

Meeting the Challenges of Patient Adherence

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To effectively address the challenges of market pressures and revenue leakage and to demonstrate the ROI of its drug regimen, the pharmaceutical industry has started taking steps to strengthen disease management ecosystems by integrating stakeholders to manage disease. Manish Gupta, CEO, Indegene Lifesystems Ltd, discusses the challenges of patient adherence in this article.

Meeting the Challenges of Patient Adherence

The global pharmaceutical industry is presently in the midst of significant transformation. On one hand, FDA approval of drugs has become more stringent, and on the other, a large number of blockbuster drugs are also nearing patent expiry. More than 80 blockbuster patents are expected to expire by 2015[1].

It is expected that the so called "generic erosion" will knock between

two percent and 40 percent off the revenues of the top 10 companies between now and 2015. Only four of these 10 have pipelines containing products sufficiently valuable to offset these losses[2].

Further, policy makers are now insisting on substantial data around cost versus benefits of therapeutic regimens in order to allow access and reimbursement. As the 'Blockbuster Model' of pharmaceutical companies

is slowly becoming irrelevant, it has become critical that pharmaceutical industry extends its role beyond just marketing to physicians.

The industry is now moving towards a model where payors and patients have considerable weight and influence in the decision-making process of the pharmaceutical marketing spend. Providing each player with strong credible case for drug support becomes an important

function for pharmaceutical industry today. Against this background, the issue of poor adherence to therapeutic treatment of chronic diseases has become a worldwide problem of striking magnitude. Adherence to long-term therapy for chronic illnesses in developed countries averages only up to 50 per cent. Several studies in developed markets like the US indicate that over 50 per cent of the 1.8 million prescriptions written annually are not adhered to correctly which results in a revenue leakage in excess of USD 30 billion.

This non adherence has implications in terms of patient's health outcomes and increased cost to the patient as well as the healthcare system. Policy makers realise that poor medication adherence presents a serious roadblock to efforts to improve health care efficiency and affordability. Policy makers and payors in these markets need substantial data around cost versus benefits to allow access and reimbursements.

They look for cost benefit ratios to allow for drug launch and reimbursement and co-pay coverage. In this scenario , patient adherence

becomes important as outcomes of drug regimen become critical for success in the market place. To effectively address the challenges of market pressures and revenue leakage and to demonstrate the ROI of its drug regimen, the industry has started taking steps to strengthen disease management ecosystems

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by integrating stakeholders to manage disease. Patient adherence makes commercial sense now more than ever. It costs six times more to attract new patients than to retain current patients[3]. Further, increased adherence by 10 per cent for a product with approximately USD 1 billion in sales would translate to an additional USD 30 to 40 million in annual revenue[4].

At Indegene, our conversations with leading global pharmaceutical clients have revealed that companies

are looking to spend about 8 to 15 per cent of overall promotional budgets towards adherence programmes. Many brands are now spending up to 10 per cent of their potential revenue in patient support programme in first year of launch.

While there are many patient support and assistance programmes

that are available, most of them fail to address requirements of effective patient adherence. Early attempts at patient adherence programmes included steps like making available educational material in the doctor's office. Physician participation in such initiatives was minimal and studies have shown that such interventions did not result in any significant difference between control and test group in terms of adherence rates.

As adherence programmes began to evolve, many companies explored the role of counsellors appointed at the doctor's clinic. These programmes were relatively successful and managed to increase the adherence rates by 10-15 per cent. However, there was no role played by the healthcare provider and hence sustaining such programmes became difficult.

Over the last few years, through experience, we have learnt that the components of a successful patient adherence programme are:

1. Personalisation: One of the key challenges is to recognise that each patient is unique and has specific challenges from a



disease outcome management perspective. It is important to look at these varied perspectives and engage with them as "Individuals" and not as "ideals". The patient personalisation metrics are useful to engage with them on their disease management based on the calculation of the individual's risk levels. The engagement plans then become more relevant to the patient and also impact their health outcomes positively.

- 2. Multichannel:** Considering the varied nature of diseases, market considerations and the profiles of patients, it's important to ensure that one is able to offer as much flexibility as possible to support interactions with patients. Voice, email, web, text messaging, eFax, direct mailing and scan & capture techniques are some of the approaches that one can look at to offer patients the option to engage based on their convenience. Intelligent configuration of these for a patient support programme allows for end goals to be met irrespective of whether a patient chooses to use one or more of these channels.
- 3. HCP involvement:** While the various channels are one part of the overall engagement aspect, one also needs to look at the variety of stakeholders, who are the beneficiaries of patients' positive health outcomes. These are the payers- pharmacists, physicians, nurses, compliance associates, care givers, patient groups and communities. Adherence initiatives can now involve the physicians by getting them to enroll the patients onto the adherence programmes. The physician is also able to monitor



the progress of his patients by way of regular updates. Patients requiring extensive physician time stand to benefit immensely from such a healthcare ecosystem. Qualified HCPs such as pharmacists, accredited experts, counsellors, and associations, have started playing an integral role in patient care.

- 4. Integration:** Patient support programmes need to leverage the strategic advantages offered by the web, mobile solutions and human intervention to allow patients a convenient choice of medium. Data captured during each patient interaction starting from the registration process through the entire engagement along with tracking of usage patterns of the selected intervention medium is useful for evaluating its effectiveness against the patient wellness index recorded.

Summary

As Patient Adherence takes center stage, it is now possible for pharmaceutical companies to deploy

advanced patient programmes that address the key challenges and the multiple dimensions of patient adherence. The move from limited engagement with a patient to a full-fledged meaningful and integrated interaction requires appreciation of the following:

1. Different interventions are required for different patient and HCP groups
2. Multiple channels of communication are more effective than those that make use of limited engagements
3. The need for multiple stakeholder involvement
4. Capturing data points for further reference and improvement of outcomes.

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