

## **Role of community pharmacies in raising awareness of malnutrition in older people**

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With an ageing population in the UK, the majority (93%) of malnutrition (undernutrition) is found in the community (1). Community pharmacies could be an ideal setting to identify people at risk of malnutrition and provide practical nutrition advice given that visitors to community pharmacies come from all sectors of the population and are often patients' first point of contact, and, for some, their only contact with a healthcare professional (2). Existing evidence suggests that 80% of over 65s take at least one regular medicine (3) and that community pharmacies can be actively involved in the delivery of public health services (4).

A health promotion initiative was carried out to explore the feasibility of community pharmacies in raising awareness of malnutrition in older people, and assess whether training provided to pharmacy staff led to improved awareness of malnutrition and specific conversations with older people.

Prior to the launch of the initiative in Portsmouth, two dietitians and one of the city council's Independence & Wellbeing team provided a 2-hour face to face training session on malnutrition awareness and the availability of local activities and interest groups for older people to seven staff across four community pharmacies. Knowledge was assessed before and after the session. Following training, pharmacies took part in the 3-month initiative (October – December 2015), which involved talking to older people (using a structured questionnaire) about their weight, eating habits and any recent weight loss, and then providing some basic information, signposting and resources to support people to maintain a healthy weight. Pharmacy staff entered the data into PharmOutcomes, which was exported to Excel for analysis. Following the initiative, informal discussions were held with each pharmacy to obtain qualitative feedback on the implementation of the initiative.

260 questionnaires were completed by staff in the four pharmacies, reflecting conversations held with people visiting the pharmacies, of which 93% (n=241) were aged over 65 and 68% (n= 177) were female. Questions on body mass index and weight loss suggested a malnutrition 'risk' of at least 19% in those over 65. The questionnaires revealed that 55% of people eat alone most days and two-thirds rarely eat a hot meal. Pharmacies differed in the way they approached people. Signposting to GP (17% of people) and Adult Wellbeing (13% of people) was most common. Results of pre-training knowledge assessment revealed limited malnutrition awareness among staff before the intervention. Qualitative data from discussions post intervention revealed improved knowledge of malnutrition, identification of people at risk and actions taken to support people.

This health promotion initiative demonstrated that training can improve malnutrition awareness in community pharmacy staff and lead to conversations with their customers about nutrition and provision of support around eating. Further research is needed to determine whether training around how to start a conversation around nutrition would improve the number and quality of conversations, and whether community pharmacies could screen older people using the Malnutrition Universal Screening Tool.

### **References:**

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