



ADHERENCE TO DIABETES MEDICATION: WHY IT'S IMPORTANT

Managing diabetes successfully can be challenging. Patients with good diabetes self-care behaviors usually attain glycemic control. However, some diabetes regimens can be complex, and many patients do not achieve glycemic control. As a result, patients continue to suffer diabetes-related health problems.

Case managers, among other health care providers, recognize that if patients with diabetes adhered to treatment recommendations, they could manage long-term diabetes-related complications. The fact that so many patients do not adhere to treatment recommendations can be very frustrating.¹

What affects adherence?

There are many reasons for nonadherence to diabetes regimens²:

- Fear of treatment side effects, such as hypoglycemia (too low blood sugar)
- Needle anxiety (injectable therapies)
- Inconvenience or complexity of a prescribed treatment
- Cost of treatment or formulary issues
- Poor patient knowledge about the importance of glycemic control

Asymptomatic chronic diseases that require long-term therapy, such as diabetes, are also associated with nonadherence.³

Importance of adherence to diabetes medications

Although patients may have their reasons for nonadherence, it is important for them to understand why adhering to their treatment recommendations is essential.⁴

Compared with diabetic patients who are adherent, nonadherent diabetic patients are far more likely to require hospitalization and more likely to incur significantly higher health care costs.⁴

Data show that for every 25% increase in medication adherence, a patient's glycated hemoglobin (A1C) is reduced by 0.34%. However, only a little more than half of patients achieve an A1C target below 7.0%.⁴

Adherence to treatment can lead to improved glycemic control.⁴

Patients must understand the importance of adherence

To instill the significance of adherence to patients, it is important for case managers (and other health care providers) to understand some of the factors that can play a role in nonadherence.¹

Demographic factors (for example, economic status, education level), psychological factors (depression, anxiety, etc), and social factors (support systems) may all affect a patient's ability to adhere to treatment.¹

Regardless of how case managers intervene with patients to achieve A1C goals, it is widely noted that when adherence to treatment regimens increases, A1C decreases.²

This is the ultimate goal, because effective and consistent treatment is important to help patients with diabetes manage their disease.⁴

Reporting adverse effects and clearing the hurdles of cost with patients

When patients experience any adverse effect from their diabetes medication, they should contact their doctor immediately.

If patients can't afford their medications, contact the manufacturer's representatives or account managers about available financial patient assistance programs, such as co-pay cards, that are designed to offer help paying for the cost of treatment.

References: **1.** Delamater AM. Improving patient adherence. *Clin Diabetes*. 2006;24(2):71-77. **2.** Nau DP. Recommendations for improving adherence to type 2 diabetes mellitus therapy—focus on optimizing oral and non-insulin therapies. *Am J Manag Care*. 2012;18:S49-S54. **3.** Ho M, Bryson CL, Rumsfeld JS. Key issues in outcomes research. *Circulation*. 2009;119:3028-3035. **4.** Wild H. The economic rationale for adherence in the treatment of type 2 diabetes mellitus. *Am J Manag Care*. 2012;18:S43-S48.