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RESEARCH ARTICLE

Managing Consumer Loyalty in the Pharmaceutical Market of a Metropolis

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Abstract

The article presents the results of a study of a complex of factors that determine consumer behavior in a pharmacy for visitors of an older age group (elderly people over 65). The main problems in providing pharmaceutical care to elderly consumers in the local pharmaceutical market of a large metropolis (for example, Moscow) are identified. Positive and negative factors of consumer loyalty of elderly customers of Moscow pharmacies are indicated. The purpose of the study was to formulate a comprehensive socio-psychological portrait of an elderly consumer receiving pharmaceutical assistance in pharmacies in Moscow. In order to achieve this goal, a study of the behavior of visitors to pharmacies over 65 years of age, their sociological surveys, as well as a survey of pharmacy managers and employees to identify positive and negative factors that affect the consumer behavior of the studied focus group of customers, were conducted. A sociological survey of visitors to Moscow pharmacies and a survey of managers and employees of pharmacies revealed the positive and negative factors of consumer behavior of elderly consumers and identified the main problems encountered in pharmacies in the provision of pharmaceutical care for this category of patients. A comparative analysis of Russian and world experience in serving elderly visitors in pharmacies was carried out. The necessity of studying the behavior of consumers of older adult focus groups is proved in order to improve the quality of pharmaceutical and psychological care. Elderly clients (over 65) account for 40-65% of visitors to Moscow pharmacies. The consumer behavior of the studied category of patients is characterized by pronounced polypharmacy, the need for advisory services and psychological assistance, the need for communication, a significant lack of information about the assortment, the interaction of drugs, their correct use, and storage. The psychological and medical problems in most elderly patients complicate the process of providing them with timely and high-quality medical care; require the use of a special psychotherapeutic approach in the work of pharmacy employees, and the introduction of a specific "client-oriented pharmaceutical advising".

Keywords: *Elderly patients; Elderly consumers; Older adults; Polypharmacy; Pharmaceutical assistance; Pharmacy organizations; Socio-psychological portrait; Client-oriented pharmaceutical advising.*

Introduction

Population aging is one of the dominant trends of the 21st century as noted in the summary of the joint report of the United Nations Population Fund (UNFPA) and HelpAge International. The average human lifespan during the twentieth century increased by 20 years.

A UN report on the analysis of changes in the age structure of the population in 1950-2050 states that population aging is a global phenomenon affecting the life of every person. Demographic changes in different countries have led to a rapid increase in the number of elderly people. According to forecasts by the US Census Bureau, the number of Americans over the age of 85 years will reach 18.7 million by 2080 [1]. Epidemiologic studies show that 11% of the world's population is over 60 years of age; this is projected to increase, by 2050, to 22 % of the population [2]. The same trend is characteristic of the Russian Federation and the CIS countries.

The process of population aging, which is developing in Russia and around the world, has important and far-reaching consequences

for all aspects of society and has an increasing influence not only on the demographic situation but also on socio-economic development [3]. An increase in life expectancy in Russia naturally entails an increase in the proportion of people of older adults' groups. In the Russian Federation, the proportion of elderly people is almost a quarter of the total population.

According to the Federal State Statistics Service, Moscow is the second region with high life expectancy after the Caucasus republics. According to the Russian Pension Fund for 2018, the number of people of retirement age (over 65) in Moscow and the Moscow Region amounted to 5.3 million people, of which 1.2 million are working pensioners. Every third pensioner (over 65) in Russia continues to work. A similar trend is observed in large cities around the world [4]. The Russian state encourages older adults to continue active activities (including labor).

Since 2018, Moscow has been implementing the Mayor's project "Moscow Longevity" aimed at expanding the opportunities for the participation of older adult citizens in cultural, educational, physical education, health, and other events. Increasing life expectancy, improving the quality of medical services, and improving the health status of older people are gradually forming a new attitude towards older age as a "better half of life". Elderly people seek more opportunities for an active, fulfilled life in order to maintain good health and vitality for the longest time possible.

Aging of population naturally leads to an increase in the incidence rate, including chronic diseases (cardiovascular system, diabetes mellitus, diseases of the gastrointestinal tract, musculoskeletal system, neurodegenerative and cognitive disorders, etc.), which not only reduces the quality of life of elderly people but also affects their working capacity.

