# Effective AC Management: Focus on Promoting and Simplifying Adherence

May 8, 2013 Marriott Desert Ridge Resort & Spa Phoenix, Arizona



NBCA extends its appreciation to the Anticoagulation Forum for the opportunity to conduct this symposium as an affiliate meeting of the 12th National Conference on Anticoagulation Therapy



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## **President & CEO**

With great pleasure, we welcome you to Phoenix and to the National Blood Clot Alliance (NBCA) symposium, *Effective AC Management: Focus on Promoting and Simplifying Adherence.* This symposium is an official affiliate meeting of the 12th National Conference on Anticoagulation Therapy of

the Anticoagulation Forum. As such, we want to extend our gratitude to the AC Forum, particularly Elizabeth Goldstein, the organization's Executive Director, for allowing us the opportunity to coordinate this meeting in conjunction with their larger conference, and also for being so helpful to NBCA in the weeks and days leading up to our gathering here.



We also want to thank our distinguished faculty for lending their

Randy Fenninger, JD

expertise to this program, and for enabling us to offer such a broad spectrum of resources from which to draw as we convene the multidisciplinary group of physicians, nurses, patients, pharmacists, and other key stakeholders who are participating in our symposium today.

## Your participation in this meeting is invaluable, as you serve a vital role in the management of anticoagulation strategies for patients who require life-saving anticoagulation therapy, with a special emphasis on those affected by atrial fibrillation (AF), as well as venous thromboembolism (VTE). This symposium is



unique, as we are gathered not only to impart information, but, most importantly, to give voice to the experiences and opinions of our symposium participants. With your participation and input, we intend to formulate recommendations for the development of resources and tools to help improve patient adherence to prescribed anticoagulation therapy and to help optimize health outcomes associated with AF and VTE.

Alan Brownstein, MPH

We are honored to have such a dynamic group gathered to contribute to this program. Working together, our efforts to optimize patient care are improved and our common efforts to Stop the Clot<sup>®</sup> are strengthened.

Randy Fenninger, JD, President Alan Brownstein, MPH, CEO

## NBCA Medical & Scientific Advisory Board

Non-adherence to prescribed drug therapy has been an issue of concern for decades in all fields of medicine. With warfarin, adherence to medication use and INR monitoring has always been important in optimizing TTR. With the introduction of new oral anticoagulation therapies,

the importance of adherance has assumed even greater significance with a short-acting, non-monitored drug.

Non-adherence is both a common and complex issue. According to a survey conducted in 2006 by the National Community Pharmacists Association and Pharmacists for the Protection of Patient Care, nearly three out of four Americans do not always take their medication as prescribed. As we know, the reasons



Gary Raskob, PhD

for non-adherence can range from something as simple as forgetting to take medication or a miscommunication between patient and prescriber, or as complicated as the onset of troublesome side effects or the inability to pay for a prescription. In anticoagulation therapy, studies have shown that 22% to 32% of patients affected by AF do not take warfarin therapy as prescribed, which generally corresponds with results of a study conducted by NBCA in 2010, in which 26% of 259 AF patients taking warfarin reported non-adherence. We are gathering to consider the many complex factors that contribute to non-adherence among patients taking anticoagulation therapy. Several factors combine to make this a subject of growing importance. A few of the changes that may impact on adherence include, the aging of America and the growing prevalence of AF and

incidence of VTE, the emergence of new

oral anticoagulation therapies with a

shorter half-life that no longer require

monitoring, and health policy changes

resulting from the Affordable Care Act.

this symposium one single strategy or

that surround adherence? We trust not,

tactic to remedy the complex issues

Will we find during the course of



Jack Ansell, MD

but we are confident that collectively we will be better focused and better equipped to identify existing models, or potentially new approaches, that will help improve our ability to reinforce adherence and help our patients achieve their best results.

On behalf of NBCA's Medical and Scientific Advisory Board (MASAB), we thank you for your contributions to this important undertaking and look forward to collaborating with you.

