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Making patient care decisions, including pharmacotherapeutics decisions and interventions, can be a complicated process. A variety of factors must be considered to determine the best therapy for a specific patient. It is increasingly important that pharmacists in Japan develop greater expertise in improving drug therapy outcomes. The change to the six-year education program and development of clinical practice models in Japanese hospitals indicate the needs for Japanese society to have pharmacists more involved in direct patient care and the desire of the profession to improve drug therapy outcomes in Japan. The use of scientific evidence, systematic reviews and guidelines (“evidence-based medicine”) has been an important advance over the past 20 years to help improve therapeutic decision-making. However in a time of increasingly limited resources, health care outcomes and economics, including pharmacoeconomics, must become a more important component in the decision-making process. While it is a simple process to determine the cost of a specific medication, the cost of therapy is much more difficult to determine and may include relative efficacy, rate and severity of adverse effects, cost of monitoring, storage/inventory and ease of adherence. Since effectiveness is a major component of the cost of therapy, using guideline-directed therapy and data from comparative effectiveness research can assist in making cost-effective therapeutic decisions. An important concept of pharmacoeconomics is to consider from whose perspective economic principles are applied, since the perspective of an individual health care professional, individual patient or health care institution or system could provide different solutions. Cases will be used to illustrate the application of pharmacoeconomics to pharmacotherapeutic decision-making.