

Title: NONCOMPLIANCE WITH ANTIHYPERTENSIVE MEDICATIONS: DOES AN INTERDISCIPLINARY REFILL REMINDER PROGRAM MAKE A DIFFERENCE?

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Objective: To demonstrate differences in medication adherence to amlodipine therapy among people who received interdisciplinary refill reminders, refill reminders with no interdisciplinary focus, and no reminders at all. **Method:** Participants: A total of 12,016 patients age 18 or older who filled a new prescription for amlodipine. Setting: More than 1,500 community pharmacies nationwide. Data were from computerized pharmacy records. Design: Participants were randomized into three protocol groups: Protocol A (n = 1,158) received interdisciplinary reminders; Protocol B (n = 1,145) received similar reminders without interdisciplinary focus; and Protocol C (n = 9,713) received no intervention (control group). Since the design included an unequal sample size among the groups, a general linear model analysis was used. On average, Protocol A and B received 5.48 and 5.46 interventions respectively. The mean age for Protocol A, B, and C were 68.88, 68.05, and 65.05 respectively. All groups had previous experience with the similar type of program to the same extent. **Results:** Both intervention groups performed superior to the control group over a period of 12 months. There were interactions of age and previous experience level with protocols. Within the protocols A and B, the low age groups obtained more days of therapy compared to the control group (P<.002 and P<.03) respectively. The difference in days of therapy obtained among Protocol A and B was not statistically significant. The impact of the interventions was greater among the participants with no previous experience. Within Protocols A and B, 21.42% and 18.60% of participants, respectively, completed their first prescription including all the prescribed refills and obtained a second prescription compared to 11.38% of the control protocol. **Conclusions:** Groups that received interventions obtained more days of therapy compared to the no intervention group. The interdisciplinary reminder group performed slightly better than the group with no interdisciplinary focus. This study clearly shows that interventions do impact medication adherence. The impact of interventions varies with age and experience level.

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