex nature and the need for individualized care. Despite the availability of evidence-based guidelines for the management of AF, many patients receive suboptimal care, leading to poor outcomes.

Many international guidelines have recommended an integrated management of AF patients that requires a coordinated and agreed patient-individualized care pathway to deliver optimised treatment by an interdisciplinary team consisting of cardiologist, physicians, nurses and pharmacist. Pharmacists are ideally positioned to play a crucial role in the management of AF, given their expertise in medication management especially in area of stroke prevention and their ability to work collaboratively with other healthcare professionals. However, their roles and responsibilities beyond stroke prevention is unclear and their challenges and barriers providing the current and future care have not been explored. Furthermore, there is no patient-centered framework for pharmacists-led atrial fibrillation care to improve patient outcomes. As such, there is a critical need for an integrated approach to their care, one that involves coordinated efforts from interdisciplinary healthcare teams.

Recognizing the pivotal role pharmacists play in medication management, patient education, and monitoring for drug interactions and adverse effects, international guidelines recommend their active involvement in the care of AF patients. However, in Malaysia, there remains a gap in standardized frameworks outlining pharmacist involvement beyond stroke prevention in AF.

To address this gap, our team is embarking on a ground-breaking study led by a distinguished team of experts:



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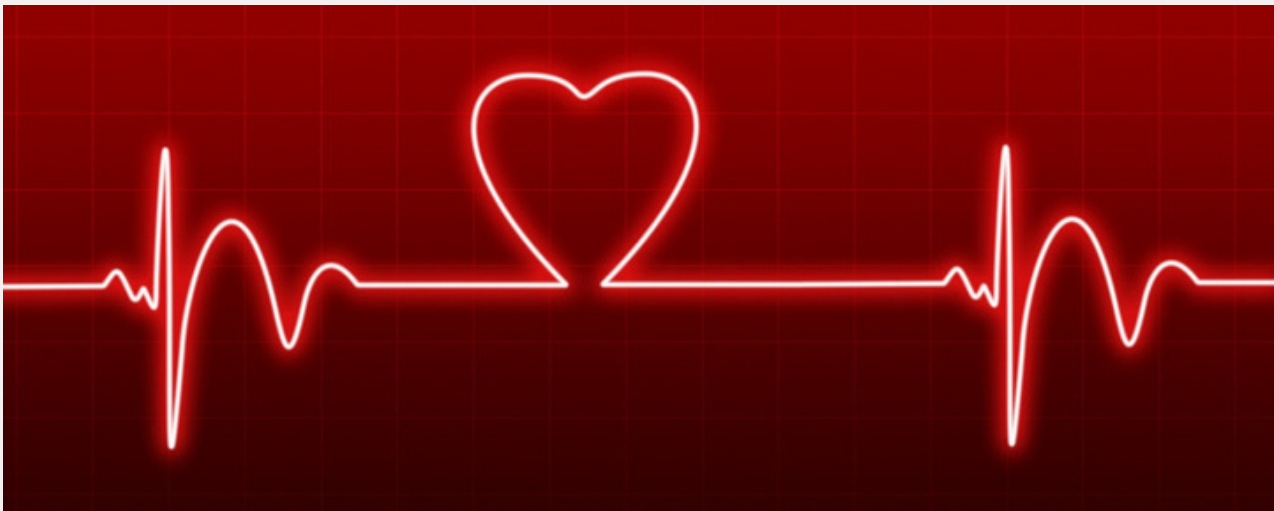


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Through this study, we aim to:

1. Explore perceptions and identify barriers through focus group discussions (FGDs) with healthcare professionals (including pharmacists, cardiologists, and nurses) and patients. We seek to understand current perceptions, roles, responsibilities, and barriers in managing patients with AF.
2. Develop an interdisciplinary framework: Building upon insights gathered in phase one, our team will develop an interdisciplinary, patient-centered care framework aimed at optimizing AF management. This framework will aim to facilitate pharmacist involvement, overcome existing barriers, and improve patient outcomes.
3. Evaluate Impact of the framework in terms of its feasibility and patient health outcomes: In the final phase, the efficacy of the developed framework will be evaluated through additional FGDs and a pilot study involving 100 AF patients. The study will assess the feasibility of the framework and its impact on patient health outcomes, including stroke incidence, hospitalization rates, and mortality.

The anticipated outcome of this study is a novel patient-centred framework for pharmacist-led AF care. By enhancing AF management, we aim to reduce hospitalizations, emergency visits, and overall healthcare costs for patients. These objectives align with the goals of the Malaysian Ministry of Health to reduce productivity loss and the disease cost burden associated with cardiovascular diseases.

**References**

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