

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

Leigh Anderson, Ph.D.
Clinical Psychologist
FNZCCP

DrLeighAnderson@gmail.com

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 non-adherence 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...

- Unintentional:
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

- **A**rticulate the adherence goal
- **I**dentify barriers in reaching the goal
- **M**ake 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