

# Barriers to Compliance

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# What is compliance?

Compliance (adherence) can be defined as the extent to which patients follow the instructions they are given for prescribed treatments.

Typical adherence rates for prescribed medications are about 50% with a range from 0% to over 100%

# System level

- Access to medicines
- Affordable prices
- Reimbursement & co payment schemes
- Patient Information Leaflets (PILs)

# Prescriber level

- Rational drug prescribing:
- Appropriate
- Effective
- Safe
- Economic

# Patient level: non compliance

- Prescription not dispensed
- Medicine not taken at all
- Self regulation of medicine taking
- Under consumption more common than over consumption
- Intentional and unintentional non compliance

# Barriers to compliance

- Social and economic factors
- Health care team and system related factors
- Condition related factors
- Therapy related factors
- Patient related factors

# Factors associated with poor compliance

- Complex regimens
- Higher rates of adverse side effects
- Patients' concerns about medicines
- Cognitive or physical impairment
- Illness denial

# Impact of non compliance

- Patients do not obtain full benefits of treatment
- Greater use of health services
- Drug resistance
- Wastage
- Non compliance may sometimes be beneficial



# Interventions for helping patients to follow prescriptions for medications

- Almost all the interventions that were effective for long term care were complex
- They included combinations of more convenient care, information, counselling, reminders, self-monitoring, reinforcement, family therapy and other forms of additional supervision or attention

# Interventions

- Even the most effective interventions did not lead to large improvements in adherence and treatment outcomes

# Haynes et al 2001

- Because the results could be applied so broadly, effective ways to help people follow medical treatments would have far larger effects on health than any treatment itself

# WHO report: adherence to long term therapies

- Adherence is a dynamic process that needs to be followed up
- Health care providers should be able to assess their patient's readiness to adhere, provide advice on how to do it, and follow up the patient's progress at every contact

# Assumptions

The term “compliance” assumes that the patient should obey or comply with what the doctor says. It is an ideal of the patient as a passive and obedient recipient of medical instructions.

# Professional perspective

- How many people do not use their medicines as the doctor instructs?
- What are their characteristics?
- Why do they not follow instructions?

# Patient perspective

- What is this medicine?
- Is it necessary?
- What is it for?
- Does it work?
- Is it safe?

# How can barriers to compliance be overcome?

- What kinds of support do patients need when taking their medicines?