# More than a Spoonful of Sugar to Make the Medicine Go Down? Psychological Factors in Adherence

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# WHO (2003)

"the extent to which a person's behaviour -

taking medication, following a diet, and/or executing lifestyle changes,

corresponds with agreed recommendations from a health care provider"

# WHO (2005)

"the magnitude of medication nonadherence is so alarming, more health benefits worldwide would result from improving adherence to existing treatments than developing any new medical treatments"

# How hard can it be to take a pill?

- Multiple-step pathway:
  - 1) keep a scheduled appointment with a provider;
  - 2) accept a prescription for a medication;
  - 3) fill the prescription at a pharmacy;
  - 4) take the medication as prescribed;
  - 5) maintain an adequate supply of the medication by refilling the prescription in a timely manner;
  - 6) return to the provider for on-going monitoring.

### Failing to adhere...

#### • <u>Unintentional</u>:

Unplanned behaviour, less strongly associated with beliefs....

e.g., forgetting.

#### Intentional:

Decision to not take after weighing up perceived benefits and costs.

#### AIM to Adhere

- Articulate the adherence goal
- Identify barriers in reaching the goal
- Make a plan to overcome barriers.

#### Unintentional Non-Adherence

#### **Problem**

Forgetting

 Not understanding or confusion

#### Assistance in the form of...

- Dosset boxes
- Reminders / prompts
  / cues / pairing of activities

 Education / simplification, reduction of pill burden

## Help with remembering

- When do you do it? How do you remember?
- How do you usually remind yourself?
- What do you think about when you know it is time to take meds?
  - When do you forget?
  - Do you take meds when doing other things?
- Do you think reminders would be helpful?
- Ways to remind yourself; Prompts / Cues???
- Barriers?

# But... Intentional non-adherence is different

# Recall: Decision made after weighing up perceived benefits and costs.

- Belief driven
  - E.g. Concepts of illness; of health; of the value of the medication itself
  - Locus of control
- Evaluative
- NOT NECESSARILY A CONSCIOUS CHOICE

# Value of adhering?

- Looking for costs and benefits
- Think about short term vs long term

Short term benefits	Long term benefits
Short term costs	Long term costs
REALLY EASY TO FIND	

#### Health Beliefs

- Attitude of the individual
  - Am I susceptible
  - Is the disease / illness / condition serious
  - Following advice will make a difference (locus of control)
  - Following the advice gives me more than it costs
- Attitude of the individual's 'norm group'

# "Poisons and Medicines are Oftentimes the SAME substance given with different intents" Anon

# Plan for coping with side effects of medication and medical regime

- Experiencing side effects?
  - What kind?
  - What do you think causes them?
- Have they gotten in the way?
  - What have you done about them?
  - Have you talked to your Dr about them?
- Plan [to overcome the barrier]

#### Health Beliefs

• Attitudes of other health professionals involved in that person's care

# Professional's Messages

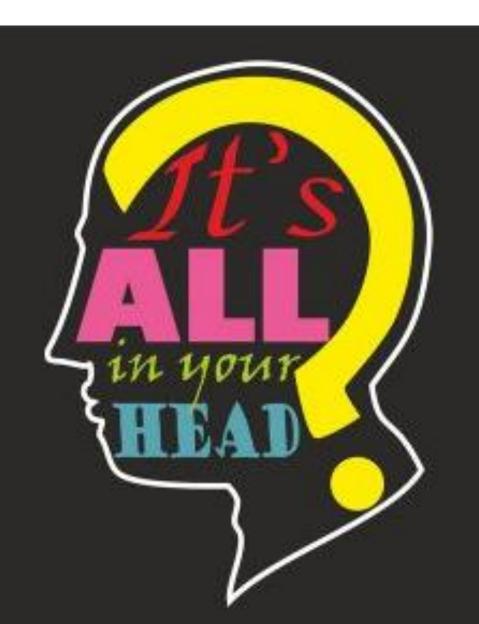
- From the prescriber:
- We'll trial this first and see how it goes. Pharmac says we need to start with this one first...
- Make an appointment for next week on your way out
- It's only a generic...

- From other health professionals
- "oh, I've never seen that medication used for that before"
- I don't know why they gave you that one
- Your doctor has prescribed this medication because...[ wrong reason/condition]

#### So let's talk about... Chronic Pain

- Patients and medical staff often disagree about:
  - Meaning / source / representation / management of pain
- Agree that treatment is:
  - time-consuming, frustrating, distressing, often ineffective
- Need reciprocal trust for patient and treatment provider
- PATIENTS ARE TOLD...

No physical evidence... Central nervous system sensitisation... which really means...



#### Amitriptyline

- Patients remember their granny, or mother, taking it and being out of their tree...
- Traditionally used for MOOD difficulties

#### Medsafe data sheet

- Amitriptyline is a potent antidepressant with sedative properties.
- http://www.medsafe.govt.nz/profs/Datasheet/a/Amiroltab.pdf

### Health Beliefs

Perception of ability to do "it"

# We try but...

- What's the point
- Never get the hang of this
- Only feel worse not better
- No effect of non-adherence
- Blown it now so may as well give up
- Etc etc etc

### Prepare for slips, prevent relapse

- Remember, slip ups happen! They are normal
- How would you feel if you didn't take your meds, or exercise, or \_\_\_\_\_\_, due to illness or forgetfulness, running out, or whatever?
- What thoughts keep you from starting again if you have a slip?
  - Hopeless, no point, useless, give up, never do it
- Expect the unexpected
- Review and revise as necessary
- Treat lapses as learning opportunities