The aim of this study was to explore pharmacists’, patients’, and general practitioners’ (GPs’) opinions and experience of medication reviews in general practice.

**Methods:** We held one focus group with patients and one with pharmacists. As the two GPs were unable to attend the focus group with the pharmacists, they were individually interviewed. Purposive sampling was used to select participants with a range of ethnicity, gender, age, and geographical mix. Reflective thematic analysis of the focus group and interview transcripts was undertaken by one researcher (MC) to identify themes.\footnote{1}

**Results:** Seven patients, five pharmacists, and two general practitioners participated in this study. Two main themes were generated.

**Theme one: preparing for the review.**
Subtheme one: time to prepare. Patients require advance notice of their review so they can be prepared with queries. Pharmacists need sufficient time to familiarise themselves with the patient’s history and perform the necessary clinical checks. Subtheme two: education about medication reviews. Some patients do not understand the purpose or process of a medication review and can be reticent to engage. Subtheme three: suitability of appointments. Longer face-to-face appointments usually benefit patients with complex medication regimens, or patients with communication difficulties. Patients who have simple regimens or are happy with their medicines may be content with a telephone or online review.

**Theme two: conducting the medication review.**
Subtheme one: establish the aim of the review. Patients present for medication reviews for different reasons (e.g., a clinical issue has been identified, patients meet defined criteria or take specific medicines); therefore, the aim of the review should be established at the beginning. Subtheme two: involve and engage the patient. Patients want to feel that they have been listened to and supported during the medication review. Patients want more opportunities to ask questions and/or raise their concerns in the review. Subtheme three: defined but flexible process for the review. Pharmacists and GPs acknowledged the use of templates and guidance to deliver medication reviews, but stressed the importance of tailoring the medication review to meet the needs of the patient.

**Conclusion:** Whilst recruitment was challenging, the variety of participants provided a multi-perspective view of medication reviews and a rich source of data. GPs interviews provided a good source of data, but it is possible that different sub-themes may have been generated from integrated discussions. The themes identified provide an outline of the implementation of pharmacist-led medication reviews in general practice. These can be used to support future work to optimise medication reviews in primary care.

**References**