A new study has found that offering patients financial incentives to take their antipsychotic medication is effective. When the incentives stop, there is no continued benefit but no long term negative effect either.

Across all fields in medicine, there is the common problem that patients may not take their medication as regularly as prescribed. For patients on antipsychotic medication this can lead to relapses with voluntary and involuntary hospitalisation. A range of different treatments have been tested to try and improve medication use and avoid these problems, but hardly anything has been shown to be effective.

A new study, funded by the National Institute for Health Research (NIHR) and led by Professor Stefan Priebe, from the Unit of Social and Community Psychiatry, Queen Mary University of London, has trialled using financial incentives to help patients take antipsychotic medication more regularly. Patients were offered £15 when they took an injection of a depot medication, which happens between once and four times per month.

The trial included patients with psychotic disorders treated in mental health teams in the community in England and compared results with treatment as usual. The study offered the money for one year and then continued to assess patients for the following two years.
Results, published in the *BMJ Open* demonstrated that whilst offering incentives for each depot injection significantly increased patients' use of prescribed medication during the year, there were no significant statistical differences when patients were assessed at 6 and 24 months after the incentives stopped.

Lead author Professor Stefan Priebe from Queen Mary University of London said: "Adherence to antipsychotic medication is problematic and nothing has been shown to improve it yet. This is the first trial in the world looking at financial incentives to solve this problem, and it has provided a clear result; that financial incentives work, for as long as they are provided, and there is no evidence for negative implications over the long-term.

"We're all exposed to financial nudging every day, from taxes to reduce alcohol and tobacco consumption to congestion charges to discourage people from driving in urban areas. Although it may be considered somewhat controversial, giving some patients real financial incentives to adhere to their medication is a new, simple and straightforward method to improve treatment for a challenging group of patients - estimated to be no more than 1,800 in the UK at any point of time."


Provided by Queen Mary, University of London

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