

8 reasons patients don't take their medications

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Medication nonadherence—when patients don't take their medications as prescribed—is unfortunately fairly common, especially among patients with chronic disease. When this is the case, it is important for physicians and other health professionals to understand why patients don't take their medications. This will help teams identify and improve patients' adherence to their medications.

If you don't have a true picture of a patient's medication-taking behavior, you may needlessly escalate their treatment, resulting in potential harm to the patient, unnecessary work for the practice and increased costs overall.

Most nonadherence is intentional with patients making a rational decision not to take their medicine based on their knowledge, experience and beliefs. These are the top eight reasons for intentional nonadherence.

Fear

Patients may be frightened of potential side effects. They may have also experienced previous side effects with the same or similar medicine. Additionally, patients report not taking their medication because they may have witnessed side effects experienced by a friend or family member who was taking the same or similar medication. From seeing those side effects experienced by someone else, it may have led them to believe the medication caused those problems.

Uncover four keys to addressing high BP and stroke among your black patients, including medication nonadherence due to side effects.

Cost

A major barrier to adherence is often the cost of the medicine prescribed to the patient. The high cost

may lead to patients not filling their medications in the first place. They may even ration what they do fill in order to extend their supply.

To overcome this, check that the drug you're prescribing is on the patient's insurance formulary. Selecting and prescribing a medication known to be on a discount list can decrease the cost regardless of insurance.

Discover how a game plan for medication adherence starts with building trust.

Misunderstanding

Nonadherence can also happen when a patient does not understand the need for the medicine, the nature of side effects or the time it takes to see results. This is especially true for patients with chronic illness—taking a medication every day to reduce the risk of something bad happening can be confusing.

Learn more from the AMA about what to do when patients won't take their meds.

Too many medications

When a patient has several different medicines prescribed with higher dosing frequency, the chances that they are nonadherent increase. Physicians can try to simplify a patient's dosing schedule by adjusting medicines so they can be taken at the same time of day. Choosing long-acting drugs can also help if the dosing burden is too complex. Additionally, if possible, consolidate medicines by using combination products.

Here are seven steps to cut your practice's medication management burden.

Lack of symptoms

As stated above, nonadherence might occur when there is a lack of symptoms. Patients who don't feel any different when they start or stop their medicine might see no reason to take it. Additionally, once a patient's condition is controlled, they may think the problem has resolved and may discontinue using the medication. It is important to inform your patient that they may need to take the medicine for a long time.

Mistrust

There has been news coverage of marketing efforts by pharmaceutical companies influencing physician prescribing patterns. This ongoing mistrust can cause patients to be suspicious of their doctor's motives for prescribing certain medications.

Learn how building patient trust can support medication adherence.

Worry

If a patient is concerned about becoming dependent on a medicine, it can also lead to nonadherence. One way to overcome this is to improve patient-physician communication. Inadequate communication can account for 55% of medication nonadherence, making it important to understand the patient's rationale for nonadherence, according to an AMA STEPS Forward™ module on medication adherence.

Depression

Patients who are depressed are less likely to take their medications as prescribed. Physicians and other health professionals may be able to uncover this by sharing issues and asking if the patient can relate to it. To reduce embarrassment, express that many patients experience similar challenges.

Learn more through the AMA's STEPS Forward open-access modules which offer innovative strategies that allow physicians and their staff to thrive in the new health care environment. These courses can help you prevent physician burnout, create the organizational foundation for joy in medicine and improve practice efficiency.

The CME module, "Medication Adherence," is enduring material and designated by the AMA for a

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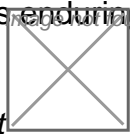
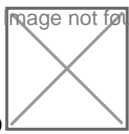


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