

# HEALTH

## Stopping or not filling a prescription is a bad idea

### VIEWPOINT



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Syndicated Columnist

Almost daily, I confront patients who elect to stop or not fill a recommended prescription. In the field of geriatrics, this is rarely life-threatening as the most frequently prescribed medications are those used to treat chronic conditions, such as osteoarthritis, back pain, high blood pressure, elevated cholesterol and depression. While noncompliance may not contribute to mortality rates, it seriously affects a physician's ability to maintain healthy patients.

Research clearly shows that continued compliance with a medical regimen is frequently a problem. Nearly half of patients elect to discontinue an effective medication, fail to follow the doctor's advice, and either stop early or take their medications incorrectly. Many patients simply forget to take their medicine.

Information just published in the Journal of General Internal Medicine evaluated non-adherence to medications in more than 75,000 patients treated by 1,217 medical prescribers. Only 78 percent of the nearly 200,000 prescriptions were filled, and of those prescriptions written for new medications, only 72 percent were filled.

The study also found that compliance rates vary with the type of physicians who prescribe medication. For example, prescriptions were filled more often when written by a primary care physician, particularly pediatricians. Fewer prescriptions were filled if the physician was a specialist, younger, female or part of a group of more than 10 physicians.

Prescriptions for patients under the age of 18 were more likely to be filled. Sadly, compliance was least likely in older patients with multiple chronic diseases, including high blood pressure (28.4 percent), elevated cholesterol (28.2 percent) and diabetes (31.4 percent).

Patients fail to follow a doctor's orders for various reasons. In many cases, cost is a concern. Patients without health insurance and those insured patients with high co-pays or deductibles may never fill a prescription.

For many Medicare patients, medications are discontinued upon reaching the "doughnut hole" - when insurance requires the patient to pay all costs up to \$2,500.

Fortunately, health care reform will slowly eliminate this gap in coverage. The cost of medication is particularly problematic for older adults with multiple chronic illnesses and those on fixed incomes.

However, cost is only one reason for poor prescription compliance. Potential side effects scare many patients from beginning a therapy. In addition, filling prescriptions seems to be partly assisted by the ease with which they can be obtained. For example, compliance appears to be higher at Kaiser Permanente hospitals and clinics, where patients can pick up drugs at a pharmacy on site.

The key to improving compliance is education. Patients must understand the purpose of every prescribed medication. More importantly, they must know how benefits of the drug outweigh potential risks.

Your doctor has an important role in explaining the value and need for a particular medication and providing understandable information on the prevalence of side effects. For virtually every medication used to treat chronic illnesses such as pain, high blood pressure, heart disease and osteoporosis, the true incidence of side effects is quite rare. Nevertheless, when side effects do occur, particularly if unexpected, they cause a great deal of alarm.

I always advise my patients to discuss their medications with a trusted pharmacist, who plays a key role in education and minimizes the risks of side effects.

Failure to take medications appropriately can lead to continued symptoms and progressive disease. Moreover, it contributes to poor health and rising medical costs.

If possible, always talk to your physician or pharmacist before discontinuing a medication. Whatever the reason for noncompliance, you should not feel reluctant or embarrassed to tell your doctor that you have elected not to fill or continue taking a medication. If cost is a concern, discuss it immediately. Generic, low-cost medication may be available or different therapies may be appropriate.

If side effects are unbearable, do not wait for several months to discuss it with your doctor. Call the clinic, make the doctor aware of the problem and find out whether there is an appropriate alternative.

*Dr. David Lipschitz is the author of the books, "Breaking the Rules of Aging" and "Dr. David's First Health Book of More Not Less." To find out more about Dr. David Lipschitz and read features by other Creators Syndicate writers and cartoonists, visit the Creators Syndicate Web page at [www.creators.com](http://www.creators.com). More information is available at [www.DrDavidHealth.com](http://www.DrDavidHealth.com).*

## HPRH to host Teens in Health Expo

High Point Regional Health  
TIMES STAFF REPORT

System's Promoting the Advancement of Teens in Health care (PATH) Service Expo introduces students to numerous health care opportunities.

Several health system departments set up stations, exhibits, storyboards and bring "hands on" equipment in order to share information about health careers with the PATH students on Thursday, June 24 at 9 a.m. at High Point

Regional Hospital Volunteering not only promotes service consciousness in the community, but the student cultivates a sense of self worth. Students see what it is like to be in a real work environment. In addition, volunteering teaches workplace skills and provides teens with resources and references for future employment.

The expo will be held in conference rooms A1, A2 and B1. The hospital is located at 601 North Elm St. in High Point.

For more information, call Jennifer Shaw (336) 878-6000 ext. 2807.

## HPRH employee named examiner for N.C. awards program

TIMES STAFF REPORT

Sue Cumpston, business intelligence analyst at High Point Regional Health System, was selected and completed training to serve as an examiner for the North Carolina Awards for Excellence (NCAfE) process.

NCAfE is a cooperative industry, academic and government initiative to improve organizational competitiveness and to provide recognition for participation. The NCAfE process provides expert feedback to organizations on their accomplishments based upon the prestigious Malcolm Baldrige Criteria for Performance Excellence.

These Performance Excellence Criteria are designed to help organizations enhance their effectiveness and competitiveness.

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