

Improving medication adherence among patients with hypertension

A tip sheet for healthcare providers

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edication adherence is critical to successful hypertension control for many patients. However, only 51% of Americans treated for hypertension follow their healthcare providers' (HCPs') advice

when it comes to their long-term medication therapy.

Adherence matters. High adherence to antihypertensive medication is associated with higher odds of blood pressure control, whereas non-adherence to cardioprotective medications increases a patient's risk of death from 50% to 80%.

As an HCP, you can empower your patients to take their medications as prescribed. Effective two-way communication is critical; in fact, it doubles the odds of your patients taking their medications properly. Try to understand your patients' barriers and address them as honestly as you can to build trust.

The SIMPLE method

Use the SIMPLE method to help improve medication adherence among your patients.

Medication adherence by the numbers



For every 100 prescriptions written...



50-70 go to a pharmacy

For every 50-70 prescriptions that are taken to a pharmacy...



48-66 come out of the pharmacy

For every 48-66 prescriptions that come out of the pharmacy...



25-30 are taken properly

For every 25-30 prescriptions that are taken properly...



15-20 are refilled as prescribed

Simplify the regimen

- Encourage patients to use adherence tools such as day-of-the-week pill boxes or mobile apps.
- Work to match the action of taking medication with a patient's daily routine (e.g., mealtime or bedtime, with other medications they already take properly).

Impart knowledge

- Write down prescription instructions clearly, and reinforce them verbally.
- Provide websites for additional reading and information—find suggestions at the Million Hearts® website.

Modify patients' beliefs and behavior

- Provide positive reinforcement when patients take their medication successfully, and offer incentives if possible.
- Talk to patients to understand and address their concerns or fears.

Provide communication and trust

- Allow patients to speak freely. Time is of the essence, but research shows that most patients will talk no

Predictors of non-adherence

When discussing medications, be aware if your patient:

- Demonstrates limited English language proficiency or low literacy.
- Has a history of mental health problems such as depression, anxiety, or addiction.
- Doesn't believe in the benefits of treatment.
- Believes medications are unnecessary or harmful.
- Has a concern about medication side effects.
- Expresses concern about the cost of medications.
- Says he or she is tired of taking medications.

These behaviors and beliefs can all be predictors of a patient who may struggle with adherence to medication.

- longer than 2 minutes when given the opportunity.
- Use plain language when speaking with patients. Ask, "Did you take all of your pills?" instead of using the word "adherence."
- Ask for patients' input when discussing recommendations and making decisions.
- Remind patients to contact your office with any questions.

Leave the bias

- Understand the predictors of non-adherence and address them as needed with patients.
- Ask patients specific questions about attitudes, beliefs, and cultural norms related to taking medications.

Evaluate adherence

- Ask patients simply and directly if they are sticking to their drug regimen.
- Use a medication adherence scale—most are available online:
 - Morisky-8 (MMAS-8)
 - Morisky-4 (MMAS-4 or Medication Adherence Questionnaire)
 - Medication Possession Ratio (MPR)
 - Proportion of Days Covered (PDC)

Additional materials to help your patients control hypertension are available at the **Million Hearts® website**.

The information in the article is courtesy of the Million Hearts® initiative at www.millionhearts.hhs.gov.

