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Therapeutic objective

- To alleviate symptoms
- To minimise the risk of long term complications – cardiovascular disease, nephropathy, retinopathy and neuropathy
- Secondary prevention of other diseases
- Tight control is essential

Current situation

- Local diabetes drug armamentarium is lacking when compared to guidelines in other countries

Anti-diabetic drugs

MALTA GOVERNMENT FORMULARY LIST (GFL)

- Biguanide class
Metformin
- Sulphonylureas
Glibenclamide
Gliclazide

OTHER COUNTRIES (BNF)

- Opposite OHAs +
- Alpha-glucosidase inhibitor
- Metglitinides e.g.
repaglinide
- Thiazolidinediones e.g.
pioglitazone
- Gliptins
- GLP-1 receptor antagonists
- Sodium-glucose co-
transporter 2 e.g.
dapagliflozin

Insulin

MALTA GOVERNMENT FORMULARY LIST (GFL)

- Soluble insulin
 - Isophane insulin
 - Biphasic isophane insulin
- All 3 above are available in both vial & cartridge form
- Insulin aspart
 - Insulin glargine
- Analogues approved for type 1 diabetes only

OTHER COUNTRIES (BNF)

- Opposite insulins +
- Insulin glulisine
- Insulin lispro
- Insulin detemir
- Insulin degludec
- Biphasic insulin aspart
- Biphasic insulin lispro

Painful diabetic neuropathy

MALTA GOVERNMENT FORMULARY LIST (GFL)

- Paracetamol
- Non-steroidal anti-inflammatory drugs
- Amitriptyline
- Nortriptyline
- Opioid analgesics

OTHER COUNTRIES (BNF)

- Opioid drugs +
- Duloxetine
- Pregabalin
- Gabapentin
- Carbamazepine

The last 3 drugs are on the local GFL but are not approved for painful diabetic neuropathy

Equipment

- Insulin syringes (10/month for pink card holders and 30/month for yellow card holders)
- Insulin pens for use with insulin cartridges
- Pen needles (1 needle per injection)
- Alcohol wipes (one per injection)
- Blood glucose monitoring strips (50 per month and 100 per month in pregnancy)
- No lancets

Lack of diabetes drugs

- Not just a matter of numbers
- Clinical significance
- Type 2 DM is a progressive disease
- Escalation of therapy is required as time goes by
- Recent guidelines – **tailor-made medicine**

Patient-centred approach

- Efficacy
- Side-effects e.g. hypoglycaemia & weight gain
- Other co-morbidities
- Patient preference

What's in the pipeline?

- Submissions for inclusion of drugs on the GFL from clinicians and agents
- Reviewed by Directorate of Pharmaceutical Affairs (DPA)
- Prescribing pathways (guidelines) for diabetes treatment submitted by clinicians
- Considered by the Government Formulary List Advisory Committee (GFLAC)

The much needed way forward

- Inclusion of new anti-diabetes drugs on the GFL is vital
- Drug & equipment protocols need to be less restrictive
- Increased drug expenditure BUT cost-effective in the long run (less diabetes complications, less hospital admissions and improved patient quality of life)

Role of pharmacists in diabetes

- Pharmacists can influence the effective use of medicine
- Vital link between the patient and other health-care professionals
- With the increasing diabetes epidemic comes an inevitable strain on the workload of doctors and nurses
- Alternative models & opportunities for diabetes care will be sought
- Pharmacists have the potential to use their skills and patient contact to support and manage patients with diabetes

Types of pharmacist interventions

- Adjustment & change of medications
- Medication review from patient interviews
- Assessment of medication adherence
- Education & counselling about medications, lifestyle and compliance
- Distribution or use of education material & educational workshops
- Drug related problems identification
- Development of treatment plans
- Recommendation & discussion with physician regarding medication changes & problems
- Point of care testing e.g. BGM, BP, review of lab data

Barriers to pharmacist's role in diabetes in Malta

- Lack of clinical pharmacists on the wards and at out-patient clinics
- Lack of independent prescribing pharmacists
- Lack of pharmacist-led chronic disease medication review clinics
- Lack of remuneration for point of care tests and services offered by community pharmacists
- Electronic patient health records not available on a national level

Thank you.
