



America's Medicine Cabinet

*Proceed with
(Pharmaceutical)
Care*

*Supported through a grant from the
Community Pharmacy Foundation*



America's Medicine Cabinet



**SPEAKER'S
NOTES**

Course Description and Objectives

Target Audience

Consumers who purchase either prescription or over-the-counter (OTC) medicines, or both, for themselves or for someone they care for.

Estimated Duration of Lesson

60 minutes.

Lesson Rationale and Goal

Prescription medication and OTC medicines are readily available and commonly found in all homes.

Literature suggests (see *A Call to Action, Protecting US Citizens from Inappropriate Medication Use*—white paper written by the Institute for Safe Medication Practices) that many Americans misuse medications for a variety of reasons, mostly because of ready access and lack of education on proper use.

The **America's Medicine Cabinet *Proceed with (Pharmaceutical) Care*** lesson emphasizes the importance of reading medicine labels (especially the **Drug Facts** label) and involving the community pharmacist in medicine decisions. The program introduces consumers to information about and an approach to medicine use that may help them with self-medication choices for themselves and in their role as a caregiver. The lesson uses scenarios to teach the importance of reading label warnings and not taking two medicines that contain the same active ingredients.

Key Concepts

- The **Drug Facts** label tells you what a medicine treats, how to use it, and if the medicine is right for you and your problem.
- When you use an OTC medicine, *read the label* and follow the label directions carefully and correctly.
- Two medicines that have the same active ingredients should not be used at the same time, unless instructed to do so by doctor or pharmacist.
- Measure your medicines correctly with measuring tools made for medicines.
- If you have questions about your medicine, ask your doctor or pharmacist.
- Medication must be disposed of properly to prevent others from taking it inappropriately and to protect the environment.

In addition, if you choose to present the health literacy slides:

- Health literacy plays an important part in taking medications correctly.

Learning Objectives

After completing this lesson, consumers will:

- Understand similarities and differences between prescription medicines and OTC medicines (including vitamin and mineral supplements and herbal products).
- Understand that OTC medicines and prescription medicines can be harmful if they are not taken according to the directions.
- Be able to identify the active ingredients in an OTC drug product and what those active ingredients treat (the purposes and uses).
- Be able to identify the warnings sections on the **Drug Facts** label and explain why there are warnings on the **Drug Facts** label.
- Be able to identify the directions section on the **Drug Facts** label and know how to measure a dose correctly.
- Understand that a person should not use two medicines that contain the same ingredient at the same time.
- Understand how to get more information about their medicines.
- Understand how to properly dispose of unwanted medications.
- Identify the educational and health services provided by their community pharmacist.
- Understand their health literacy level (if using additional slides).

Slide 1:

Welcome to America's Medicine Cabinet.

Today, we are going to talk about prescription and over-the-counter (or OTC) medicines.

This presentation was created by the American Pharmacists Association (APhA) and the Institute of Safe Medication Practices (ISMP) and was supported through a grant from the Community Pharmacy Foundation.

Slide 2:

Acknowledgement:

Slide 3:

Today we are going to discuss the following.

- The significance of medication misuse and contributing factors
- Who is at risk for using medications incorrectly and why
- Why it is important to take medications correctly
- How to read an OTC medicine label
- Practice reading OTC labels
- How to properly dispose of unused medications
- How to interact with your pharmacist for the best results

Why are we here today? Americans are able to buy many types of medications, both by prescription from a doctor and over the counter in many types of stores—grocery stores, deep discount stores such as Wal Mart, natural food stores, gas stations, and, of course, drug stores. This ready access of medications has led some people to take these medications for granted, resulting in their taking medications incorrectly, or, as we say, misusing medications. This can cause harmful reactions to people, including hospitalization and, in rare circumstances, death.

Today, we are going to talk about how people incorrectly use medications and how the local pharmacist can help you to use your medications safely and effectively so that these medications will actually make you feel better, not worse.

When it comes to using medicine, it is important to know that no medicine is completely safe.

Slide 4: *(Read slide)*

(transition slide)

Let's talk about the value of medication and the importance of being an informed consumer.

