

Getting the most value from medicines

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Medicines may make the difference between life and death. That sounds very dramatic, but it is true. They may also make a significant difference in a patient's quality of life.

There are many factors that influence whether or not a patient gets the best outcome from medicine. Even if the development and production of the medicine were perfect, the storage conditions were ideal, the diagnosis was accurate, the most appropriate medicine was prescribed and acquired by the patient, the therapy will fail if the medicine is not used appropriately.

Compliance or adherence?

For years, the word compliance was used to describe whether or not the patient uses the medicine correctly. In other words, the patient complies with instructions given by the doctor, nurse, pharmacist or pharmacist's assistant. This is the equivalent of doing something because your mother tells you to do it – you have no choice!

It has however been recognised that patients have both rights and responsibilities. Patients must actively take responsibility for medicine use. It is their choice – take the medicine correctly and appropriately, or risk the consequences of not doing so. Adherence is therefore an active choice that the patient makes.

The consequences of non-adherence

Clearly, if the patient is non-adherent, the condition for which the medicine was prescribed is unlikely to improve. The patient's quality of life will remain unacceptable or may deteriorate. The condition may worsen, resulting in hospitalisation, with significantly increased financial costs. In the worst cases, the patient may die because the condition was not treated.

Reasons for non-adherence

From the patient's point of view, there are many reasons why they don't take their medicines correctly. In some cases,

medicine may not be accessible because patients don't have time, money or transport. The patient may not take the medicine because of side effects, ignorance of the benefits or may simply forget.

The healthcare provider may not have communicated adequately with the patient, or may just not have bothered to do so.

Improving adherence through education

Although it is the patient's choice, it is necessary to ensure that the patient fully understands the importance of using the medicine correctly as well as how and when to use it.

The patient should know what to expect when taking a medicine. When taking a medicine, the patient may experience three different sensations, which will influence whether he or she continues to take the medicine.

- The patient feels worse – this is often due to side effects so they stop taking the medicine.
- The patient feels better – they need to know when it is appropriate to stop using the medicine. If it is used for short term relief of symptoms, it is fine. If it is used to control a chronic condition, such as asthma or gout, the patient must understand that if the medicine is stopped, the symptoms will resume.
- The patient feels the same – this doesn't necessarily mean that the medicine isn't working. Some conditions, e.g. hypertension, don't have symptoms that are obvious to the patient.

In the elderly patient, non-adherence may not be the result of not knowing what to expect – it may simply be that the patient doesn't remember to take the medicine.

What can the pharmacist's assistant do about non-adherence?

While the pharmacist's assistant post basic scope of practice includes providing instructions regarding the correct use, there are other aspects that may be equally important.

Managing non-adherence is primarily the responsibility of the pharmacist, nurse or doctor, but the pharmacist's assistant will be able to help to minimise it. Many (if not all) pharmacist's assistants have built up a good relationship with patients. You may therefore hear or see something that indicates that the patient is not taking the medicine correctly. You may notice that the patient is late to collect chronic medicines. This opens the door for you to speak to the patient about it, or to refer the patient to the pharmacist or prescriber.

Pharmacist's assistants are able to suggest ways to remember to take medicines – using an alarm in the patient's cell phone is a simple but effective way of doing it. The sound of the alarm can be selected to indicate a unique reminder.

The introduction of sms reminders has also worked well to remind patients that they need to collect chronic medicines.

Pharmacist's assistants need to be alert to the possibility that a patient may not be adherent to the prescribed medicine regimen. When speaking to patients, always ask how they are – they may give you a clue that needs to be followed up on. If you can't handle it yourself, refer the patient to the pharmacist.

The pharmacist's assistant should use every opportunity to motivate the patient to take the medicine correctly – you can make a difference.

Further reading

- <https://www.amerisourcebergen.com/insights/pharmacies/nine-tips-for-medication-adherence>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5990186/>
- <https://catalyst.nejm.org/optimize-patients-medication-adherence/>