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## Pharmacist-led Educational Interventions Involving the “Hidden” Patient in Cirrhosis: Caregivers

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Patients request – and deserve – better medication management tools. Beyond the challenges of drug titration to effect and following instructions in the context of encephalopathy, patients with cirrhosis are frequently prescribed contraindicated therapies but not indicated therapies.<sup>1</sup> In our recent publication, we described several barriers to effective care and their solutions as identified by patients and their caregivers.<sup>2</sup> Hayward et al. write to highlight the important role of pharmacists in addressing these barriers. We thank the authors for their letter. The authors provided extended follow-up data from their trial of pharmacist-led educational interventions<sup>3</sup>, demonstrating a durable, multi-year reduction in hospital admissions. Their work also speaks to the importance of quality patient education and empowerment: required elements for maximizing the longevity of interventions. Including caregivers in their intervention likely further contributed to their strong results, and future interventions should continue to involve caregivers to optimize their success and sustainability. Similar caregiver involvement with other members of the care team (nurse care managers, dieticians, physical therapists, occupational therapists, and if appropriate, psychologists) may potentiate the therapeutic effect of their services. Even though their involvement increases the upfront caregiver “workload”, we suspect that in the long run, it improves patient care and outcomes, ultimately reducing the magnitude of burden and burnout for our “hidden” patients in cirrhosis – caregivers.

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