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Short communication

Community pharmacists' role in acne management in the R. Kosovo: Knowledge, practice patterns and cost-effectiveness analysis

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Introduction

Acne vulgaris is a highly prevalent inflammatory skin disorder requiring continuous management and appropriate therapeutic guidance.

Community pharmacists play an important role in evidence-based counselling and acne management. In the R. Kosovo, pharmacies frequently represent the first point of contact for patients with acne, particularly in the context of patient-reported behaviors such as delayed consultation and reliance on self-medication with OTC and cosmetic products (Ramshaj Haliti and Glavas Dodov, 2025).

This study aims to evaluate the knowledge, attitudes and practices of community pharmacists, with an integrated focus on clinical decision-making and cost-effectiveness aspects of acne management, in line with contemporary therapeutic guidelines (Zaenglein et al., 2016).

Materials and methods

A structured questionnaire was distributed to 121 community pharmacists across R. Kosovo. The survey included demographic characteristics, knowledge of acne treatment, counselling practices, perceptions of patient trust and economic aspects related to treatment selection. Data were analyzed using descriptive and comparative statistical approaches, with additional economic interpretation based on treatment cost considerations, in accordance with established health economic evaluation methodologies (Drummond et al., 2015).

Results and Discussion

Demographic characteristics

The study included 121 pharmacists, predominantly female (≈81%), with 95% holding a Master of Pharmacy degree.

Consultation frequency and professional engagement

Frequent consultations were reported by 57% of pharmacists, confirming that community pharmacies function as a primary point of access for acne management.

Patient counselling and follow-up

Patient counselling was reported by 90% of pharmacists, and 75% performed follow-up. This indicates a strong patient-centred approach and active monitoring of product safety. In the context of acne management involving OTC and cosmetic

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products, this role aligns with cosmetovigilance practices. Patient trust was reported by 76% of respondents, reinforcing the pharmacist's role as a reliable and accessible healthcare provider. This level of trust supports adherence to recommended therapies and strengthens the effectiveness of pharmacist-led counselling, particularly in settings where patients frequently rely on self-medication.

Interprofessional collaboration

Collaboration with physicians was reported by 64% of respondents, suggesting moderate integration within the healthcare system and highlighting opportunities for improved coordination.

Therapeutic decision-making and economic considerations

Therapeutic recommendations were largely aligned with established clinical guidelines, particularly regarding the use of topical agents such as salicylic acid, benzoyl peroxide, and azelaic acid (Zaenglein et al., 2016).

In addition to clinical considerations, treatment selection was influenced by product availability, brand perception, and patient affordability. La Roche-Posay was recommended by 46% of pharmacists, followed by non-branded alternatives (30%) and The Ordinary (16%), reflecting a balance between perceived efficacy and economic accessibility.

From an economic perspective, pharmacist-led acne management using OTC and cosmetic products demonstrates a balance between accessibility, affordability, and effectiveness. The estimated monthly cost of treatment ranges between €30 and €60 per patient, including cleansers (€10–€15), active formulations (€12–€20), and moisturizers (€10–€25). This cost range represents a relatively low financial barrier compared to prescription-based or specialist-led treatment pathways, making pharmacist-led care particularly accessible in settings with high out-of-pocket expenditure, where patients frequently rely on direct payment for healthcare services (World Health Organization, 2022).

The availability of lower-cost alternatives enables individualized treatment selection based on patients' financial capacity, while maintaining acceptable treatment outcomes in routine practice. This cost pattern aligns with patient-reported behaviors in Kosovo, where self-medication and delayed consultation are common (Ramshaj Haliti and Glavas Dodov, 2025), and early pharmacist intervention may improve adherence and reduce the likelihood of escalation to more complex and costly therapies. From a broader health economic perspective, cost-effectiveness is determined not only by treatment cost, but by the balance between affordability, adherence, and prevention of complications (Drummond et al., 2015).

Conclusion

Community pharmacists in R. Kosovo demonstrate an important role in acne management by providing evidence-based counselling and affordable treatment recommendations. Pharmacist-led interventions may improve accessibility and rational use of OTC and cosmetic products.

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