A Pilot Study for Methadone Dispensing from a Community Pharmacy

Mark Caruana, Maresca Attard Pizzuto, Anthony Serracino-Inglott, Lilian M. Azzopardi Department of Pharmacy, Faculty of Medicine and Surgery, University of Malta, Msida, Malta





INTRODUCTION

email: markcaruana4@gmail.com

Methadone maintenance treatment (MMT) was introduced in Malta in 1987 and is provided by the Substance Misuse Outpatient Unit (SMOPU). The mode of administration is a centralised one, implying that opioid dependent patients visit the SMOPU where they take their prescribed methadone medication. In 2005, the Government announced the formation of a take-home methadone prescription programme. In 2013, 976 patients were receiving methadone.¹

AIM

To determine whether pharmacists in Malta would be willing to dispense methadone

METHOD

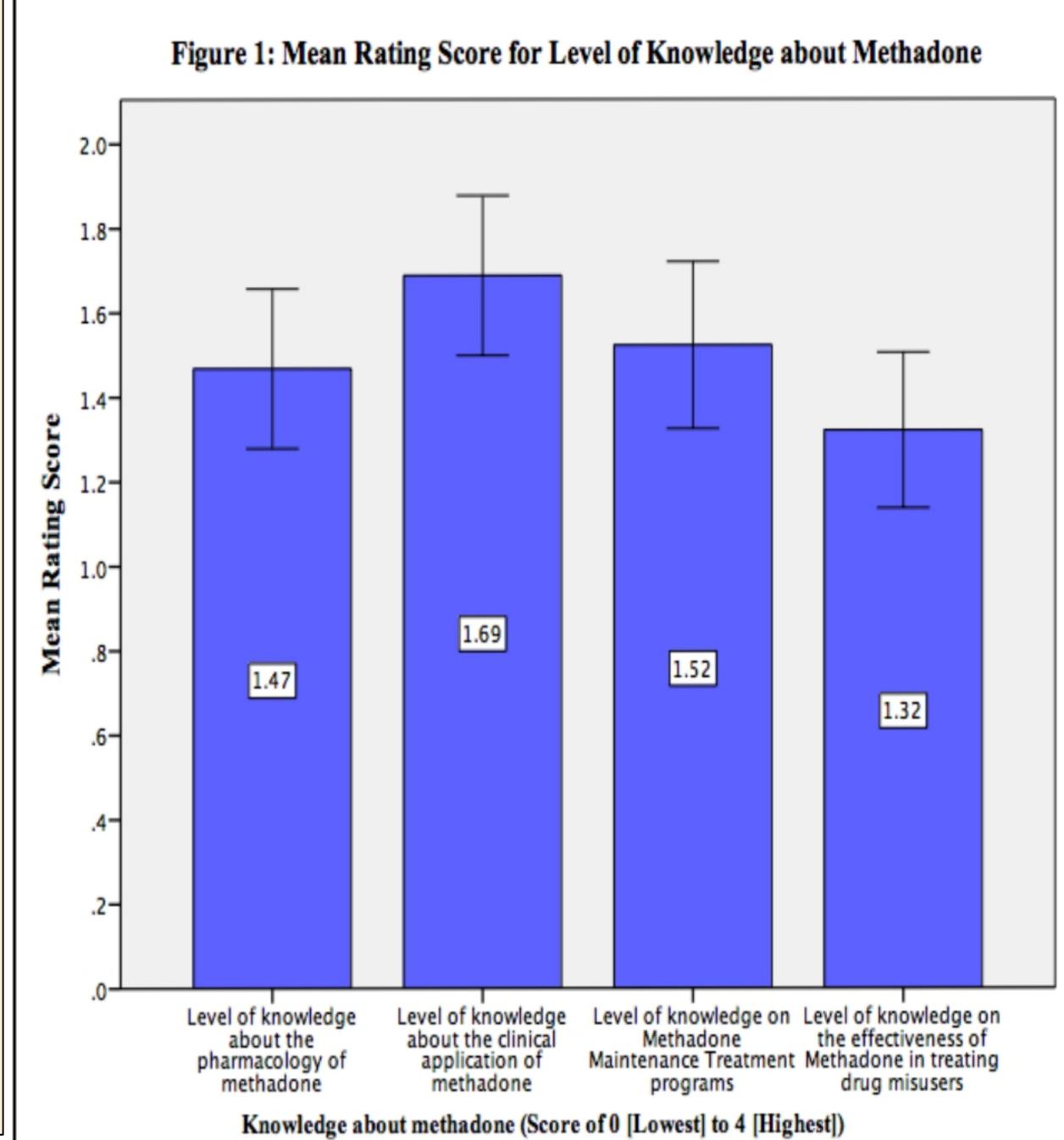
A cross-sectional study was performed to quantitatively. An online format of the questionnaire was circulated to analyse whether community pharmacists in Malta would 311 community pharmacists, of which 59 responses were be willing to dispense methadone if a new methadone collected. dispensing service was to be implemented within Community pharmacies were chosen via a systematic community pharmacies. A self-administered sampling procedure to increase the response rate. A questionnaire was used to carry out this study.

The questionnaire consisted of 19 questions divided into 3 instructions on how the questionnaire was to be sections, with each section assessing a particular aspect of returned, and a pre-paid self-addressed envelope was community pharmacists' attitudes towards methadone distributed via traditional post to 103 community adapted from a research paper that presented a similar a total of 109 responses were collected. investigation that was carried out in another country.^{2,3,4} Data obtained was analysed using SPSS® version 21.

hard copy of the questionnaire, addressed to the managing pharmacist, along with a covering letter, Each section of the questionnaire was pharmacies. Fifty questionnaires were returned. Hence,

RESULTS

- 109 community pharmacists answered the questionnaire
- •32% (n=35) of community pharmacists were willing to dispense methadone
- •41% (n=45) of community pharmacists were willing to dispense methadone if they were provided with appropriate education and support
- •29% (n=32) of community pharmacists were prepared to supervise the consumption of methadone
- •73% (n=80) of community pharmacists were willing to take part in a training programme on MMT
- A p-value of 0.024 was obtained for mean rating scores provided to the statements "Level of knowledge on the effectiveness of Methadone in treating drug misusers" and "Level of knowledge about the clinical application of methadone", indicating that mean rating scores for these two statements vary significantly



CONCLUSION

Findings obtained from the questionnaire indicated that community pharmacists in Malta are open to participating in decentralising methadone dispensing to community pharmacies.

References

- 1. European Monitoring Centre for Drugs and Drug Addiction [Internet]. Lisbon. C1995-2012 [updated 2015 May 22; cited 2016 September 7]. Available from: http://www.emcdda.europa.eu/data/treatment-overviews/Malta
- 2. Sheridan J, Manning V, Ridge G, Mayet S, Strang J. Community pharmacies and the provision of opioid substitution services for drug misuser: changes in activity and attitudes of community pharmacists across England 1995-2005. Addiction. 2007; 102: 1824-30.
- 3. Matheson C, Bond CM, Tinelli M. Community pharmacy harm reduction services for drug misusers: national service delivery and professional attitude development over a decade in Scotland. Journal of Public Health. 2007; 29 (4): 350-57. 4. McNeely J, Drucker E, Hartel D, Tuchman E. Office-based prescribing: acceptance by inner-city practitioners in New York. Journal of Urban Health: Bulletin of the New York Academy of Medicine. 2000; 77 (1): 96-102.