

# 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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DIREÇÃO DE SOLUÇÕES E EVIDÊNCIA EM SAÚDE

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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  $\geq 50$ , 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

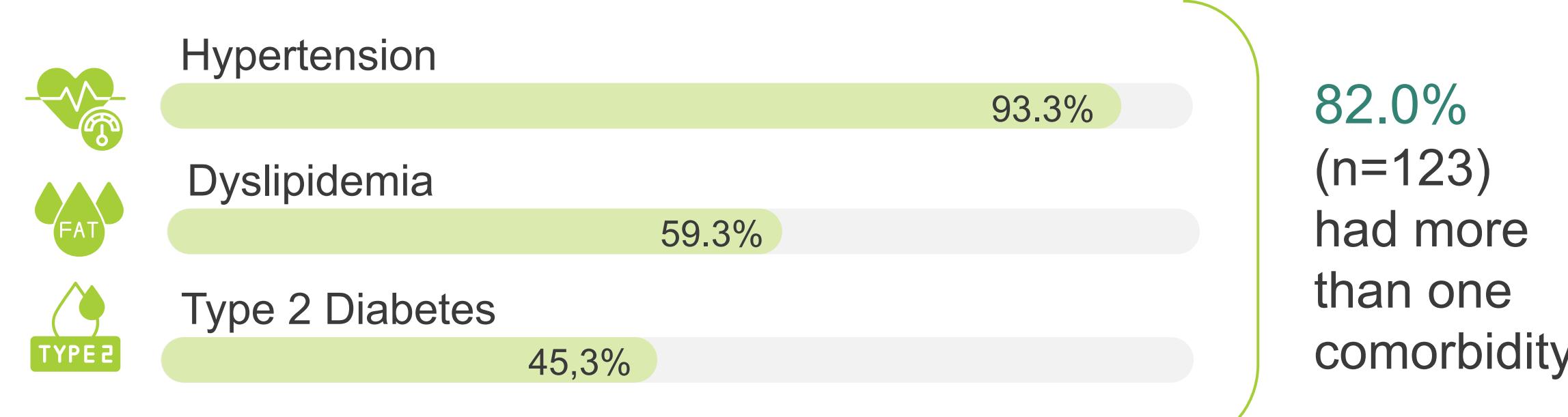
To describe demographic, clinical and behavioural characteristics of individuals at risk for HF and/or CKD who participated in a pharmacy-led awareness and screening campaign, and to identify key gaps in disease monitoring and management.

