

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/the-drug-report/survey-says-key-findings-on-drug-information-centers/11282/>

ReachMD

www.reachmd.com
info@reachmd.com
(866) 423-7849

Survey Says: Key Findings on Drug Information Centers

Announcer:

You're listening to *The Drug Report* on ReachMD, hosted by Linda Bernstein, Pharm.D., Clinical Professor on the Volunteer Faculty of the School of Pharmacy, University of California, San Francisco.

Dr. Bernstein:

Welcome to *The Drug Report*. I'm Dr. Linda Bernstein.

Today I will provide you with highlights of the findings of the 2018 Survey of Drug Information Centers (DIC) in the United States as described in the American Journal of Health Systems Pharmacists, January 1, 2020 issue.

Let's start with a little history. Since the mid-1970's Jack Rosenberg and Tina Koumis and colleagues of the International Drug Information Center of the Arnold & Marie Schwartz College of Pharmacy and Health Sciences (Long Island University) have studied the status, mission, and scope of non-industry-based Drug Information Center services. The most extensive of these surveys was published in 2003, with an update in 2005, revealing 89 active centers. This number represented a significant drop from 127 centers that existed in 1986. A 2008 follow up survey found that over the preceding 5 years, 14 centers had ceased operations. It was deemed necessary to do another survey so Sara Grossman and associates from Long Island and the University of Illinois at Chicago embarked on a survey in 2018 to examine the current status of these centers in the US, with the goal of creating an updated directory and share information about their characteristics, activities and services, networking activities and opportunities.

The key points of the survey are as follows:

- The survey identified 82 formal drug information centers that provide drug information services, including, but not limited to answering drug information requests.
- A variety of services are provided by the centers to their clients, but almost all precept pharmacy students, whether or not the centers are university or medical center - based.
- A directory of centers was compiled for reference and networking purposes.

Let's now turn to study methodology. This was a February 2018 electronic survey of DICs as identified in the 2003 survey minus the ones found no longer in operation in 2008. Telephone follow up verified that these centers were operational. Messages were also sent via several listservs to individuals at non-industry based DICs to obtain further contact information for investigators. An internet search using appropriate terms was also used to identify additional centers. These steps yielded 118 DICs who were then sent the 23-question survey. Non-respondents were contacted by email and phone. For the purposes of the study, a DIC was defined as "a formal center which is dedicated to providing drug information services, including but not limited to, responding to drug information requests." Centers could opt out of being identified in the directory. The survey was designed to gather information about center characteristics, drug information activities, services and requests and networking activities. Descriptive statistics were used, and various analyses were performed post hoc.

Survey response rate was good. Of the 118 DICs sent the survey, 93 (79%) responded. 82 indicated that they met the prespecified definition of a DIC. Most of the centers had been in operation for more than 20 years. Almost half were based in a university or college, while 44% were hospital or medical center based. The remainder were both university and medical center based, associated with the federal government, a hospice pharmacy benefits manager, managed healthcare organization, insurance company or physician practice. The majority of centers' funding came from the parent institution. Fee for service as a sole funding source occurred in only 5% of centers. The five center services reported most often were provision of responses to drug information requests, education of

pharmacy students, participation in pharmacy and therapeutics committee activities, participation in drug utilization reviews and/or medication-use evaluation and provision of informatics support. Pharmacists were involved in provision of drug information services in all 81 of the centers that responded to that question. Pharmacy students, residents and fellows were involved in the majority of centers. Thirty percent indicated they offered a drug information residency or fellowship. A small percentage of centers had non-pharmacists on staff including nurses and physicians.

What was the nature of the drug information requests?

All centers received drug information requests from healthcare professionals, while only 41% accepted questions from consumers. Two-thirds of centers reported receiving an average of 50 requests or less per month. There was a noted decreasing trend in requests among half of the centers who had been open for more than 5 years, while 30% reported no change and 18% reported an increase. There was no correlation between the change in the number of requests received over 5 years and efforts to expand or broaden DIC services activities. The majority of DICs reported using a customized database to enter, store and/or retrieve drug information requests. Two thirds of respondents reported using at least one electronic means of communication to reach out to the drug information community, most using an existing listserv.

What is the significance of this survey for us in 2020?

This was the first comprehensive survey of drug information centers in the US since 2003, with 82 centers identified...not much different than the 89 identified in 2008. That said, the definition of what a DIC is differs in this and past surveys, so a direct comparison cannot be made. The definition of a DIC used in this survey was expanded to include non-drug information requests services as well, and those who take requests from non-healthcare professionals as well as healthcare professionals. 90 percent of their activities surround responding to drug information requests. There was an overall decrease in the number of requests handled by all the centers, which may allow them to engage in other kinds of activities, tackle more complex and time-consuming requests and train pharmacy or other healthcare professional students.

The authors urge drug information centers to utilize electronic platforms to reach out to colleagues, create dedicated user groups for the DI community via social media and private messaging platforms. Using these communications may also enhance advertising of the site to potential clients, securing funding and research collaboration. The ASHP Midyear Clinical Meeting was identified by respondents as the preferred venue to network and hold professional sessions with colleagues.

Study limitations surrounded the possibility that not all DICs were identified and the different definition of a DIC compared to previous studies made direct data comparisons difficult.

For *The Drug Report*, I'm Pharmacist, Dr. Linda Bernstein.

Announcer:

To access this episode and others from *The Drug Report*, visit ReachMD.com/drugreport, where you can be part of the knowledge. Thanks for listening.