



JORNADA DE
ADHERENCIA
AL TRATAMIENTO

PAÍS VASCO

Adherencia en EPOC

Dra. Pilar de Lucas Ramos

Vocal del Comité Científico del Grupo OAT

Resultados del Análisis Nacional
y del País Vasco en
Adherencia al Tratamiento en Patologías Crónicas

¿Qué entendemos por adherencia?

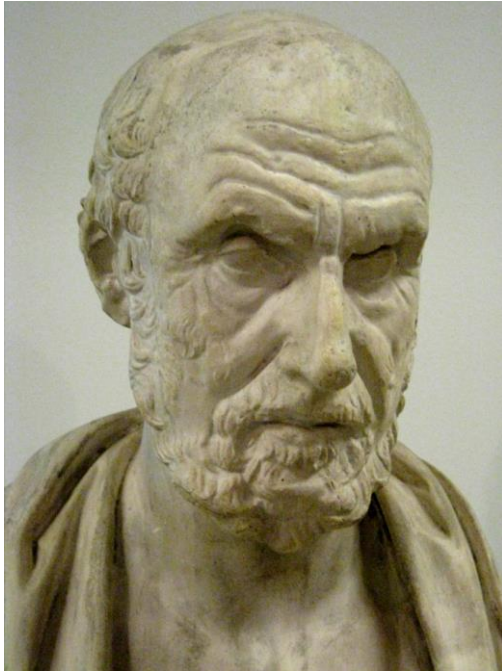


World Health
Organization

“Grado en que la conducta de una persona coincide con el plan terapéutico acordado previamente con el médico”



- Implicación del paciente
- Responsabilidad
- Motivación



“El médico debe saber que los pacientes a menudo mienten cuando sostienen que están tomando ciertas medicinas”

Hipócrates

EPOC, a que nos enfrentamos



Prevalencia: 10,2%

- **Mayores de 70 años: 23%**



Mortalidad anual en España: 18.000

- **Incremento del 38%**



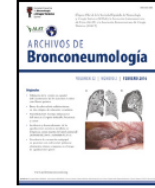
Carga sanitaria

- **40% de las consultas de Neumología**
- **106.729 altas hospitalarias al año**

Carga económica

- **3000 millones €**
- **2% gasto en sanidad.**





Artículo especial

Nuevo estudio sobre la prevalencia de la EPOC en España: resumen del protocolo EPISCAN II, 10 años después de EPISCAN

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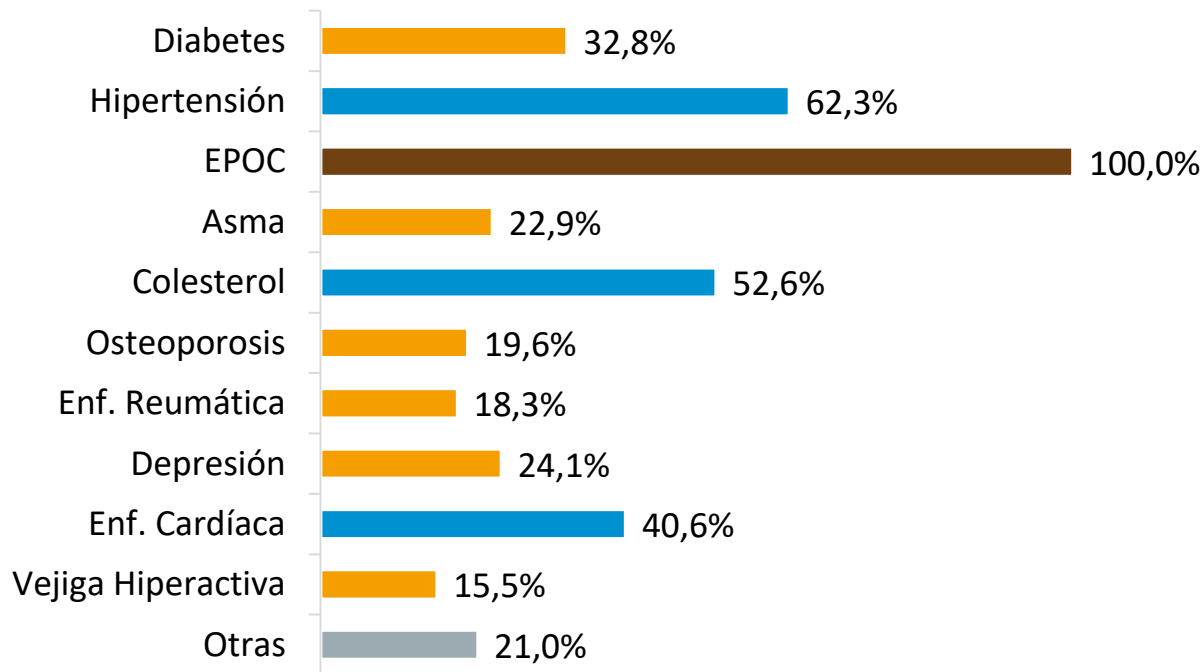
^k Consultor de Metodología e Investigación de SEPAR, Barcelona, España

Alfageme I, et al. Arch Bronconeumol 2019.

