

# Effect of Pharmacist Involvement on Patient Reporting of Adverse Drug Reactions: A Multiregional Italian Study

**First published:** 29/05/2014

**Last updated:** 13/03/2025

Study

Finalised

## Administrative details

### EU PAS number

EUPAS5289

### Study ID

6890

### DARWIN EU® study

No

### Study countries

Italy

### Study description

Background: Patients may increase spontaneous reporting system and contribute to the detection of signals. Community pharmacies could have an important role in this context as a service for promoting patient reporting of ADRs. A pilot study was conducted in 2010 in the Veneto Region of Italy to increase the patient reporting through the role of the pharmacist. This project had so good results we decided to extend it to a multi- regional level.

Objectives: to assess the potential impact of an intervention to promote patient reporting in community pharmacies and to compare the characteristics of patients and general practitioners reports of adverse drug reactions (ADRs).

Methods: Eight regional centres (Basilicata, Calabria, Campania, Friuli-Venezia Giulia, Lazio, Puglia Bari, Puglia Barletta, Veneto) have been involved in the study. Each pharmacist was asked to select, during the study period, about 240 customers who had received at least one drug and then to offer the spontaneous reporting form to those who had experienced a suspected ADRs. Patients were asked to complete the ADR report form and either give it back to the pharmacist or send it by fax or email or else to fill in the form online.

Preliminary results: in a 3-month period (from October 2013 to March 2014) the study involved 615 pharmacists working in 388 community pharmacies.

115,055 patients (58% female) were interviewed by the pharmacists and 12,185 (10,6%) referred a suspected ADR. The project has collected a total of about 4,000 citizen's ADR reporting form, corresponding to about 30% of all patients interviewed who had experienced suspected ADRs. After a quality control about 60% of these reports were entered into the Italian Pharmacovigilance Database. A comparison with the reports sent by the general practitioners in the same region and in the same period is in progress. Further results will be published as soon as available.

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### **Study status**

Finalised

## Research institutions and networks

## Institutions

Pharmacology Unit - Veneto Pharmacovigilance Centre (Pharmacol UNIVR), University Hospital Verona

Italy

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**Institution**

**Educational Institution**

**Hospital/Clinic/Other health care facility**

**ENCePP partner**

Department of Experimental Medicine, Section of Pharmacology “Leonardo Donatelli”, Center of Pharmacosurveillance and Pharmacoepidemiology, Faculty of Medicine and Surgery, Second University of Naples (CRF\_Campania)

Italy

**First published:** 28/06/2010

**Last updated:** 17/06/2011

**Institution**

**Outdated**

**Educational Institution**

**ENCePP partner**

# Pharmacology Unit - Veneto Pharmacovigilance Centre (Pharmacol UNIVR), University Hospital Verona

Italy

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**Institution**

**Educational Institution**

**Hospital/Clinic/Other health care facility**

**ENCePP partner**

PhV Regional Centre of Basilicata Region, PhV Regional Centre of Calabria Region, PhV Regional Centre of Friuli Venezia Giulia Region, PhV Regional Centre of Lazio Region, Centre of Bari, Puglia Region, Centre of Barletta, Puglia Region

## Contact details

### **Study institution contact**

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**Study contact**

[roberto.leone@univr.it](mailto:roberto.leone@univr.it)

## Primary lead investigator

Leone Roberto

**Primary lead investigator**

## Study timelines

### Date when funding contract was signed

Planned: 01/01/2012

Actual: 01/01/2012

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### Study start date

Planned: 01/10/2012

Actual: 01/10/2012

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### Data analysis start date

Planned: 01/09/2013

Actual: 01/09/2013

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### Date of final study report

Planned: 31/01/2014

Actual: 31/01/2014

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## Sources of funding

- Other

## More details on funding

Italian Medicines Agency

## Regulatory

**Was the study required by a regulatory body?**

No

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**Is the study required by a Risk Management Plan (RMP)?**

Not applicable

## Methodological aspects

### Study type

#### Study type list

**Study topic:**

Disease /health condition

Other

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**Study topic, other:**

Disease/Epidemiology study

**Study type:**

Not applicable

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**Scope of the study:**

Assessment of risk minimisation measure implementation or effectiveness

Other

**If 'other', further details on the scope of the study**

Promotion and Information of patient reporting

**Data collection methods:**

Primary data collection

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**Main study objective:**

To assess the potential impact of an intervention to promote patient reporting in community pharmacies and to compare the characteristics of patients and general practitioners reports of adverse drug reactions (ADRs).

## Population studied

**Short description of the study population**

Patients who had received at least one drug

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**Age groups**

- Adults (18 to < 46 years)
- Adults (46 to < 65 years)
- Adults (65 to < 75 years)
- Adults (75 to < 85 years)
- Adults (85 years and over)

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**Estimated number of subjects**

115000

## Study design details

**Outcomes**

improve patient reporting

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## **Data analysis plan**

ADR reports with all mandatory fields were and will be entered into the Italian Pharmacovigilance Database. Drugs were and will be coded using national terminology and following the ATC classification. Drugs reactions were classified using MedDRA. The characteristics of ADR reports sent by patients were and will be compared with those sent by GPs in the Veneto Region. The Chi- square test was used to compare patient and GPS reports. All calculation were made using Epi Info, a standard statistical software program developed by the Centers for Disease Control and Prevention, Atlanta, US.

## Documents

### **Study, other information**

[leone\\_drugsafety.pdf](#) (85.28 KB)

## Data management

### ENCePP Seal

The use of the ENCePP Seal has been discontinued since February 2025. The ENCePP Seal fields are retained in the display mode for transparency but are no longer maintained.

## Data sources

### **Data sources (types)**

[Spontaneous reports of suspected adverse drug reactions](#)

## Use of a Common Data Model (CDM)

## **CDM mapping**

No

# Data quality specifications

## **Check conformance**

Unknown

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## **Check completeness**

Unknown

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## **Check stability**

Unknown

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## **Check logical consistency**

Unknown

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# Data characterisation

## **Data characterisation conducted**

No