## Results

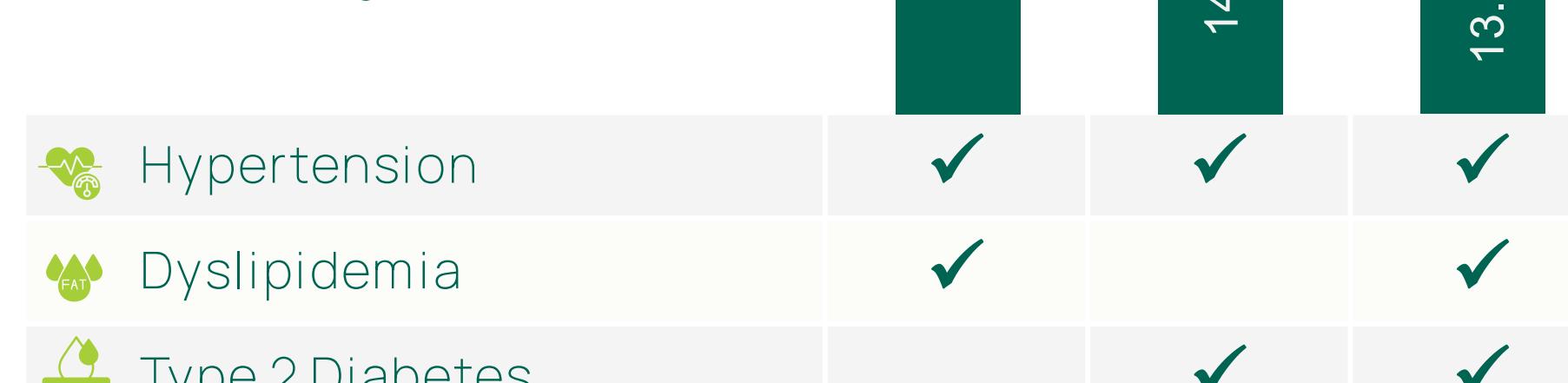
### Participant Profile



### Comorbidities prevalence



### TOP 3 most frequent comorbidity clusters

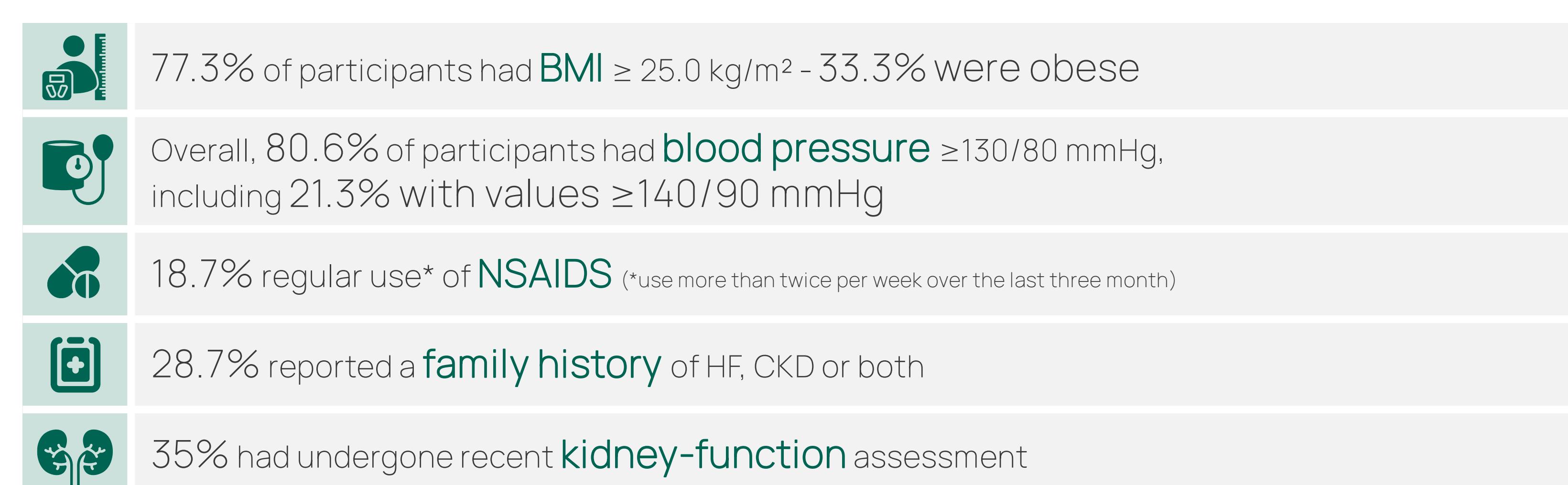


## Methods



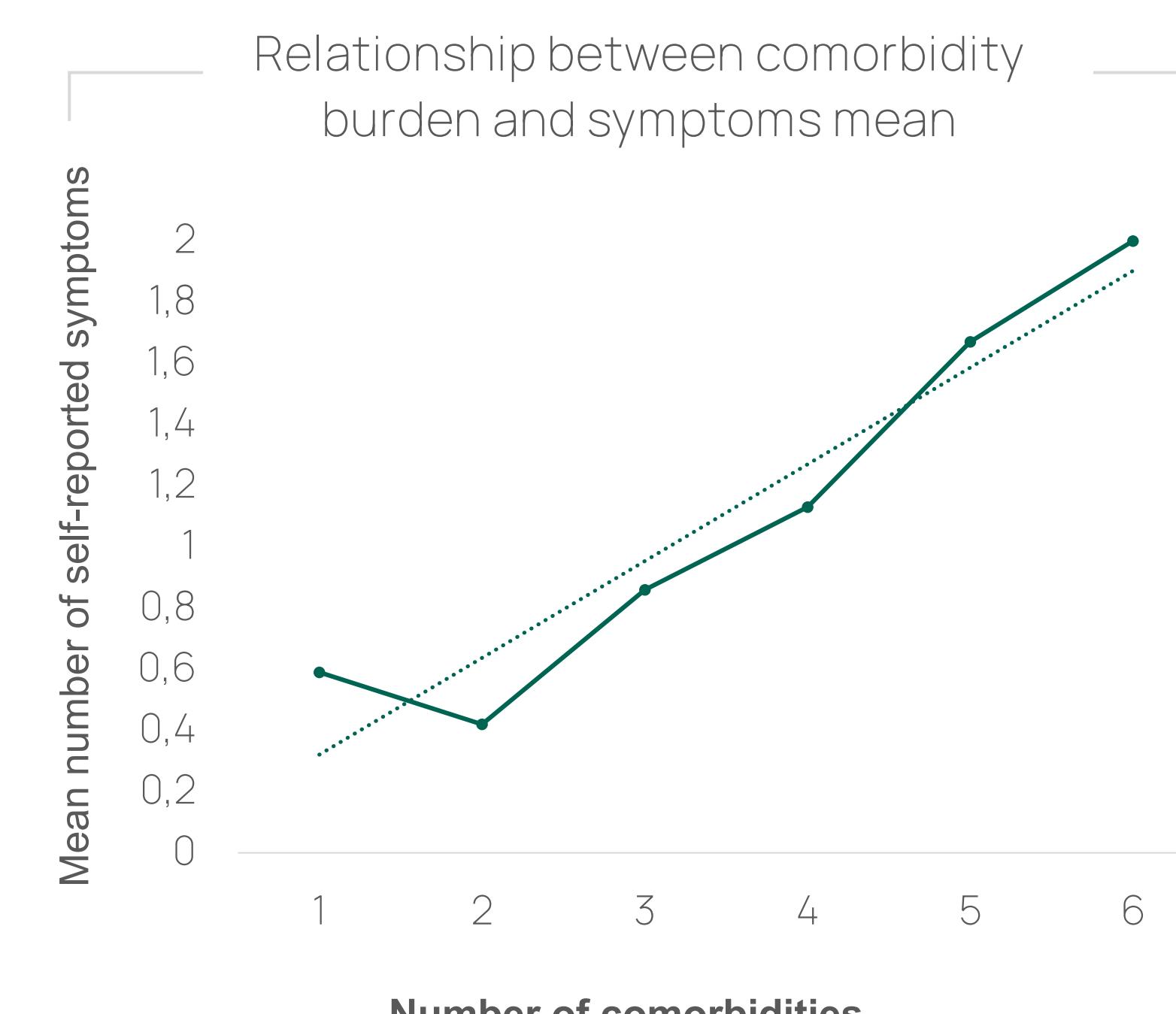
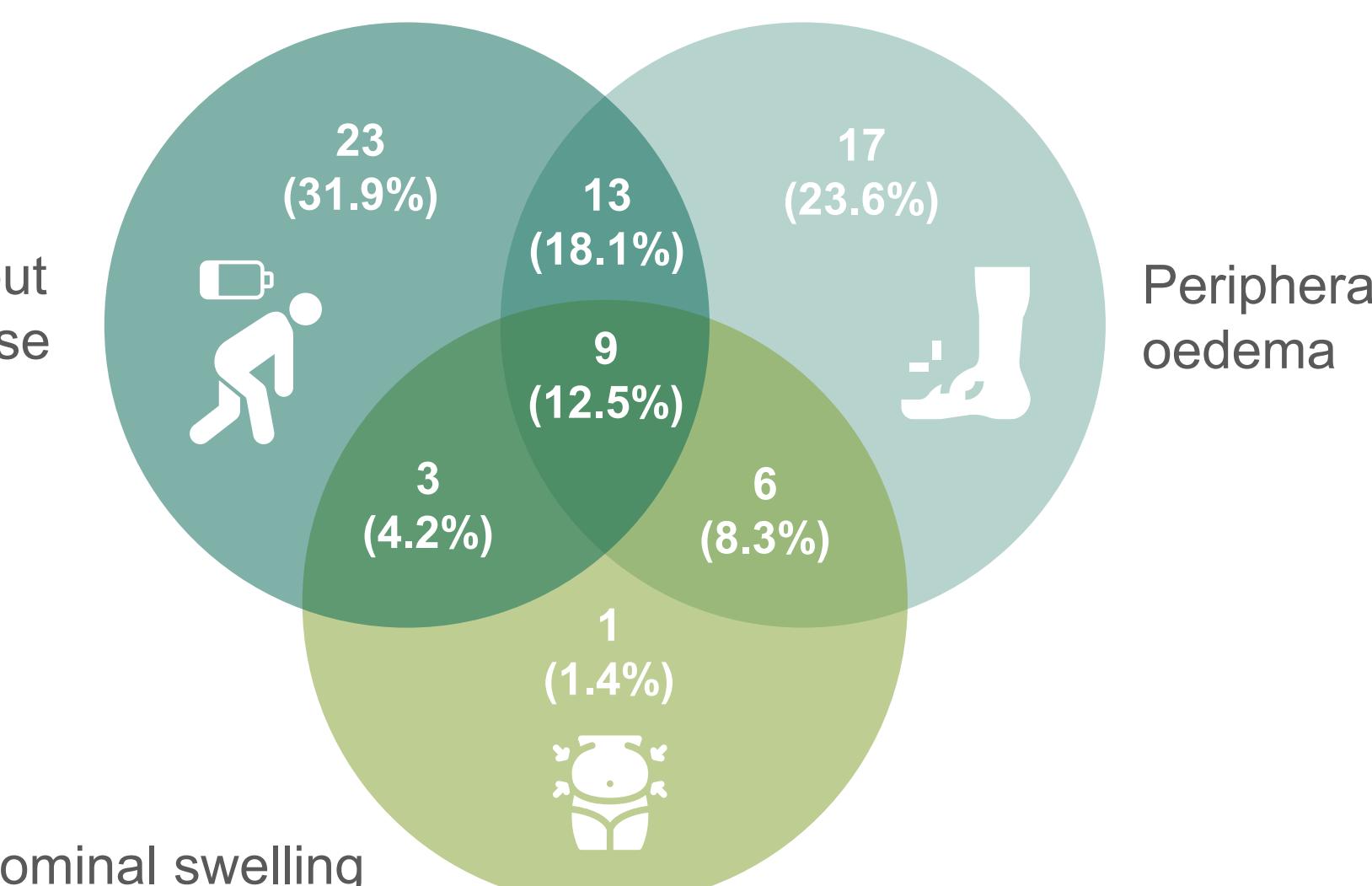
A cross-sectional study was conducted in 26 community pharmacies across Portugal as part of the "Chronic Diseases from A to Z" program. Adults aged  $\geq 40$  years with hypertension (HTN) and/or type 2 diabetes (T2D) but no known HF and/or CKD diagnosis were eligible. Structured interviews and electronic 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.

### Clinical parameters and other data



### Self-reported symptoms

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



Symptom burden generally increased with higher comorbidity count. This progressive trend was supported by a weak-to-moderate correlation between comorbidity burden and symptom number (Spearman's  $\rho = 0.257$ ,  $p = 0.001$ ).

## 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.

## References

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2. 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.
3. Insuficiência cardíaca afeta mais de 700 mil pessoas em Portugal. 2023

## Acknowledgments

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