

Real-World Outcomes from a Pharmacy-Based Awareness and Screening Campaign for HF and CKD: Insights from the Chronic Diseases from A to Z Program

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Background

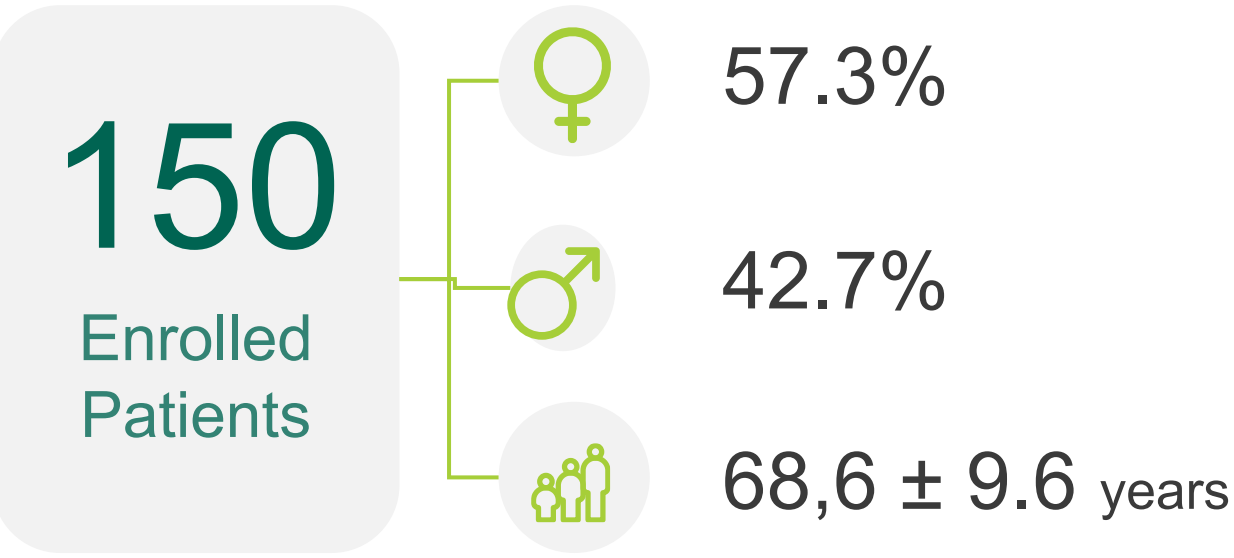
Chronic kidney disease (CKD) and heart failure (HF) are prevalent, often coexisting conditions that impose a growing public health burden. In Portugal, CKD affects about **21%** of adults, and HF prevalence reaches **17%** in those aged ≥ 50 , with **90%** of cases **undiagnosed**. **Community pharmacies** provide accessible settings for **early identification and patient education**. This study evaluated real-world outcomes from a pharmacy-based awareness and screening campaign for CKD and HF in Portugal.

Purpose

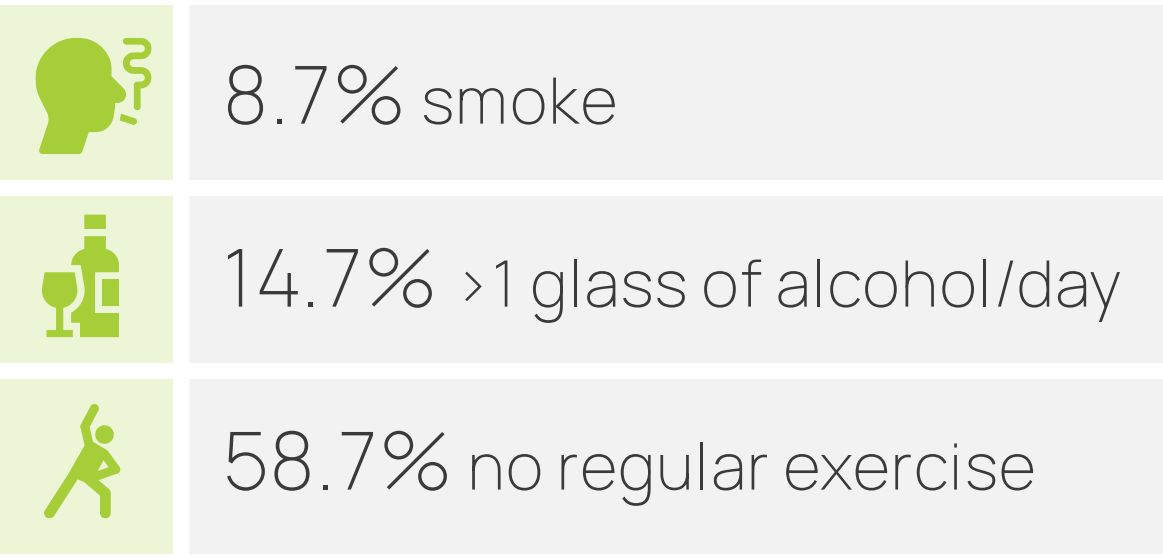
To describe demographic, clinical and behavioural characteristics of **individuals at risk for HF and/or CKD** who participated in a pharmacy-led awareness and screening campaign, and to **identify key gaps** in disease monitoring and management.