Slide 5: *(Read slide)*

Unintentional medication misuse can lead to patient harm and additional health care costs.

Slide 6: (Read slide)

We are going to talk about how all of these reasons lead to people misusing medications.

People take a lot of (legal) drugs.

- Many prescriptions are written.
- Large numbers of new prescription, OTC, and “natural” medicines and vitamins are available.
- Pharmaceutical companies run TV ads.
- OTC labels are hard to read.
- Seniors, parents get confused.
- Written information is hard to read.

Slide 7: (Read slide)

- 4 of 5 US adults take prescription (Rx), OTC, or dietary supplement *every* week
- 33% take 5 or more medications weekly
- 1.5 million injured by medication errors
- Medication errors cost \$3.5 billion

The more medications people take, the more the medicines can interact with each other and lead to unintentional misuse of medications

Keep in mind that “medicines” include vitamins, minerals, and herbals products and OTC (*aka nonprescription*) medicines, or medicines you can buy without a prescription, such as antacids, laxatives, pain, fever, or cough/cold medicines.

Slide 8: (Read slide)

Lots of prescriptions are being written and filled every year. How many of you have had a prescription written by your doctor and filled at a pharmacy? How many of you have had more than one prescription filled last year? Have you or has anyone in your family used an OTC medicine this week?

- *Two of three patients leave doctor’s office with a prescription*
- *3.4 billion prescriptions filled in 2005*
- *40% of the US population receive four or more prescriptions every year*

Source: Miller L., ed. *Chain Pharmacy Industry Profile*. 9th ed. Alexandria VA: NACDS Foundation; 2006, p. 8.

Slide 9:

When you have a cold, how many of you want an antibiotic for a cold for yourself or your child, thinking you will get better, faster?

Antibiotics are powerful drugs but they are not the cure for all that ails you. Antibiotics are drugs that fight infections caused by bacteria. They are not effective against viral infections such as the common cold, most sore throats, and the flu, yet doctors write prescriptions for antibiotics because their patients want them.

Today, almost all important bacterial infections in the United States and throughout the world are becoming resistant to antibiotics. Antibiotic resistance has been called one of the world's most pressing public health problems. The smart use of antibiotics is the key to controlling the spread of resistance.

Source: Medco Health Solutions. *2005 Drug Trend Report*. Accessed 2/25/08 at: <http://medco.mediaroom.com/file.php/97/2005+DRUG+TREND+REPORT.pdf>

Slide 10:

The US Food and Drug Administration (FDA) is the part of our country's government that makes sure our medicines are safe and do what they say they do.

The FDA judges a drug to be safe enough to approve when the benefits of the medicine outweigh the known risks for the labeled use.

People are living longer, but developing more diseases; therefore, more new drugs are needed.

Last year alone, the FDA approved 20 biotech drugs, among them treatments for insomnia, multiple sclerosis, severe pain, chronic kidney disease, incontinence, mouth sores, and many types of cancer.

Source and background information:
Medco Health Solutions. *2007 Drug Trend Report*. Franklin Lakes, NJ. Available online at: <http://medco.mediaroom.com/file.php/129/2007+DRUG+TREND+REPORT.pdf>

Slide 11:

Vitamins and minerals also have the potential to interact with medications you're taking. Drug-drug interactions occur when a drug interacts, or interferes, with another drug.

For example, ferrous sulfate (iron) can negate the effects of tetracycline, a commonly used antibiotic.

-More than 40% of Americans have tried alternative medicines.

-50% of people ages 35–49 use alternative medicines.

Source: Eisenberg D, Davis RB, Ettner SL, et al. Trends in alternative medicine use in the US, 1990-1997. *JAMA* 1998;280:1569–1575.

As many as 40% of cancer patients take unconventional herbal and dietary supplements such as St. John's wort, shark cartilage, and megadoses of vitamins (without telling their doctor).

Prevention Magazine survey of US adults. Ironically patients with poor lifestyle habits or nutrition are the least likely to take them; older patients and women are more likely to use these supplements.

