



Policy Recommendations For Improving Medication Adherence

28 Oct 2009 [Click to Print](#)

A diverse group of health care and consumer organizations released five policy recommendations this week that are designed to promote better medication adherence and improved health outcomes for patients.

The group, which includes the American College of Cardiology, GlaxoSmithKline, the National Association of Chain Drug Stores, the National Consumers League and the Pharmaceutical Research and Manufacturers of America, focused their recommendations on the areas of quality improvement, care coordination, health information technology, patient/provider education and engagement, and health services research.

Although some of the recommendations have been the subject of discussion during the ongoing health care reform debate, and in fact have been reflected in some of the proposals under consideration, the recommendations are being released with an eye toward an ongoing and consistent commitment to improving health care - and health outcomes - in America.

According to a 2005 study published in the *New England Journal of Medicine*, an estimated one-third to one-half of all patients in the United States do not take their medications as prescribed. The impact of this non-adherence is costly in terms of both quality of care and medical expenses. In fact, recent research including work by the New England Healthcare Institute (NEHI) and a 2004 study published in *Medical Care* suggested that costs resulting from non-adherence may be as high as \$300 billion annually.

"Not only is poor medication adherence costly, but it also can be dangerous," said Sally Greenberg, Executive Director of National Consumers League. "Because patients don't take their medications for a variety of reasons, including side effects, misconceptions or fears about the medication, trouble with dosing, and costs such as co-pays, we need to employ a multitude of strategies to improve adherence. Our efforts are focused on identifying key opportunities to reduce barriers that keep patients from adhering to their medications."

The five recommendations were constructed, refined and finalized following a July conference with more than 40 medication adherence experts, including providers, patients, health plans, employers, and researchers. The dialogue was informed by research by the RAND Corporation, which conducted a review of the literature on

medication adherence to provide an evidence-base for the discussions, and by Avalere Health, which described lessons learned from here-and-now programs to improve medication adherence.

Walid Gellad, M.D., the lead RAND researcher on this review noted that, "Poor medication adherence is an enormous public health problem. Finding solutions to this problem should be part of health reform discussions now and in the future."

Each of the recommendations is supported by specific action items to help guide its implementation. To see the full recommendations, please [click here](#).

Quality Improvement - National quality improvement strategies should explicitly recognize medication adherence and appropriate medication use as critical components to improve health care quality and clinical outcomes.

Care Coordination - Proposals aimed at improving care coordination must recognize the important role that medications play in treating and managing illnesses.

Health Information Technology - Health information technology must improve the flow of timely and complete information between patients and providers, and enable providers and payers to identify and address gaps in patients' medication use.

Patient/Provider Education and Engagement - Strategies to improve medication adherence must fully engage patients, and patient-centered care must involve strategies to help them better understand their conditions and treatments. These efforts also must support providers in effectively communicating the importance of following treatment plans, and in providing medication support services to patients and caregivers.

Health Services Research - There is a need for additional research on medication adherence, including a focus on the effectiveness of a wider range of interventions to improve adherence, as well as an analysis of the diverse factors, behaviors, costs and consequences related to poor adherence.

"Medical adherence is a problem that should unite all providers, elected officials, pharmacists, insurers and pharmaceutical companies," said Jack Lewin, CEO of the American College of Cardiology. "Fifty percent of patients with heart disease are not taking their potentially life-saving medications, but it is our hope that recommendations like these will go a long way toward addressing this serious problem."

Source:

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References:

There are no references listed for this article.

Citations:

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Tom Murphy. "Policy Recommendations For Improving Medication Adherence."

Medical News Today. MediLexicon, Intl., 28 Oct. 2009. Web.

6 Feb. 2012. <<http://www.medicalnewstoday.com/releases/169004.php>>

APA

Tom Murphy. (2009, October 28). "Policy Recommendations For Improving

Medication Adherence." *Medical News Today*. Retrieved from

<http://www.medicalnewstoday.com/releases/169004.php>.

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