Results

Participant Profile



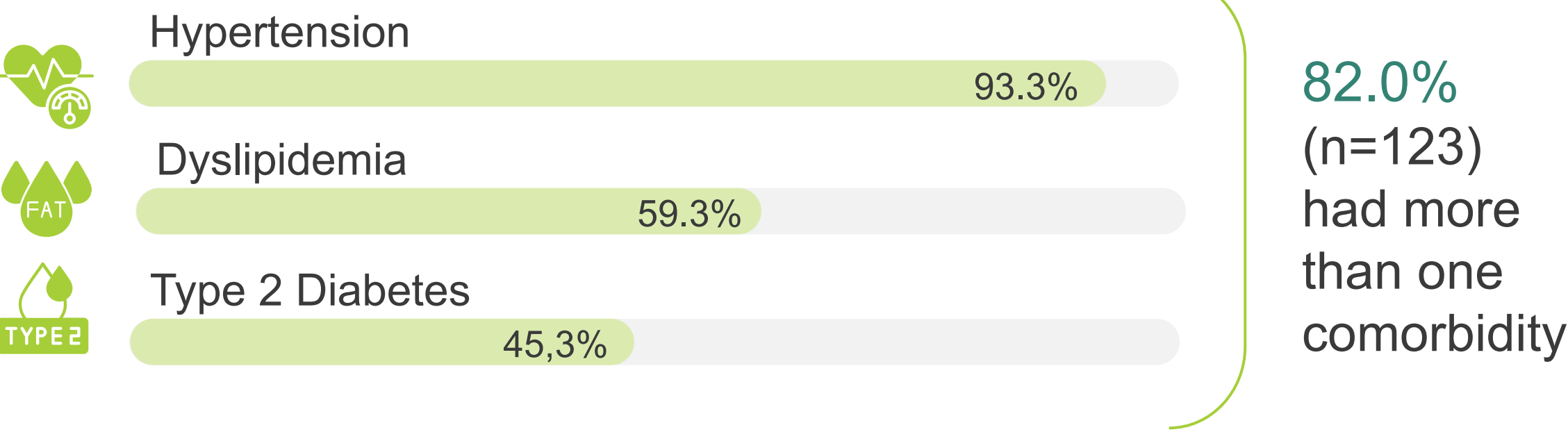
Lifestyle and habits



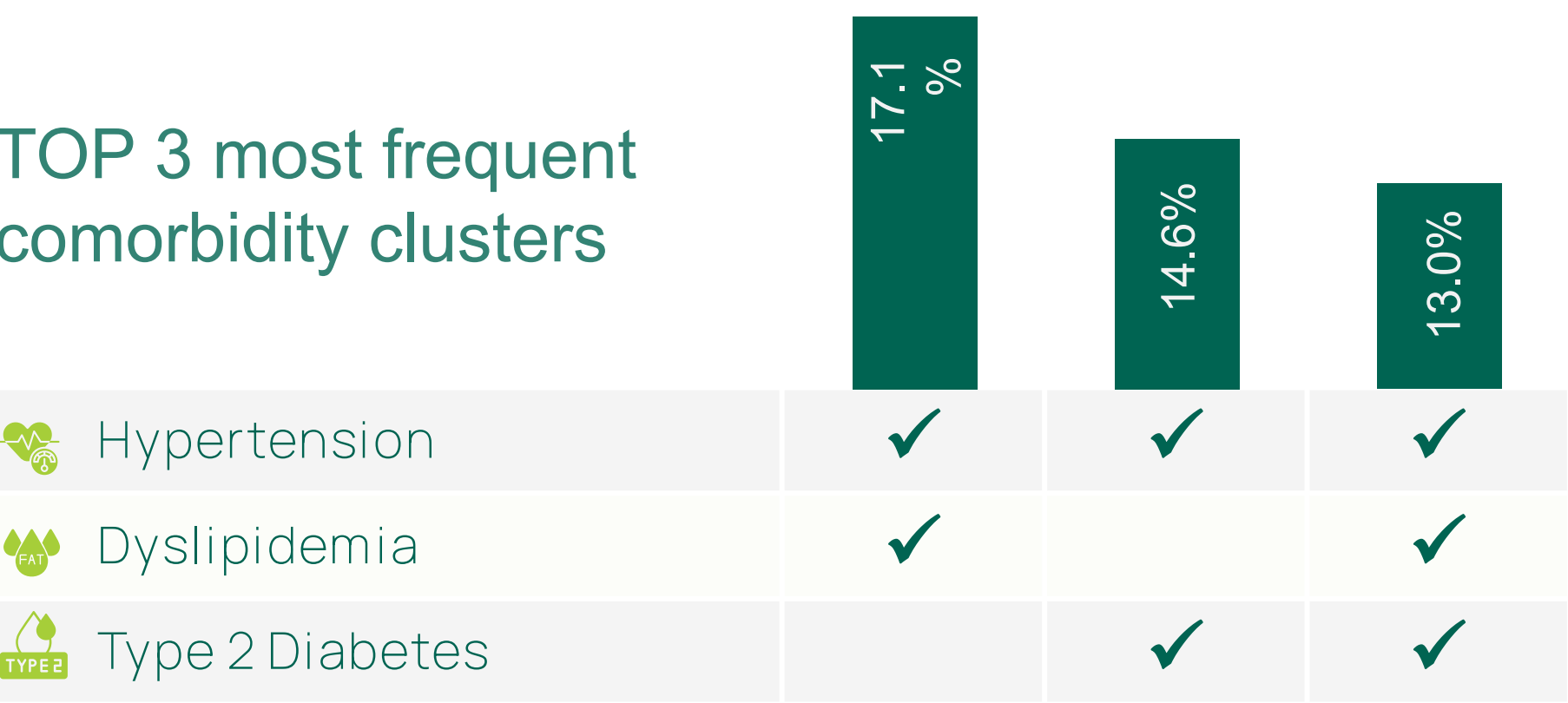
Clinical parameters and other data

	77.3% of participants had BMI ≥ 25.0 kg/m ² - 33.3% were obese
	Overall, 80.6% of participants had blood pressure $\geq 130/80$ mmHg, including 21.3% with values $\geq 140/90$ mmHg
	18.7% regular use* of NSAIDS (*use more than twice per week over the last three month)
	28.7% reported a family history of HF, CKD or both
	35% had undergone recent kidney-function assessment