Patologías concomitantes de EPOC



EPOC- Prevalencia patologías



Chronic obstructive pulmonary disease as a cardiovascular risk factor. Results of a case-control study (CONSISTE study)

De Lucas et al. Int J COPD, 2012; 7:679-686

Table 2 Prevalence of comorbidities

Comorbidities	Cases	Controls	P
AHT	499 (51.8%)	100 (36%)	<0.001
Dyslipidemia	462 (48.3%)	88 (31.7%)	<0.001
Diabetes	377 (39.5%)	27 (9.7%)	<0.001
Obesity	337 (35.2%)	94 (33.8%)	0.666
Anemia	132 (13.6%)	4 (1.4%)	<0.001
Lung cancer	1 (0.1%)	1 (0.4%)	0.346
Malnutrition	33 (3.4%)	0 (0%)	0.002
Osteoporosis	159 (16.6%)	10 (3.6%)	<0.001
Ischemic heart disease	121 (12.5%)	13 (4.7%)	0.000
Arrhythmia	153 (16.1%)	13 (4.7%)	<0.001
Heart failure	238 (24.7%)	4 (1.4%)	<0.001
ACVA	96 (10%)	8 (2.9%)	0.000
Peripheral vascular disease	157 (16.4%)	11 (4.1%)	<0.001



Cual es la adherencia en la EPOC?

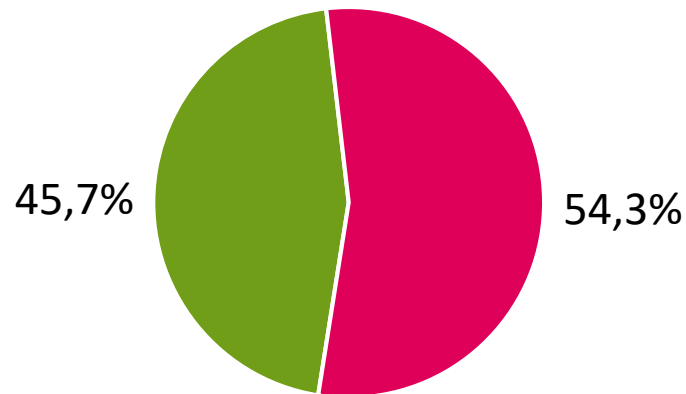


EPOC Nacional



■ Adherente ■ No adherente

EPOC Euskadi

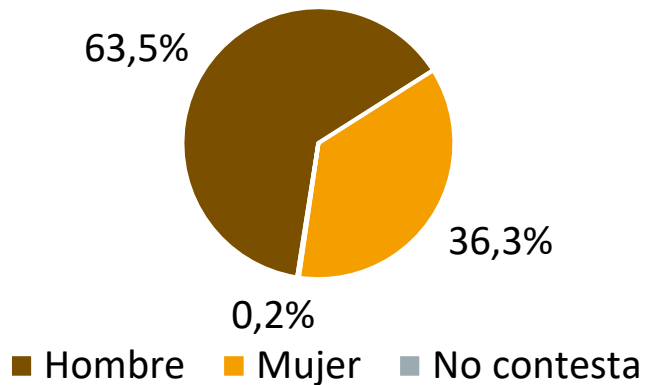


■ Adherente ■ No adherente

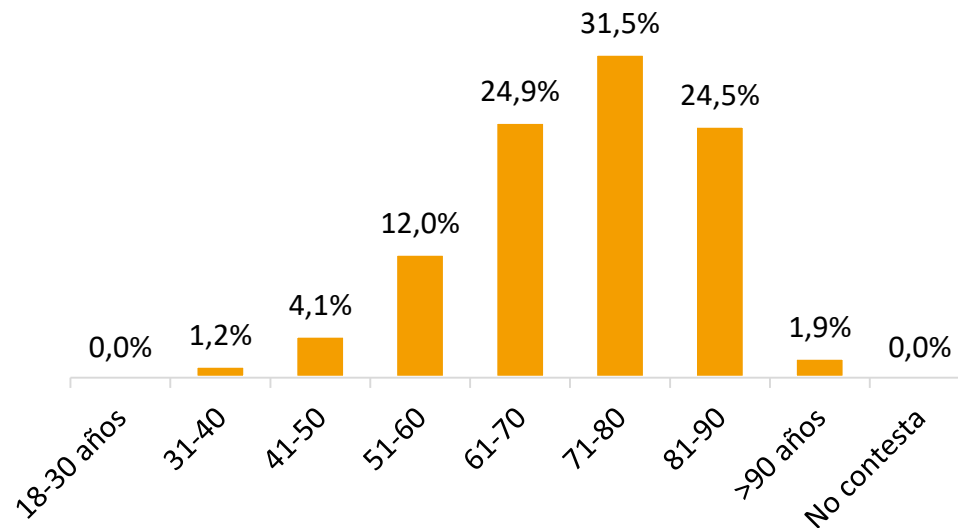
Perfil nacional en EPOC



Sexo



Edad



Adherencia Euskadi por patologías



Adherencia en EPOC

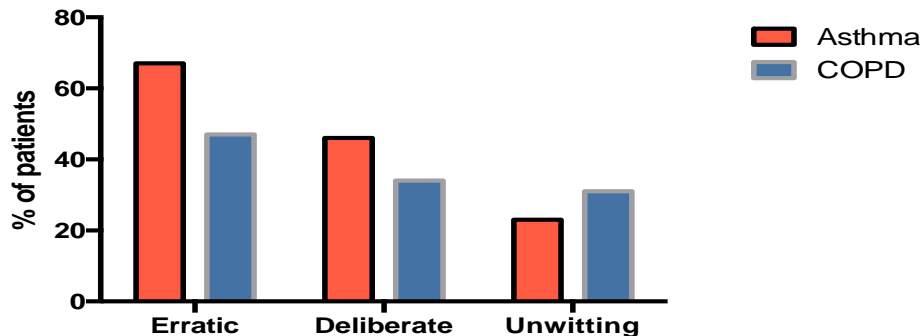
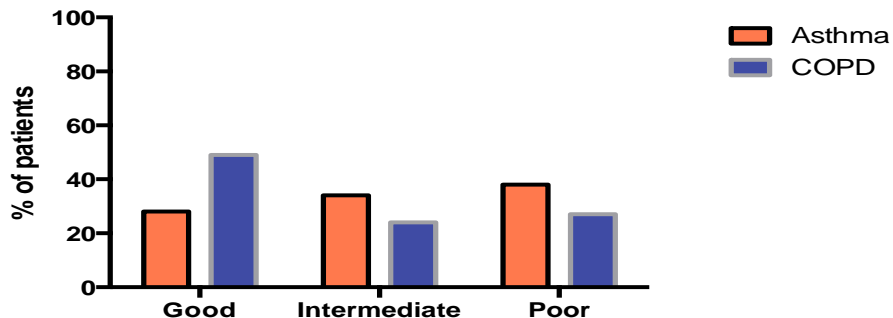