Source: Huang HY, Caballero B, Chang S, et al. The efficacy and safety of multivitamin and mineral supplement use to prevent cancer and chronic disease in adults: a systemic review for a NIH conference. *Ann Intern Med* 2006;145:372–385).

Slide 12:

Herbal supplements, which have grown significantly in availability and popularity in recent years, can add to the risk of drug-drug interactions.

For example, ginkgo, which inhibits blood clotting, may cause trouble if it's taken with anticoagulants or blood thinners, such as warfarin (Coumadin). Taking these two products together increases the risk of bleeding.

Slide 13:

When people see commercials of happy people who are suffering from what they think is the same disease as they have, the TV watchers want those medications, too.

Remember the people on TV are actors!

Anyone who watches TV knows the “healing purple pill” Nexium is often touted as a cure for heartburn and “erosions in the esophagus.” Do you really have erosions of your esophagus? Or just some mild heartburn?

“I see it on TV all the time. All my friends are taking it.” People need to understand that no matter how many times they see a drug on TV, these medications need to be used appropriately.

Source: Abramson J. *Overdosed America: The Broken Promise of American Medicine*. Copyright ©2004 HarperCollins Publishers.

Slide 14:

Direct-to-Consumer (DTC) advertising can impact requests for pharmaceuticals by patients (some being inappropriate for the patient).

The *Consumer Reports* magazine reported 40% of doctors surveyed believe DTC ads (ads for prescription drugs on TV and in magazines) by the pharmaceutical industry are a disservice to the public.

A total 335 doctors and 39,090 people around the nation were surveyed in this study.

- 78% of primary care physicians were asked by their patients for specific drugs advertised on TV
 - 67% of doctors granted their patients' request

Source: Get better care from your doctor: what 39,090 patients and 335 doctors have to say about how to make the most of your next appointment. *Consumer Rep* 2007;72:32–36.

Slide 15: *(Click through the differences over three clicks—compare and contrast)* *(Click once more to bring up the similarities)*

Any medicine can cause harm if you use too much of the medicine or use it incorrectly. This is true for prescription and OTC medicines.

For all medicines, you must read and follow the directions.

Children should use medicine only with permission from a parent or guardian.

We have both prescription and OTC medications currently in the United States.

More medications are moving from Rx to OTC status everyday: 700+ former prescription products now sold without a prescription (eg, Nizoral AD, Lamisil AT, Pepcid, Nicorette, Plan B).

Just because they are OTC doesn't mean you can take the medication lightly.

If you have questions about a medicine, you can ask a pharmacist.

(Review bullets)

Slide 16:

Now we will talk about the kinds of things that cause people to use their prescription and OTC medications incorrectly.

Slide 17:

This is usually what people do wrong.

(Read slide)

Take Your Medications Safely

Medicine is prescribed to help you. But it can hurt you if you take too much or mix medicines that don't go together.

Know what the medicine is for and how to take it.

Ask about side effects and what to avoid.

Read the label and warnings when you get your medicine.

Ask the pharmacist about your medicine if it looks different than you expected—we will talk more about this in a minute.

If you want to stop a medicine your doctor told you to use or to use it in a different way than directed by your doctor or the label, talk to a pharmacist. Some medicines take longer to show that they are working. With some medicines, such as antibiotics, it is important to finish the whole prescription even if you feel better sooner. With some medicines, if you want stop using them, you must reduce the dose little by little to prevent unwanted side effects.

Slide 18:

Understanding the importance your medication plays in your treatment will help you get the most benefit from your prescription.

Your doctor prescribed your medication, but you must take the medicine correctly to see the benefits.

If you don't take your medications correctly or at the right time, your condition can get worse.

Slide 19:

People end up in the hospital when they take the wrong amount of medication.

Source: Budnitz DS, Pollock DA, Weidenbach KN, et al. National surveillance of emergency department visits for outpatient adverse drug events. *JAMA* 2006;296:1858–1866.

The recent death of actor Heath Ledger (*Brokeback Mountain*) is raising awareness about the potential dangers of prescription drugs, especially sleep medications that are combined with other drugs.

