

A study takes a closer look at so-called 'adherent' patients

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A study at Universidad Miguel Hernández (UMH) in Judging medicine on its looks Elche shows that patients defined automatically as "adherent" by dint of collecting their prescriptions each month are not necessarily any better than their "non-adherent" peers at actually taking their medication. It also found that replacing a patient's medication with one that looks different can have a detrimental impact on adherence.

The study was carried out by Elsa López Pintor and Blanca Lumbreras Lacarra, researchers and pharmacy lecturers at UMH. The subjects included 602 patients, male and female with an average age of 68.8, who were being treated for hypertension and collected their prescriptions from 40 pharmacies across the province of Alicante.

In the case of chronic diseases like hypertension, patients not sticking to their treatment plans is one of the main causes of treatment failure. It is a major concern, incurring tremendous costs to the health service and to society as a whole. However, measuring <u>adherence</u> is complex and imperfect. Most studies published to date, for instance, automatically define patients who collect their medication from the pharmacy as adherent. This study questions this practice, as well as studying other factors involved in adherence.

The main finding, then, was that lack of adherence even among those patients who regularly collected their medication was as high as 32%, based on inpharmacy physical testing and questionnaires. A full 15% presented blood pressures well above healthy limits, even after months of collecting their prescriptions.

As might be expected, adherence was strongest when taking the medication didn't interfere with the patient's daily activities, either in terms of sideeffects or dosage and timing. Patients taking five or more different medications and long-term outpatients were better at following their prescribed treatments.

Interestingly, the study shows that patients are more likely to stop taking their medication if changes are made to the appearance of either the packaging or the medication, with adherence dropping most significantly when changes were made to the size, shape or colour of the pill itself. We know this because patients who were given the new-look medication presented higher hypertension and systolic blood pressure than either of their peers whose medication was unchanged or simply wrapped in a different packaging.

These findings call for pharmacists to play a larger role in patient care, underlining the importance of bringing the patient into the conversation, something which is not always happening at pointof-delivery. This is particularly important in the event changes are made to the look-and-feel of their medication, where the patient needs to be reassured that the visual change does not necessarily reflect an actual change to what they are taking (and where it does, they can expect similar outcomes).

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1/2



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