“Un 50% de los pacientes con EPOC no son buenos cumplidores, muchos de ellos de forma involuntaria”

COPD: Journal of Chronic Obstructive Pulmonary Disease

Differences in Adherence and Non-Adherence Behaviour Patterns to Inhaler Devices Between COPD and Asthma Patients

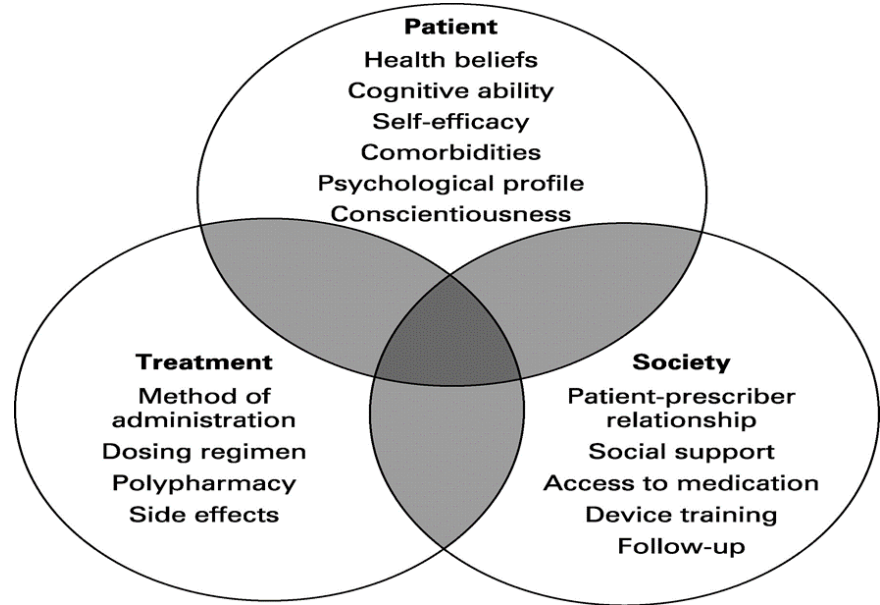
Vicente Plaza, Antolín López-Viña, Luis Manuel Entrenas, Concepción Fernández-Rodríguez, Carlos Melero, Luis Pérez-Llano, Fernando Gutiérrez-Pereyra, Eduard Tarragona, Rosa Palomino & Borja G. Cosío



Factores asociados a la baja adherencia en EPOC



- Edad
- Estado de salud o calidad de vida
- Fumador activo
- Número de medicaciones diarias
- Coste mensual del tratamiento



Agh et al. Respiration 2010

Bourbeau J. Thorax 2008

Consecuencias de la no adherencia



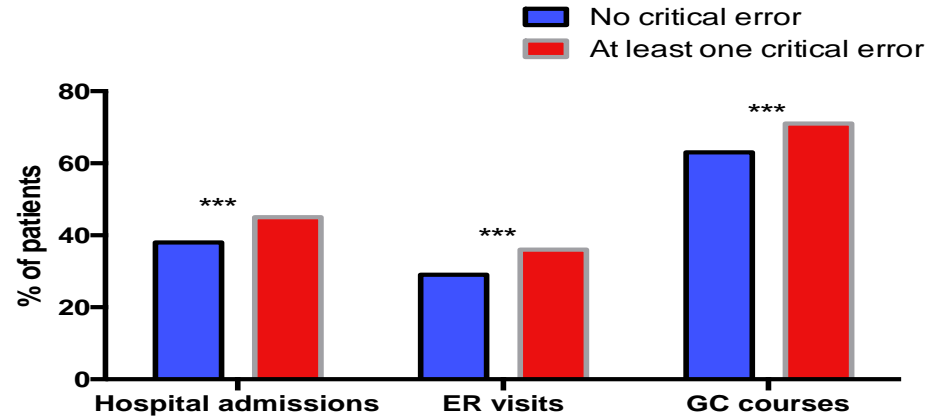
- Mal control de la enfermedad
- Aumento de agudizaciones
- Aumento de ingresos hospitalarios
- Aumento de costes



“El uso incorrecto del inhalador se asocia a más exacerbaciones”



Melani et al. Resp Med 2011





“Los pacientes ingresados por agudización de EPOC tienen elevada prevalencia de factores modificables”

28% no vacuna antigripal
86% no RHB
28% no uso de OCD
43% mala técnica inhalatoria
26% fumadores activos
21% fumadores pasivos

Estudio EFRAM
Garcia-Aymerich et al. ERJ 2003, AJRCCM 2003)

