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COMMENTARY

The burden of COVID-19 on pharmacists

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ABSTRACT

The unprecedented changes brought about by the global coronavirus disease 2019 (COVID-19) pandemic have had important impacts on society. The pandemic has provided an opportunity to highlight the crucial role pharmacists play in the provision of health care. The critical and unique role of pharmacists in pandemics and other disasters has been highlighted in the past (severe acute respiratory syndrome and Ebola outbreaks) and more recently with reports of the contributions of pharmacists during the global COVID-19 pandemic. Many reports have documented that health care professionals are experiencing significant psychological morbidity as a result of providing essential care and services during the global COVID-19 pandemic. In these reports, pharmacists are not well represented, and, therefore, it is essential to understand the impact of COVID-19 on pharmacists across multiple practice settings. This is particularly true as the experiences of pharmacists working through previous pandemics and disasters, and the associated psychological burden, are likely to offer insights and be useful in supporting the psychological well-being of pharmacists during the global COVID-19 pandemic. Research into the effect of the global COVID-19 pandemic on pharmacists should improve the understanding of the impact and the psychological morbidity associated with their role as frontline health care professionals.

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The global coronavirus disease 2019 (COVID-19) pandemic has brought about unprecedented changes in the delivery of health care in which the essential role of the pharmacist has never been more evident. Pharmacists have been consistently working on the frontline during this pandemic, continuing their vital role in supplying medicines and caring for the health needs of the community. Pharmacists believe they have an obligation to provide health services and understand they have an important role to play during the global COVID-19 pandemic. Community pharmacists have been caring directly for a stressed and anxious community who is worried about the supply of their medicines and other essential items. Patients and carers are looking to pharmacists for advice and

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health care services as their usual access to health care is not possible because of general practitioners closing or working predominately by telehealth but pharmacies remaining open. Hospital pharmacists have held a key role in supporting hospitals and health care organizations in planning for the worstcase scenario, providing advice on supply and product substitutions as well as training and supporting hospitals with a flexible service delivery. Many pharmacists are involved in policy positions providing advice on legislative and technological solutions in the rapidly changing environment to support the supply of medicines. Other pharmacists are teaching and researching, which has included navigating new and uncharted modalities of delivery. Whatever the role, pharmacists have not stopped providing for their community with their clinical skills and knowledge. Their accessibility is an important part of their involvement of delivering health care, in addition to an increasing scope of practice to assist with emergency preparedness and health promotion in the community.3-5

The global COVID-19 pandemic is not the first disaster to illustrate the vital role that pharmacists play in such circumstances. The experiences of pharmacists caring for patients with Ebola report changes to their roles and delivery of services, the importance of the pharmacist in community education, and the ability of the profession to remain flexible and

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Key Points

Background:

- Pharmacists are working hard on the frontline to provide care for patients during coronavirus disease 2019 (COVID-19).
- Pharmacists have a unique and important role to play in pandemics and disasters.
- Pharmacists are at risk of burnout and psychological morbidity related to their work.

Findings:

- There is literature available describing the experiences of pharmacists in previous pandemics and disasters that can be used to inform practice during COVID-19.
- This commentary highlights the importance of investigating and reporting the psychological burden that is placed on pharmacists working during COVID-19.

