

90-day prescriptions lead to better blood pressure outcomes in children

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A new study by pediatric researchers at the University of Rochester Medical Center (URMC) found that children take their hypertension (high blood pressure) medication more consistently when they receive a

90-day prescription fill from the pharmacy rather than a 30-day one, resulting in improved health outcomes.

The study, [published](#) in the journal *Pediatric Nephrology*, tracked 449 [pediatric patients](#) with hypertension over three years and compared prescribed days per fill to dispensed days using pharmacy and insurance data. Seventy percent of participants were prescribed a 90-day supply at least once, but only 37 percent received it from the pharmacy. There was no difference in prescription likelihood between insurance types (public vs. private), but patients with public insurance were less likely to receive the full 90 days.

Patients receiving 90-day fills showed better medication adherence (77.5% vs. 58.1%) and were more likely to achieve hypertension control as assessed by providers.

"In pediatric hypertension, adherence is a significant issue," said Meghan M. McLaughlin, M.D., co-author and pediatric nephrology fellow at UR Medicine's Golisano Children's Hospital (GCH). "Patients often miss doses or stop taking their medication altogether. There are many reasons a patient may not take medication, and some of these obstacles include difficulty getting to the pharmacy or struggling with copays. 90-day fills can help with these modifiable barriers."

Ten percent of teenagers with obesity have hypertension, and both children and teens with [hypertension](#) face poor adult [health outcomes](#), including increased risk of heart attacks and strokes. McLaughlin emphasized the importance of more 90-day prescriptions for better adherence to ensure long-term health.

The Centers for Disease Control (CDC) and Medicare now recommend 90-day fills for chronic medications, but support is lacking for Medicaid patients. Although doctors frequently prescribe 90-day fills, pharmacies

often dispense only 30 days, especially for Medicaid-insured children.

"Our key finding is that children with public insurance encounter numerous challenges, including limited access to 90-day fills," noted McLaughlin. "Advocacy efforts nationwide are necessary to align Medicaid policies with CDC and Medicare recommendations."

She highlighted recent progress with the opening of NYRx, a central Medicaid pharmacy program in New York State in April 2023, which improves 90-day fill access for children on Medicaid.

More information: Meghan M. McLaughlin et al, Medication fill duration in pediatric hypertension: adherence, blood pressure control, and disparities, *Pediatric Nephrology* (2024). [DOI: 10.1007/s00467-024-06363-z](https://doi.org/10.1007/s00467-024-06363-z)

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