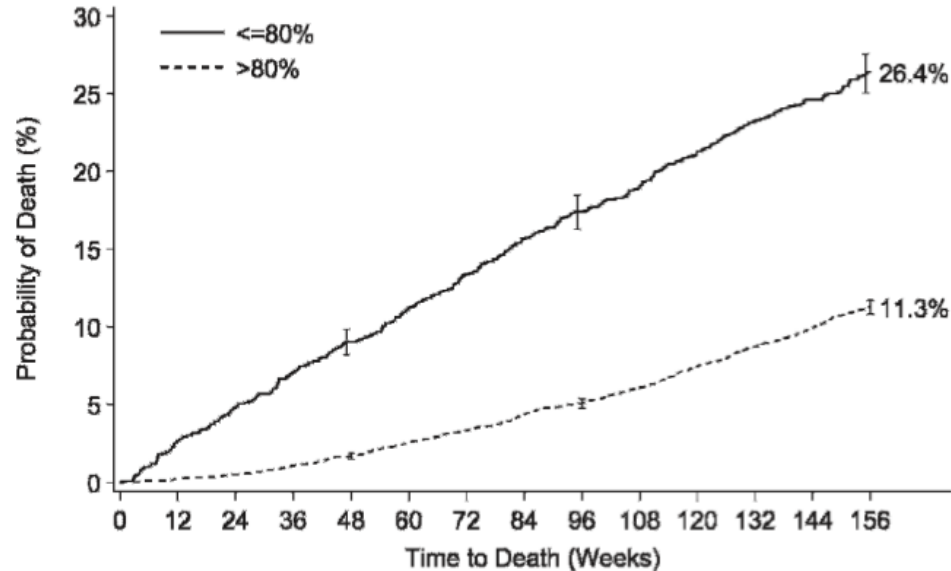


Table 2 Outcomes associated with adherence to COPD therapy.

Study	Outcome specification	Absolute outcomes		Relative outcomes	Significance <i>p</i> -value
		Non-adherent	Adherent		
Mortality					
Turner [23]	Percentage died	22.6%	23.7%	NR	n.s.
Vestbo [22]	Percentage died	26.4%	11.3%	Hazard rate 0.40 (0.35–0.46)	<0.001
Economic outcomes					
Halpern [20]	Healthcare costs	NR		Cost ratio 1.469 (1.13–1.91)	<0.01
	Medical costs	NR		0.629 (0.43–0.91)	<0.05
	Inpatient costs	NR		0.466 (0.30–0.72)	<0.01
Toy [19]	ED costs	\$412.658	\$405.248	Difference (%) –\$7.410 (–1.8%)	NR
	Hospital costs	\$11.635.099	\$11.338.501	–\$296.598 (–2.6%)	NR
	Outpatient costs	\$1.867.863	\$1.871.082	\$3.219 (+0.2%)	NR
Simoni-Wastila [17]	Inpatient costs	\$19.594	\$14.061	Marginal effects –\$4.609	<0.001
	Outpatient costs	\$12.664	\$11.450	–\$606	<0.001
	Drug costs	\$7.546	\$9.190	\$1.654	<0.001

Adherence to inhaled therapy, mortality and hospital admission in COPD

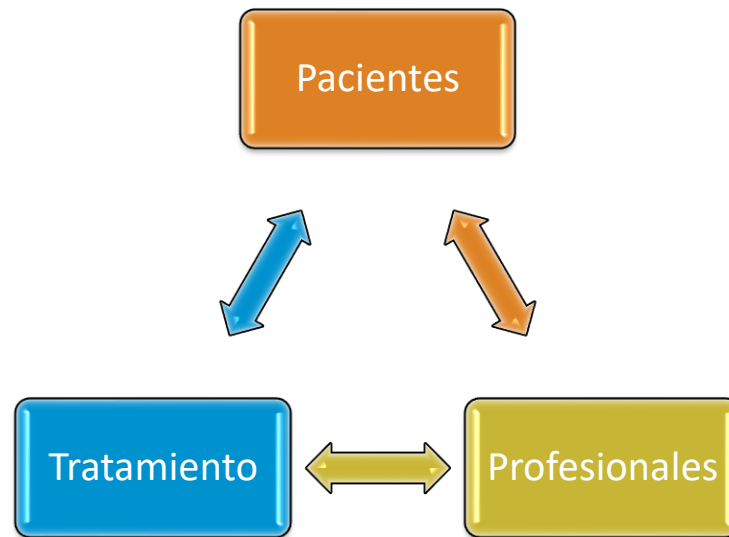
Thorax 2009;**64**:939–943



HR mortalidad: 0,40
(95%CI 0,35-0,46), p,0,001)

HR hospitalización: 0,58
(95%CI 0,44-0,73), p,0,001)

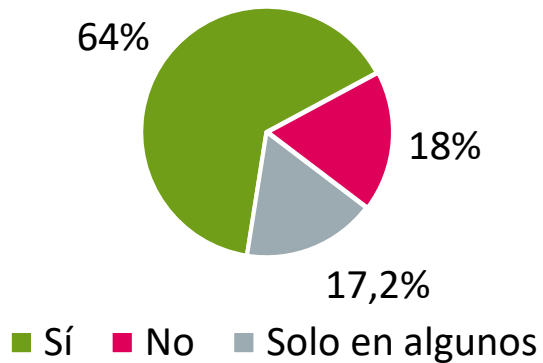
Como mejorar la adherencia



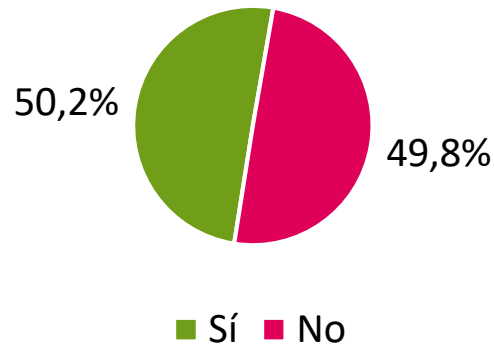
¿Evaluamos la adherencia?