Comorbidities prevalence

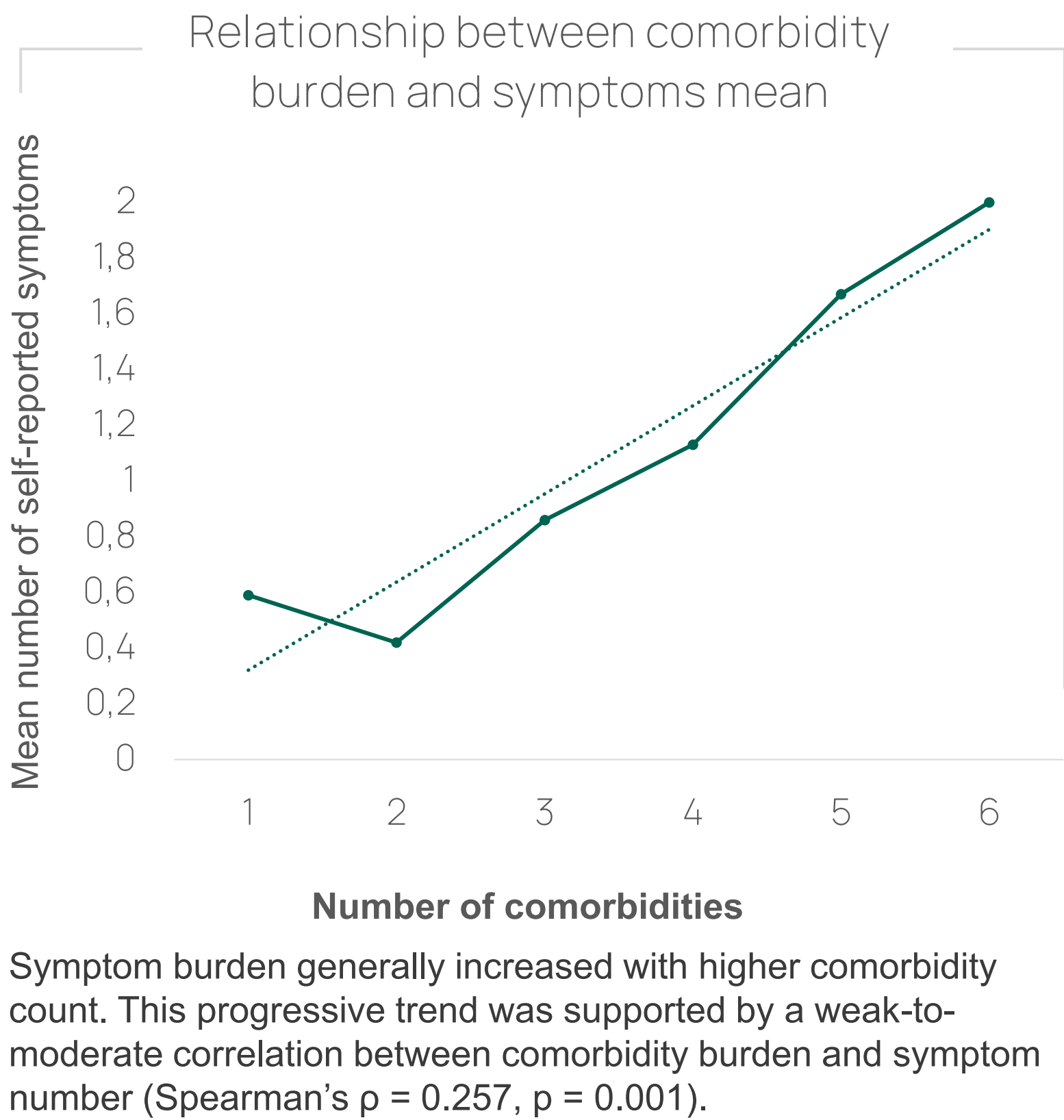