In order to continue active work, it is necessary to deal with the prevention of aging, which includes not only a healthy lifestyle, sports, and proper nutrition but also the use of correctly selected and correctly combined drugs. Older adults are economical and thrifty. For most of them, making a purchase is a significant life issue. Many factors influence the decision to make a purchase-financial capabilities, individual preferences, duration of the disease, well-being, lifestyle, gender, age, social status of the consumer, level of activity, and others. In the case of the purchase of medicines, the recommendations of specialists (doctors and pharmacists), their professional and communication qualities, ability and capability to arouse a patient's confidence are also influential. Elderly consumers are a significant segment of both actual and potential customers of pharmacy organizations [5].

The most important component of the marketing analysis of the retail pharmaceutical market is a comprehensive study of the growing segment of elderly consumers, including the dynamics of their number and age composition, identifying the needs for pharmaceutical products, consumer behavior, specific preferences, etc. with the aim of developing a competent strategy for the provision of pharmaceutical assistance. Not only the pharmacy's revenue depends on this, but also the enterprise's management system, the principles of assortment, pricing, and product policy, the tactics of attracting customers, and much more.

The results of the analysis of the socio-psychological, medical and demographic characteristics of the elderly population of a particular region or micro district, the identification of similar needs, preferences, and factors affecting the consumer choice of residents served by a pharmacy make it possible to predict market trends and model sales dynamics. Such studies make it possible to formulate and predict the demand for pharmaceutical products depending on the characteristics of the family's area of residence, income, the share of essential goods expenses and other constant and variable indicators.

More in-depth market research involves analysis aimed at specific focus groups of consumers, a study of demand by region, district, and micro district, paying attention to the targeted relevance of pharmaceutical care for consumers of different age groups. This allows optimizing the inventory of medicines and planning the turnover of the pharmacy organization more accurately. Consequently, the conduct of socio-psychological and demographic studies of consumers, primarily of groups of older

adults, is timely and relevant. In the current competitive conditions of a large metropolis, such as Moscow, it is this group of consumers that can become the guarantor of the stable functioning of the pharmacy organization.

Literature Review

In many countries around the world, the segment of the market for elderly consumers is being given serious attention. Older people pay more attention to health, disease prevention, being potential consumers of drugs, dietary supplements, herbs, and other pharmaceutical products of pharmacies [3, 5]. Domestic and foreign authors note that older adults are one of the fastest-growing segments of the population, and the amount of drugs they consume is constantly increasing [6, 7].

At the same time, due to the presence of many concomitant diseases (poly morbidity) in elderly patients, a slowdown in metabolism due to aging, age-related transformation of pharmacodynamics and pharmacokinetics, the administration of several drugs at the same time (5-6 or more) leads to an increase in the number of adverse reactions during drug therapy, increasing the likelihood of polypharmacy.

The consequences of polypharmacy are manifested by an increased risk of drug interactions, a cumulative effect, worsening of overall well-being (nausea, dizziness, lack of appetite, etc.) and a decrease in the quality of life [8, 14].Russian and foreign literature describes the results of evaluating the relationship between polypharmacy and other factors, such as gender, age, education level, the number of simultaneously taken drugs, drug interactions, the presence of concomitant diseases, etc.

The results of the study confirm a close relationship between polypharmacy and the listed factors. Thus, the hospitalization rate among older adults due to the development of side effects when taking drugs is 5-10%, according to other sources, up to 30% of all hospitalizations of elderly patients are medical [15, 16]. Doctors prescribing drug therapy to geriatric patients often lack sufficient information on the use, metabolism, interaction, efficacy, and safety of drugs and dietary supplements in this group of patients [16, 19]. Long-term use of many groups of drugs in old age (sedatives, painkillers, sleeping pills) is addictive and leads to the need to increase doses, which is the reason for the development of drug intoxication. Gerontologists recommend prescribing these drugs for a short time, often replacing them with other drugs with a similar effect, and, if possible, taking interruptions in administration. In order to prevent toxic effects and enhance effectiveness, it is advisable to use in small doses a complex of pharmacological agents that have a similar therapeutic effect, complementing each other.

Elderly patients constitute a heterogeneous group with multiple concomitant diseases and a widely varying functional state, which makes it difficult to predict their response to treatment [20, 11].The number of drugs used by elderly consumers is significant, but so far only a few have proven efficacy and safety, as well as have been recommended for use in old age.

Since the first phases of clinical trials of drugs are carried out on a younger cohort of subjects who do not have age-related changes in the pharmacokinetics and pharmacodynamics like those of older adults, recommendations for their use in these age categories are absent or, in extreme cases, are extrapolated for elderly consumers [8, 5, 12].