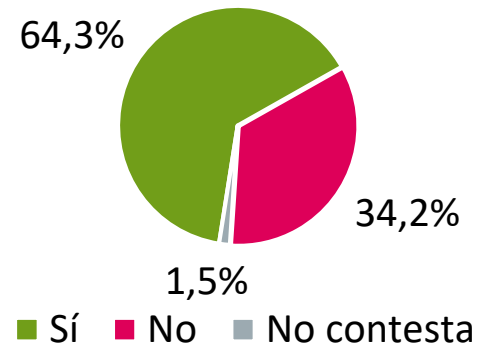
Medicina- Seguimiento adherencia



Farmacias- Seguimiento adherencia



Enfermería- Seguimiento adherencia



¿Evaluamos la adherencia?



International Journal of COPD

Dovepress
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ORIGINAL RESEARCH

Clinical audit of COPD in outpatient respiratory clinics in Spain: the EPOCONSUL study

Clinical interventions at the time of the last follow-up visit a

Treatment adherence evaluated

Inhalation technique evaluated

Grade of satisfaction with inhalation device evaluated

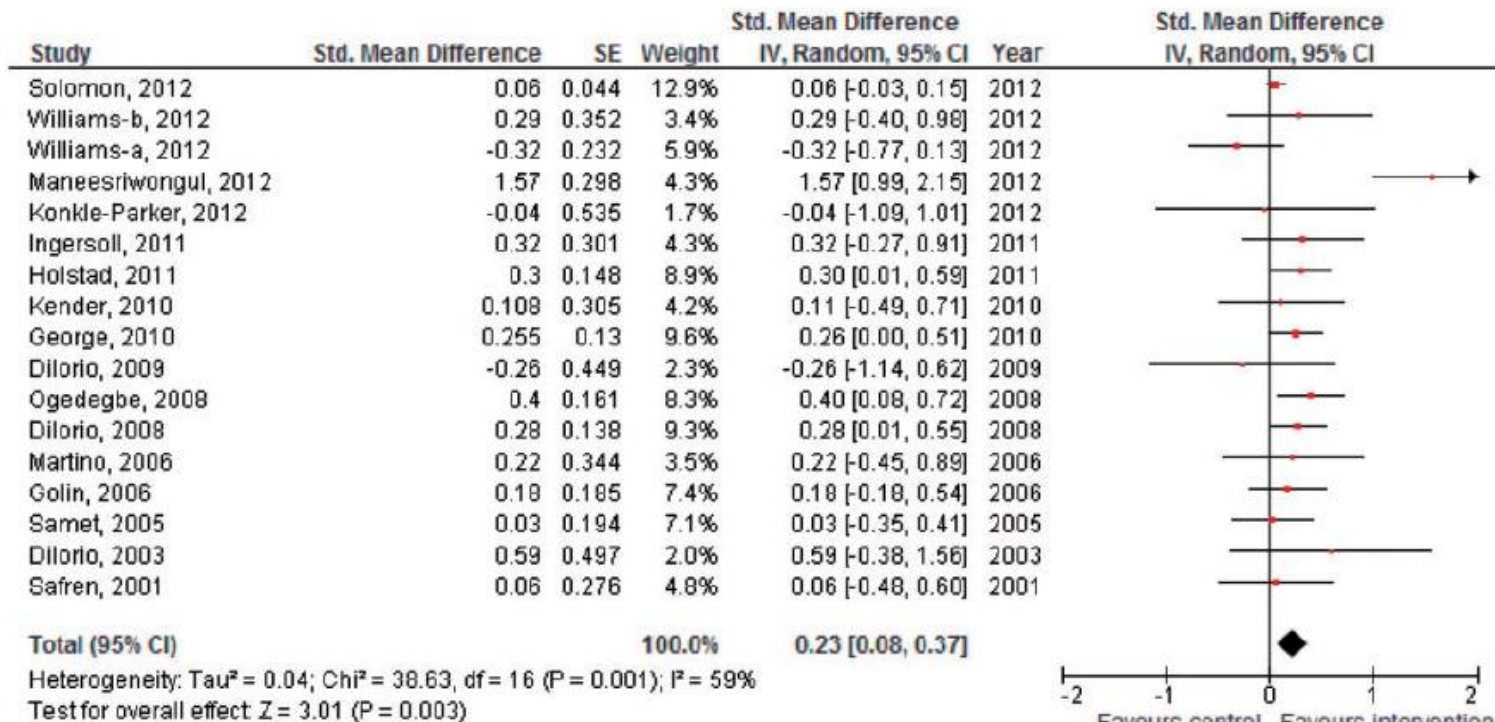
Adverse effects of medication collected

Patients (N=4,508)

N	Percent or median (IQR)
---	-------------------------

31.7	17.9–61.7
44.5	40–56.6
7.6	1.7–23.2
12.4	5–27.5

Effectiveness of motivational interviewing interventions on medication adherence in adults with chronic diseases: a systematic review and meta-analysis





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Respiratory Medicine

journal homepage: www.elsevier.com/locate/rmed



Review article

Impact of community pharmacists in COPD management: Inhalation technique and medication adherence



Iman Hesso*, Shereen Nabhani Gebara, Reem Kayyali

Kingston University London, School of Life Sciences, Pharmacy and Chemistry, Penrhyn Road, Kingston upon Thames, KT1 2EE, United Kingdom

Results: Ten studies are included in the review. The studies show that community pharmacists' interventions had a positive impact on improving patients' inhalation technique and adherence to inhaled medications. This was shown in some studies to be cost-effective in terms of reducing hospitalisation and severe exacerbation rate. Scarcity of studies in this domain is noted through this review.

