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a:care

ADHERENCE IS A COMPLEX BEHAVIOR

Practical individual interventions any healthcare professional can apply to detect and address non-adherence

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applied to Medicines
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Financial disclosure

I have presented talks for Abbvie, Bayer, Chiesi, Boehringer Ingelheim, Roche, Sandoz and Merck.

I have received a PhD research grant from Merck, and currently serve on the Behavioral Science Advisory Board for Sanofi.

Outline



Anticipating & preventing non-adherence

Since 50% of patients are likely to become non-adherent to long-term medication, there is considerable scope for trying to optimize uptake and early medicines use in the **initial prescribing** consultation by:

Checking patient's understanding of the treatment and why it has been prescribed for them (e.g., necessity beliefs; goodness of fit)

Eliciting and managing any early concerns/worries about the medicine(s)

Checking for any possible barriers to regular use (e.g., finance; access; daily routine etc.)

Working with the patient to develop an acceptable action plan


Detecting non-adherence

Since many patients are often reluctant to disclose non-adherence, particularly if the question is asked in a very direct way, you will be more likely to “uncover” non-adherence if you:

Ask about adherence in a non-blaming way (e.g., Engel et al, 2017)

Use a simple screener (e.g., Weinman et al, 2018) or adherence self-report (Chan et al, 2020)

Use SPUR tools provided by a:care (De Bock, 2022)

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Making Medicines Work for You





- This questionnaire is for people who are prescribed medicines or for people who are responsible for making sure another person takes their medicine (e.g. a parent, partner).
- It is quite common that people don't take medicines as prescribed. For example, they might forget, take more or less, or stop and start. We want to help you find a way of taking your medicines that works for you.
- The questions below are to help you think about how you are finding your medicines.
- Your answers will help your doctor, nurse or pharmacist understand what's important to you.

You and your medicines
Please look at each of the 7 items below and tick any that apply to you.

	Please tell us which medicine(s) you are thinking of?
1. My medicine(s) is/are difficult to use or take	<input type="checkbox"/>
2. I can't manage so many medicines	<input type="checkbox"/>
3. I am not sure if the medicine(s) is/are really helping me	<input type="checkbox"/>
4. I have some worries about using the medicine(s)	<input type="checkbox"/>
5. I sometimes forget to use the medicine(s)	<input type="checkbox"/>
6. I can't afford either the time or the money to get the medicine(s)	<input type="checkbox"/>
7. I've found my own way to use the medicine(s) that suits me	<input type="checkbox"/>
8. Do you have any questions or things you'd like to discuss about your medicines today?	

What next?

- You can share your answers with your doctor, nurse or pharmacist when you go into your appointment.
- They will ask you more about any issues you have identified
- They may suggest different medicines, help you learn more or make suggestions for getting more out of your medicines.

  Guy's and St Thomas' and Maudslayi  King's College Hospital  South London and Maudslayi and Maudslayi

- Engel T, Ungar B, Ben-Haim G, Levhar N, Eliakim R, Ben-Horin S. (2017) Re-phrasing the question : A simple tool for evaluation of adherence to therapy in patients with inflammatory bowel disease. *United European Gastroenterology Journal*, 5, 6, 880 – 886
- Weinman, J., Ali, I., Hodgkinson, A., Canfield, M., & Jackson, C. (2019). Pilot testing of a brief pre-consultation screener for improving the identification and discussion of medication adherence in routine consultations. *Patient preference and adherence*, 13, 1895.
- Chan, A. H. Y., Horne, R., Hankins, M., & Chisari, C. (2020). The medication adherence report scale: a measurement tool for eliciting patients' reports of nonadherence. *British journal of clinical pharmacology*, 86(7), 1281-1288.
- De Bock, E., Dolgin, K., Kombargi, L., Arnould, B., Vilcot, T., Hubert, G., ... & Reach, G. (2022). Finalization and Validation of Questionnaire and Algorithm of SPUR, a New Adherence Profiling Tool. *Patient preference and adherence*, 16, 1213.

Basic adherence support strategies

- If cause(s) of your patient's non-adherence are known – target these with appropriate **behavior change technique** (e.g., information about consequences; reminders; prompts; feedback; pros and cons etc.)