The medical and pharmaceutical community in Russia and abroad is concerned about the current situation and the problems of drug provision for geriatric patients. As the population ages, global health systems will constantly face the burden of chronic diseases and polypharmacy among the elderly [20, 17, 8, 21, 22, 19, 10, 11, 12, 13, 14]. In many European and Asian countries, special programs of cooperation between doctors and pharmaceutical workers have been developed and implemented in order to provide professional assistance to the elderly, with age-specific features and the presence of several concomitant diseases taken into account [8, 22, 18]. With age, older adults experience hearing, vision and memory disorders, which require pharmaceutical workers to pay extra attention to this group of consumers [21, 23, 22].

In recent years, Russian scientists have also recognized the need for an in-depth study of the segment of elderly consumers in the pharmaceutical market.

In Russia, the scientific direction of "geriatric pharmacy" or "pharmaceutical geriatrics", recognized at the world level, has gained new development [24, 23, 25, 26, 27]. Geriatric pharmacy as a scientific and practical field combines medical, social, economic, psychological, and pharmaceutical knowledge. It uses methods inherent in the management and economy of pharmacy, pharmacoeconomics, pharmaceutical technology and biopharmacy, pharmaceutical information, etc.

The main goal of geriatric pharmacy is to optimize the drug supply of geriatric patients. In the Russian Federation, a system for providing medical and pharmaceutical care to this group of patients has been created and is constantly being improved. One of the urgent areas of research is the development of a training program for pharmacists and front-line workers in special techniques and methods for providing medical care to elderly patients in a pharmacy [27].

The most promising strategies aimed at mitigating the negative impact of demographic trends include a strategy to improve the quality and manufacturability of social, medical and pharmaceutical assistance to older adults, which would extend the period of their working capacity.

The competitive situation in the retail segment of the Russian pharmaceutical market encourages pharmacy organizations to conduct marketing research on elder consumers with the aim of improving the quality of services provided to them, identifying factors of consumer loyalty and finding ways to increase sales volume and profitability for this group of customers.

Materials and Methods

The following methods were used in the research process: theoretical analysis of the degree of development of the investigated problem on the basis of the study of statistical data and scientific research in the subject field; methods of applied sociology (individual survey method, questionnaire method); grouping methods, generalization and comparison; modeling methods. According to the developed program, a study of respondents was conducted: a survey of pharmaceutical specialists of pharmacy organizations and a sociological survey of older adult visitors.

The study of elderly consumers included 562 respondents, of whom 77.4% were women, 22.6% were men, the majority of respondents (82%) were 65-75 years old, 77.4 % were unemployed. The survey included 272 pharmaceutical specialists working in both large network and individual pharmacies. The research base included 165 pharmacy organizations located in the central regions of Moscow in the immediate vicinity of the underground as well as in sleeping areas.

Results

The results of the study showed that significant part of visitors (from 40% to 65%) was elderly people and their purchases accounted for a significant part of the income of Moscow pharmacies. As a result of a sociological survey of elderly visitors to pharmacies, it was found that 64.7% of respondents, in addition to purchasing medicines, needed professional advice from a pharmacist, 85.3% of visitors surveyed had a lack of communication along with the need for advice. About 2.5% of elderly respondents came to the pharmacy only because of a lack of communication. The need for advice was more often experienced by women (54.8%) than male visitors (3.3%).

An analysis of the structure of the consumer basket of visitors to Moscow pharmacies showed that the majority (45.5%) of elderly patients bought 3-4 drugs at a time, 26.7% of visitors bought 1-2 drugs, and 19.2% bought 5-7 drugs. More than 7 types of drugs were bought by 9% of elderly consumers. When analyzing the actual consumption of drugs by elderly patients, it was found that 63.5% of respondents used 2-3 drugs daily, 30.6% – from 3 to 5 different drugs, 5.0%-more than 5 items.

In the structure of consumption, the majority (up to 85.0% of items) of drugs were drugs that improved cerebral circulation, antioxidants, as well as drugs for the treatment and prevention of cardiovascular diseases. As a rule, geriatric patients due to poly morbidity are observed simultaneously by several specialists (therapist, neurologist, endocrinologist, cardiologist, etc.), and everyone prescribes drug therapy. Thus, there is a clear tendency to polypharmacy in

the consumption of drugs by the group of older adults.