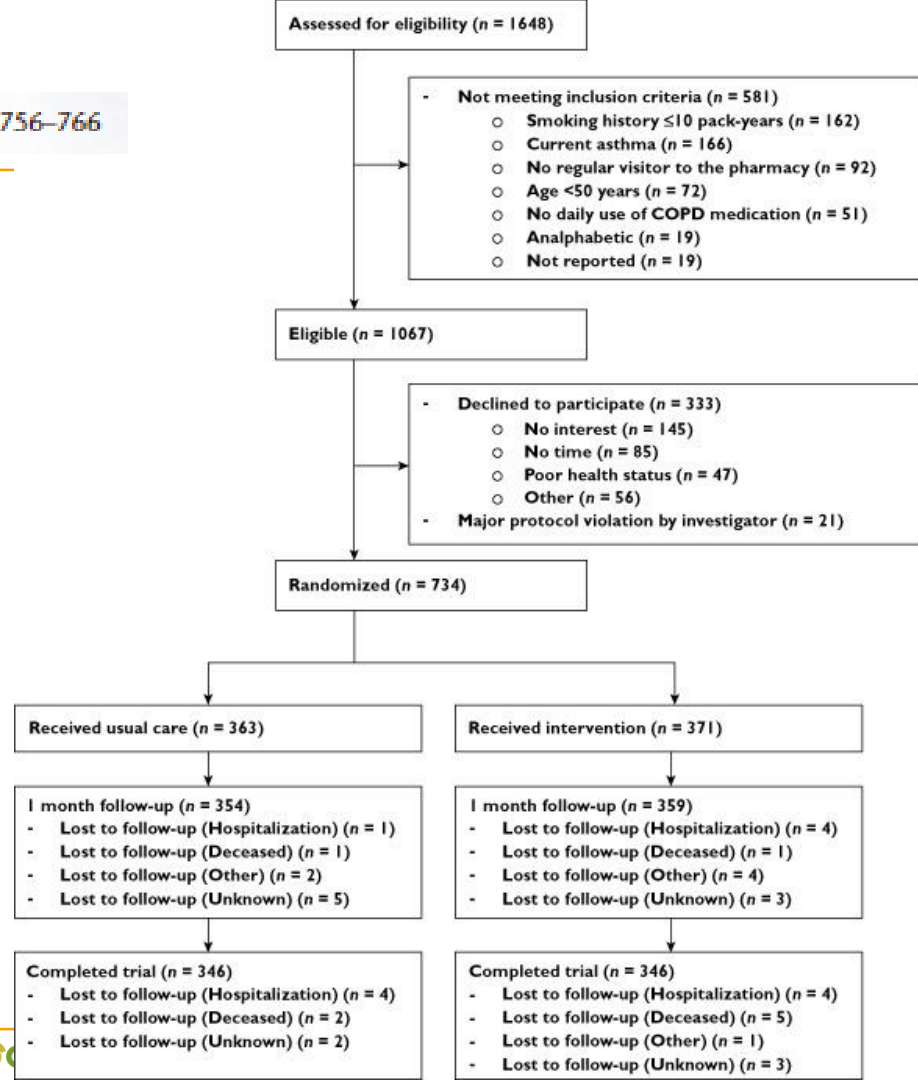
Effectiveness of pharmaceutical care for patients with chronic obstructive pulmonary disease (PHARMACOP): a randomized controlled trial

