

**Title of Intervention:** Cardiovascular Risk Management by Community Pharmacists

**Intervention Strategies:** Individual Education, Supportive Relationships

**Purpose of the Intervention:** To provide effective cardiovascular case management through community pharmacists

**Population:** Adult employees

**Setting:** Manufacturing worksite in rural Iowa; worksite-based

**Partners:** Worksite, drug management firm, local pharmacy

**Intervention Description:**

- Individual Education: Pharmacists provided education about heart disease and healthy lifestyle choices during individual appointments. Pharmacists also identified drug therapy problems and performed routine blood pressure, pulse and weight measurements. Pharmacists worked with the participants and their health care providers to develop drug therapies to meet patient-specific goals. The program was provided at the worksite by pharmacists. Employees enrolled in the program for one year at a time. After one year, employees were re-evaluated. They were discharged from the program if treatment goals were met.
- Supportive Relationships: Pharmacists, health care providers and peers provided support and encouragement.

**Theory:** Not mentioned

**Resources Required:**

- Staff/Volunteers: Pharmacists, health care providers
- Training: Not mentioned
- Technology: Screening equipment
- Space: Room for meetings between the pharmacist and participant
- Budget: Not mentioned
- Intervention: Phones and fax used to communicate with health care providers
- Evaluation: Screening equipment

**Evaluation:**

- Design: Retrospective Data Analysis
- Methods and Measures:
  - Analysis of body mass index, systolic and diastolic blood pressure, HDL and LDL cholesterol, and triglyceride levels was performed using billing data submitted by the pharmacists
  - Full lipid profiles were only available for subjects with diabetes
  - Percentage of patients who reached the treatment goal

**Outcomes:**

- Short term Impact: Among subjects with diabetes, the proportion of individuals meeting the LDL treatment goal increased. No significant improvements were made on any of the other clinical outcomes. Among those without diabetes, significant improvements were made with respect to blood pressure control. No significant differences were found in either group regarding body mass index.
- Long Term Impact: Not measured

**Maintenance:** Not mentioned

**Lessons Learned:** The workplace may be an important location for delivering services to middle-aged men. This population may seek medical care less often than other groups. They may benefit from ongoing attention to cardiovascular risk factors.

**Citation(s):**

John, E. J., T. Vavra, et al. (2006). "Workplace-based cardiovascular risk management by community pharmacists: impact on blood pressure, lipid levels, and weight." *Pharmacotherapy* 26(10): 1511-7.