According to the study, the most popular pharmacotherapeutic groups of drugs were drugs for the treatment and prevention of cardiovascular diseases (46.3 %), nootropic drugs (38.5 %) and sedatives (37.8 %), as well as drugs for treatment of gastroenterological diseases (antiulcer-24.1%, choleretic-22.6 %, laxatives -25.2%). Among the drugs purchased by elder people, 42% were over-the-counter drugs.

In the formation of demand for over-the-counter drugs, the leading role is given to pharmacists and front-line workers as intermediate consumers, since elderly patients cannot professionally assess the need to purchase a particular medicine.

Special attention should be paid to the rational choice of the dosage form and packaging of the drug for this category of clients. Thus, more than half (54.3%) of the elderly patients surveyed admitted that they often had difficulty removing the medicine from the package, and spilled tablets out of vials; about 67.0% of visitors from time to time missed the hours of taking the medicine, they were afraid that they would take the medicine again. For elderly patients, it is advisable to recommend drugs for single or double, rather than multiple doses, and modified release drugs. In these situations, the role of the pharmacist as a consultant considering the correct use of the drug and as an assistant in choosing the most comfortable dosage form is growing.

For a more detailed study of the factors of consumer behavior of older adults, the authors conducted a study of the motives of consumption, the system of preferences and the degree of medical drugs awareness. The frequency of visits to the pharmacy was different for different respondents, but the majority (80.6%) answered that they purchased drugs 1-2 times a week.

In 93.5% of cases, drugs are purchased on the recommendation of a doctor, in 85.5% cases-on the recommendation of a pharmacist, in 61.3% cases - on the recommendation of relatives and friends. Independent choice accounted for 17.7% of purchases. The least stimulating effect (8%) was provided by advertising.

The vast majority (98.7%) of elderly patients purchased drugs for the treatment of diseases, and not for the purpose of disease prevention, a significant proportion (82.3%) of the respondents interviewed did not prevent aging through the use of drugs. At the next stage of the study, a survey was conducted among elderly patients in pharmacies about the degree of their awareness of the interaction of drugs, the occurrence of side effects, metabolism, and excretion.

The majority (87.0%) of respondents said that they did not have sufficient knowledge about the features of the use and metabolism of drugs, 85.2% of elderly pharmacy visitors did not know the difference between the original and generic drugs, 76.2% of the respondents were poorly oriented in the assortment of drug preparations.

In this regard, elderly consumers expressed a desire to receive more information both from the doctor (93.5%) and from the side of the pharmaceutical worker (88.7). As a rule, older adults are especially careful in choosing a medicine and focus on the price of the goods when making a purchase.

A sociological survey showed that for the majority of elderly visitors the prices for medicines in Moscow pharmacies were high, 62.9% of respondents considered the prices for all medicines to be high, and 34.5% considered prices to be high for certain groups of drugs. Older women more often than men (36.2% and 2.9%, respectively) paid attention to the cost of medicines and other goods of the pharmacy assortment.

In Russia and abroad, in order to increase the availability of medical care, older visitors to pharmacies are given the opportunity to purchase medicines at a discount on the «Moskvich Card» and various discount programs. There are social pharmacies in which drug prices are 15-20% below the market average. With age, people become less sociable due to changes in their psycho-emotional status, with impaired hearing, memory, cognitive abilities, and for other reasons. 76.2% of elderly visitors to Moscow pharmacies get used to a specific pharmacy specialist and prefer to receive advisory assistance from him. At the same time, the vast majorities (61.0%) of pharmacy customers prefer a confidential conversation

with a mature specialist, as they do not completely trust the young employees of pharmacies; they feel discomfort in communicating with them.

Discussion

Discussion of the results of the conducted sociological survey of elderly patients with pharmaceutical workers allowed considering the issue from their point of view. According to 92.5% of pharmacists, it is elderly buyers who are extremely sensitive to the quality of pharmaceutical care. Particularly significant factors for them are the level of service and the atmosphere of the pharmacy, the convenience of acquiring goods, the lack of queues at the pharmacy and the opportunity to receive qualified pharmaceutical advice.

However, pharmacy staff noted that older adult buyers, especially those with cognitive impairments, did not understand the meaning of professional terms used by pharmacists, they were annoyed by long sentences and fast pace of speech; repetition of what was said and explanation in more understandable language were required. About 18.0% of managers and 27.0% of pharmacy employees reported a frequent manifestation among older adult visitors, on the one hand, of restraint, sluggishness, the rigidity of thinking and, on the other hand, resentment, increased irritability, nervousness and even proneness to conflict.

