

Prevention c+olumn

ADHERENCE TO PRESCRIBED THERAPY – OCTOBER 2019

70% of patients in Canada do not take their medications as prescribed by their physician.¹

One-tenth of heart attack patients do not take their medications. This is an alarming statistic, since the risk of death in the first year following a heart attack is 80% higher in patients who are not compliant to treatment.²



By: **Rebecca Deslandes-Brosseau**

Pharmacist

EXPERIENCE LA CAPITALE'S PREVENTIVE APPROACH



This prevention column is available for free download at viva.lacapitale.com

lacapitale.com    



Workplace Health
and Wellness Program



La Capitale

Insurance and
Financial Services

Following doctor's orders

Have you ever joined a loyalty program that allowed you to earn points based on your purchases? Points that you could redeem for cash, merchandise or a dream vacation? What about if the reward was a better quality of life or even extra years of life? Adherence to therapy prescribed by your physician will give you better control over your condition, prevent complications and, most importantly, enhance your quality of life. It may not be a trip somewhere, but following doctor's orders may enable you to enjoy good health, longer, with your loved ones. That's what adherence to prescribed therapy means.

70% of patients in Canada do not take their medications as prescribed by their physician.¹



What is meant by adherence to prescribed therapy?

You leave your doctor's office with a prescription. It may be for medication, physiotherapy, blood work, etc. Adherence to prescribed therapy means receiving the recommended or prescribed treatment.

HOW DO WE REACT TO CHANGE?

Following doctor's orders to the letter may not be straightforward. Some people may find it a real challenge that brings about significant changes in their lives. Here is how many patients react when they receive a new prescription:

1. ACCEPTANCE

New diagnosis, follow-up tests, new medications, etc. It is sometimes very difficult to accept the changes, manage them and integrate them into our daily lives. The acceptance of a new health problem or a new treatment is an essential step in adherence to prescribed therapy.

2. PERSISTENCE

Therapy persistence refers to the period during which the patient continues to receive treatment. 50%³ of patients do not follow their treatment program long enough to benefit from it. Take antidepressant treatment as an example. The feeling of well-being it brings occurs about three months after the start of treatment. In order for antidepressant treatment to work and prevent relapses in the long term, it should be taken for at least a year. When a patient does not take antidepressant treatment for the recommended period, the risk of relapse is doubled.⁴

3. COMPLIANCE

After acceptance and persistence, we can talk about compliance. You've started receiving treatment and decided to continue with it. But do you take it exactly as prescribed at the same time every day? 70%⁵ of patients with asthma or chronic obstructive pulmonary disease (COPD) fail to take their medications adequately, even though they reduce their symptoms and prevent recurrences.



One-tenth of heart attack patients do not take their medications.

This is an alarming statistic, since the risk of death in the first year following a heart attack is 80% higher in patients who are not compliant to treatment.²

WHY so many people?

Medication compliance is based on three main elements. If you recognize yourself in one or more of these elements, talk to your pharmacist, your physician or a health professional you trust to come up with solutions that will work with your lifestyle.

1. KNOWLEDGE

Do you know the exact reason why you're taking a medication? Patients who don't know why they're taking a certain medication are likely to not take it, because they do not see the added value it brings. If that is your case, ask your pharmacist to explain why you're taking the medication and, most importantly what benefit it brings in the short, medium or long term.

2. ABILITY

Are you able to take the medication? Can you afford it? Are you able to swallow the tablets? In some cases, the choice of treatment may not be appropriate to your lifestyle. For example, working the night shift, having to take medications several times a day or having difficulty open the vials because of your arthritis may interfere with adequate compliance. Approximately,

one-eight of all patients⁶ stop taking their medication without even discussing it with their doctor, because they can't afford to pay for it. There are solutions, so talk about it with your doctor or pharmacist, so you can find the best way to take your medication.

3. WILLINGNESS

Willingness means agreeing to receive treatment. You know why you need to have it, you are able to receive it, but you don't want to. That may be due to a lack of trust, personal belief or willingness. Sometimes, losing weight, eating a healthy diet and being more active can be enough to lower your blood pressure, for example. Have an honest discussion with your doctor or pharmacist to find out what options could work for you.

