Non-Adherence – The Underestimated Problem: New Options Utilizing a Database with Claims Data
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Non-Adherence to drug therapies especially for chronic illnesses is common. Many patients experience difficulty in following treatment recommendations. Reasons therefore are magnitude. For this purpose, epidemiologic and pharmacy practice research is needed to evaluate persistence (refill compliance) as a prerequisite of adherence in ambulatory care. The German Institute for Drug Use Evaluation (Deutsches Arzneimittelprüfunigsinstitut: DAPI) is active in the area of pharmacoeconomic and pharmacoepidemiological analyses (www.dapi.de). The objective is to further the aims of science and research and to contribute to improved drug safety. This is realized by establishing, maintaining and managing a pharmaceutical institute engaged in scientific processing of matters regarding data analyses for pharmaceuticals. Therefore, the DAPI supports organizations and institutions in the healthcare sector in matters regarding drug use evaluations (DUE). Since January 2000, the institute receives prescription data (GKV) as a completely anonymized copy of claims data from currently 5 major data processing centers covering >80% of German community pharmacies. Monthly, approximately 50 million claims data are uploaded to the data warehouse (DWH). The DWH can provide individual evaluations to cover special queries. These include not only aggregated data, but also analyses based on case-related data. This allows follow-up of drug therapy of individual, anonymized patients over an extended period, and to provide answers to detailed pharmacoepidemiological and pharmacoeconomic questions as well as to questions relevant to DUE, drug utilization review (DUR), and pharmaceutical care (e.g. persistence, adherence). One of the most interesting options is to use these data for persistence research. In cooperation with the Institute of Pharmacology of the Goethe-University in Frankfurt, two PhD projects started recently to evaluate persistence in patients treated with antihypertensives and antidepressants, respectively. Results of these data analyzes will be compared with self-report data collected from patients in German community pharmacies. Other projects of the DAPI are exploring persistence/adherence in daily ambulatory practice or primary care, and the DAPI can and will contribute to this piece of research.