Gary Raskob, PhD, MASAB Incoming Chair, Symposium Co-Chair Jack Ansell, MD, MASAB Chair, Symposium Co-Chair

## Agenda

## Morning Program 8:00 am – Continental Breakfast Desert Conference Suite I



#### 8:30 am Randy Fenninger, JD NBCA President and VTE Patient

## Utilizing Patient Advocacy Teams to Reach Patients, Enhance Adherence

Advocacy organizations and lay educators build the framework for the exchange of a spectrum of information that can impact adherence, which has a dramatic impact on improving public health. As such, they pave pathways for information sharing and interventions that may foster improved understanding of, and adherence to, lifesaving anticoagulation therapies. The advent of the Affordable Care Act perhaps makes these issues more important than ever before, as the law challenges providers and patients to do things differently, with improved results and reduced cost. Multiple opportunities exist in this regard for public-private partnerships to help benefit patient care, quality of life, and health outcomes, while respecting the finite resources that we can apply to healthcare or any other endeavor.



## 8:50 am

Mellanie True Hills StopAfib.org CEO and AF Patient

## Anticoagulation Management and Adherence: Putting Patients First

There are many reasons why a patient might not adhere to their prescribed medication. Communication should always be considered a prime factor. Outreach conducted by StopAfib.org asked atrial fibrillation patients why they don't follow doctor's orders and how physicians can help them achieve their best results. Communication was identified as a root cause of adherence problems. A patient-centered approach with improved communication

may help to overcome barriers associated with adherence. It also may help to bridge gaps between the needs of individual patients and the desired patterns of adherence. Better dialogue between healthcare providers and patients is a main ingredient in fostering adherence and treatment outcomes.



**9:20 am** Jack Ansell, MD *Chair, NBCA MASAB* 

Anticoagulation Management: New Challenges in a New Era of Anticoagulation Therapy

The introduction of new oral anticoagulants creates new opportunities for healthcare professionals and both VTE

and AF patients alike, but with these opportunities come new challenges. New oral anticoagulants, which do not require laboratory monitoring and dose adjustment, raise new issues relative to adherence. The promise of these new therapies must be balanced with the challenges they pose. Effective methods to help overcome potential challenges associated with non-adherence to these newer anticoagulants must be explored and better understood. As a monitored therapy, warfarin will maintain a role among select patient populations, which may include patients who fail on or who are noncompliant to new oral ACs. The future of AC therapy in AF and VTE hinges on our ability to harness the potential associated with an expanding spectrum of therapeutic options in the name of optimal patient care.

## 9:45 am



Meera Viswanathan, PhD Director, Research Triangle Institute University of North Carolina, EPC III

## Medication Adherence Interventions: Comparative Effectiveness

## AHRQ Evidence Report/Technology Assessment #208

Central to the achievement of quantitative improvements in public health are knowledge and tools. Despite advances in medical treatments to improve health outcomes, numerous published studies and reports demonstrate the incongruity between current treatment success rates and those thought to be achievable. Non-adherence to treatment is one of the explanations for this incongruity. A comparative effectiveness review prepared for the Agency for Healthcare Research & Quality (AHRQ) suggests that numerous pathways provide opportunities to improve medication adherence across a spectrum of clinical conditions. These approaches range from low-cost interventions, such as telephone reminders, to more intense and more costly interventions, such as care coordination and case management. Research shows a subset of these effective interventions relate better adherence to better health outcomes. Further research is needed to explore improved adherence with other outcomes, such as, for example, morbidity, mortality, quality of life, healthcare utilization, and costs.

