

COURAGE TO CARE

A Health Campaign of Uniformed Services University, www.usuhs.edu, and the Center for the Study of Traumatic Stress, Bethesda, Maryland, www.CSTSonline.org

# Adherence: Addressing a Range of Patient Health Behaviors

Patient adherence challenges health care providers and our healthcare system. Adherence encompasses a wide range of health behaviors related to routine preventative healthcare (e.g., annual mammogram, annual physical, and cholesterol check), recommendations (e.g.,

maintaining appropriate weight and smoking cessation), and on-going health maintenance (e.g., blood sugar

checks, diabetic foot care, and taking medications for depression).

New medical advances (e.g. oral medications for cancer treatment) have improved the trajectory of many illnesses. The patient's ability to understand, tolerate, and appropriately follow prescribed regimens influences the outcome of treatment. In pediatric and elderly populations, physician communication is an important factor for patients' adherence. Equally as important is the doctor's role in anticipating potential

Patient adherence challenges health care providers and our healthcare system. obstacles and sensitivity to the challenges of the prescribed treatment and recommendations.

Taken in a broader perspective, adherence applies to recommendations and treatments during widespread events (e.g., exposure to public health

epidemics, disasters, terrorism, and war). Adherence, during these times, is required for accepting and following interventions in order to protect one's health. These include behaviors such as taking medications, willingness to shelter-in-place, or the need to evacuate one's home or community after exposure to weapons of mass destruction (e.g., anthrax).

This *Courage to Care* Fact Sheet addresses a broadened approach to adherence. We identify "teachable moments" when healthcare providers can educate patients about this important health behavior and its implications for individual, family, and community health.

#### **Patient Health Behaviors: Discrete and Continuing**

Patient adherence involves two types of health behaviors: discrete behavior and continuing behavior. Having a mammogram involves a discrete behavior that should occur every year or two. Taking a flu shot during flu season is another example of a discrete behavior. Managing diabetes, on the other hand, requires a complex set of continuing behaviors for the diabetic and also for their family.

Medical treatments involving discrete behaviors may be easier for patients to follow as they are less likely to disrupt one's lifestyle and can be scheduled to accommodate work or social routines. Medical treatments involving continuing behaviors, on the other hand, often shape one's routine and involve acceptance and commitment.

Discussion around these issues may help providers and patients communicate more effectively about healthcare

options in which adherence is an integral part of a desired outcome (see Table 1).

### **Strategies to Improve Adherence** *Know Your Patient*

- Assess their level of understanding their illness and provide information at that level.
- Explain treatment benefits and potential adverse effects.
- Respect a patient's autonomy, individual rights, and readiness for change.

### Simplify the Treatment or Intervention

Customize the treatment/recommendation to a patient's lifestyle needs.

- Seek to reduce frequency of dosing and number of medications when possible.
- Facilitate access (e.g., timing of refills, locations of available pharmacies, and mail-in options).

### Anticipate Obstacles

Address patient concerns, especially fear and stigma, which can impede their willingness to start or stay with a treatment.

# Patient Adherence Challenges Health Care Providers and Our Healthcare System

- Identify approaches (e.g., pill organizers) to help patients overcome forgetfulness, mismanagement, or lack of motivation.
- Explain that "feeling better" is not a reason to discontinue treatment, but a sign that treatment is working.

### **Motivate Patients**

- Provide relevant examples of improvements resulting from patient adherence.
- Offer available office/clinic resources to monitor their treatment regimen.
- Communicate support and willingness to answer questions after the visit.

### **Educate Patients**

A routine office visit can become a "teachable moment" for patient adherence.

- Recognize and reinforce positive heath behaviors.
- Commend patients for discrete behaviors like getting a flu shot or mammogram, and for continuing behaviors like cessation of smoking, following a diet for weight loss, lowering of cholesterol, or management of chronic conditions like diabetes.
- Tell patients that their "adherence" to these health sustaining behaviors is valuable to themselves, their families, and our healthcare system.

### Communication to Facilitate Adherence

Adherence may be improved by emphasizing to the patient:

- 1. When and how often to take the medicine.
- 2. The expected time interval before beneficial effects of treatment may be noticed.
- 3. The necessity to take medication even after feeling better.
- 4. The need to consult with the physician before discontinuing medication.
- 5. Steps to take if problems or questions arise.

## Table 1: Discrete and Continuous Health Behaviors

DISCRETE HEALTH BEHAVIORS	CONTINUOUS HEALTH BEHAVIORS
Time specific/often time limited	Ongoing and complex
Well described	Requires learning and adapting
Operational	Often involves family/employer support/commitment
Doable	Need to monitor, change, collaborate with healthcare provider



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