Deaths caused by unintentional poisoning, of which 95% are drug overdoses, jumped from 12,186 in 1999 to 20,950 in 2004, according to figures from the Centers for Disease Control and Prevention.

Slide 20:

Are you going through a life change such as death of a loved one, retirement, moving, divorce, or remarriage?

Are you uncomfortable asking you doctor, pharmacist, or other health care professional questions? If not, then you may be at risk for taking your medications incorrectly.

Source: US FDA. FDA Proposes Program to Give Patients Better Medication Information. AARP survey. Available online at: http://www.fda.gov/fdac/features/995_medinfo.html

Slide 21:

Elderly patients—75% of whom take prescription drugs and 82% of whom use OTC products regularly—are at greater risk because they take and combine more medications than younger individuals.

As mentioned before, drug-drug interactions occur when a drug interacts, or interferes, with another drug: mixing prescription and OTC drugs without advice from a pharmacist can result in harm and lead to hospitalizations. In fact, 243,000 people were admitted to the hospital last year because of bad reactions when taking more than one medication.

Source: Cost Overdose: Growth in Drug Spending for the Elderly, 1992-2010. Washington, DC: Families USA; 2000.

Slide 22:

Senior citizens' bodies look and act differently than those of younger adults.

Changes in body weight can influence the amount of medicine you need to take and how long it stays in your body. Body (blood) circulation may slow down, which can affect how quickly drugs get to the liver and kidneys.

In addition, the liver and kidneys may work slower, which can affect how a drug breaks down and is eliminated from the body. Because of these changes, medicine may remain in your body longer and create a greater chance of interaction.

Source: IOM report July 2006: "Preventing Medication Errors: Quality Chasm Series" (Self medicate with cheaper OTC products; Inability to act on own behalf; Complex medications leads to adverse drug events; Side effects and complications)

Slide 23:

About 850,000 people each year misuse sedatives, including sleep aids, according to the Centers for Disease Control and Prevention. All told, 14 million people misuse prescription drugs, including pain relievers, tranquilizers, and stimulants.

Slide 24:

Children are affected by medication misuse, too, which includes not taking medication according to the directions, or skipping doses.

Sometimes medication (antibiotics, asthma inhalers, allergy medication) needs to be given to a child during school hours; many school systems don't have nurses or trained health care workers to help students. This results in children not getting the medications they need at the time their body needs it.

What happens to the student that does not have access to his or her breathing inhaler in gym class?

Informed students who are taught responsible behavior will be responsible patients and have good health habits for life.

Source: Johnson P, Hayes M. "Medication Use in Schools," *Am J Health Sys Pharm* 2006;63:1277–1285.

Slide 25: (Transition slide)

Now we will talk specifically about medications you can buy without a prescription and how to safely purchase the most appropriate medication for what you need to treat.

Slide 26:

The term "misuse" refers to taking more than the recommended number of pills per dose or taking pills more often than the label directs.

Approximately one in two Americans misuse common pain relievers such as ibuprofen, naproxen, and aspirin.

The survey also found that more than three-quarters of respondents reported never speaking to a doctor or nurse about any potential risks associated with these medications, many of which can be purchased without a prescription, or "over the counter" (OTC).

Source: Consumer Healthcare Products Association, IOM 2006. <http://www.nclnet.org/otcpain/jan30release.htm>

Slide 27:

Know your child's weight. Directions on some OTC medicines are based on weight. Never guess the amount of medicine to give to your child or try to figure it out from the adult dose instructions. If a dose is not listed for your child's age or weight, call your doctor or pharmacist.

Slide 28: (Click through slide several times while explaining the items that get circled, and say—)

This is why parent's do not give correct doses—the label can be confusing, and when you look for the dose to give your baby, it says to “ask your doctor”—what does a Mom or Dad do in the middle of the night?”

Always give infants and children OTC medicines that are especially formulated for their age and weight.

