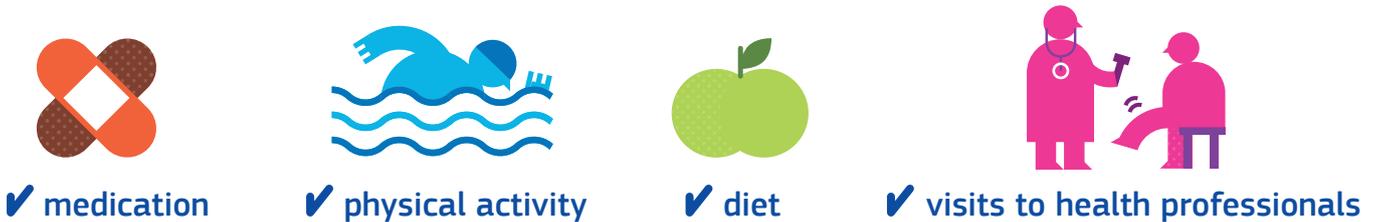


Adherence to medical plans for older people

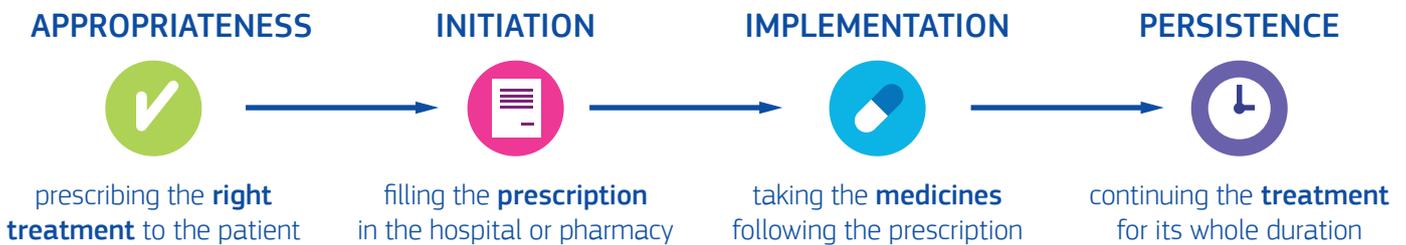
A European Innovation Partnership on Active and Healthy Ageing priority

WHAT IS ADHERENCE?

Adherence is the extent to which a person's behaviour corresponds with **agreed recommendations** from a healthcare professional. It encompasses:



The overall adherence process consists of:*



*e.g. when taking medicines

WHAT HAPPENS IF PATIENTS DO NOT ADHERE TO THEIR MEDICAL PLANS?



Consequences for patients

- ✓ potential harm or little clinical benefit
- ✓ risks due to additional prescribing
- ✓ development of resistance to therapy (e.g. antibiotics)



Consequences for the healthcare system

- Increased health costs due to:
- ✓ the cost of initial care service
 - ✓ medicines dispensed but not used
 - ✓ increased use of health services in cases of worsening of symptoms

WHY ARE WE WORKING ON ADHERENCE...

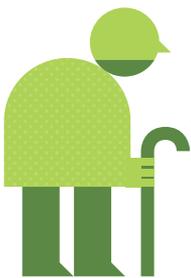
ONLY 50% of patients typically take their medications as prescribed

NEARLY 200,000 premature deaths per year among Europeans are related to non-adherence

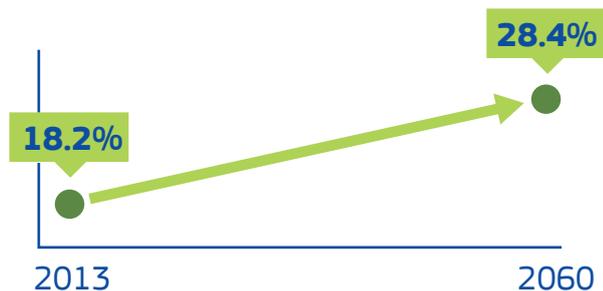
"Increasing the effectiveness of adherence interventions may have a far greater impact on the health of the population than any improvement in specific medical treatments"

WHO report on adherence to long-term therapies
Costing statement: Medicines adherence, NICE

... IN AN AGEING POPULATION?