adaptable in the face of uncertainty and changing advice.⁶ Pharmacists can play an important role in the various phases of disasters including prevention, preparedness, response, and recovery,⁷ and this remains true during COVID-19.⁸⁻¹⁰ There have been various papers illustrating the potential role of pharmacists during disasters, which include traditional roles as well as roles that encourage the increasing scope of practice including, for example, continuing to supply chronic medicines without a prescription, educating the community on infection control, preparing hand sanitizer, and vaccinating. 4,11-15 In an effort to support overburdened health care systems and use the accessibility of pharmacies, many countries have implemented legislative changes to support the evolution of pharmacists' roles during these periods, including pharmacists participating in first-responder and other nontraditional roles with other health care providers. 16-18 Reports from China during COVID-19 highlight the increased workload and the importance of the community pharmacists' roles in medication dispensing, referrals and consultations, chronic disease management, patient education, psychological support for the community, and provision of support for COVID-19 related homecare services. 15 Clinical pharmacists working in China during COVID-19 have advised their colleagues around the world to contribute during the COVID-19 pandemic with roles such as guiding the provision of pharmacy services, providing medicines information, contributing to research, performing drug evaluations and writing and reviewing guidelines, providing pharmaceutical care as part of the multidisciplinary team, and providing telehealth and multimedia education using technology.¹⁴ This constantly changing environment, uncertainty, and shifting roles are some of the things creating a high degree of psychological burden associated with the global COVID-19 pandemic. 19 This additional burden must be considered with the high-burnout rates in pharmacists even before the global COVID-19 pandemic. Reports vary in their prevalence rates, with many reporting more than 50% of pharmacists experience burnout, ²⁰⁻²⁴ similar to rates reported in physicians. ²⁵ One study, which compared pharmacists with other health care providers including physicians and nurses, reported that pharmacists had the highest rates of burnout. ²² Factors associated with burnout for pharmacists include a lack of resources, excessive workloads, inefficient systems, and time pressures, which are similar to the factors associated with physician burnout. ^{21,25-30}

The global COVID-19 pandemic has caused profound disruption to everyday life and has inflicted additional psychological burden on health care workers. ^{19,31,32} Although there have been some data highlighting the importance of mental health of health care workers and prioritizing self-care as an important factor in the response to the pandemic, ^{19,33-35} there has been little evidence to suggest there has been a prioritization of the health and well-being of health care workers during COVID-19, and pharmacists are rarely mentioned in this context.

Previous pandemics can provide insights into the psychological impact of pandemics on frontline health care workers and possible interventions to minimize this burden and can be used to inform strategies during the current COVID-19 pandemic. Studies investigating the psychological impact of working during the severe acute respiratory syndrome and Middle East respiratory syndrome epidemics on health care workers identified specific confounders that are congruent with COVID-19.³⁴ Issues identified in these previous epidemics that relate to psychological morbidity include a sense of personal danger particularly associated with intense media coverage, uncertainty regarding the virus and rapidly changing recommendations, concern around supply shortages, and a feeling of loneliness and isolation.³⁶⁻⁴⁴ Other factors associated with psychological impact related to natural disasters and pandemics include an increased workload, preparation and recovery activities, and concern for family and friends.^{42,45} Interventions reported to help minimize the psychological effects were providing practical advice and approaches to dealing with stress, provisioning flexible support services to be accessed as individually required, being supported to assist with not feeling alone, as well as providing clear communication and collaboration.^{37,41} A sense of unity, awareness of infection control, focus on current affairs, and an acceptance of personal risk were also associated with a reduction in negative psychological outcomes. 40,46 Lower reported rates of burnout in medical staff working on the frontline compared with colleagues working in their usual wards have been due to being acknowledged for their contribution, feeling closer to decision makers, and having access to timely information and potentially a greater sense of control.⁴⁷ Community pharmacists have described the importance of providing a continued service provision to the community and the increasing responsibility of pharmacies to function as frontline health care facilities when others, such as general practitioners and outpatient clinics were less available. This increase in workload and the general expectation of pharmacists to adapt and broaden their scope and services to meet these demands are overwhelming and daunting for some pharmacists. Leadership and practical guidance are important because a lack of cohesive guidance and decision-making reportedly add to the ambiguity and sense of unknown. Finally, a sense of

"teamness" was considered an important part of pharmacists' experiences in disasters as was personal responsibility, flexibility, and a lack of traditional hierarchy. Because many of the issues for pharmacists working through COVID-19 are similar to those described in previous disasters, we should be turning to the information gained from these events to consider what factors are important to pharmacists and introduce interventions to support them.

The only study to report on the psychological factors affecting pharmacists during COVID-19 investigated the resilience of pharmacists, which is thought to be protective against burnout. ^{49,50} The factors associated with increased resilience among community pharmacists were predominantly organizational factors including the use of technology, task orientation and structured breaks, and provision of practical guidelines and personal protective equipment. ⁴⁹ These factors are all potentially manageable interventions at an organizational level, which could protect pharmacists against burnout and therefore reduce psychological morbidity. Moving forward through the pandemic, the opportunity for pharmacists to take on nontraditional roles, and particularly, the important role pharmacists will play in the widespread provision of a vaccine will offer pharmacists a sense of purpose and value.