Give the right medicine, in the right amount, to your child. Not all medicines are right for an infant or a child. Medicines with the same brand name can be sold in many different strengths, such as infant, children, and adult formulas. The amount and directions are also different for children of different ages or weights. Always use the right medicine and follow the directions exactly. Never use more medicine than directed, even if your child seems sicker than the last time.

Unless labeled otherwise, adult-strength products should not be given to children; doing so could result in accidental overdosing.

To be safe, don't cut adult tablets in half or estimate a child's dose of an adult-strength liquid product.

Slide 29:

Use the dosing tool that comes with the medicine, such as a dropper or a dosing cup. A different dosing tool, or a kitchen spoon, could hold the wrong amount of medicine. Kitchen silverware spoons are different sizes and will not give the exact dose.

Know the difference between a tablespoon (tbsp) and a teaspoon (tsp). Do not confuse them! A tablespoon holds three times as much medicine as a teaspoon. On measuring tools, a teaspoon (tsp) is equal to “5 cc” or “5 mL.”

It is important to wash these measuring tools with soap and water after using them so they don't pass germs from one person in your family to another.

Slide 30: (Read slide—ask questions to audience.)

An important point is to read the label and recognize the *active ingredients* to avoid duplication of ingredients.

Slide 31:

You may be surprised to know that many OTC medicines may contain the same active ingredients in some prescription or common cold and flu medicines. Don't combine pain relievers, prescriptions, or multisymptom medicines with the same active pain relief ingredient because this could result in taking too much of that ingredient, and too much of any one ingredient can lead to serious health problems.

More is not better.

Look closely at product labels and be aware that advertisements do not always list the *active ingredients*—don't be fooled by product names.

Source: The People's Pharmacy. Beware brand name creep in the drugstore. October 2006.

Slide 32:

Laxatives and stool softeners are different ingredients and used for different reasons but these two products have the same name: Dulcolax.

If your doctor told you to buy Dulcolax before a colonoscopy, how would you know which one to get?

Slide 33:

Does "total stomach relief" mean it is the same stuff but stronger than "regular"?
NO, see this next slide.

Slide 34:

NO: two different ingredients, but they are both called Maalox!

The one on the right (total stomach relief) contains an ingredient that makes your stools turn black and "hairy" (Bismuth)—what if no one told you that and you bought it thinking it was just stronger Maalox?

Slide 35:

For many years, the well-known *Kaopectate* brand name has been used as an antidiarrheal (stops bowel movements) product. Now there is new Kaopectate product—a stool softener (increase bowel movements)!

Thus the same brand name is used for products with opposing indications/actions.

A stool softener is used when you are constipated, not when you have diarrhea!

Slide 36:

When buying an OTC, read the **Drug Facts** label carefully to make sure it is the right medicine for you.

Prescription and OTC medicines don't always mix well with each other.

Dietary supplements (such as vitamins and herbals) and some foods and drinks can cause problems with your medicines too. Ask the pharmacist if you have questions.

Now, let's look a little closer at the **Drug Facts** label.

Slide 37:

Know what active ingredients are in your medicine.

An *active ingredient* is the chemical compound in the medicine that works with your body to bring relief to your symptoms; make sure that you aren't using more than one medicine with the same active ingredient.

Know what to avoid while taking an OTC medicine

Warnings (*precautions*)—safety measures to make sure the medicine is used the right way and to avoid harm (before, during, and after use).

As with prescription medicines, some OTC drugs can cause side effects or reactions. Read the label to see what to avoid while you are taking an OTC drug.

When using this product/possible interactions

These are substances that should not be used while using the medicine. Find out if other prescription and OTC medicines, food, dietary supplements, or other items (such as alcohol and tobacco) could cause problems with the medicine

Possible side effects (*adverse reactions*)

Unwanted effects that the medicine can cause and what to do if you get them.

Source: <http://www.bemedwise.org/label/label.htm>

Slide 38:

Uses (*"indications" and "contraindications"*)

What the medicine is used to treat, (*why it is being used*), and when the medicine should/should not be used.

Look for an OTC medicine that will treat only the symptoms you have

The formulations of OTC drugs are very specific and should not be mixed and matched.