Share of population **over 65** is increasing in OECD countries:



Eurostat

- ✓ **Multimorbidity**, the co-occurrence of multiple diseases, affects **more than half of the elderly population**
- ✓ **Polypharmacy**, the simultaneous use of multiple medicines by a single patient, for one or more conditions, is common in older people: **40% of people aged 65 and over** consume between five and nine medicines per week

WHY DO PATIENTS NOT ADHERE TO THEIR MEDICAL PLANS?

Non-adherence can be motivated by several factors:



Health illiteracy (lack of understanding of one's condition and significance) and health beliefs



Access to healthcare (e.g. cost of medication, geographical availability)



Forgetfulness



Misunderstanding of prescription instructions



Complex regime (high number of medicines taken at different times) or restrictive precautions (e.g. no alcohol or cheese)



Adverse effects (real or imagined)



Reduction, fluctuation or disappearance of symptoms

HOW ARE WE IMPROVING ADHERENCE TO MEDICAL PLANS IN OLDER PEOPLE?

The European Innovation Partnership on Active and Healthy Ageing (EIP on AHA) supports public and private actors across the EU to improve adherence to medical plans through a multidisciplinary approach that impacts upon each step of the **patient's journey through the healthcare system**.



PROBLEMS ENCOUNTERED

- System works in silos
- Prescriptions not cross-checked

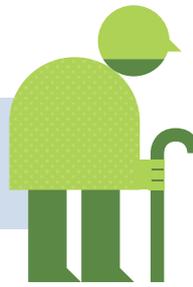


- Patient misunderstands the health problem or prescription instructions

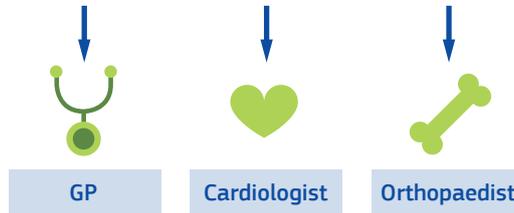
- Patient forgets to take medication
- Patient has a complex medication regime
- Patient misunderstands prescription instructions
- Patient has an adverse drug reaction

- More knowledge and evidence needed on adherence related issues, especially in polymedicated patients
- Need to identify most effective interventions

Old person with several conditions



Visits to different healthcare professionals (HCP)



Prescription of several drugs, physical activity & nutrition advice



Focus on prescription of drugs

Patient fills in prescription of drugs at hospital or community pharmacy



Patient seeks assistance in case of problems with medication

H hospital + pharmacy




WORK UNDERTAKEN BY THE EIP ON AHA

- **Electronic prescription**
- Collaborative **digital platforms** between HCP
- **Integrated care** approaches
- **Decision-support tools** for appropriateness of prescription (e.g. guidelines, dispensing protocols, risk stratification)
- Patient **electronic health records**
- **Training programmes** for HCP

- **Health literacy and lifestyle interventions** (including ICT tools) around medicines, physical activity & nutrition
- **Medication review** for appropriateness of prescription
- Web-based **social platforms**
- Information and counselling campaigns

- **Electronic devices** and alert systems
- Age-friendly medicines and **packaging** (e.g. Personalised Dosage Systems)
- **Adherence monitoring** platforms for HCP
- **Medication review** and reconciliation protocols
- **Pharmacovigilance tools**

- **Indicators/algorithms** on appropriate prescription, adherence measurement, polypharmacy
- **Scientific studies** on adherence related issues
- **Data repositories**
- **Cost-effectiveness** and intervention analyses

The European Innovation Partnership on Active and Healthy Ageing (EIP on AHA)

The European Innovation Partnership on Active and Healthy Ageing (EIP on AHA), set up in 2012, gathers stakeholders at EU, national and regional level from the public and private sector across different policy areas. Together they share knowledge and expertise on common interests and engage in activities and projects to find innovative solutions that meet the needs of the ageing population.

Under the framework of the EIP on AHA, the Action Group on adherence to medical plans works to improve the quality of life and health outcomes of older people by supporting patient adherence to care plans while empowering them and delivering improvements in the healthcare system.

<https://webgate.ec.europa.eu/eipaha/>