The most common causes of conflict with older visitors were: refusal by the pharmaceutical worker to dispense over-the-counter prescription drugs (75.7% of cases), demand to take back the medicine that was bought earlier (60.0%), lack of the necessary drug (63.5%) or increase in the price of it. At the same time, pharmacy employees believed that older visitors to pharmacies were generally little conflictive and in 57.4% of cases, if a conflict arose, they were ready to compromise.

At the same time, 41.4% of respondents said that women were more conflictive, older men agreed to a compromise solution more easily. Thus, the main components in the communication of a pharmacy worker with an older age group of clients are flexibility, attentiveness, stress resistance, patience, empathy, special speech etiquette, and respectful attitude.

More than 90.0% of pharmaceutical workers in Moscow pharmacies noted that most of the time (up to 95.0%) in servicing elderly visitors was spent on providing advisory and psychological assistance (reading the instructions, explaining the pharmacological effect of the drug, warning about possible side effects, explanation of the mode and method of administration, storage conditions, etc.).

In addition, many elderly patients are prone to complain of poor health, lack of attention of family members, loneliness, low income, etc. An analysis of the publications indicates that in other countries, pharmacists are faced with similar situations. A study in the UK has shown that one in three patients over 65 does not understand information related to health issues, which necessitated the involvement of patients in the development of instructions for medicines so that they contain clear and understandable information for everyone [15, 21, 18].

To evenly distribute the flow of customers, the overwhelming majority of Moscow pharmacies have introduced the Electronic Queue management system-a hardware-software complex consisting of a terminal for selecting services with a receipt printer, an information display, sound notification equipment, and other software. Moscow pharmacies also have information kiosks and drug search terminals that allow pharmacies visitors to obtain information on the availability of the required medicine and its cost, provide an opportunity to study the instructions for use, and in the absence of the required product, they help to find out where it can be purchased.

Employees of pharmacies note that it is difficult for elderly visitors to choose the right menu on the terminal's display due to vision problems; some of them categorically refuse to use electronic devices and do not understand their purpose, are worried, nervous, and display elements of aggression.

Therefore, it is necessary to constantly have pharmacy administrator on the trading floor, the main function of whom is to assist and train visitors in working with this electronic equipment. In order to increase consumer loyalty, in many pharmacies in Moscow visitors are provided with free services for measuring heart rate and blood pressure.

Elderly patients regularly use this service, but in 97.5% of cases, they need the help of a pharmacist, as independent use of the pressure measurement electronic device is difficult for them. Many pharmacies abroad also provide additional services to the population, but the range of these services is much wider. For example, in the UK pharmacies, one can not only measure blood pressure but also get a DNA test, vaccinate to prevent various diseases and test the blood glucose level.

Australian pharmacies provide the opportunity to vaccinate and to control blood pressure and offer sell reference materials about medicines and diseases [27]. In Canada, pharmaceutical workers provide lens-fitting services for geriatric patients, remind about the need to extend a doctor's prescription for chronic diseases, monitor adverse reactions and conduct educational seminars for the population on health issues [28]. In the USA, pharmacies vaccinate against influenza, test blood cholesterol and glucose levels, remove warts and advise on dietary nutrition [29].

In Latvian pharmacies, blood cholesterol and glucose levels are measured, and expiring drugs collection points are organized [30]. Swedish pharmacies also provide a number of additional services: they assess the risk of diseases, organize educational seminars, remind about the repeated dispensing of medicines for patients with chronic pathology, and advise on the treatment of diseases. Pharmaceutical workers visit patients at home (especially the elderly) to monitor the treatment process [31].

In German pharmacies, a place has been organized for visitors to provide medical care, where one can measure body temperature, drip anti-inflammatory eye drops, treat minor wounds with an antiseptic, and take an anesthetic drug [32]. A serious obstacle to the provision of timely and affordable drug care is an absence of a prescription for a drug. Older adults often forget prescriptions at home, mispronounce the name of the medicine, and forget what dosage they need.

In Russia, only the initial steps are being taken to introduce electronic prescriptions. A mechanism has been developed for issuing electronic prescriptions, the Government of the Russian Federation has adopted an appropriate regulatory document, but there is still no practical experience in using electronic prescriptions in Moscow pharmacies. In large pharmacy chains in Moscow, an online reservation system for over-the-counter medicines operates, followed by their independent receipt from a nearby network pharmacy. A small number of elderly visitors use this service, as most of them lack computer and Internet skills. In many countries of the world, the online drug booking service is functioning successfully. For example, in the UK, a nationwide website allows contacting the doctor for an electronic prescription.

