

Use of mail-order pharmacies use could improve patients' medication adherence

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(PhysOrg.com) -- Researchers found that 85 percent of patients who received their medications by mail stuck to their drug regimen, compared with 77 percent of those who used traditional pharmacies.

Buying medicine by mail may encourage patients to stick to their doctor-prescribed medication regimen, new research suggests.

In a first-of-its-kind study, researchers from UCLA and Kaiser Permanente's Division of Research in Oakland, Calif., found that patients with diabetes, high blood pressure and [high cholesterol](#) who ordered their medications by mail were more likely to take them as prescribed by their physicians than patients who obtained medications from a local pharmacy.

The study findings appear in the online edition of the [American Journal of Managed Care](#).

"The field of medication adherence research typically focuses on patient factors for poor adherence, leading to a 'blame the patient' approach for non-adherence," said Dr. O. Kenrik Duru, the study's lead researcher and an assistant professor in the division of general internal medicine and health services research at the David Geffen School of Medicine at UCLA.

"Our work helps to place this issue in a larger perspective," Duru said. "Our findings indicate that mail-order pharmacies streamline the

medication-acquisition process, which is associated with better medication adherence."

For the 12-month study, researchers analyzed medication refill data from 2006 and 2007 for 13,922 Kaiser Permanente members in Northern California. They defined "good adherence" as having medication available and on-hand at least 80 percent of the time.

The researchers found that 84.7 percent of patients who received their medications by mail at least two-thirds of the time stuck to their physician-prescribed regimen, compared with 76.9 percent of those who picked up their medications at traditional "brick-and-mortar" Kaiser Permanente pharmacies.

"The results were consistent for all three classes of medication, including medications to control diabetes, [high blood pressure](#) and high cholesterol," said co-investigator Julie A. Schmittdiel, Ph.D., a research scientist with the Kaiser Permanente research division.

Other findings include:

-- Before adjusting for other variables, white patients were more likely than Hispanics to obtain medications by mail (61.0 percent vs. 37.1 percent) and to be in the highest socioeconomic status quartile (27.5 percent vs. 17.8 percent).

-- Mail-order pharmacy users were more likely than local pharmacy users to have a financial incentive to fill their prescriptions (49.6 percent vs. 23.0 percent) and to live a greater distance from a local pharmacy (8.0 miles vs. 6.7 miles). An example of a financial incentive is receiving a three-month supply of medication for the cost of a two-month supply.

-- After adjusting for other variables, whites were more likely to use

mail-order pharmacies (24.1 percent) than were Asian/Pacific Islanders (8.4 percent), Hispanics (5.2 percent), African Americans (4.0 percent) and individuals of mixed race (8.0 percent).

While other research has examined the association between medication costs and mail-order and local pharmacies, this is the first study to look at the relationship between pharmacy type and [medication adherence](#). Furthermore, it controls for differences in out-of-pocket costs and medication supply (by number of days) between mail-order and local pharmacy users, something other datasets have not included.

"In other words, our study is able to isolate the use of mail-order pharmacies specifically, without the results being affected by differences in cost or in the number of pills provided with each dispensing," Duru said.

The study does have some limitations. For example, the findings need to be confirmed by a randomized controlled trial.

Still, the research suggests that increased mail-order use to obtain medications could improve patients' adherence.

In addition to Duru and Schmittziel, researchers included Wendy Dyer, Melissa Parker, Connie Uratsu, James Chan and Andrew J. Karter of the research division at Kaiser Permanente Northern California.

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