- If cause(s) are not known
 - Use an **implementation intention** approach to enable patient to choose **when, where and how** meds will be taken – to establish a daily routine
 - Encourage **self-monitoring**
 - Enable **problem-solving** to deal with barriers

- Arrange follow-up to check on progress and/or identify new barriers

Digital adherence support strategies

Educational tools



Awareness on
non-adherence



Adherence training
— C.A.R.E by KCL

Interventional tools



SPUR™



my a:care app



Improving
medication
adherence

Educational tools

Supporting medication adherence with C.A.R.E. Training on adherence by KCL

- Abbott is proud to partner with King's College London through an unrestricted educational grant to facilitate training and access to educational materials for doctors from emerging countries interested in non-adherence
- There is a significant skills and knowledge gap in this area, with clinicians being unaware of the extent of non-adherence and unsure how to recognize or address it during routine consultations
- This unrestricted educational grant will support training activities provided by the Centre for Adherence Research and Education



Non-adherence is a complex issue that can't be fixed with simple solutions

Please learn more about the training from your contact person in Abbott or go to local [acarePRO](#) website

Interventional tools

“my a:care” digital mobile app

SPUR™
(Social, Psychological,
Usage, Rationale)

A tool based on behavioral science to empower patients to take charge of their health

A next-generation patient profiling algorithm enabling health care professionals to go beyond a patient's symptoms and adapt their approach based on what will be perceived as meaningful by their patient

Introducing SPUR™

SPUR™ is a service created to encourage adherence in two important ways¹

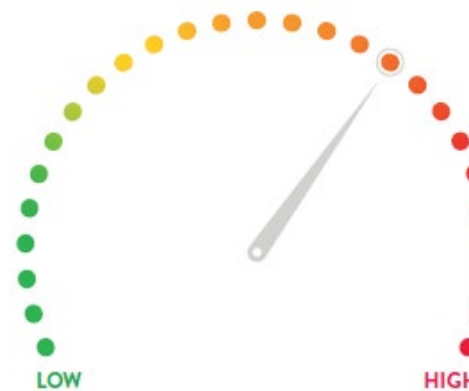
- SPUR™ helps healthcare professionals to identify patients at risk of being non-adherent
- SPUR™ provides feedback and strategies that can be discussed with their patient to help improve their adherence

SPUR™ is a specially developed short questionnaire that can be used to profile patients for adherence risk whilst also identifying the drivers behind that risk

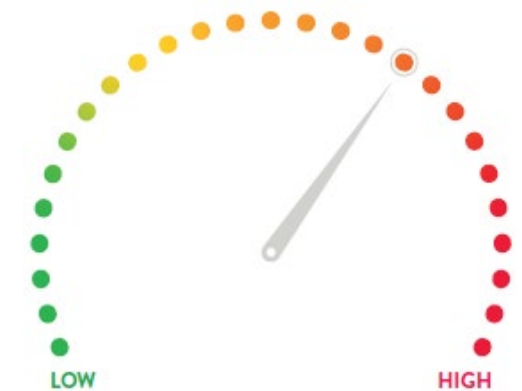
SPUR™ delivers

- A tool to measure non-adherence behavior
- Indicates the potential for non-adherence and identifies the patient-specific drivers of non-adherence
- Offers guidance on the level of support that the patient requires

Non-adherence risk

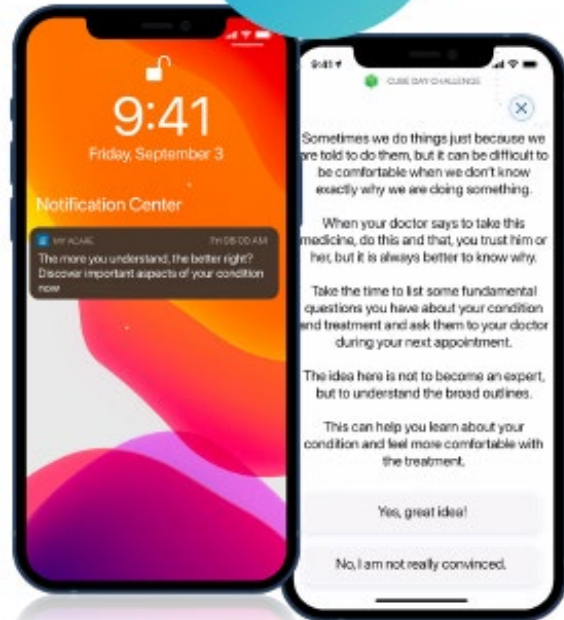


Support need



The my a:care app is a personal digital coach

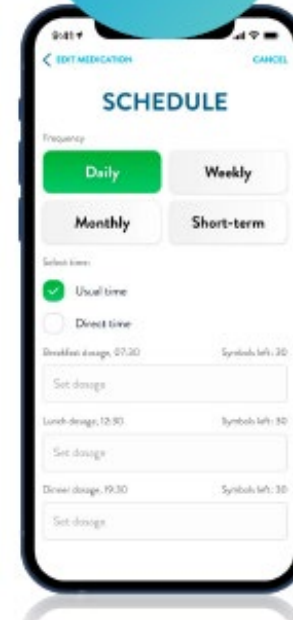
MOTIVATION IS
ENCOURAGED



PROGRESS IS
ENCOURAGED



DAILY SUPPORT
IS OFFERED



PROGRESS IS
TRACKED



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app puts
control in
their hands**

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- Available for both Apple and Android devices
- Personal privacy is safeguarded

**Encouraging
adherence to improve
health outcomes**