Source: National Council on Patient Information and Education. *The New Drug Facts Label*. Available online at: <http://www.bemedwise.org/label/label.htm>

Slide 39:

Directions—the correct amount to use, or dose; how to measure it; how often to use it; what to do if you miss a dose; special directions on how to use the medicine, such as whether to take it with or without food.

Taking too much of a nonprescription medicine can be harmful. Only take the recommended amount and at the exact intervals stated on the label.

Source: National Council on Patient Information and Education. *The New Drug Facts Label*. Available online at: <http://www.bemedwise.org/label/label.htm>

Slide 40:

Inactive ingredients—(*the part of the medicine that colors, flavors, shapes, preserves, or helps the medicine dissolve*) have you had any problems with ingredients in medicines, such as colors, flavors, starches, sugars, preservatives?

Check for allergies

Example: red food coloring, gluten

Check for tolerance

Example: lactose intolerance

Source: <http://www.bemedwise.org/label/label.htm>

Slide 41:

Storage instructions—how and where to keep (or store) the medicine. **Expiration**—date after which the medicine may not work, or may be harmful to use.

Source: National Council on Patient Information and Education. *The New Drug Facts Label*. Available online at: <http://www.bemedwise.org/label/label.htm>

Slide 42:

Let's look at the label you have in front of you.

What does "Feel Better Cold and Fever Suspension" treat?

What are the active ingredients?

(Call on someone to provide one active ingredient and what it does. Call on a second person to provide the second active ingredient and what it does)

(Can then click through 4 clicks to demonstrate all the places on the label that shows us what the medicine treats and with what ingredients)

Slide 43: *(Confirm answers with this slide)*

Note difference on **Drug Facts** and what is on the main label.

Slide 44: *(Read questions and solicit responses)*

Answer: B

http://www.bemedwise.org/quiz_facts/quiz.htm

Slide 45: *(Read questions and solicit responses)*

Answer: B

http://www.bemedwise.org/quiz_facts/quiz.htm

Slide 46: *(Read questions and solicit responses)*

Answer: D

http://www.bemedwise.org/quiz_facts/quiz.htm

Slide 47:

Now we will discuss how you can take charge of the proper use of medication by yourself and those you care for.

Slide 48: *(Read slide)*

- Health literacy is the ability to read, understand, and effectively use basic medical instructions and information.
- *Low health literacy can affect anyone of any age, ethnicity, background, or education level*

Slide 49:

Let's face it. Medicine is prescribed to help you. But it can hurt you if you take too much or mix medicines that don't go together.

If people can't read or understand the label and written information given to them, they can be in trouble, have needless suffering, and end up costing the government or themselves more money to get better.

Many people are harmed each year, some seriously, because of taking the wrong medicine or not taking the right medicines correctly.

People who are confused about medication schedules don't understand their disease or the reason to take their medicines prescribed to them and end up not taking their medications at all or taking them incorrectly.

Source: Weiss BD. Assessing health literacy in clinical practice. *Medscape Today*. Available online at: <http://www.medscape.com/viewprogram/8203>

Slide 50:

Have you ever had a problem with your medicines? You are not alone.

There are so many things to keep track of. For example, you may have asked yourself:

- When exactly should I take my medicine?
- Is it safe to take my vitamins when I am taking a prescription medicine?
- Now that I feel better, can I stop taking my medicine?

Follow Prescription Directions

Always take medications as instructed by your doctor, pharmacist, or other health care professional, and do not change the way you take them unless instructed by them to do so.

Monitor Your Reactions

Side effects of prescription medicines can be due to many possible causes. If you experience unusual symptoms that begin after you start taking a new medication, contact your doctor, pharmacist, or other health care professional **immediately**. It is important to determine if a symptom was drug-related and whether or not you should continue taking the medicine.

Source: [www.usp.org/pdf/EN/patient safety](http://www.usp.org/pdf/EN/patient%20safety) (accessed 8/06)

Slide 51: *(Read slide)*

If you don't understand, it is important to ask to get better results!

