**Medicines Use Review (MUR)**

**National target groups for MURS**

* Patients taking high risk medicines (NSAIDs, anticoagulants, antiplatelets and diuretics)
* Patients recently discharged from hospital that had changes made to their medicines while they were in hospital.
* Patients with respiratory disease; and
* Patients at risk of or diagnosed with cardiovascular disease and regularly being prescribed at least four medicines.

Medicines are frequently and widely used in the NHS and account for 12% of NHS expenditure (Department of Health). There are over 15 million people in the UK with at least one long term medical condition such as diabetes, asthma and coronary heart disease managed through medicines. It is estimated that as much as half of all medicines are not taken as prescribed by the GP according to the National Pharmacy Association.

A Medicines Use Review (MUR) is an NHS advanced service offered free to patients by community pharmacists since April 2005. It delivers multiple benefits for patients, the NHS budget as well as supporting public health. It involves an in depth discussion with the pharmacist in a private consultation room to discuss all the patients medication – prescribed and self prescribed i.e. bought over the counter and gives the opportunity for the pharmacist to pass on further healthy living advice or signpost the patient to other relevant services.

**Benefits of MURs for GPs, commissioners and the primary care team**

* MURs can support and improve patient medication compliance and identify medication side effects and drug interactions.
* Reduction in GP appointments and secondary care admissions as a direct result of poor compliance of prescribed medication.
* MURs can flag up the need for a full clinical review.
* MURs can support cost effective prescribing and help GPs to meet QOF targets.
* MURs can lead to a reduction in prescribed medicine wastage by identifying unnecessary reordering and dispensing of medicines.
* Empower patients with the full knowledge of the drugs they are taking and the associated monitoring if any.

**What is the difference?**

|  |  |
| --- | --- |
| **Medication use review** | **Clinical medication review** |
| Improve patients’ understanding of their medicines | Full medical history of patient is needed. A discussion of the medical condition beyond drug treatment. |
| Improve patient adherence to medication | An agreement about changes to medication. |
| Highlight side effects of medication and identify technical solutions. | Mostly clinical |

**Outcome of Successful MUR**

**“**An MUR was carried out on an 82yr old male. At the same time as the MUR I had checked the patient’s blood pressure, which was found to be high at 180/95 mm Hg. The patient complained of generally not feeling well, and mentioned a history of strokes. I informed the GP and an urgent appointment for the patient was arranged. The patient soon returned to the pharmacy with a prescription for increased blood pressure medication. The patient was identified as an eligible candidate for the New Medicine Service and suitably followed up, and the patient has made a significant improvement. This is a good example of how high quality MURs can positively influence therapeutic outcomes for patients with long term conditions.” Garry, The Heath Pharmacy, Bushey Heath.

****