

Program helps heart patients stick with meds after leaving hospital

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Study found more took their pills as directed if they got personal attention from a pharmacist, reminders.

(HealthDay)—People who are hospitalized for a heart attack or angina are more likely to take their medication properly once they leave the hospital if they receive personal attention from a pharmacist, new research indicates.

One-third of these [heart patients](#) typically stop taking at least one of their medications just one month after being discharged from the hospital. But the researchers found cost-effective programs that include patient education, collaboration between doctors and pharmacists, and voicemail reminders can help more patients stick to their treatment plans.

The study looked at 241 patients from four U.S. Department of Veterans

Affairs medical centers across the United States. The researchers, led by Dr. P. Michael Ho, of the Denver VA Medical Center, randomly assigned the patients to receive typical care or a personalized care program. The program included counseling with a pharmacist, information about their treatment and reminders to take their medication.

In the year after patients were discharged from the hospital, the researchers tracked how many followed their treatment plan. In addition, the patients were checked to see how many had [blood pressure](#) and [cholesterol levels](#) within a set target range.

The investigators found that only 74 percent of the patients who received typical care followed their treatment plan compared with over 89 percent of those who were in the personalized care program.

However, there was no difference between the two groups in the percentage who had blood pressure and cholesterol levels that were in the desired target range.

The study was published online Nov. 18 in the journal *JAMA Internal Medicine*.

The personalized care program cost roughly \$360 per patient, the study authors noted.

The researchers pointed out that more studies are needed to understand the impact of helping patients adhere to their treatment plans.

For [patients](#) who already have high rates of taking of their medications, providing a personalized treatment plan for three to five years, or even longer, may not really improve outcomes, *JAMA Internal Medicine* editor Dr. Rita Redberg noted in a journal news release.

"Before recommending investment in this strategy, it would be prudent to know that patient outcomes will actually improve," Redberg said.

More information: The American Heart Association has more about [acute coronary syndrome](#).

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