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# VARIOUS ISSUES OF PHARMACIST DURING COVID-19 PANDEMIC

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#### **ABSTRACT**

The corona virus disease 2019 (COVID-19) impact on the mental health of pharmacist is extremely detrimental. It is imperative that the psychological health of all healthcare workers be protected. However, an often overlooked member of the healthcare frontline is the pharmacist. Pharmacists provide many types of essential services during the pandemic, which often cannot be done from a remote location. Being frontline healthcare workers, pharmacists have experienced an increase in the number of patients seen, the amount of screening and triage being done, the amount of COVID-19 information being delivered, the number of medication shortages, and the amount of workplace harassment taking place. These activities increase the

amount of stress, burden, and frustration felt by pharmacists have a negative impact on their mental health and well-being. This article seeks to address to various issues of pharmacists during Covid-19 Pandemic.

**KEYWORDS:** COVID-19, Mental health, Pharmacists.

### INTRODUCTION

COVID-19 is a severe infectious respiratory disease caused by a novel corona virus (SARS-CoV-2) whose first case of infection occurred on December 31, 2019, in Wuhan, China. The World Health Organization (WHO) has officially declared it a global pandemic on March 11, 2020. COVID-19 is transmitted person-to-person via drop- lets produced by coughing, sneezing, speaking, and through contact with contaminated surfaces These measures were implemented to control the physical spread of COVID-19 and ramifications on the population's mental health. The challenging conditions imposed causes increased stress, anxiety, depressive symptoms, and exacerbation of pre-existing mental illness. Social

isolation is strongly associated with poor mental health outcomes.

Pharmacists are one of the frontline HCWs working diligently to provide much-needed services during the pandemic, Pharmacist-provided services have shown to improve patient outcomes and contribute to healthcare savings. Community pharmacists provide COVID- 19 screening and medication dispensing to maintain continuity of care, disseminates critical information regarding COVID- 19, collaborate closely with other HCWs and government organizations, engage in home medication delivery, and remain the most accessible healthcare member that patients can interact with. Hospital pharmacists directly support physicians, nurses, and other staff in managing life- saving medications for COVID-19 patients, participating in patient rounds, and engaging in infectious disease control Unfortunately, pharmacists are often over- looked and are underrepresented regarding advocacy. In this editorial, we will address pharmacist-specific mental health issues as well as methods to support pharmacists' psychological well-being.

Pharmacists experience issues common to all HCWs during COVID-19. Both community and hospital pharmacists experience a lack of personal protective equipment (PPE). Long work hours are required for treating the increased number of scared and frustrated patients, along with increased responsibility and pressure. Increased risk of infection resulting from work-related exposure leads HCWs to self-isolate, which can result in feelings of isolation and loneliness. However, due to the pharmacist's unique role, they will also experience pharmacist-specific issues as summarized in Fig. 1.

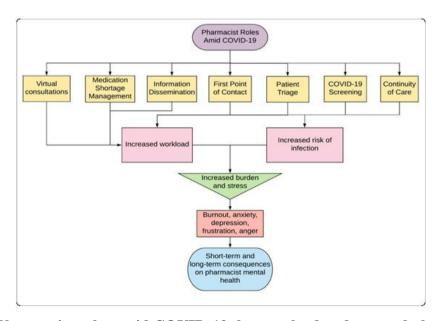


Fig. 1: Pharmacist roles amid COVID-19 that can lead to decreased pharmacist.

#### VARIOUS ISSUES OF PHARMACIST

#### 1. First point of patient contact

As one of the most easily accessible HCWs, pharmacists are often the first point of contact for many patients. Pharmacists may experience an increase in the number of patients seen during the pandemic. Understandably, many patients who have non-COVID-19-related illnesses may be hesitant to go directly to a hospital or other similar institutions for fear of contracting COVID-19, Instead of going to a hospital, they may present themselves to a pharmacy to receive guidance from a pharmacist, which results in a decrease in the number of non-essential hospital visits and allows healthcare resources reallocation to treat COVID-19. However, this could lead to a strain on community pharmacists as they attempt to fill that clinical role. The resulting increased workload will add to the burden, leading to burnout among pharmacy staff, which is detrimental to individual well-being and compromising the quality of care provided.