The prescription is automatically sent to the pharmacy, and the patient can pick up the prescribed medicine at a convenient time. There is also a possibility of delivering the prescription to the patient's home. This is especially convenient for older people suffering from chronic diseases and taking medications daily for a long time. The practice of writing electronic prescriptions for medicines also exists in Norway, Estonia, Australia, the USA, Great Britain, Canada, Finland, and other countries. There is an electronic system for prescribing medicines to effectively monitor the treatment process in UK hospitals. In a number of countries (Japan, USA, Canada), an electronic pharmaceutical dossier is created for each patient in a pharmacy, containing data on all diseases and prescriptions of medicines [30, 28, 31, 32, 29, 27].

In many countries of the world, such as the USA, Holland, Denmark, Switzerland, Great Britain, Ukraine, Australia, the service of ordering medicines via the Internet and delivering them to the client's home has become widespread. In Sweden, medicines are ordered in the state pharmacy network by telephone or via the Internet and delivered to the patient by mail [29]. Older adult visitors, by virtue of their conservatism, are most susceptible to elements of merchandising. Any even the most insignificant changes can cause confusion, irritation, and refusal to purchase due to a change in design or color scheme of the packaging design of a previously known drug.

In this regard, in pharmacies located in sleeping areas, where there are many older adults, it is not advisable to make drastic changes in the location of the goods, because

this disorients elderly consumers and negatively affects loyalty to a particular pharmacy. Currently, pharmacy robots are successfully used in Russia and many other countries of the world (Germany, Switzerland, Ukraine, etc.); their main functions are the storage and delivery of medicines to the workplace of a pharmacist (front-line worker). Pharmacy robots contribute to the rational use of retail space and the optimization of inventories. Pharmaceutical workers get rid of routine work and may spend more time on patient advising. The speed of customer service increases, which saves patients (including elderly ones) from the need to wait a long time for their turn [26].

Among the positive factors affecting the consumer loyalty of pensioners, the first place is occupied by the elements of geo marketing. The convenient location of the pharmacy is very important as the majority of older adults purchase medicines at pharmacies near their home. A noticeable sign, a convenient entrance to the pharmacy and a wide range of products also play a significant role.

The popularity of the pharmacy will be the higher the more often the buyer will be able to purchase all the medicines he or she needs in one place. Pensioners have been giving priority to a particular pharmacy they love for a rather long time, therefore, polite communication with them helps to increase loyalty and provide fast and high-quality pharmaceutical assistance.

Conclusion

The global trend of aging population has naturally led to the situation when geriatric patients become the main consumers of not only medical but also pharmaceutical services. Consumer behavior of patient population is characterized by pronounced poly morbidity and poly pharmacy, the need to obtain advisory services and psychological counselling, the need for communication, significant lack of information about drug range and interactions, about correctness of drug administration and storage. Specific age peculiarities of patients cause problems with understanding information when providing pharmaceutical counselling. Natural cognitive decline, frequent anxiety and depressive disorders significantly hamper communication between geriatric patients and pharmacists, reducing the level of awareness about drugs, which violates compliance with pharmacotherapy and can lead to side effects and complications caused by uncontrolled self-medication.

The identified problems of psychological and medical nature impede the process of providing timely and high-quality drug care, forcing to search for innovative technologies to solve them, such as “geriatric pharmaceutical nursing”, the use of a special psychotherapeutic approach by pharmacy staff in their work, introduction of specific “client-oriented pharmaceutical counselling” aimed at taking into account drug interactions and predicting possible adverse drug reactions in polypharmacy, as well as the principles of “responsible self-medication”. Scientific and practical significance of the sociological survey performed lies in identifying and assessing positive and negative factors that shape a loyal consumer behavior in older patients.

The results of the study revealed the main directions for developing and implementing a concept of individualized pharmaceutical care, including a client-oriented approach and special rules of communicative behavior of a pharmaceutical specialist, adapted to biomedical and socio-psychological peculiarities of geriatric patients, taking into account international standards of healthy aging aimed at minimizing the risks of drug use, improving quality and safety in pharmacotherapy.

This concept should be based on an integrated approach to providing pharmaceutical services to elderly patients by way of consolidating professional capabilities of health professionals within their core competencies, and on technologies that preserve health and improve the quality of life, as this epitomizes the humanistic mission of health care.

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