

Adherence

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Objectives

- Understand the unique aspects of adherence with the pediatric population
- Understand the components of adherence assessment
- Identify appropriate tools to enhance and monitor adherence

The Complexity of Adherence

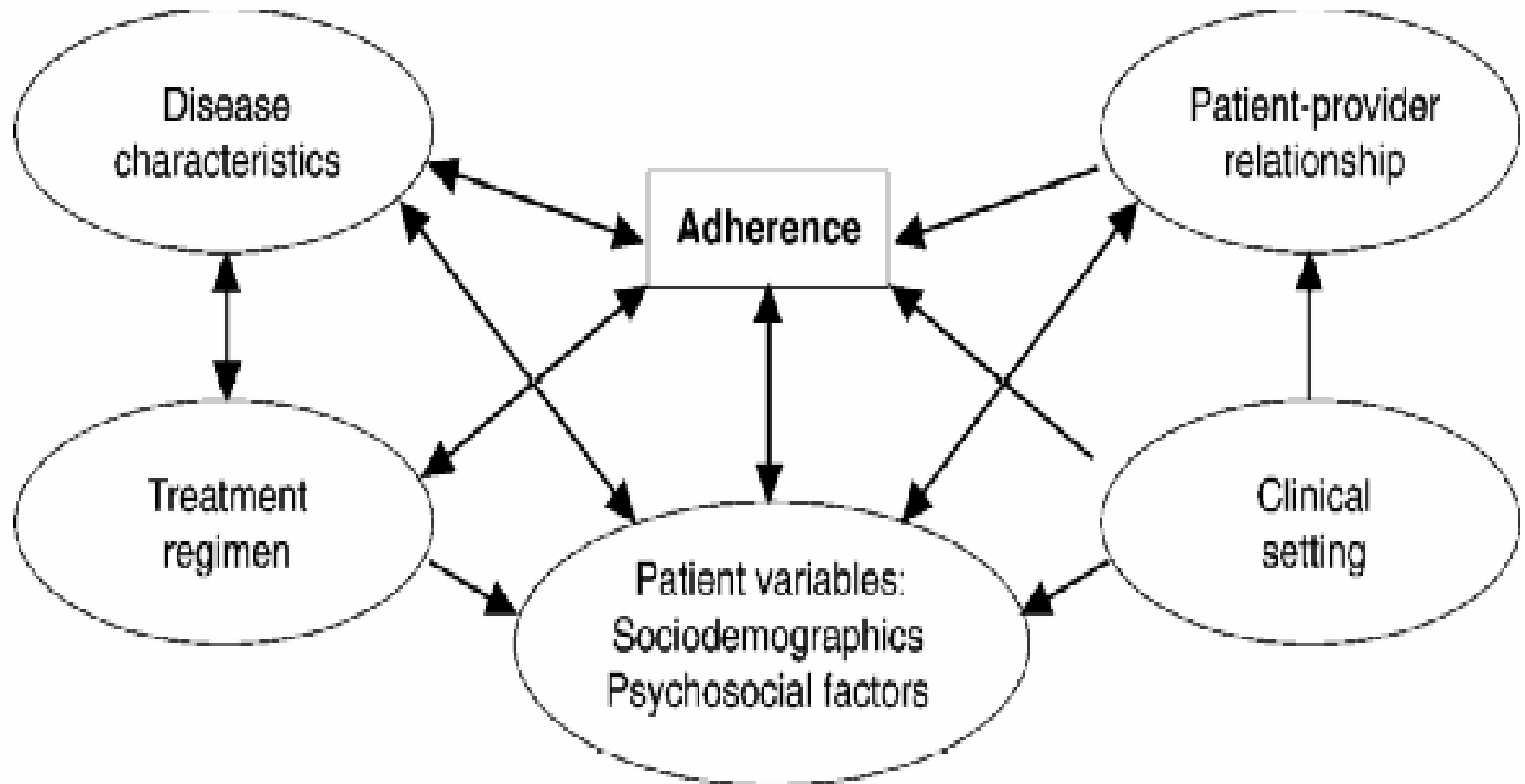


FIG. 1. *Determinants of adherence. Adapted from Ickovics & Meisler (1997).*

Factors Affecting Adherence

- Provider factors
 - Style
 - Assessment skills
 - Cultural sensitivity
 - Non-judgmental
 - Adherence team
 - Resources
 - Willingness to form a partnership