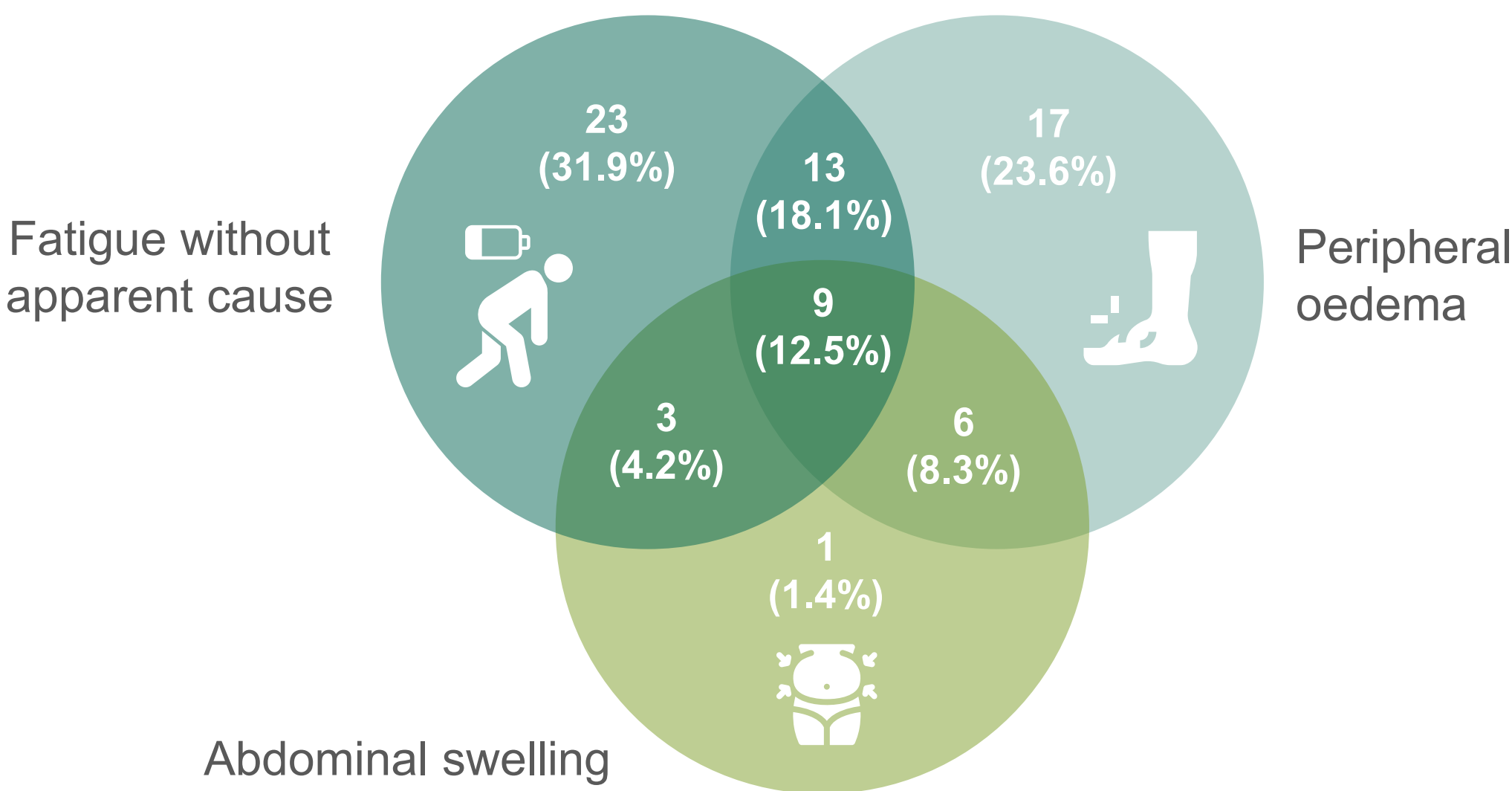