Understanding the impact of COVID-19 on the psychological well-being of pharmacists broadly both in the community, hospital, and other settings is an important step to supporting pharmacists' well-being. Pharmacists are among the essential health care providers that have remained on the frontline providing services to the community in these times of uncertainty, despite the inherent personal risk. However, there has been limited mention of the pharmacy profession in the advocacy of prioritizing the mental health of health care workers. There must be efforts made to assess the psychological impact on the pharmacy profession and a recognition of the burden placed on pharmacists as a result of their work. A first step would be to measure burnout, likely contributing factors, and possible interventions that might support the profession. This is a matter of critical importance to provide support to pharmacists as they continue to work tirelessly throughout this global COVID-19 pandemic and to better inform and prepare for the future.

References

- Basheti IA, Nassar R, Barakat M, et al. Pharmacists' readiness to deal with the coronavirus pandemic: assessing awareness and perception of roles [e-pub ahead of print]. Res Social Adm Pharm. https://doi.org/10.1016/j. sapharm.2020.04.020. Accessed November 10, 2020.
- Department of Health Therapeutics Good Administration. Limits on dispensing and sales of prescription and over-the-counter medicines. Available at: https://www.tga.gov.au/media-release/limits-dispensing-and-salesprescription-and-over-counter-medicines. Accessed July 10, 2020.
- Al-Quteimat OM. Amer AM. SARS-CoV-2 outbreak: how can pharmacists help? [e-pub ahead of print]. Res Social Adm Pharm. https://doi.org/10.1 016/j.sapharm.2020.03.018. Accessed November 10, 2020.
- Aruru M, Truong HA, Clark S. Pharmacy Emergency Preparedness and Response (PEPR): a proposed framework for expanding pharmacy professionals' roles and contributions to emergency preparedness and response during the COVID-19 pandemic and beyond [e-pub ahead of print]. Res Social Adm Pharm. https://doi.org/10.1016/j.sapharm.2020.04. 002. Accessed November 10, 2020.
- Liu S, Luo P, Tang M, et al. Providing pharmacy services during the coronavirus pandemic. Int J Clin Pharm. 2020;42(2):299–304.
- Guarascio AJ, Faust AC, Sheperd L, O'Donnell LA. Ebola virus disease: roles and considerations for pharmacists. *Ann Pharmacother*. 2015;49(2):247–249.

