

# Exploring pharmacist comfort and readiness to dispense mifepristone

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## BACKGROUND

- Mifepristone under Risk Evaluation and Mitigation Strategy (REMS) restrictions, including an in-person dispensing requirement, since approved by FDA in 2000
- December 2021, FDA modified rules, allowing for certified pharmacies to dispense the drug directly to patients; requirements for certification not finalized

## AIMS

- Explore readiness of pharmacists to dispense mifepristone should the REMS regulations allow pharmacy dispensing

## METHODS

- Design: Key informant interviews with pharmacists or pharmacy staff (June-Dec 2021)
- Eligibility: English-speaking, recent work in pharmacy setting in the U.S
- Analysis: Transcripts coded in Dedoose, code summaries synthesized themes

## LIMITATIONS

- Selection bias
- Uneven geographic representation

## CONCLUSIONS

- FDA's pharmacy certification process should be simple and straightforward as pharmacists are comfortable and willing to dispense mifepristone with some basic training
- Pharmacies should establish prescription transfer policies if pharmacist on staff refuses to dispense

## REFERENCES

1. Approved Risk Evaluation and Mitigation Strategies (REMS). Accessed May 18, 2021. <https://www.accessdata.fda.gov/scripts/cder/remis/index.cfm?event=RemisDetails.page&REMS=390>
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3. Center for Drug Evaluation and Research. "Questions and Answers on Mifeprex." U.S. Food and Drug Administration, FDA, 16 Dec. 2021. <https://www.fda.gov/drugs/postmarket-drug-safety-information-patients-and-providers/questions-and-answers-mifeprex>.

Table 1. Demographic characteristics (N, %) of interview participants.

Characteristic	N (%)
Total	21
<b>Age</b>	
≤ 35	15 (71)
≥ 36	5 (24)
Prefer Not To Answer	1 (5)
<b>Sex/Gender*</b>	
Male	4 (19)
Female	17 (81)
<b>Race/Ethnicity</b>	
White	9 (43)
Black/African American	4 (19)
Asian	3 (14)
Latinx	2 (10)
Multiracial	2 (10)
Prefer Not to Answer	1 (5)
<b>Setting</b>	
Community	9 (43)
Ambulatory	8 (38)
Both	4 (19)
<b>Region</b>	
Illinois	9 (43)
Outside of Illinois	8 (38)
Both	4 (19)
<b>Years of Experience</b>	
≤ 10 years <sup>1</sup>	13 (62)
≥ 11 years	7 (33)
Prefer Not to Answer	1 (5)

<sup>1</sup>Includes three pharmacy residents

\*Participants were invited to identify sex or gender

## Pharmacists are ready and able to fill prescriptions for mifepristone with minimal training.

### Comfort

- Almost all participants felt comfortable dispensing mifepristone following minimal additional training (e.g., webinar, one-pager, in-person)
- Most stated that their coworkers and employers would support pharmacy dispensing
- Pharmacists saw themselves as "medication experts;" have the skills and resources to learn about new medications quickly

"I would be happy to dispense [mifepristone] as long as I was able to get the information I needed in order to safely do so."  
- Massachusetts community pharmacist

## Challenges

- Concern that employers might oppose pharmacy dispensing due to concerns about community backlash or negative media coverage
- Time constraints on already overworked pharmacists
- Concerns that coworkers might refuse to dispense due to personal beliefs, emphasized importance of minimizing burden on patients and ensuring prescription transfer policies for such cases

## Recommendations

- Pharmacists feel underutilized, want to be seen as part of patient's health care team
- Almost all participants were interested in patient-directed resources
- Suggested prior communication between pharmacist and prescribers on dispensing process/logistics, easy way for pharmacists to contact prescribers with questions

"What pharmacists need and want is a method of communication back to the office that's seamless, because they're constantly calling and faxing into a black hole, they can't get hold of the physician...anything that would ease communication."  
- Illinois community pharmacist

