

Pharmacist-led quality improvement project to improve patients' adherence to their antidepressant medications in ambulatory care setting

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Background

- Antidepressants are the mainstay of mental disorders treatment along with psychotherapy and have been proven to reduce depressive symptoms effectively.
- However, poor adherence to medication poses one of the major obstacles to treatment success and remission.
- According to reports from CNS Drugs, difficulty in maintaining adherence to antidepressant contributes to higher incidence of relapse and treatment failure.
- Nonadherence to antidepressant is also associated with increased emergency department visits and hospitalization rates and places a significant cost burden on healthcare systems.
- Intervention on adherence to antidepressant medication analyzed to be effective for up to 6 months.

Objective

- This pharmacy-led quality improvement project aimed to improve antidepressant adherence rate to 60% among patients with an increased risk by
 - Reminding patients about refills,
 - Addressing concerns about side effects,
 - Encouraging appropriate medication use

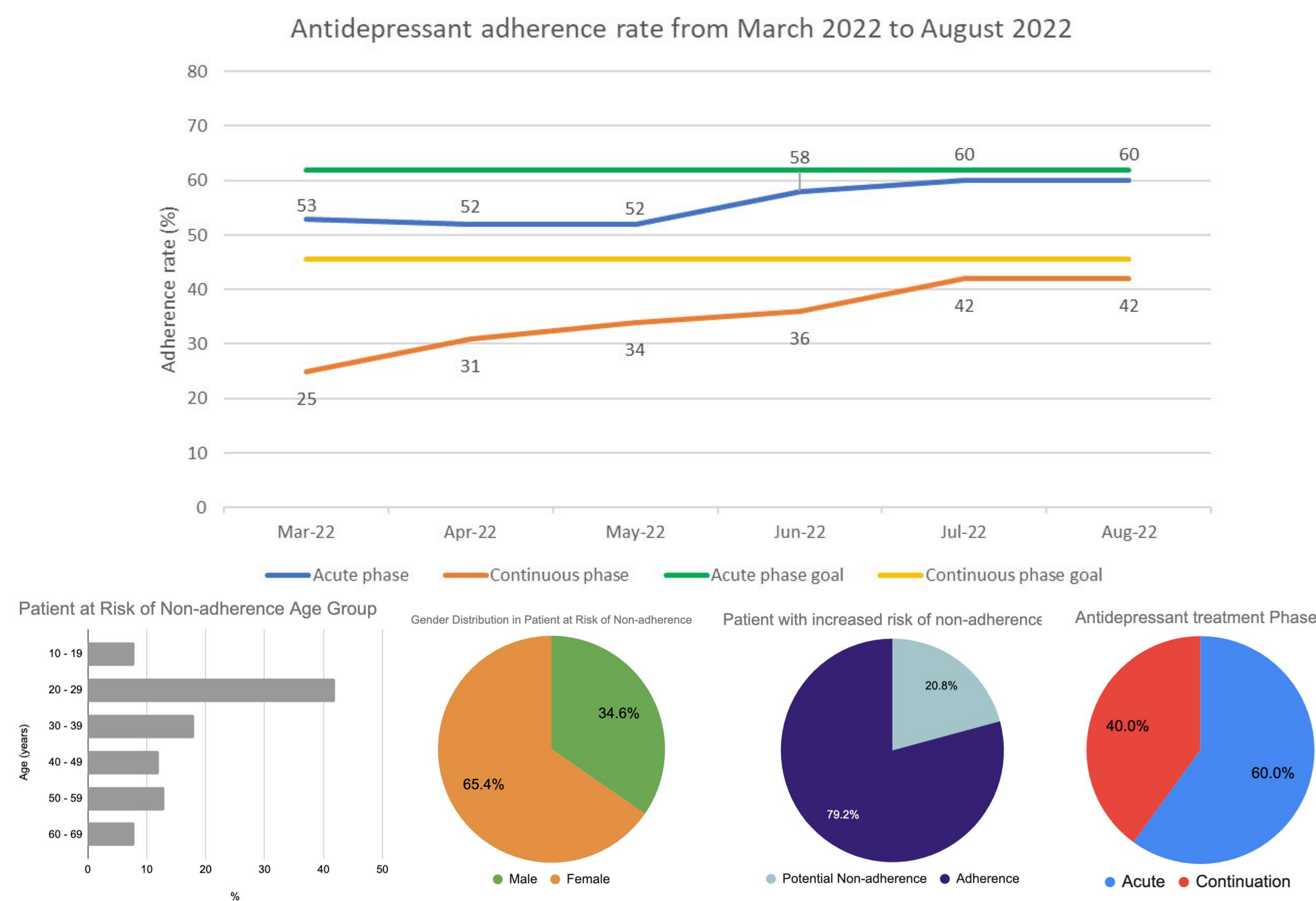
Definition

- Acute phase = 84 days of treatment with antidepressant medication after the initial dispensing date
- Continuation phase = 180 days of treatment with antidepressant medication after the initial dispensing date

Methods

- The insurance plan CHPW provides a list of patients with potential adherence concerns every month
- Quality improvement data analyst screens and ensures the list contains only patients seen by a primary care provider at International Community Health Service
- Pharmacy staff adds patients to an electronic reminder list in the electronic health record system (Epic)
- Pharmacists or interns reach out to patients via phones or secure messaging
- Patients are provided counseling on medication use and adherence management to resolve potential barriers to adherence
- Pharmacists or interns follow up with patients at the next refill due date via Epic reminder list

Results



Conclusions

- Pharmacy-led interventions showed improvement in adherence rate, which suggests a positive correlation between patients' antidepressant adherence and pharmacy intervention.
- Our method of continuously monitoring patients using the Epic reminder list in addition to the monthly list provided by the insurance plan may contribute to the 17% increase in adherence for the continuation phase group.
- Future direction will be focusing on adjusting adherence outreach workflow to maintain a more regular patient follow-up.

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Disclosures

- Authors do not have any financial relationships to disclose.

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