- Watson KE, Singleton JA, Tippett V, Nissen LM. Defining pharmacists' roles in disasters: a delphi study. PLoS One. 2019;14(12), e0227132.
- 8. Traynor K. Pharmacists matter in pandemic response. *Am J Health Syst Pharm.* 2008;65(19):1792–1793.
- International Pharmacutical Federation. FIP COVID-19 information hub. Available at: https://www.fip.org/coronavirus. Accessed June 21, 2020.
- Li M, Razaki H, Mui V, Rao P, Brocavich S. The pivotal role of pharmacists during the 2019 coronavirus pandemic [e-pub ahead of print]. J Am Pharm Assoc (2003). https://doi.org/10.1016/j.japh.2020.05.017. Accessed November 10, 2020.
- Cadogan CA, Hughes CM. On the frontline against COVID-19: community pharmacists' contribution during a public health crisis [e-pub ahead of print]. Res Social Adm Pharm. https://doi.org/10.1016/j.sapharm.2020.03. 015. Accessed November 10, 2020.
- Bukhari N, Rasheed H, Nayyer B, Babar ZU. Pharmacists at the frontline beating the COVID-19 pandemic. J Pharm Policy Pract. 2020;13(8):1–4.
- Erku DA, Belachew SA, Abrha S, et al. When fear and misinformation go viral: pharmacists' role in deterring medication misinformation during the 'infodemic' surrounding COVID-19 [e-pub ahead of print]. Res Social Adm Pharm. https://doi.org/10.1016/j.sapharm.2020.04.032. Accessed November 10, 2020.
- Li H, Zheng S, Liu F, Liu W, Zhao R. Fighting against COVID-19: innovative strategies for clinical pharmacists [e-pub ahead of print]. Res Social Adm Pharm. https://doi.org/10.1016/j.sapharm.2020.04.003. Accessed November 10, 2020.
- Zheng SQ, Yang L, Zhou PX, Li HB, Liu F, Zhao RS. Recommendations and guidance for providing pharmaceutical care services during COVID-19 pandemic: a China perspective[e-pub ahead of print]. Res Social Adm Pharm. https://doi.org/10.1016/j.sapharm.2020.03.012. Accessed November 10, 2020.
- Merks P, Jakubowska M, Drelich E, et al. The legal extension of the role of pharmacists in light of the COVID-19 global pandemic. Res Social Adm Pharm. https://doi.org/10.1016/j.sapharm.2020.05.033. Accessed November 10. 2020.
- Moore AF, Kenworthy L. Disaster relief: a look into the pharmacist's role. N C Med J. 2017;78(3):195–197.
- Hogue MD, Hogue HB, Lander RD, Avent K, Fleenor M. The nontraditional role of pharmacists after Hurricane Katrina: process description and lessons learned. *Public Health Rep.* 2009;124(2):217–223.
- Shanafelt T, Ripp J, Trockel M. Understanding and addressing sources of anxiety among health care professionals during the COVID-19 pandemic. JAMA. 2020;323(21):2133–2134.
- Higuchi Y, Inagaki M, Koyama T, et al. A cross-sectional study of psychological distress, burnout, and the associated risk factors in hospital pharmacists in Japan. BMC Public Health. 2016;16(1):534.
- Jones GM, Roe NA, Louden L, Tubbs CR. Factors associated with burnout among US hospital clinical pharmacy practitioners: results of a nationwide pilot survey. Hosp Pharm. 2017;52(11):742–751.
- Neumann JL, Mau LW, Virani S, et al. Burnout, moral distress, work-life balance, and career satisfaction among hematopoietic cell transplantation professionals. *Biol Blood Marrow Transplant*. 2018;24(4):849–860.
- Johnson RE, Ried LD, Robertson N. Self-reported burnout among HMO pharmacists. J Pharm Mark Manage. 1987;2(2):107–127.
- Durham ME, Bush PW, Ball AM. Evidence of burnout in health-system pharmacists. Am J Health Syst Pharm. 2018;75(23 Suppl 4):S93—S100.
- Patel RS, Bachu R, Adikey A, Malik M, Shah M. Factors related to physician burnout and its consequences: a review. *Behav Sci (Basel)*. 2018;8(11):98.
- Balayssac D, Pereira B, Virot J, et al. Burnout, associated comorbidities and coping strategies in French community pharmacies-BOP study: a nationwide cross-sectional study. *PLoS One*. 2017;12(8), e0182956.
- Calgan Z, Aslan D, Yegenoglu S. Community pharmacists' burnout levels and related factors: an example from Turkey. *Int J Clin Pharm*. 2011;33(1):92–100.
- McCann L, Adair CG, Hughes CM. An exploration of work-related stress in Northern Ireland community pharmacy: a qualitative study. *Int J Pharm Pract*. 2009;17(5):261–267.
- Holden RJ, Patel NR, Scanlon MC, Shalaby TM, Arnold JM, Karsh BT. Effects of mental demands during dispensing on perceived medication safety and employee well-being: a study of workload in pediatric hospital pharmacies. *Res Social Adm Pharm.* 2010;6(4):293–306.
- **30.** Rothmann S, Malan M. Work-related well-being of South African hospital pharmacists. *SA J Ind Psychol*. 2011;37(1):1–11.
- 31. Sasangohar F, Jones SL, Masud FN, Vahidy FS, Kash BA. Provider burnout and fatigue during the COVID-19 pandemic: lessons learned from a high-volume intensive care unit. *Anesth Analg.* 2020;131(1):106–111.
- Lai J, Ma S, Wang Y, et al. Factors associated with mental health outcomes among health care workers exposed to coronavirus disease 2019. JAMA Netw Open. 2020;3(3), e203976.

