Mixed-method case studies were conducted in 9 sites, Germany, Greece, Italy, Poland, Portugal, (Spain) Catalonia, Sweden and (United Kingdom) Scotland and Northern Ireland, mapping the structures, processes, and outcomes of policies and practices at the institutional, regional, and local level.

Phase I
Desk Review
Evaluating economic, political, and cultural context; Checklist of complex interventions.

Phase II
Key Informant Interviews
Assessing development and implementation strategies. Participants included: Primary care and hospital pharmacists, hospital geriatricians, primary care and hospital managers, health system administrators.

Phase III
Focus Groups
Validating interim report findings with focus group of primary care pharmacists, hospital and primary care geriatricians, hospital manager and health system administrator.

To learn more about Project SIMPATHY and polypharmacy and adherence in the elderly across Europe contact:

Alpana Mair,
Deputy Chief Pharmaceutical Officer for Scotland
alpana.mair@scotland.gsi.gov.uk

Prof. João Malva
Faculty of Medicine, University of Coimbra
jomalva@fmed.uc.pt

Prof. Fernando Llimos-Fernandez
Faculty of Pharmacy, University of Lisbon
f-llimos@ffulisboa.pt

To learn more about Project SIMPATHY in Portugal, please contact:

Other case studies GERMANY · GREECE · ITALY · POLAND · (SPAIN) CATALONIA · SWEDEN · (UNITED KINGDOM) NORTHERN IRELAND · (UNITED KINGDOM) SCOTLAND


Partners:

This leaflet is part of the SIMPATHY project (663082), which has received funding from the European Union’s Health Programme (2014-2020).
Lack of polypharmacy management programs in Portugal

- Care center’s autonomy
- Lack of standards
- Skimpy concept from Data Protection Agency
- Lack of evidence at National level
- Limited specific research funding
- Freedom to prescribe
- Small interest from the academia
- Lack of multidisciplinary culture
- Poor history of pharmacists’ services
- Difficulty to access patient records
- Inappropriate IT solutions
- Lack of common software
- No sufficient staff
- Interest in direct-cost cuts
- Short-term cost containment policies

**By positions**
- 3 Academics
- 3 Regional Healthcare Administrations
- 3 Physicians
- 3 Practising Nurse

**By professions**
- 7 Pharmacist
- 3 Nurse

**Participants**
- 2 Moderators
- 2 Interviewers
- 3 Hospital Pharmacist
- 3 Community Pharmacist
- 3 Internal Medicine Physician

*More than one position per participant*