TOP 3 most frequent comorbidity clusters



Self-reported symptoms

48.0% (n=72) reported at least one symptom potentially related to HF or CKD.



Conclusions

Our results indicate that Pharmacy-based screening is an effective approach to identify individuals with high cardiorenal-and metabolic risk, particularly due to the poor control of risk factors such as hypertension and obesity. The findings underscore the critical role that pharmacists can play in bridging gaps in chronic disease monitoring and risk factors management. This real-world initiative reinforces the value of integrating community pharmacists in chronic disease prevention strategies and in screening campaigns, particularly amongst the elderly and individuals with suboptimal disease control, who may benefit from closer follow-up and earlier intervention.

Methods



A **cross-sectional study** was conducted in 26 community pharmacies across Portugal as part of the “Chronic Diseases from A to Z” program. Adults aged ≥ 40 years with hypertension (HTN) and/or type 2 diabetes (T2D) but no known HF and/or CKD diagnosis were eligible. **Structured interviews** and **electronic data collection** were performed to record demographics, comorbidities, lifestyle behaviours, family history, symptoms, and blood pressure control. Bivariate analyses explored associations between comorbidity burden and symptom presentation. Sample representativeness and non-participant comparisons were assessed.

References

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- Vinhas J, Aires I, Batista C, et al. RENA Study: Cross-Sectional Study to Evaluate CKD Prevalence in Portugal. Nephron 2020; 144: 479-487. 2020/08/19. DOI: 10.1159/000508678.
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Acknowledgments

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