



# Adherence and the Online PATIENT EXPERIENCE

**A**s many as 50% of chronically ill patients fail to adhere to, or comply with, physician prescribed treatment regimens in the first year of therapy. Non-adherence spans the spectrum of chronic disease from relatively minor illness, such as allergies, to life-threatening conditions, such as cancer and HIV.

## The Adherence Dilemma

For the patient, poor adherence leads to preventable worsening of the disease, posing serious and unnecessary health risks. For the public, it accounts for a significant drain on our healthcare resources, with some estimates putting the cost of non-adherence at \$290 billion annually.

Seen from pharma's perspective, non-adherence means lost revenue, as the significant investment made to acquire new patients does not result in patients staying on therapy long term. In fact, Datamonitor estimates that better adherence could generate \$30 billion a year in additional sales.

## More Than Forgetfulness

The common perception is that patients are non-adherent because they do not remember to take their medications. While unintentional non-adherence — like forgetfulness — is certainly a factor, many patients make an active decision to forego prescribed therapy. This intentional non-adherence is primarily driven by patient beliefs about their treatment, disease, and prognosis.<sup>1</sup> In other words, if patients do not believe their disease warrants treatment and/or that the medication will help them, they simply choose not to take it.

Patients who gain a proper understanding of both their condition and their prescribed drug regimen before they start taking a medication are more likely to stick with treatment. Improving communication between healthcare professionals and patients is a key component of any adherence intervention. However, the clinical setting is limited in its ability to offer comprehensive and easily accessible support.

## An Online Adherence Experience

Patients prefer to obtain information about

their health concerns from their physicians or other healthcare professionals. However, patients are turning to online resources to answer their health-related questions at an ever-increasing rate.

Research by the Pew Research Center's Internet & American Life Project has found that "there is a social life of health information, as well as peer-to-peer support as people exchange stories about their own health issues to help each other understand what might lie ahead."<sup>2</sup> Because online resources, particularly peer-to-peer networks, are a primary route to health information and support, it may be possible to leverage a patient's social connections and networks to improve medication adherence.

For instance, what if a patient who has doubts about a prescription learns from a peer video about the importance of continuing therapy even if they can't feel it working? Or if a patient who is confused by his physician's instructions learns about proper administration from a fellow patient? Or if a patient who skips doses because she struggles to afford her treatment learns from another patient about a copay benefit program? Better yet, what if the efforts of a pharma company could facilitate these interactions?

## But, Seriously, What Can Pharma Do?

Social media poses unique risks for the highly regulated pharmaceutical industry. There are many good reasons why pharma continues to shy away from social media when marketing products: concerns about how to handle adverse events and potential off-label discussions, lack of demonstrable ROI, and non-existent FDA guidelines, to name a few.

As the indisputable experts on the benefits and risks of their products, pharma companies must continue to proactively educate patients about their medications. Yet, it is equally important for the industry to learn from their patients. A low-risk social media "listening" campaign provides a unique platform to learn about patient safety concerns or uncover common patient objections to therapy. Pharma can use this information to provide healthcare professionals with valuable patient counseling insights, as well as create more impactful adherence programs.

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**When it comes to engaging in social media dialogue, pharma may need to take a step-wise approach. However, it is critical that pharma at least takes a first step:**

- » Build patient trust through non-branded, sharable content, such as a list of the most credible patient blogs or most relevant YouTube videos.
- » Develop relationships with patient advocates or prolific patient bloggers and educate these important stakeholders about the importance of adherence, so that they share this information with their readers.
- » Create community-enabled websites designed to encourage peer-to-peer adherence support, but include prominent commenting guidelines that advise patients not to mention the specifics of events or personally identifiable information, or clearly direct patients with this information to the FDA.

## For the Sake of Good Health

The true value of a product to the health of a patient cannot be realized if a patient does not adhere to the prescribed regimen. As we enter the era of pay-for-performance healthcare, solving the adherence problem is more critical to the health of pharma itself than ever before. Furthermore, by supporting patients' efforts to stay on therapy, pharma can build stronger relationships with patients and healthcare professionals and solidify its role as a partner in patient care.

Notes: 1. Gadkevi and McHorney *BMC Health Services Research* 2012, 12:98 <http://www.biomedcentral.com/1472-6963/12/98>. 2. Fox S, Jones S. *The social life of health information (online)*. Pew Internet and American Life Project. 2009. 

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