Practitioners’ use and perceptions of personality disorder knowledge in practice and teaching

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Abstract
Personality disorders (PDs) are pervasive and affect patients with psychiatric illnesses. While difficult to treat with pharmacotherapy, compared to Axis I disorders (e.g. depression, schizophrenia), Axis II disorders may impact the manner in which patients are clinically approached. It may behoove faculty teaching psychopharmacotherapy to integrate PDs into their teaching. Prior work by Cates et al. showed personality disorders are not commonly discussed in pharmacy curricula. As a clinician with experience in psychiatric pharmacy, I felt knowledge of PDs was crucial to my practice and enriched my interactions with patients and professionals. As a professor of psychopharmacotherapy, I integrated PDs into every lecture using active learning methods (e.g. case-based vignettes, student reflection papers). I feel our students benefitted from this integration. This study will present specialists’ perceptions regarding the use of PD knowledge in practice and/or teaching. Results will help determine if PDs should be a greater part of didactic, pre-APPE Doctor of Pharmacy education.

Disciplines
Pharmacy and Pharmaceutical Sciences

Comments
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Practitioners’ use and perceptions of personality disorder knowledge in practice and teaching

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Introduction

Personality disorders (PDs) are pervasive and affect patients with psychiatric illnesses. While difficult to treat with pharmacotherapy, compared to Axis I disorders (e.g. depression, schizophrenia), Axis II disorders may impact the manner in which patients are clinically approached. It may behoove faculty teaching psychopharmacotherapy to integrate PDs into their teaching. Prior work by Cates et al. showed personality disorders are not commonly discussed in pharmacy curricula. As a clinician with experience in psychiatric pharmacy, I felt knowledge of PDs was crucial to my practice and enriched my interactions with patients and professionals. As a professor of psychopharmacotherapy, I integrated PDs into every lecture using active learning methods (e.g. case-based vignettes, student reflection papers). I feel our students benefitted from this integration. This study will present specialists’ perceptions regarding the use of PD knowledge in practice and/or teaching. Results will help determine if PDs should be a greater part of didactic, pre-APPE Doctor of Pharmacy education.

Methods

College of Psychiatric and Neurological Pharmacy specialists (n = 374) were approached with an online request communicated via email to participate in a voluntary 10-item survey asking for the following:

<table>
<thead>
<tr>
<th>Question</th>
<th>Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Describing Practice Area: Please provide information on all areas of practice with which you are involved.</td>
</tr>
<tr>
<td>2</td>
<td>Degrees and Certifications: Please provide information on your current degrees and certifications.</td>
</tr>
<tr>
<td>3</td>
<td>Training: Please provide information on your post-Pharmacy graduate training in psychiatry/clinical pharmacy.</td>
</tr>
<tr>
<td>4</td>
<td>Practice Timeline: Please provide information on your post-training years in practice. Which description BEST describes your time spent as a practitioner?</td>
</tr>
<tr>
<td>5</td>
<td>Which of the following describe your perceptions of personality (or cluster) disorders?</td>
</tr>
<tr>
<td>6</td>
<td>Practice Duties: Please provide information on activities carried out in your day-to-day operations as a practitioner.</td>
</tr>
<tr>
<td>7</td>
<td>Personality Disorder Inventory: Please check all of the personality disorders with which you are familiar.</td>
</tr>
<tr>
<td>8</td>
<td>As a practitioner or professor, do you think students should be taught about the concepts related to personality disorders during their didactic Pharm.D. curriculum?</td>
</tr>
<tr>
<td>9</td>
<td>Physical Area: Describe the SINGLE MOST COMMON personality disorder you encounter in your practice on a regular basis.</td>
</tr>
<tr>
<td>10</td>
<td>Geographic Location: Where is your practice or teaching institution generally located?</td>
</tr>
</tbody>
</table>

PollDaddy.com, a third party online service, was used to execute the survey and the project was approved by our institutional review board.

The following objectives were targeted:

1. Describe specialty pharmacists’ practice settings, general location, experience and training, and, years of service to the profession
2. Inventory practitioners’ and educators’ familiarity with, and exposure to, personality disorders
3. Identify practitioners’ and educators’ perceptions regarding the importance of personality disorders in teaching and practice

Descriptive statistics are used to communicate the resulting trends and outcomes.

Results

• Respondents (n = 92) out of 374 answered all survey items.
• Approximately 82% of respondents agreed that PDs should be taught to pharmacy students in pre-clinical and didactic Pharm.D. education before students enter APPE.
• About 77%, 88% and 58% of all respondents reported knowledge of PDs increased their effectiveness as clinicians, proved generally useful in their practice areas, and piqued their interest in psychopharmacotherapy, respectively. The most common PD encountered was borderline.

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<tr>
<td>2</td>
<td>Describing the Roles of the Psychiatric Pharmacy Specialist</td>
</tr>
<tr>
<td>3</td>
<td>The Personality Disorder Inventory</td>
</tr>
</tbody>
</table>

Discussion

• A majority of respondents agreed that PDs should be taught in didactic and pre-clinical Pharm.D. curricula.
• Clinical preceptors not appointed to roles in academia (80.5%) were more likely than clinical preceptors affiliated with the academy (64.9%) or full-time faculty members (65.8%) to agree these disorders should be taught prior to APPE. Differences may be due to faculty members’ recognition of real and perceived barriers in the implementation of changes to Pharm.D. curricula.
• The majority of pharmacists in every role ranging from dispensing at outpatient settings (83.3%) to actively working in inter-professional teams in the acute psychiatric clinics (78.8%) reported that PDs should be part of didactic Pharm.D. curricula. Pharmacists monitoring patient outcomes (80.6%), guiding formulary options (85.2%), interviewing patients (82.2%), documenting care (85%), prescribing medications (87.1%), and working with others in quality improvement endeavors for their institutions (92.1%) were in agreement.
• The widespread support of integrating PDs correlates with reported greater effectiveness when approaching patients (77.2%). Perhaps greater levels of interactions with patients and diverse providers creates a better appreciation of PD concepts, knowledge and applications.

Conclusions

• It may behoove faculty teaching psychopharmacy to integrate content highlighting the most commonly encountered PDs.
• Borderline disorders, or more broadly, Cluster B disorders may help students effectively interact with those suffering from mental illness.
• Further work may in this area may ask practitioners and educators to explain specifically why PDs should or should not be added to didactic curricula.
• Regarding applicability, greater exposure to PDs may add to pharmacists’ effective interviewing and approaches to adherence in difficult populations.

Acknowledgements and Disclosures

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