

Title: IMPACT OF POPULATION-BASED ADHERENCE PROGRAMS ON IMPROVING FLUTICASONE / SALMETEROL INHALATION DISC USE

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Objective: To demonstrate the impact of adherence programs and differences in medication adherence to fluticasone / salmeterol therapy among people who received mailed reminders before the refill due date, after the refill due date, reminders with positive reinforcement, and no reminders at all. **Method:** Participants: A total of 31,278 patients age 18 or older who filled a new prescription for fluticasone / salmeterol. Setting: More than 1,600 community pharmacies nationwide. Data were from computerized pharmacy records. Design: Participants were randomized into four protocol groups: Protocol A (n = 8,171) received reminders before the refill due date; Protocol B (n = 8,217) received reminders after the refill due date every time they were late to pick up a refill; Protocol C (n = 8,314) received reminders with positive reinforcement messaging; and Protocol D (N=6,576) received no interventions (control group). On average, Protocol A, B, and C received 4.69, 2.09, and 2.67 interventions respectively. **Results:** On Average, the groups that received interventions obtained 9.18 more days of therapy compared to the control group over an average period of 5.5 months (P<.0001). Of the intervention groups, Protocol A performed best, obtaining 90.26 days of therapy compared to the control group which obtained 80.20 days of therapy and Protocol B performed worst, obtaining 88.13 days of therapy (P<.0001). Overall, the 53-67 age group had the best performance, picking up 11.4 more days of therapy compared to the control group (P<.0001). **Conclusions:** In general, groups that received interventions obtained more days of therapy as compared to the control group which received no interventions. The group that received refill reminders before the refill due date, performed slightly better than the other intervention groups. This study clearly shows that interventions do impact medication adherence. The impact of interventions varies with the type, timing and frequency of messages.

This abstract was presented at the APhA Annual Meeting in March 2003. It was published in the March/April 2003 issue of the *Journal of the American Pharmacists Association* (*J Am Pharm Assoc.* March/April 2003;43(2):281).