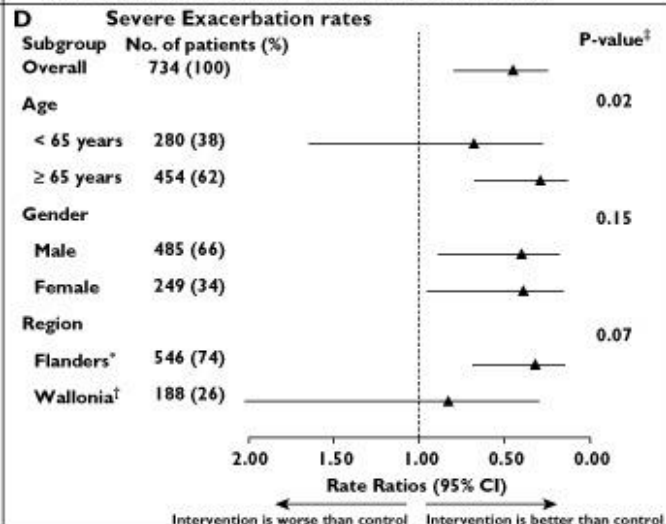
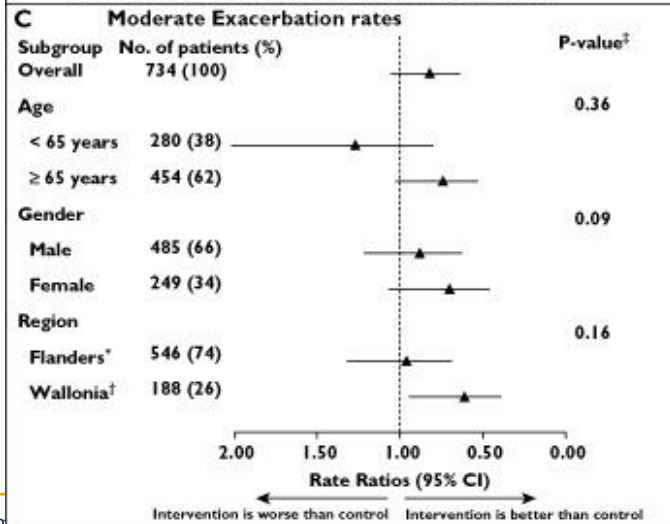
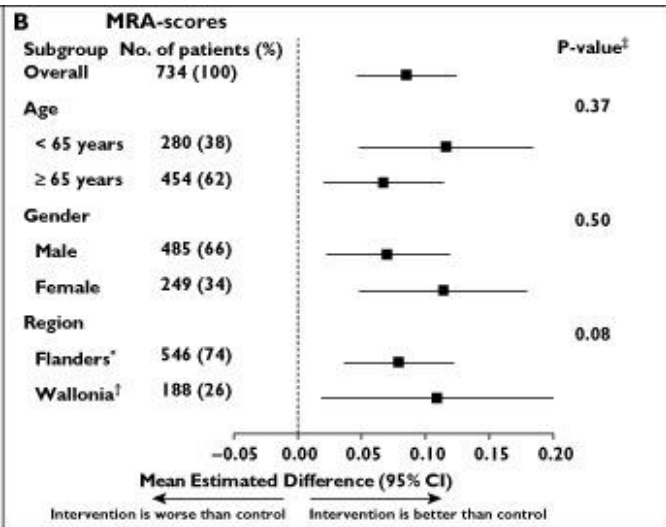
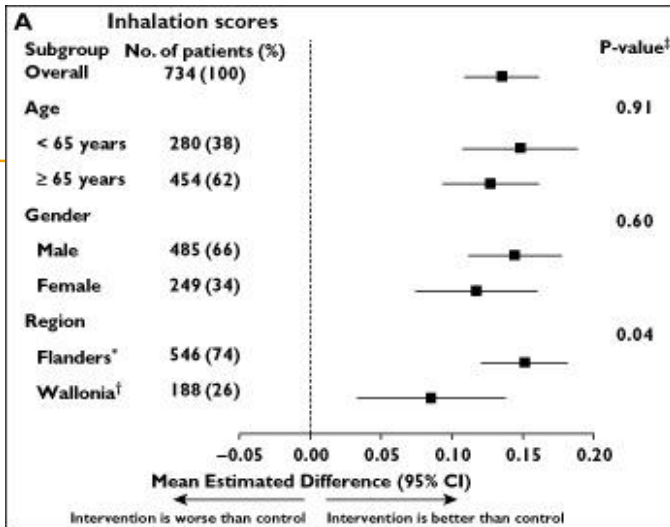
Eline Tommelein,¹ Els Mehuys,¹ Thierry Van Hees,² Els Adriaens,¹ Luc Van Bortel,³ Thierry Christiaens,⁴ Inge Van Tongelen,¹ Jean-Paul Remon,¹ Koen Boussey¹ & Guy Brusselle^{5,6}

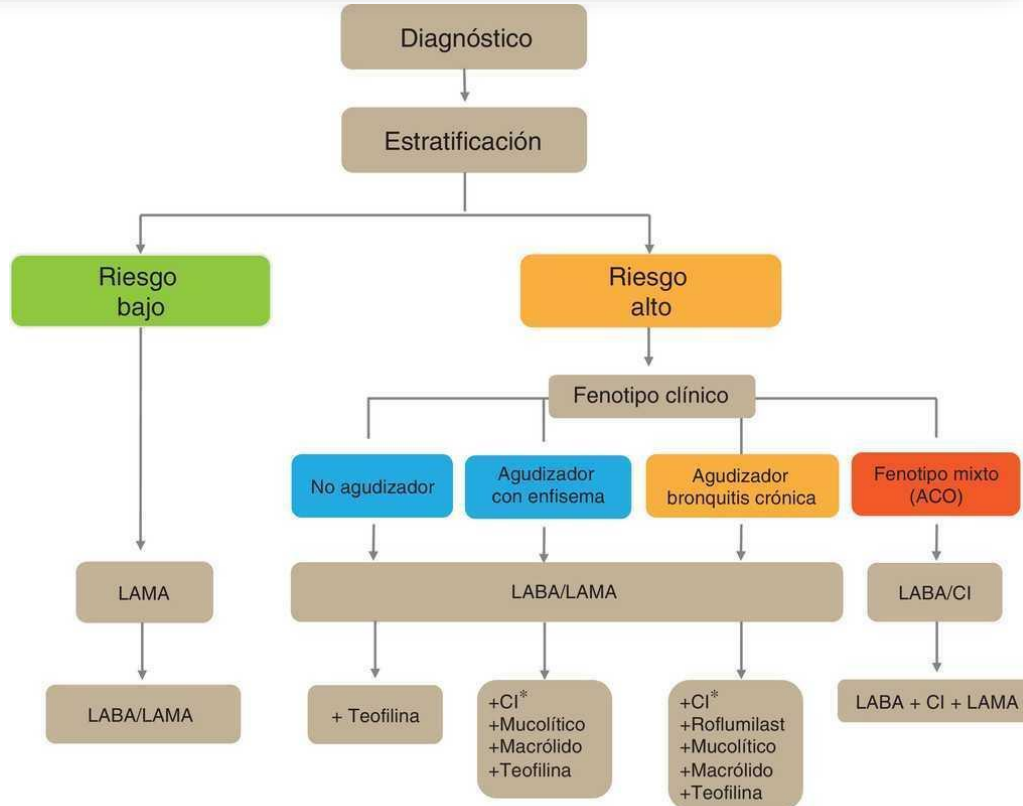
¹Pharmaceutical Care Unit, Faculty of Pharmaceutical Sciences, Ghent University, Ghent, Belgium,