- **33.** Adams JG, Walls RM. Supporting the health care workforce during the COVID-19 global epidemic. *JAMA*. 2020;323(15):1439–1440.
- **34.** Shah K, Kamrai D, Mekala H, Mann B, Desai K, Patel RS. Focus on mental health during the coronavirus (COVID-19) pandemic: applying learnings from the past outbreaks. *Cureus*. 2020;12(3), e7405.
- Shah K, Chaudhari G, Kamrai D, Lail A, Patel RS. How essential is to focus on physician's health and burnout in coronavirus (COVID-19) pandemic? *Cureus*. 2020;12(4), e7538.
- Maunder RG, Lancee WJ, Balderson KE, et al. Long-term psychological and occupational effects of providing hospital healthcare during SARS outbreak. Emerg Infect Dis. 2006;12(12):1924–1932.
- Maunder R, Hunter J, Vincent L, et al. The immediate psychological and occupational impact of the 2003 SARS outbreak in a teaching hospital. CMAJ. 2003;168(10):1245–1251.
- 38. Chan-Yeung M. Severe acute respiratory syndrome (SARS) and health-care workers. Int J Occup Environ Health. 2004;10(4):421–427.
- **39.** Lin CY, Peng YC, Wu YH, Chang J, Chan CH, Yang DY. The psychological effect of severe acute respiratory syndrome on emergency department staff. *Emerg Med J.* 2007;24(1):12–17.
- Chua SE, Cheung V, Cheung C, et al. Psychological effects of the SARS outbreak in Hong Kong on High-Risk Health Care Workers. Can J Psychiatry. 2004;49(6):391–393.
- Robertson E, Hershenfield K, Grace SL, Stewart DE. The psychosocial effects of being quarantined following exposure to SARS: a qualitative study of Toronto health care workers. Can J Psychiatry. 2004;49(6):403–407.
- Nickell LA, Crighton EJ, Tracy CS, et al. Psychosocial effects of SARS on hospital staff: survey of a large tertiary care institution. CMAJ. 2004;170(5):793–798.
- **43.** Phua DH, Tang HK, Tham KY. Coping responses of emergency physicians and nurses to the 2003 severe acute respiratory syndrome outbreak. *Acad Emerg Med.* 2005;12(4):322–328.
- **44.** Lee SM, Kang WS, Cho AR, Kim T, Park JK. Psychological impact of the 2015 MERS outbreak on hospital workers and quarantined hemodialysis patients. *Compr Psychiatry*. 2018;87:123–127.

- Henneman A, Thornby KA, Rosario N, Latif J. Evaluation of pharmacy resident perceived impact of natural disaster on stress during pharmacy residency training. Curr Pharm Teach Learn. 2020;12(2):147–155.
- Wu P, Fang Y, Guan Z, et al. The psychological impact of the SARS epidemic on hospital employees in China: exposure, risk perception, and altruistic acceptance of risk. Can J Psychiatry. 2009;54(5):302–311.
- **47.** Wu Y, Wang J, Luo C, et al. A comparison of burnout frequency among oncology physicians and nurses working on the frontline and usual wards during the COVID-19 epidemic in Wuhan, China. *J Pain Symptom Manage*. 2020;60(1):e60—e65.
- **48.** Austin Z, Martin JC, Gregory PA. Pharmacy practice in times of civil crisis: the experience of SARS and the blackout in Ontario, Canada. *Res Social Adm Pharm.* 2007;3(3):320–335.
- Austin Z, Gregory P. Resilience in the time of pandemic: the experience of community pharmacists during COVID-19 [e-pub ahead of print]. Res Social Adm Pharm. https://doi.org/10.1016/j.sapharm.202 0.05.027. Accessed November 10, 2020.
- Chisholm-Burns MA. Building resilience to combat stress, burnout, and suicidal ideation among pharmacists. Am J Health Syst Pharm. 2019;76(18):1364–1367.

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