Community pharmacists can play an effective role in closing gaps in the delivery of stroke risk reduction therapy by prescribing appropriate oral anticoagulation therapy (OAC) for high-risk older individuals with atrial
fibrillation (AF), according to a study published online July 24 in *JAMA Network Open*.

Roopinder K. Sandhu, M.D., from the Libin Cardiovascular Institute at the University of Calgary in Alberta, Canada, and colleagues investigated whether pharmacist-led OAC prescription can increase the delivery of stroke risk reduction therapy in individuals with AF compared with usual care. The analysis included 70 patients (aged 65 years and older) with AF and high stroke risk identified at 27 community pharmacies.

The researchers found that guideline-concordant OAC use at three months occurred in 92.3 percent in the early pharmacist intervention group versus 56.1 percent in the control group. Results yielded an absolute increase of 34 percent, with a number needed to treat of three. Of the 23 individuals in the control group who received appropriate OAC prescription, for six patients, the primary care provider called the pharmacist for prescribing advice.

"This study provides evidence of a potentially high-yield opportunity to effectively close gaps in the delivery of stroke risk reduction therapy for AF," the authors write. "Scalability and sustainability of pharmacist OAC prescription will require larger trials demonstrating effectiveness and safety."

Two authors disclosed ties to the pharmaceutical industry.


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