## 10:15 am Break

10:45 am



Julie Kuhle, RPh Senior Director of Performance Measurement, Pharmacy Quality Alliance

## Adherence as a Performance Measure for Newer Anticoagulant Therapies

Evidence shows the clinical and financial impact of noncompliance and lack of patient adherence to prescribed

drug regimens. Performance measures addressing adherence have been successful in improving adherence rates for chronic medications. In the field of anticoagulation management, newer anticoagulation therapies do not require monitoring and therefore pose new and unique challenges associated with adherence. The Pharmacy Quality Alliance developed a performance measure for non-warfarin anticoagulants in the treatment of AF that can be used by prescription drug plans. The consensus based process to construct the measure utilizing only prescription claims data will be covered. Testing questions, the results of measure testing and next steps for the endorsement of this measure will be shared.



## 11:15 am

Margaret Fang, MD, MPH Medical Director, UCSF Anticoagulation Clinic

#### Adherence to Oral Anticoagulants in Real-World Settings: Factors Influencing Adherence and Persistence of Therapy

For decades, vitamin K antagonist anticoagulants have formed the mainstay of anticoagulation therapy. There are acknowledged challenges in maintaining patients on warfarin within target therapeutic ranges, and the efficacy and safety of therapy can be compromised by poor anticoagulation control. Inadequate adherence to therapy has been often cited as a contributing factor to less than perfect anticoagulation control. However, many factors are associated with anticoagulation guality, of which adherence is only a part. Several risk factors for lesser adherence have been identified in patients taking anticoagulants, but it is not yet clear what interventions may have the greatest impact in improvement. The newer target-specific anticoagulants, despite not requiring the stringent monitoring that warfarin does, will also be subject to challenges in adherence and persistence of therapy.

## Afternooon Program 12:00 pm – Lunch Desert Conference Suite I

#### 1:15 Working Groups

Group AF (Desert Suite III) Margaret Fang, MD, MPH Medical Director, UCSF Anticoagulation Clinic

**Group VTE (Desert Suite V)** Facilitator: Scott Kaatz, DO, MSc, FACP *Chief Quality Officer, Hurley Medical Center* 





## 2:45 pm (Desert Conference Suite I) Symposium Reconvenes

#### 2:50 pm

Margaret, Fang, MD, MPH AF Working Group Opinions and Input

#### 3:00 pm

Scott Kaatz, DO, MSc, FACP VTE Working Group Opinions and Input

## 3:10 pm Panel Discussion of Working Group Input, Q&A

## 3:30 pm

Gary Raskob, PhD Dean, College of Public Health, and Professor, Epidemiology and Medicine, University of Oklahoma Health Sciences Center, and incoming Chair NBCA MASAB

## **Closing Remarks**

Long-standing evidence demonstrates the impact of nonadherence on public health. Be it connected to diabetes management or the optimal treatment of AF or VTE, adherence is a complex issue that requires careful scrutiny and a multidisciplinary approach to help improve understanding and uncover effective methods for intervention. Important factors involving diverse patient needs, emerging trends in patient care, new therapies, and new healthcare policies and practices, all combine to create a dynamic challenge that healthcare professionals face each day. As our population ages, these issues become more pressing, as the incidence of blood clots and AF cases increase. Through our collective contributions and collaboration, our focus should remain on the patient. Our goal should be to achieve optimal outcomes that benefit the patient and minimize the public health burden of blood clots that cause stroke and blood clots connected to VTE. The recommendations brought forward from this meeting will contribute to improved dialogue about these important issues in AC management, particularly in light of our expanding spectrum of treatment in the care of AF and VTE.

**3:55 pm** Alan Brownstein, MPH *NBCA CEO* 

Thank You, Next Steps

4:00 pm Meeting Concludes



## NBCA Vision and Mission Statements

## Vision

The National Blood Clot Alliance foresees a future in which the number of people suffering and dying from blood clots in the United States is reduced significantly.

## Mission

Working on behalf of a broad array of people who may be susceptible to blood clots, the National Blood Clot Alliance advances prevention, early diagnosis and successful treatment of blood clots, clotting disorders and clot-provoked strokes through public awareness building, patient and healthcare professional education and supportive public and private sector policy promotion.

## **Program Participants**

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