#### 2. Patient triage in Hospital

Pharmacists also engage in patient triage while there may exist some increased risk of contracting COVID-19 in clinics and hospitals, patients who need care should not be afraid to seek care. Pharmacists can provide over the phone and in-person screening of COVID-19 symptoms as well as appropriately redirect patients to other healthcare facilities. The importance of continuity of care is amplified during a pandemic and demonstrates the importance of pharmacist triage. However, it is not always easy to triage and prioritize patients difficult decisions often must be made. This also emphasizes the importance of adequate PPE, as screening exposes pharmacists to the risk of infection and contamination. Both the burden of appropriate triage and the absence of peace of mind against the disease contribute to the stress that pharmacists face.

#### 3. Information dissemination

As pharmacists provide essential information regarding COVID-19 to the public in an easy to access manner, they must stay up to date on the latest pandemic developments. Pharmacist's help patients navigate fact from fiction as well as educate on proper hygiene and infection control. This is important as misconceptions about COVID-19 can exacter- bate worry and other mental health concerns. However, pharmacists find themselves under constant bombardment of COVID-19 related information, which can be overwhelming and affect overall mental well-being. Pharmacists can also use adverse

drug reaction (ADR) and medical device incident (MDI) reporting to facilitate misinformation correction. The demand for COVID-19 therapies drives the rampant adoption of potential medications, even when there is insufficient evidence for its efficacy and safety.

#### 4. Managing medication shortages

Pharmacists are also managing medication shortages and limited resources during COVID-19. Before the pandemic, medication shortages were already a global issue. The spread of COVID-19 generated a spike in the number of critically ill patients and fear-based medication hoarding contributing to the pre-existing shortages. Medication shortages disrupt care and pose safety concerns for patients. Two drugs that have been publicized as candidates for the treatment of COVID-19, hydroxy- chloroquine and chloroquine, have now become difficult to obtain for patients who need these agents to manage rheumatoid arthritis, systemic lupus erythematosus, and other autoimmune disorders. While most of medication shortage issues are out of the pharmacists' control, there are some initiatives pharmacists have taken to tackle the problem. Pharmacists can find alter- native sources, alternative therapies, and rationing existing drug supplies. One such proposed method is to sterilize metered-dose inhalers used once or twice in hospitals so that they can be reuse. In addition to technical difficulties in managing medication shortages, there are also ethical dilemmas when deciding to prioritize one patient over another, which can also be damaging to mental well-being. This results in something known as moral injury, described as "the psychological distress which results from actions, or lack of them, which violate someone's moral or ethical code."

#### 5. Harassment from patients

An unfortunate circumstance that pharmacists have to face is harassment and abuse. In a national survey conducted by CPhA, 73% of pharmacists report an increase in harassment, verbal abuse, and other forms of abuse by patients ever since the pandemic began. Anecdotal accounts also exist of healthcare workers experiencing stigma and abuse due to the public's fear of contracting COVID-19 from someone who has high exposure to the virus. In such a perilous time, it is understood- able that patients will feel frustrated, angry, and frightened. However, pharmacists do not deserve to be poorly treated. It is important to let them know that pharmacists are doing their best to support patient health throughout the pandemic and beyond. As a result of the power dynamics at play, it is ultimately up to pharmacists to be

able to reassure patients and provide care, all while taking into account their mental health. Currently, guidelines regarding patient interaction during a pandemic are needed.

#### 6. Pharmacists mental health

Mental health care for HCWs is more critical now than ever. According to CPhA, pharmacists' mental health was among the top four pharmacists' greatest concerns during COVID-19, along with personal and staff safety, drug shortages, and workload/staffing shortages. Poor HCW mental health may lead to decreased quality of care, attention paid, and decision-making ability, but pharmacist-specific data is lacking. One study looked at the job satisfaction of pharmacists which can be considered another indicator of thepharmacists' well-being. Pharmacists with low job satisfaction often have less productivity and lower overall quality of life. On the contrary, high job satisfaction positively impacts performance, employee relationships, mental health, and life satisfaction. During such dire times, pharmacists are being relied upon more and more to provide much-needed services during the pandemic. Pharmacists, like other HCWs, know how important their role is and are resilient in providing care even at the expense of their own mental and physical well-being. It is well known that mental illness is associated with lower life expectancy and poorer health outcomes than the general population, increasing the risk of infection with COVID-19. It is uncertain what exactly the long-term may be, but there is evidence that such exist. COVID-19 is as much of a somatic battle as it is a mental battle. If unaddressed, poor mental health can have more serious consequences down the line and may lead to a shortage of pharmacists.

