Is there a role for the pharmacist in screening for metabolic syndrome?


2020
IS THERE A ROLE FOR THE PHARMACIST IN SCREENING FOR METABOLIC SYNDROME?

Rana Moustafa1, Kirti. S. Prabh2, Derek Stewart1,2, Cristin Rayan3, Hani AbdelAziz1, Mohsen EL Edris2, Mohamed Izham3, Anh Jochebeth4, Shilpa Kutlikrishnam2, Ann O’Connor4, Monica Young4, Martin Steinhoff2, Shahab Uddin4, Antonella Tonna5

Affiliations: 1Hamad Medical Corporation, Doha, Qatar, 2Translational Research Institute, Academic Health System, Hamad Medical Corporation, Doha, Qatar, 3Qatar University, Doha, Qatar, 4Robert Gordon University, Aberdeen, UK, 5Trinity College Dublin, Ireland, 6Qatar Metabolic Institute, Hamad Medical Corporation, Doha, Qatar.

Background:
Evidence for a pharmacist role in the screening of MetS has been shown to be effective in at-risk populations (1). Despite, migrants being an at-risk group for the development of MetS, no literature has described screening of migrants by pharmacists.

Aim:
To identify the impact of the pharmacist role in screening migrants upon arrival in a Middle Eastern country and following 24 months of residency in the Middle East (ME).

Methods:
❖ This prospective longitudinal observational study is being conducted over two periods. The initial phase was the retrospective pharmacist facilitated screening process of the migrants to Qatar (the new HMC employees, within three months of arrival to Qatar) included screening for DM, HTN, central obesity and dyslipidemia (high triglycerides and low high density cholesterol). Migrants with normal metabolic parameters at baseline were included in the second phase which is the follow-up study 24 months post residing in Qatar, as illustrated in figure 1. Follow-up laboratory tests, BP and waist circumference measurement are being repeated two years post residing in Qatar. Moreover, a questionnaire to address the change in their lifestyle since migration is being applied (Figure 2).
❖ Participants were coded with a unique study identification number on data collection sheets and during data analysis
❖ Descriptive analysis was utilized for baseline characteristics. ANOVA test will be applied to ascertain the incidence of the new MetS-development after exposure to migration.

Disclosure: None of the authors of this study have to disclose any possible financial or personal relationships with commercial entities that may have a direct or indirect interest in the subject matter of this study. Correspondence to: sharammed@hamad.edu

Abstract number: 4CP5.103. ATC code: L02 - Endocrine therapy

References:

Figure 1: Flow diagram of participant recruitment during period one

Figure 2: Flow diagram of participant follow up during period two

Figure 3- The recruitment process

Figure 4 – The potential impact of the project

Conclusion
The study indicates that pharmacist screening is effective for early identification and potential early management of MetS in this migrant population.

The findings of this study will contribute to the evidence about the relation between migration to Qatar and MetS development. Findings will also inform HMC policies about the risk and incidence of MetS amongst migrants residing in Qatar.