



FACULTY OF
PHARMACEUTICAL MEDICINE
OF THE ROYAL COLLEGES OF PHYSICIANS
OF THE UNITED KINGDOM

1 St Andrews Place, Regent's Park, London, NW1 4LB
Telephone +44 (0)20 7224 0343 – Fax +44 (0)20 7224 5381
Email: fpm@fpm.org.uk – Website: www.fpm.org.uk
Registered Charity No: 1130573

Healthy Lives, Healthy people: Our Strategy for public health in England

Comments submitted by the Faculty of Pharmaceutical Medicine (FPM)

30.03.11

Answer to Question (C)

Public Health evidence ~ How can Public Health England address current gaps such as using the insights of behavioural science, tackling wider determinants of health achieving cost effectiveness and tackling inequalities?

The advances of medicines have led to extension of the life and minimized the disability of chronic disease. The impact of major diseases on people such as coronary artery disease, respiratory disease, diabetes and infections have been reduced markedly over the last 3 decades. However the gains in health from these medicines are un-equally distributed between rich and poor, educated and un-educated people in our society.

Access to early and accurate diagnosis is part of the issue, but recognition of illness is more important. Often the reason for referral to the GP is the family pressure on a patient with chronic obstructive bronchitis who has failed to attribute breathlessness as an illness. The GPs consulting room is therefore not the place to alert people to the risk of missing the early symptoms and signs of illness.

The FPM therefore believes that it is important to distribute “high impact” information on health through the following routes:

- Community shops, cinemas, public houses, sports clubs/football grounds and religious buildings.
- Each illness has a unique pattern of symptoms and signs and these should be linked to the illness with pictures.
- The Pharmaceutical Industry should be engaged in this activity as they have the details used to help doctors recognize the disease. This should be

undertaken as a public service, without the company advertising their products.

- Community Pharmacies should play a similar role but where interactive computers can provide access to people with questions and those with diagnostic answers could be directed to the pharmacist for the first encouragement to seek advice on the illness.

Once an illness has been diagnosed it has become clear in many chronic illnesses that continued specialized support is needed to motivate patients to take their medication and to overcome fear of reliance on therapy. Thus specialized clinics have been developed in hospitals. However the best care is in the community, without need for transportation and long waiting periods (plus lost notes and ill-informed junior doctors). Here the pharmacies where the prescriptions are collected could offer an alternative route to support to maintain therapy. It has also been estimated (although disputed) that misuse of therapy and “hoarding” supplies of unused pills and treatments cost the NHS up to £4 billion per annum.

The FPM recommends that we increase adherence of patients to their prescribed therapies by:

- The Regulatory Agency (MHRA) needs to have simplified patient’s information with all therapies, not designed for people with PhDs.
- The Pharmaceutical Industry must lead this with clear descriptions of the benefit/risks of the therapy written to enable understanding and to use more pictorial information.
- The Pharmacies should have information sites (computer based) with interactive programmes for the patients to explain the working of the therapy and how regular use lessens the impact of the illness.
- We would advocate that television and internet should have disease sites for all the common chronic illnesses with interactive areas for patients to learn about their disease.
- Free newspapers and the red-top newspapers should run advertisements on how treatment can lessen the impact of illness. Whilst we have a limit to advertising specific therapies there could be disease areas supported by certain companies. These would encourage use of therapy and to come forward for early diagnosis.

These suggestions are built on the simultaneous and unique understanding of the financial imperatives of illness and the major benefits of therapies from within the Faculty of Pharmaceutical Medicine.