



**Adherence with Glivec[®] (imatinib):
pattern of refill in community
pharmacies**

Master Thesis

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Carole Kaufmann

Person in support

Dr. Isabelle Arnet

Pharmaceutical Care Research Group

University of Basel

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Abstract

Background

Few published studies have reported low adherence rates in cancer patients. The high price of Glivec®, indicated for oral treatment of CML, and the lifelong intake could be a barrier to patients adherence and a stimulator for pharmacists counselling in adherence. The efforts made by the pharmacists in Switzerland to improve non adherence in general and patient adherence to Glivec® in particular are unknown in Switzerland as well as in other countries.

Objectives

Assess retrospectively adherence to Glivec® in ambulatory patients, detect adherence tools available in community pharmacies and identify adherence behaviour of the patients.

Methods

Medication records of Glivec® patients were collected in community pharmacies. Medication possession ratio (MPR) and continuous measures of medication gaps (CMG) were calculated as measure of refill adherence. Adherence tools were assessed by interviewing pharmacists. Adherence behaviour of patients was evaluated with questionnaires (Beliefs about Medicines Questionnaires BMQ, Medication Adherence Report Scale MARS) and semi-structured interviews.

Results

Mean MPR of Glivec® was $97.8\% \pm 10.7$ (range 70-116%), mean CMG was $10.0\% \pm 7.5$ (range 0-30%), mean MARS score was 24.1 ± 1.3 (max. 25), mean BMQ score for necessity was 4.5 ± 0.5 (max. 5) and for concerns was 2.5 ± 1.1 (max. 5). Correlation analysis (n=18) showed a positive relation between MPR and MARS ($r = 0.5$, $p = 0.02$) and a negative relation between CMG and MARS ($r = -0.6$, $p = 0.02$).

Conclusion

This pilot study revealed an almost perfect adherence among Glivec® patients, the readiness of the patients to speak about a sensible topic, the reserved attitude of the pharmacists toward these patients and the lack of knowledge of the pharmacists regarding Glivec®. The patients who declared never to engage in non adherent behaviours had better refill adherence and showed less gaps over the observational period, indicating that MARS can be an adequate instrument to detect non adherence.

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