

Adults who struggle to follow heart medication regimens should focus on behavior change

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Unlike some conditions, heart failure must be managed by patients taking prescriptions for the rest of their lives. Individuals who do not take their heart medication as prescribed have increased risks of mortality and hospitalization and higher health care costs. Numerous interventions have been designed to increase patients' adherence to medications; yet, no research has determined what intervention techniques are most effective. Now, a University of Missouri researcher found that interventions to encourage patients to take their medications as prescribed were most effective when focused on changing the behavior of patients rather than the behavior of health care providers.

"Previous research has shown that 50 percent of <u>patients</u> who take medications long term do not take them as prescribed," said Todd Ruppar, assistant professor in the MU Sinclair School of Nursing. "This study helps identify aspects of different interventions that contribute to better patient outcomes so that more effective interventions can be developed."

Ruppar and his colleagues compared characteristics of 29 medication adherence interventions for individuals who were not taking their heart medication as prescribed. The researchers found that interventions directed at <u>health care</u> providers or education-based interventions that focused on teaching individuals about their medications were less effective than interventions that focused on changing the behavior of



patients.

"These findings reinforce the need for <u>health care professionals</u> to maintain a patient-centered focus when developing strategies to improve <u>heart failure</u> medication adherence," Ruppar said. "Medication adherence has to be a team effort. Many different reasons exist to explain why individuals are not taking their medications as prescribed; health providers must consider all of these reasons."

Health providers also must improve their skills for addressing nonadherence to medications with their patients, Ruppar said.

"Heart disease is a consistent top-killer in the U.S. and medication is essential to managing individuals' conditions and controlling their risks for problems such as heart attacks, strokes and kidney disease," Ruppar said. "Medication adherence is essential to reducing the risks associated with this disease."

Ruppar says individuals who skip medication doses, take more or less than what is prescribed, or stop taking their medications too soon experience the side effects and costs of their medications without receiving the health benefits.

Ruppar suggests individuals who struggle to take their medications consistently should try associating taking their medication with an already established routine such as brushing their teeth. Ruppar says seven-day pill organizers can also help patients ensure that they have taken their medications for the day.

In the future, Ruppar hopes to look at how <u>medication adherence</u> influences re-hospitalization and mortality of patients.

The study, "Medication adherence interventions for heart failure



patients: A meta-analysis," was published in the European Journal of Cardiovascular Nursing.

Provided by University of Missouri-Columbia

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