²Department of Clinical Pharmacy, University of Liège, Liège, Belgium, ³Heymans Institute of Pharmacology, Faculty of Medicine and Health Sciences, Ghent University, Ghent, Belgium,

⁴Department of Family Medicine and Primary Health Care, Faculty of Medicine and Health Sciences, Ghent University Hospital, Ghent, Belgium, ⁵Department of Respiratory Medicine, Ghent University Hospital, Ghent, Belgium and ⁶Departments of Epidemiology and Respiratory Medicine, Erasmus MC, Rotterdam, The Netherlands







Arch Bronconeumol 2017;53:324–35

Treatment of COPD: Relationships between daily dosing frequency, adherence, resource use, and costs



N = 55.076
pacientes

	1/día	2/día	3/día	4/día
% Días C	43,5	37	30	23

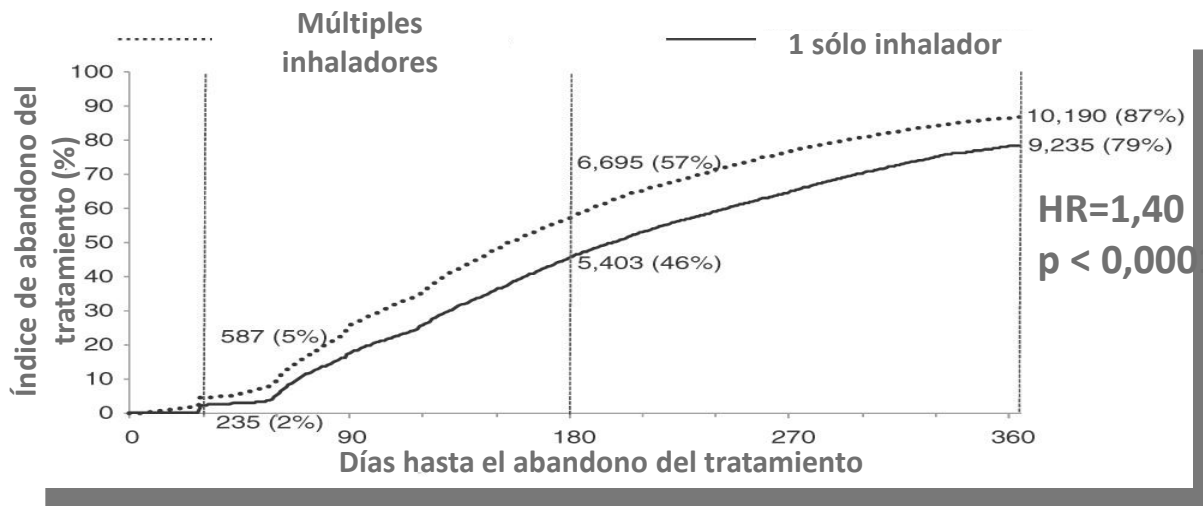
	Ingresos	Urgencias	Costes
Δ 5% Días C	2,5%	1,8%	300.000

Respir Med 2011; 105:435-441

La importancia de 1 versus 2 o más dispositivos en EPOC



Índice anual de **abandono del tratamiento** entre 1 inhalador vs. varios inhaladores, tras controlar factores de confusión

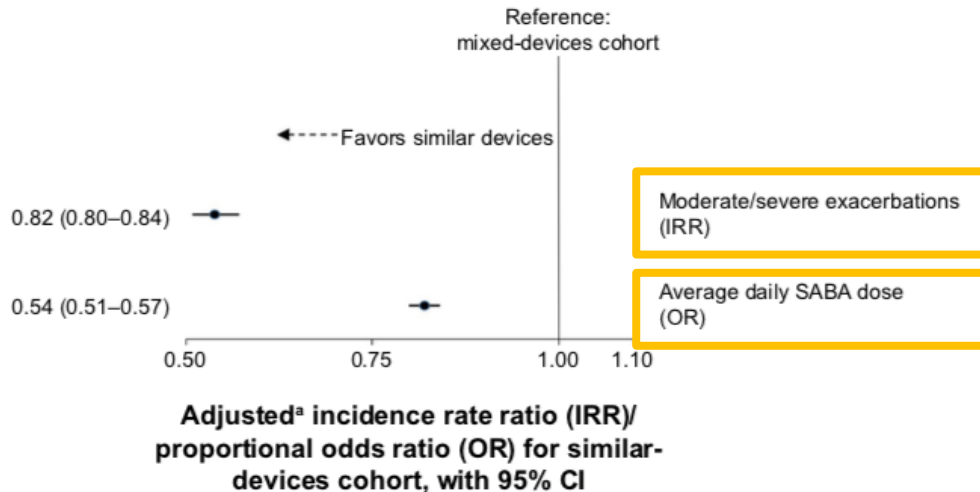


Yu AP et al. J Med Econ (2011) ;14 (4):486-496

Similaridad inhaladores



The use of multiple respiratory inhalers requiring different inhalation techniques has an adverse effect on COPD outcomes



International Journal of COPD 2017;12:59-71



- Falta de adherencia en EPOC: problema de salud.
- Información y formación
- Estrategias para el cumplimiento
- Tratamiento participativo
- Equipos multidisciplinares
- Simplificar tratamientos



GRUPO OAT

Gracias

Un compromiso de todos, un objetivo común

