

**Excerpts from...**

**Supporting Patient Choice and Adherence:**

*What You Can Do To Lower Patients' CHD Risk*

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# The value of adherence support

- Poor adherence results in increased morbidity and mortality
- Adherence support is supported by systematic evidence reviews of adherence interventions

Hypertension	Factors affecting adherence	Interventions to improve adherence
<b>Socioeconomic-related factors</b>	(-) Poor socioeconomic status; illiteracy; unemployment; limited drug supply; high cost of medication (46,48-55)	Family preparedness (58-60); patient health insurance; uninterrupted supply of medicines; sustainable financing, affordable prices and reliable supply systems
<b>Health care team/health system-related factors</b>	(-) Lack of knowledge and training for health care providers on managing chronic diseases; inadequate relationship between health care provider and patient; lack of knowledge, inadequate time for consultations; lack of incentives and feedback on performance (+) Good relationship between patient and physician (46)	Training in education of patients on use of medicines; good patient-physician relationship; continuous monitoring and reassessment of treatment; monitoring adherence; non-judgemental attitude and assistance; uninterrupted ready availability of information; rational selection of medications; training in communication skills; delivery, financing and proper management of medicines; pharmaceuticals: developing drugs with better safety profile; pharmaceuticals: participation in patient education programmes and developing instruments to measure adherence for patients
<b>Condition-related factors</b>	(+) Understanding and perceptions about hypertension (37)	Education on use of medicines (58)
<b>Therapy-related factors</b>	(-) Complex treatment regimens (38,46,48-55); duration of treatment; low drug tolerability, adverse effects of treatment (46,48-55) (+) Monotherapy with simple dosing schedules; less frequent dose (56); fewer changes in anti-hypertensive medications (54); newer classes of drugs: angiotensin II antagonists, angiotensin converting enzyme inhibitors, calcium channel blockers (22)	Simplification of regimens (38,46)
<b>Patient-related factors</b>	(-) Inadequate knowledge and skill in managing the disease symptoms and treatment; no awareness of the costs and benefits of treatment; non-acceptance of monitoring (+) Perception of the health risk related to the disease (37); active participation in monitoring (41); participation in management of disease (42)	Behavioural and motivational intervention (58-60); good patient-physician relationship; self-management of disease and treatment (58); self-management of side-effects; memory aids and reminders (58-60)

Tobacco smoking	Factors affecting adherence	Interventions to improve adherence
<b>Socioeconomic-related factors</b>	(-) High treatment cost (41) (+) Higher education levels, older age (41)	Social assistance (25)
<b>Health care team/health system-related factors</b>	(-) Unavailability for follow up or lost to follow up (1,8,10,11,17,21); failure to recall the receipt of a prescription (20) (+) Access to free NRT; more frequent contact with physicians and pharmacists (35)	Pharmacist mobilization (41); <b>access to free NRT;</b> frequent follow-up interviews (35)
<b>Condition-related factors</b>	(-) Daily cigarette consumption; expired CO, plasma nicotine and cotinine levels; Fagerstrom Tolerance Questionnaire (FTQ) scores (44); greater tobacco dependence (25); psychiatric comorbidities; depression (3,25); failure to stop or reduce smoking during treatment (1,3,8-10,17,18,21,22,24,29,36-38,41-43)	<b>Education on use of medications;</b> supportive psychiatric consultation (3,25)
<b>Therapy-related factors</b>	(+) Attendance at behavioural intervention sessions (26); adverse events (1,9,16,37-40) or withdrawal symptoms (1,9,11,12,13,16-18,22,35-40)	NRT; antidepressant therapy; education on use of medications; <b>adherence education;</b> assistance with weight reduction (29); continuous monitoring and reassessment of treatment; monitoring adherence (46)
<b>Patient-related factors</b>	(-) Weight gain (29) (+) Motivation (25); good relationship between patient and physician (41)	<b>Adjunctive psychosocial treatment;</b> behavioural intervention (1,9-13,16-19,21-23,25,29,30,32,38,39,47-52); assistance with weight reduction (29); good patient-physician relationship (41)