

The role of the neuropharmacist

Introduction

Since 2010, the number of disease modifying therapies has increased to over 14 treatments available. But whilst they have grown in number, they have also grown in risk and therefore the monitoring required has increased to ensure the medication is used safely.

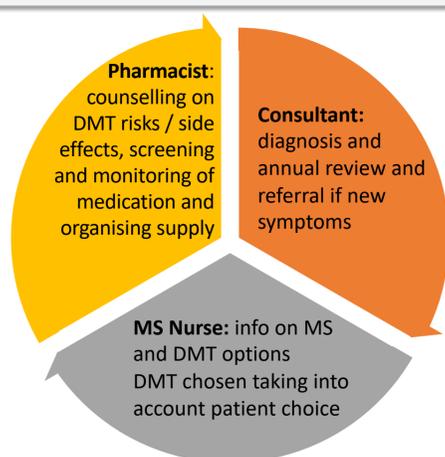
This increase in work has not led to an increase in neurologist or CNS capacity and trusts and teams have to look at utilising other team members in new and differing ways to cope.

Neuropharmacists are ideally placed, to tackle medication related issues due to their unique knowledge about the place of medication within the treatment pathway and understanding of the commissioning, and supply issues relating to the use of medication e.g. use of homecare, and outsourced pharmacy. Pharmacists also have unique training and exposure to risk management and governance around the use of medication.

Trusts might employ a pharmacist dedicated to MS or the roles may be spread among a team of neuropharmacists who cover other diseases within neurosciences.



Picture of neuropharmacist group from MasterClass 2019



Examples of roles the neuropharmacist can undertake:

The roles that are undertaken by the neuropharmacists are wide and varied. Below are some examples of the roles undertaken relating to MS across the country:

1. Ensure supply of DMTs are available within trust
2. Writing of local DMT protocols
3. Ensuring compliance with eligibility criteria for DMTs
4. Monitoring of patients on DMTs
5. Homecare SLAs
6. Prescription renewal management for homecare patients
7. DMT initiation and monitoring clinics
8. MDT attendance to discuss patients in line with NHSE requirements
9. Network with local centres e.g. London-wide MS Pharmacist group
10. Audit and service evaluation
11. Teaching and Support for pharmacy and wider MDT
12. Liaising with other clinical specialties re issues e.g. TB, liver, infectious diseases, public health
13. Answer queries from patients, GPs and other health care professionals re the treatment of MS patients
14. Deal rapidly with new announcements e.g. cannabis legislation, ocrelizumab in primary progressive MS
15. Finance reports and queries relating to medication costs
16. Supporting MS teams in the blueteq process

Tips for neuropharmacists to make the most of the role

As can be seen the role of the neuropharmacist is uniquely placed within the pharmacy department. Unlike other clinical specialities we are involved in a growing area of medicine which crosses the hospital barriers and goes into day cases, out patients and homecare of patients with a chronic condition.

To get the most of your position we advise the following:

1. Attend your local MS team meetings / CPD sessions
2. Help out with the co-ordination of MDT meetings
3. Participate in MDT meetings (virtual and face-to-face)
4. Ask your lead MS consultant to set you an objective
5. Network with your local neuropharmacists
6. Join the UKCPA Neuropharmacist group
www.ukclinicalpharmacis.org
7. Sign up for the neuropharmacist masterclass with eh neurology academy
8. Join the neuropharmacist email group by emailing Joela.Mathews@nhs.net
9. Work closely with your local NHSE representative to tackle queries etc
10. Get involved with research on your population and service evaluations
11. Utilise your GPhC requirement for a peer discussion by utilising the neuropharmacist network to discuss an issue.
Joela.Mathews@nhs.net can help you find a peer if needed
12. Follow the UKCPANeuro twitter feed for useful information

Conclusions

Neuropharmacists can offer a unique range of skills not found elsewhere in the MDT and can relieve some of the pressure of the increasing workload.

For the pharmacist, neuropharmacy provides a unique career path which is growing and within a speciality that embraces all members of the team.

If you want more details please email joela.mathews@nhs.net or RachelDorsey@nhs.net

www.neurologyacademy.org/neuropharmacy

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