


Unraveling the Worth of a Clinical Pharmacist

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Clinical pharmacy is defined as a specialization in pharmacy that practices rational medication use.¹ The primary role of a clinical pharmacist is to ensure the safe, appropriate, and cost-effective use of medications in various healthcare settings. The role of a clinical pharmacist has undergone a paradigm shift over the last two decades, from drug dispensing to a greater responsibility of safe and rational drug prescription in routine clinical practice.²

Clinical pharmacists are currently involved in clinical drug trials, are a part of a team that decides on hospital drug formulary, and form an integral member of the clinical team for monitoring prescriptions. Their pharmaceutical expertise helps to provide valuable inputs to clinicians in correct prescription, drug dosing, identification of drug interactions, and adverse effects.³

Polypharmacy (the concomitant use of five or more drugs at a time in a single patient) is a common occurrence in critically ill patients.⁴ Polypharmacy increases the incidence of drug interactions with increased risk of adverse drug effects and detrimental clinical outcomes. The incidence of drug interactions in critically ill patients can be as high as 58%.⁵

Clinical pharmacists' intervention in routine clinical practice is one of the recommended methods to reduce the incidence of drug interactions.

Chronic kidney disease patients in the intensive care unit frequently suffer from polypharmacy, due to their underlying comorbidities.^{6,7} The renal impairment further alters the pharmacokinetics of drugs, with the incidence of drug interactions that can be much higher.^{8,9}

Despite the clinical significance, there is a scarcity of literature on drug interactions in chronic kidney disease patients admitted to the intensive care unit and the role of clinical pharmacists in these situations. The study by Aghili et al. fills this scientific knowledge gap.¹⁰

The role of a clinical pharmacist in India is still in the developmental stage. Clinicians are often oblivious to the occurrence of drug interactions because of a lack of in-depth understanding of the pharmacokinetics and dynamics of drugs *in vivo*. There is still a barrier to the acceptance of clinical pharmacists by clinicians. Education and increasing awareness among clinicians with the availability of scientific evidence of improved patient outcomes and economic benefits with clinical pharmacist's interventions will help better collaboration between the teams.¹¹ Many tertiary care hospitals consider clinical pharmacists to be essential members of their multidisciplinary clinical team, especially in the intensive care unit. The National guidelines should be formulated to make it mandatory for all hospitals to integrate clinical pharmacists in routine healthcare as a standard of best practice.¹²

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