#### 7. Future directions

Healthcare delivery is progressing in the direction of telemedicine and virtual methods of delivery. It is a very good candidate for electronic delivery. This can be extended to providing mental health care to pharmacists and other HCWs. Digital learning package that consisted of evidence-based guidance, actions to take, and self-care strategies relating to maintaining mental well-being for HCWs. The material was better received if it addressed specific issues that were relevant to healthcare work environments. This further proves the importance of having more pharmacy- specific mental health resources.

Pharmaceutical systems due to COVID-19 and issues become apparent, the process of strengthening a pharmaceutical system is lengthy and resource intensive which may

not be feasibly done in time during COVID-19. Pharmaceutical systems requires the engagement of government bodies and multiple stakeholders as well as policy and legislation reform, Finally, the interventions that work to strengthen pharmaceutical systems are not precisely known, which is an area of further research.

#### **CONCLUSION**

Various issues of Pharmacist during the COVID-19 pandemic needs to be addressed. Pharmacists are frontline HCWs and belong in this category as they provide necessary services amid the pandemic. As one of the most accessible HCWs, they face many stressors that need to be specifically targeted to address pharmacist's mental health issues effectively. All in all, more research and resources need to be developed to provide solutions for the declining psychological well-being of pharmacists and HCWs in general amid COVID-19.

#### REFERENCE

- 1. Cosic K, Popovic S, Sarlija M, Kesedzic I. Impact of human disasters and COVID-19 pandemic on mental health: potential of digital psychiatry. Psychiatr Danub, Apr 15, 2020; 32(1): 25–31.
- Fiorillo A, Gorwood P. The consequences of the COVID-19 pandemic on mental health and implications for clinical practice. Eur Psychiatry [Internet], 2020 Apr 1 [cited 2020 Jun 11]; 63(1). Available from: https://www.ncbi.nlm. nih.gov/pmc/articles/PMC7156565/.
- 3. Brooks SK, Webster RK, Smith LE, Woodland L, Wessely S, Greenberg N, et al. The psychological impact of quarantine and how to reduce it: rapid review of the evidence. Lancet Lond Engl, 2020; 395(10227): 912–20.
- 4. Luo M, Guo L, Yu M, Jiang W, Wang H. The psychological and mental impact of coronavirus disease 2019 (COVID-19) on medical staff and general public a systematic review and meta-analysis. Psychiatry Res., Jun 7, 2020; 291: 113190.
- 5. Leigh-Hunt N, Bagguley D, Bash K, Turner V, Turnbull S, Valtorta N, et al. An overview of systematic reviews on the public health consequences of social isolation and loneliness. Public Health, Nov. 2017; 152: 157–71.
- 6. Courtin E, Knapp M. Social isolation, loneliness and health in old age: a scoping review. Health Soc Care Community, 2017; 25(3): 799–812.
- 7. Ge L, Yap CW, Ong R, Heng BH. Social isolation, loneliness and their relationships with

- depressive symptoms: a population-based study. PLoS ONE [Internet], Aug 23, 2017; [cited 2020 14]; Available Jun 12(8). from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5568112/.
- 8. Banerjee D, Rai M. Social isolation in Covid-19: the impact of loneliness. Int J Soc Psychiatry, Apr., 2020; 29: 0020764020922269.
- 9. Pappa S, Ntella V, Giannakas T, Giannakoulis VG, Papoutsi E, Katsaounou P. Prevalence of depression, anxiety, and insomnia among healthcare workers during the COVID-19 pandemic: a systematic review and meta-analysis. Brain Behav Immun [Internet], May 8, 2020; [cited 2020 Jun 23]; Available from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7206431/.
- 10. Kang L, Li Y, Hu S, Chen M, Yang C, Yang BX, et al. The mental health of medical workers in Wuhan, China dealing with the 2019 novel coronavirus. Lancet Psychiatry, Mar. 2020; 7(3): e14.