Patients who understand health care information may:

- understand instructions and take medications correctly.
- visit doctors less often.
- have fewer hospitalizations.
- have better health outcomes.
- have increased patient satisfaction (feel better!).

Slide 52:

Ask for information about your medicines in terms you can understand—both when your medicines are prescribed and when you receive them.

Read the label before you leave the pharmacy with your prescription; be sure you have the right medicine, know the right dose to use, and know how to use it.

What is the medicine for?

How am I supposed to take it, and for how long?

What side effects are likely? What do I do if they occur?

Is this medicine safe to take with other medicines or dietary supplements I am taking?

What food, drink, or activities should I avoid while taking this medicine?

If you have bought the medicine before, make sure that this medicine has the same shape, color, size, and packaging.

Anything different?

Ask your pharmacist.

Do they offer you the opportunity to talk to the pharmacist?

Know what you are signing. You may be signing a statement that says you didn't want to talk to a pharmacist.

Slide 53:

READ THE LABEL AND FOLLOW DIRECTIONS

Read the label each time you buy an OTC medicine or fill your prescription.

Using too much of any active ingredient may increase your chance of unwanted side effects.

It helps to give a *written list* of all your medicines and treatments to all your doctors, pharmacists, and other team members. Keep a copy of the list for yourself and give a copy to a loved one.

Teen “Pharming”

Teens abuse prescription drugs to get high.

Prescription pain killers are second—only behind marijuana—as the nation's most prevalent illegal drug problem.

Teens “steal” medications from you; you may not realize how easy it is for them to get your prescription medications.

Slide 54:

Does anyone in your home have these prescription drugs? (*Refer to slide*). If so, lock them up and dispose of them properly when no longer needed.

Store medications where children cannot see or reach them—for example, in a locked box or cabinet. Teach children that medications can be dangerous if misused.

Slide 55:

Dispose of all medicines promptly after their expiration date and be careful not to throw them away where children or pets may find them.

Slide 56:

Dispose of all medicines promptly after their expiration date and be careful not to throw them away where children or pets may find them.

- **Do not flush unused medications**
- **Be proactive and dispose of unused medication yourself in household trash.**
 - *For pills, pour into plastic bag before crushing or dissolve in water to prevent airborne particles.*
 - *Crush medication.*
 - *For liquid medications, pour into a plastic bag.*
 - *Mix kitty litter or coffee grounds in the plastic bag containing the medication.*
 - *Seal the plastic bag to reduce the risk of potential poisoning.*
 - *Place sealed plastic bag in household trash for disposal.*
 - *Remove and destroy ALL identifying personal information (prescription label) from the medication container.*
 - *Recycle empty medication container as allowed in the local recycling area or throw it in the trash.*

Source: SMARxT Disposal Campaign (www.pharmacist.com).

Slide 57: (*Read slide*)

How can your pharmacist help you?

Slide 58:

Pharmacists are the most widely accessible health care professionals—there is a pharmacy on many street corners.

Ask how to use the medicine correctly

Read the directions on the label and other information you get with your medicine. Have the pharmacist explain anything you do not understand.

Are there other medicines, foods, or activities (such as driving, drinking alcohol, or using tobacco) you should avoid while using the medicine?

Ask if you need lab tests to check how the medicine is working or to make sure it doesn't cause harmful side effects.

Slide 59:

Pharmacists work with you and your doctor to evaluate your medications and compare them to the disease or symptoms you are trying to treat.

Refer to information on slide

Slide 60:

Does your pharmacy offer these services? Do you use them? Many times they are available free of charge.

Slide 61: *(Review slide with audience)*

Slide 62:

Rxs may be expensive, but consider the cost to the benefits value. When taken correctly, medications can lead to better disease state management and better quality of everyday life.

If you need help paying for prescriptions, ask your pharmacist or doctor for government and pharmaceutical sources.

Source: NACDS Practice Memo, "It's time to talk about value." Available online at: <http://www.practicememo.com/Archives/html/2006/Nov06.html>

Slide 63:

If you are not sure, ask the pharmacist. The pharmacist is there to answer your questions.

