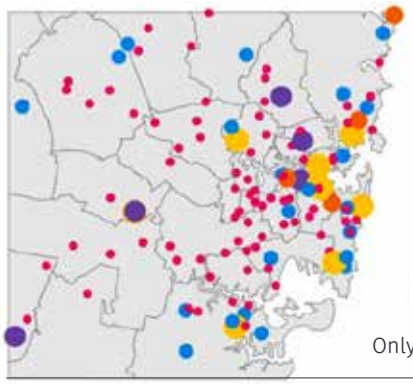
Pharmacist-led dermatology (DERM) care: Key findings from the PATH-DERM trial

THE PATH-DERM TRIAL AT A GLANCE



>500 pharmacies

participated in the PATH-DERM trial across metropolitan, regional and rural NSW and ACT

Only Sydney region pharmacies shown on map.

Number of consultations 1–5 6–10 11–15 16–20 21+

Breakdown of trial participants

54.5% impetigo

24.5% atopic dermatitis

15.3% herpes zoster (shingles)

5.8% psoriasis

3,423

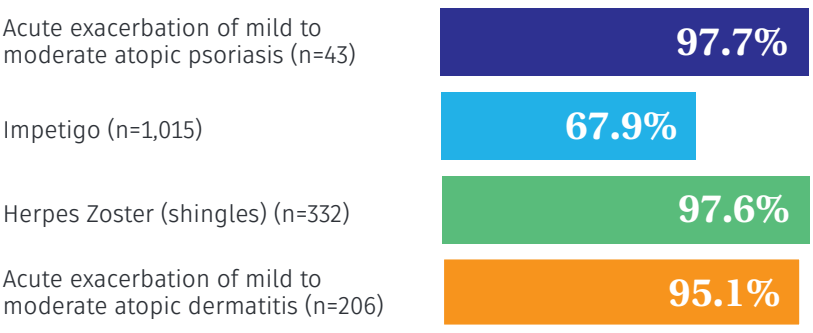
consultations were provided across NSW and ACT over 13 months

4 out of 5

participants had an overall positive experience with the service

SAFETY AND EFFECTIVENESS DATA

Resolution of patient symptoms 7/14 days after pharmacy consultation*



*Resolution was defined as total resolution for impetigo after 7 days follow-up. For herpes zoster (shingles) and psoriasis, resolution included both total and partial resolution at 7 days follow-up. For atopic dermatitis, resolution included both total and partial resolution at 14 days follow-up. Direct comparisons between impetigo and other conditions should be interpreted with caution.

1.4%

of participants experienced side effects

8.7%

of consultations resulted in referral to a GP (8.3%) or the ED (0.4%)

<5 participants

self-reported hospital admissions for the same skin condition following the pharmacist consultation

WHERE CARE HAPPENED

69.9%

of pharmacy consultations occurred in metropolitan areas

~30%

of pharmacy consultations occurred in rural towns

There were no consultations in remote/very remote communities

suggesting a different model may be required for these areas

5% of trial participants were Indigenous communities members

Satisfaction was high overall but brief vs longer consultations were associated with substantially lower satisfaction

$31.2 million

in estimated annual savings for the health system

Pharmacist prescribing is perceived as a credible strategy to improve access to timely treatment in primary care

A sustainable integration of community pharmacy in primary care is required

WHAT THE TRIAL SUPPORTS

- Make dermatological management for certain conditions a regular pharmacy service
- Raise public awareness of services that can be offered by pharmacists
- Ensure that cost is not a barrier for patients
- Invest early in infrastructure and subsidised training to support sustainable pharmacist prescribing
- Expand pharmacist scope in Indigenous communities through Aboriginal and Torres Strait Islander-led, culturally safe care
- Strengthen collaboration between GPs and pharmacists to support safe, coordinated care
- Ensure that protocols and guidelines are well defined
- Implement targeted incentives to attract and retain pharmacists in rural and remote communities

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