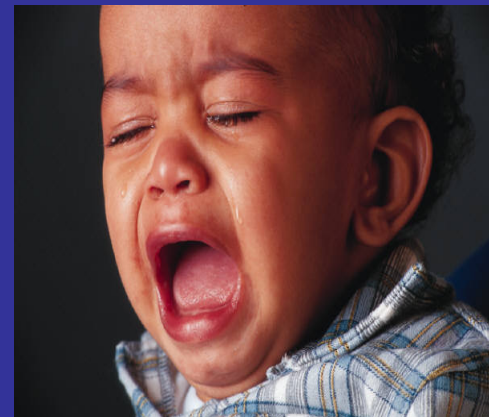


Parents/caregivers must GIVE the medications

- Parents/caregivers must GIVE the medications
 - Parents/caregivers may be dealing with their own illness and medications
 - Parents/caregivers may have job obligations
 - Who gives the medicine: Relatives, daycare, babysitters, school
 - Other family responsibilities
 - Myths/ lack of understanding re: HIV

Children must TAKE the medication

- Previous medication history
- Ability to swallow pills
- Taste/texture
- Volume of liquid
- Developmental stage
- Refusal, fight...



Reasons for Non Adherence

- The three most common themes for children and families found in one qualitative study were:
 - Complexity of regimen
 - Side effects
 - Forgetting



Starting Treatment Is Rarely An Emergency

- ART should not be started on first clinic visit
 - ART is rarely an absolute emergency
 - OI treatment may be an emergency, however
 - Adherence assessment, counseling and patient education are all necessary to maximize adherence BEFORE treatment is begun

Caregiver Knowledge Assessment

- What does patient know and believe about HIV
- What are the patients knowledge and beliefs about medications
- **Do not move ahead until you have assessed these critical issues**

Assessment of Caregiver Readiness

- Explore potential barriers to adherence:
- Explore prior adherence strategies that may have been attempted in the past
- Carefully assess the home life and routine of the family
- Who cares for the children
- Who knows the diagnosis in the home?
- Does the medicine need to be kept cold?

Assessment of Child Readiness

- Readiness to swallow tablets
- Do not assume that a child is too young or too small to be able to swallow tablets
- Do not assume that a patient is big enough or old enough that they must be able to swallow tablets
- Disclosure status

Patient Education

- Discuss medications and the proposed program
 - Remember: Goals of therapy
 - ARV is NOT a cure
 - Importance of adherence
 - Potential side effects and how to manage
 - Discuss follow-up schedule and importance
- Discuss specific medication regimen
 - Name, dose, specific dosing requirements of each medicine

Patient Education

- Clinicians often fear discussing side effects with patients, because they worry that if they tell them about side effects, they will develop them
- But, failing to inform can compromise credibility and trust
- Adherence is increased when patients know what to expect

Activities of Daily Living

- Help them to identify things they may do everyday that will trigger them to take their medication
 - Brushing teeth
 - Eating meals
 - A regular activity
- Remember that changes in normal routine will affect adherence
 - Help to troubleshoot in advance
 - Make a plan

Provide Tools

- Pill boxes
- Charts
- Color coding
- Reminder calls
- Buddy system
- Diaries
- Alarms



Tablet Swallowing

- Do not :
 - ◇ Bargain or bribe
 - ◇ Try to “trick”
 - ◇ Threaten or punish
- Do:
 - ◇ Use short commands
 - ◇ Be repetitive
 - ◇ Praise for effort—not outcome



Anticipate and Plan

- Anticipate problems ahead of time
- You may see drug holidays during times of change or increased stress on a family
- Talk with them about problems that may come up before they do
- Be flexible with your treatment and change it if it will help to make things easier and more successful
- Be consistent

Questioning

- Use concrete questions – in the last three days, last week, since the last visit
- Be non judgmental
- Ask how many doses were missed vs. Did you miss any doses?
- What dose is the hardest for you to give/take?
 - Tell me about that
- Tell me about a time when it was really easy to remember and take the meds

Possible Disappointments

- Recognize that almost all families will not adhere to medication regimens at some time
 - May be short or long term
- Ask families about perceived non-adherence or actual non-adherence
- Don't take it personally
- Try to identify the problem
 - Ask specific questions about medications and what makes it difficult for them to take medications?
 - Ask the right questions-get the right answer?

Even the Best Attempts at Education...



PROACTIVE

- P Partnership to assess readiness for HAART
- R Reminders/pill boxes
- O Obstacles to adherence—address explicitly
- A Active monitoring of adherence, side effects and treatment outcomes
- C Compassionate care
- T Trust/respect—nurture patient–provider relationship
- I Interventions to enhance adherence
- V Vigilance over time to avert treatment fatigue
- E Evaluate clinical outcomes and available regimens

FIG. 2. *PROACTIVE* clinical care to enhance adherence.