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The Adoption Of The Pharmacoconomic Center As A Resource By Air Force Medical Treatment Facilities



Synopsis

This is a AIR FORCE INST OF TECH WRIGHT-PATTERSON AFB OH report procured by the Pentagon and made available for public release. It has been reproduced in the best form available to the Pentagon. It is not spiral-bound, but rather assembled with Velobinding in a soft, white linen cover. The Storming Media report number is A068623. The abstract provided by the Pentagon follows: The Department of Defense (DOD) took action to address the problem of increasing pharmaceutical expenditures by developing a TriService Pharmacoeconomic Center (PEC) in January 1993. The charge to the PEC was to develop a TriService Formulary (TSF) system to promote a consistent pharmacy benefit, educate prescribers, develop treatment guidelines, and outcome indicators. The purpose of this study was to look at adoption of the PEC as an innovative resource for use at the treatment facility level. The overall hypothesis is that Air Force facilities have, on average, adopted the PEC as an information resource and use its recommendations in their local formulary systems. Data were collected by a survey of pharmacy directors and from prescription databases at Air Force facilities to explore this hypothesis. Pravastatin, the PEC selected HMGCoA drug of choice, is used as a surrogate to study the action taken by local facilities on a specific PEC recommendation. We received 49 (80.3%) surveys that were usable for analysis. Responses show that PEC materials are well accepted and are being used in Air Force facilities. A significant shift to pravastatin occurred during the study period. As a quasi- experimental design, a causal link is not proposed. However, the results support describing the PEC as an innovative resource that has been adopted into local formulary systems of Air Force medical treatment facilities.

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