45%⁷ of Canadian patients on medication for cardiovascular conditions (such as hypertension) do not take it as prescribed. Yet, adequate compliance with antihypertensive medications reduces the likelihood of suffering a heart attack, stroke, heart failure and emergency room visits.⁸



What do pharmacists think?

In general, your pharmacist is the health professional you see most often. When you go to fill a prescription, your pharmacist is responsible for checking the frequency. If it is not correct, various situations may occur.

1. EARLY

You go early to renew the medications that help you sleep. Your pharmacist will take the time to ask you about the reasons. It's not to give you a lecture but, if you take more medications than have been prescribed for you, it might be that your condition is not under adequate control. It is important to mention that type of situation in order to find solutions.

2. LATE

If you're two weeks late going to pick up your medications, your pharmacist will ask you why. Here again, it's not to give you a lecture but rather to ensure your knowledge, ability and willingness and to help you come up with solutions that will make it easier to integrate your treatments into your daily life.

3. FORGOT

If you forget to order one or more medications, your pharmacist will check to determine that you have everything you need for adequate compliance to treatment. 56%⁹ of patients who skip a dose do so because they forget. Here are a few tips on how not to forget to take your medications.

- Program your mobile device to sound an alarm at the same time each day to remind you to take your medications. A regular alarm would also work.

- Some mobile apps can also remind you to take your medications. Ask your pharmacist which one would be the best for you.
- You can also synchronize the time you take your medication with another activity (e.g. when one of your favourite TV shows starts).
- Use a pill organizer.

Adherence to prescribed therapy is important for your health. It prevents complications and improves your quality of life. To ensure that you stay on the "straight and narrow," get help from your loved ones and healthcare professionals!

1. Express Script Canada: Prescription Drug Trend Report 2018.
2. Ho PM, Spertus JA, Masoudi FA, Reid KJ, Peterson ED, Magid DJ, et al. Impact of medication therapy discontinuation on mortality after myocardial infarction. Arch Intern Med. 2006; 166(17): 1842-7. <https://doi.org/10.1001/archinte.166.17.1842>.
3. Emmanuèle Garnier. Observance thérapeutique : connaître les bons ressorts et les bons moyens. Le Médecin du Québec, Vol. 45, No. 3, March 2010
4. Matthew S. Keene MD, The True Cost of Noncompliance in Antidepressant Therapy. Medscape Psychiatry. 2005;10 (2) © 2005 Medscape, LLC
5. Mathieu Ste-Marie. Non-observance médicamenteuse: « Une véritable crise dans le domaine de la santé ». Profession santé. April 30, 2019.
6. <http://www.pharmacists.ca/index.cfm/news-events/news/failure-to-take-meds-leads-to-worsening-health-outcomes-and-increased-costs-to-health-care/>
7. Non-adherence to Prescribed Therapy: A Persistent Contributor to the Care Gap Terrence Montague, CM, CD, MD, Lori-Jean Manness, BScPharm, Bonnie Cochrane, RN, MSc, Amédé Gogovor, MSc, John Aylen, MA, Lesli Martin, BA, Joanna Nemis-White, BSc, PMP https://www.mcgill.ca/hcic-sssc/files/hcic-sssc/nonadherence_to_prescribed_therapy_hcic_29_may_2017.pdf
8. Michel Burnier, Brent M. Egan. Adherence in Hypertension: A Review of Prevalence, Risk Factors, Impact, and Management. Compendium on the Pathophysiology and Treatment of Hypertension. 2019 American Heart Association, Inc.
9. Non-adherence to Prescribed Therapy: A Persistent Contributor to the Care Gap, by Terrence Montague, CM, CD, MD, Lori-Jean Manness, BScPharm, Bonnie Cochrane, RN, MSc, Amédé Gogovor, MSc, John Aylen, MA, Lesli Martin, BA, Joanna Nemis-White, BSc, PMP https://www.mcgill.ca/hcic-sssc/files/hcic-sssc/nonadherence_to_prescribed_therapy_hcic_29_may_2017.pdf