Slide 64:

ADDITIONAL SLIDES Health Literacy

Slide 65: (Note to pharmacist/presenter)

Why Conduct a Pharmacy Health Literacy Assessment?

Health literacy is an important factor in an individual's ability to perform various health-related tasks. These include filling a prescription and taking medications correctly, reading and being able to act on information from a disease prevention brochure, filling out forms, and making decisions about health insurance. In its 2001 report *Crossing the Quality Chasm* and its 2004 report *Health Literacy: A Prescription to End Confusion*, the Institute of Medicine indicated that health care providers must redesign the system of health care delivery in order to meet the needs of low-literate individuals.

Sources: Institute of Medicine. *Health Literacy: A Prescription to End Confusion*. Washington, DC: The National Academies Press; 2004.

Institute of Medicine. *Crossing the Quality Chasm: A New Health System for the 21st Century*. Washington, DC: National Academy Press; 2001.

Results from the 2003 National Assessment of Adult Literacy indicate that many Americans have difficulty understanding and acting upon health information.

Source: Kutner M, Greenberg E, Jin Y, et al. *The Health Literacy of America's Adults: Results from the 2003 National Assessment of Adult Literacy*. Washington, DC: National Center for Education Statistics; 2006.

Fourteen percent of adults (30 million people) have *below basic* health literacy—meaning that they are either nonliterate in English or can perform no more than the most simple and concrete health literacy tasks, such as circling the date of a medical appointment on an appointment slip.

An additional 22% (47 million people) have *basic* health literacy—indicating that they can perform only simple health literacy activities, such as locating one piece of information in a short document.

Although about half (53%) of adults have *intermediate* health literacy—for example, determining a healthy weight for a person on a body mass index chart—just 12% of adults have *proficient* health literacy. In other words, only about 1 of 10 adults may have the skills needed to manage their health and prevent disease.

Some adults are more likely to have limited health literacy than others, including those who:

- are Hispanic, Black, and American Indian/Alaskan Native.
- have lower incomes.
- are in poorer health.
- have limited English proficiency.
- are age 65 and older.

A pharmacy health literacy assessment is an important first step for quality improvement in organizations that serve individuals with limited health literacy.

Source: Rudd RE, Anderson JE. *The Health Literacy Environment of Hospitals and Health Centers*. Boston: Health Literacy Studies, Harvard School of Public Health, National Center for the Study of Adult Learning and Literacy; 2006.

A pharmacy health literacy assessment:

- raises pharmacy staff awareness of health literacy issues.
- detects barriers that may prevent individuals with limited literacy skills from accessing, comprehending, and taking advantage of the health information and services provided by the organization.
- identifies opportunities for improvement.

Slide 66: *(Pharmacist present: before presenting these next slides, review “why and ice cream label” document attached to this CD-ROM)*

Let's use this commonly seen ice cream nutrition label to test your reading and understanding skills.

Source: The NVS can be obtained online at no cost from the Partnership for Clear Health Communication <http://www.clearhealthcommunication.org/physicians-providers/newest-vital-sign.html>.

Slide 67: *(Ask participants question on slide)*

Answer: *1,000 is the only correct answer.*

Slide 68: *(Ask participants question on slide)*

Answer: *Any of the following is correct: 1 cup (or any amount up to 1 cup), half the container.*

Note: If patient answers “two servings,” ask “How much ice cream would that be if you were to measure it into a bowl.”

Slide 69: *(Ask participants question on slide)*

Answer: *33 is the only correct answer.*

Slide 70: *(Ask participants question on slide)*

Answer: *10% is the only correct answer.*

Slide 71: *(Ask participants question on slide)*

Answer: *No.*

Slide 72: *(Ask participants question on slide—ask only if the patient responds “no” to question 5)*

Answer: *Because it has peanut oil.*

Slide 73:

Answering the questions correctly requires the ability both to read and understand the content on the nutrition label (eg, to determine if the list of ingredients on the ice cream label contains a substance to which the patient is allergic) and to perform computations (eg, numeracy to calculate the number of calories in a serving of ice cream).