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Title:

**Community pharmacists' perspectives on non-prescription supply of laxatives when abuse is suspected:
A qualitative study
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Abstract: (Please refer to instructions to authors and example abstract)

Focal Points:

- This study aimed to explore community pharmacists' perspectives on managing the non-prescription supply of laxatives when abuse is suspected
- Two distinct customer caricatures associated with laxative abuse emerged from the findings and specific barriers to intervention were identified. These related to the ease and wide availability of laxatives and large pack sizes
- Legal status reclassification or pack size restriction of laxatives should be considered

Introduction:

Stimulant laxatives have been identified as a class of non-prescription medicines liable to abuse.¹ Previous research has found that community pharmacy staff seemed concerned about non-prescription medicine abuse, including abuse of laxatives, but reported uncertainty about how best to manage it.¹ Studies do not seem to have explored whether there are perceived differences in how laxative abuse may be identified compared to other non-prescription medicines or views on how suspected laxative abuse may be better identified and managed in pharmacies. This study aimed to explore community pharmacists' perspectives on these issues.

Methods:

A qualitative approach was adopted on the basis of being well-suited to exploring participants' perspectives.² Following institutional ethical approval, in-depth digitally-recorded telephone interviews were conducted with 15 community pharmacists from pharmacies within Staffordshire. Participants were recruited by sending an invitation letter to pharmacies, followed by telephone contact. The interview guide was developed from the existing literature and from the objectives of the study. Key topics included experiences of laxative abuse, policies, and perspectives on control of laxative sales. Interviews were transcribed verbatim and analysed using framework analysis.²

Results:

Participants included male and female pharmacists from various ethnic backgrounds and from pharmacies of different types (e.g. independents and branches of large chains) and locations to represent a broad range of views. All participants, bar one, reported having experience of suspecting a customer of abusing laxatives. Participants usually reported characteristics of suspected abusers in clusters, from which two distinct customer caricatures emerged: the young, underweight, typically female customer, making regular laxative purchases for likely intentional abuse and the older, typically elderly customer making regular purchases apparently unaware of laxative overuse. Participants reported that younger customers tended to react more defensively than elderly customers when questioned about their intended purchase. Some participants attributed such defensive responses to the General Sale List (GSL) status of laxatives, e.g. *"People seem to understand that I'm picking it from behind the counter, it's my right to ask the questions...when they're picking stuff from the shelf it's when they become very, very defensive"*. Participants also reported that the GSL status of laxatives hindered effective management of suspected abuse by laxatives being widely available from non-pharmacy outlets where there is typically no restriction of sales or provision of medicines-related advice. Differences noted by participants about laxatives compared to other abusable non-prescription medicines included customers tending not to become aggressive when sales were challenged (compared to medicines such as co-codamol) and larger pack sizes of laxatives making abuse more difficult to identify. When asked about control of prescription sales of laxatives, most participants said that they thought more control should be introduced, with reclassification to a Pharmacy Only medicine or restriction of large packs to Pharmacy Only status being commonly reported approaches.

Discussion:

Two distinct customer caricatures associated with laxative abuse emerged from the findings and barriers to intervention were identified that may not be found with other abusable non-prescription medicines. Including this in pharmacy staff training may help staff better identify potential laxative abuse. Whilst limited to one county but with saturated data, the findings suggest that policy-makers should consider legal reclassification or pack size restriction of laxatives.

References:

1. Cooper R. Surveillance and Uncertainty: Community Pharmacy Responses To Over The Counter Medicine Abuse. *Health & Social Care in the Community* 2012; 21: 254-262.
2. Pope C, Ziebland S, Mays N. Qualitative research in healthcare: Analysing qualitative data. *British Medical Journal* 2000; 320: 114-116.