



eHealth
week

11 - 13 MAY 2015
RIGA, LATVIA

ORGANISED BY



meHEALTH



EIP AHA TRACK - THE POWER OF PARTNERSHIP, MEET THE AG-A1: ADHERENCE TO MEDICAL PLANS

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Dimension of non-adherence...

Only of patients typically
50% take their medications
as prescribed

nearly premature deaths per
200.000 year among Europeans are
related to non-adherence

...and impact on society



Patient health



- Potential harm from sub-optimal management of clinical condition
- Worsening of functional abilities



Health Services
Use/Spending



- Cost of medicines dispensed but not used
- Higher medical spending
- Higher inpatient hospital days
- Higher Emergency Dpt visits



Social Engagement/
Productivity



- Reduced social activity and more days away from work derived from poorly managed long-term conditions

The EIP-AHA AG-A1 «Ecosystem»

63
main
partners

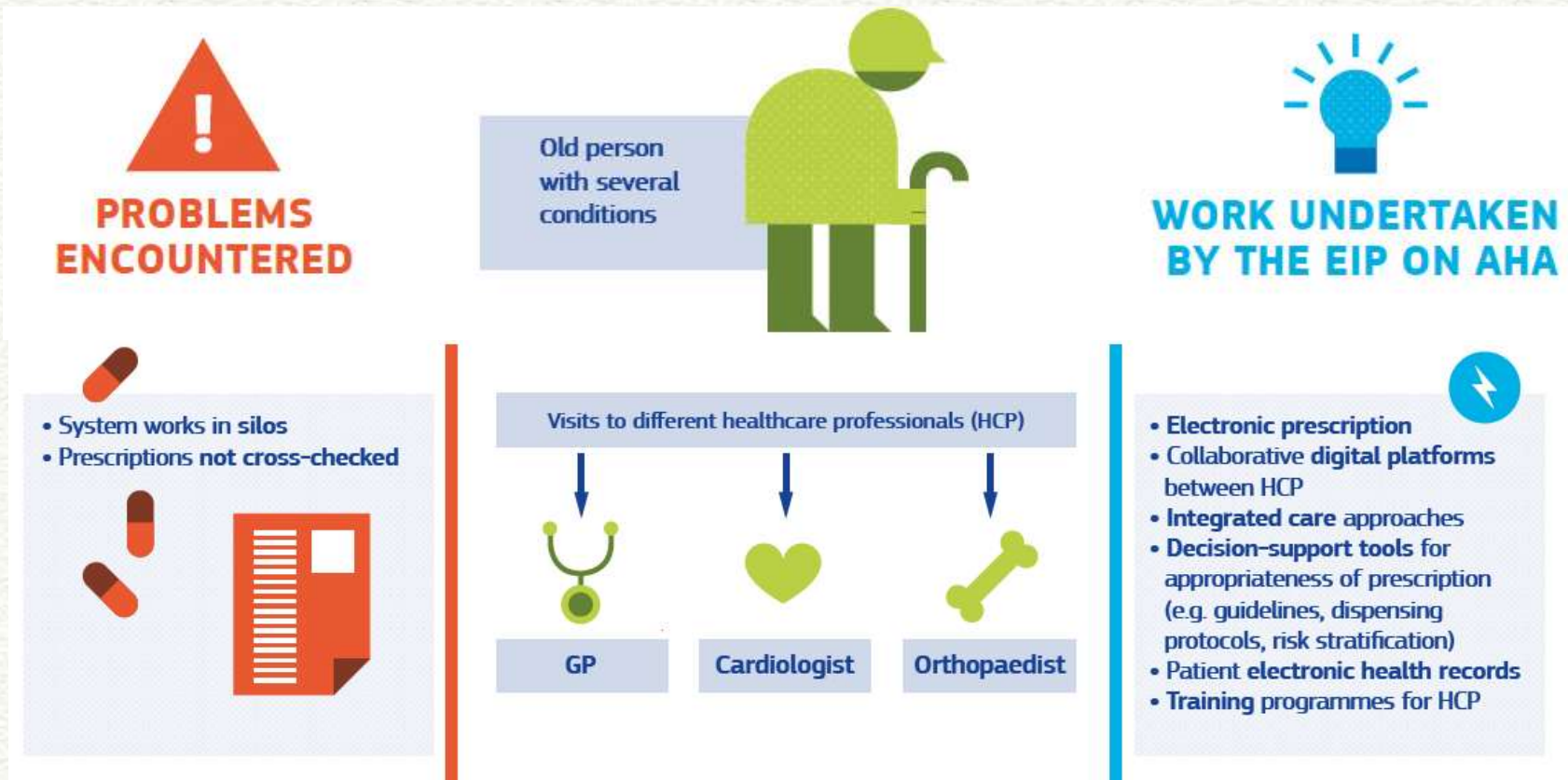
representing
68
multi- stakeholder
commitments

from
31
European
Countries

- Advocacy Organizations
- Health and Social Care Providers
- Large Industries
- SMEs
- National Public Administrations
- Regional Administration
- Research/Academia

HOW ARE WE IMPROVING ADHERENCE TO MEDICAL PLANS IN +65 PEOPLE?

Multidisciplinary approaches and cross collaborations can impact upon patient's journey through the healthcare system.



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PROBLEMS ENCOUNTERED

- Patient forgets to take medication
- Patient has a complex medication regime
- Patient misunderstands prescription instructions
- Patient has an adverse drug reaction

Old person with several conditions



Focus on prescription of drugs

Patient fills in prescription of drugs at hospital or community pharmacy



Patient seeks assistance in case of problems with medication



WORK UNDERTAKEN BY THE EIP ON AHA

- Electronic devices and alert systems
- Age-friendly medicines and packaging (e.g. Personalised Dosage Systems)
- Adherence monitoring platforms for HCP
- Medication review and reconciliation protocols
- Pharmacovigilance tools

The Italian initiative

SABA

European Experts
assessing most
effective
interventions

Institutional workshop

Contextualization
of interventions
within the national
territory

Integration model

Development of a
coherent model to
integrate specific
actions within the
NHS

**National
Strategic
plan for
Adherence**



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The European Scaling-up Strategy in Active and Healthy Ageing: partnership with AG-A1

Integrating observatories on Administrative Health Data Flows

THE NEED

- Use of Common Elements and Measures could facilitate data sharing
- Better analysis of multi-morbidity, adherence to medications and polypharmacy

HOW

- Translation Layers towards common meta-structures could facilitate this

CHALLENGES

- Need for better integration, anonymization strategies and compliance with national policies and constraints

PARTNERSHIP

- Collaborative Works on Sharing Common Data Elements and Structures
- Existing experience on aggregating information in rare diseases could accelerate scaling up:
- More partnerships are needed

Take-home messages



Poor adherence to treatment of chronic diseases is a worldwide problem of striking magnitude



The consequences of poor adherence to long-term therapies are poor health outcomes and increased health care costs



Adherence is an important modifier of health system effectiveness



Patients need to be supported and empowered, not blamed; health professionals need to be established in proactive and prepared teams



Family, community and patients' organizations are key factors for success in improving adherence



A multidisciplinary approach towards adherence is needed



THANK YOU

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