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Generic substitution: additional challenge for adherence in hypertensive patients?

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Abstract

Objective:

This study aims to investigate whether, and in what way, generic substitution affects drug adherence in hypertensive patients.

Methods:

Personal and brand-name antihypertensive drugs were substituted with generic equivalents in a semi-structured manner. The study was conducted in a primary care setting. Results are presented in a separate paper. On average, 1.5 (1-4) drugs were substituted. The study included 100 hypertensive patients. The results show that 20% of the patients did not remember to take their medication every day. One in three said generic substitution

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made keeping track of their medications more demanding. Twenty-nine percent were anxious when they started to use a generically substituted drug. Eight percent felt that the effect of the drug had changed, and 15% reported having new or more side-effects. A negative attitude towards generics was significantly associated with low educational attainment, increasing number of drugs, having general concerns about medicine use, and having received insufficient information regarding generic substitution. Five percent of the patients had been using more than one equivalent generic drug at the same time. These were among those who used several different drugs and also among those who got their medications from more than one pharmacy. Five percent is a too small number to draw general conclusions; however, there is no reason to suspect that these mistakes do not occur from time to time.

Conclusions:

This study shows that generic substitution can be an additional factor in poor drug adherence in hypertensive patients and contributes to concerns and confusion among the patients. Although generic substitution is an important measure of cost containment, health personnel should approach each patient individually. Clearly, many patients feel insecure about substituting their medication and demand more information.

Keywords: :

Adherence

Compliance

Cost containment

Generic drugs

Generic substitution

Hypertension

Patient safety

Transparency

Declaration of Conflicts of Interest

The authors have no conflicts of interest to declare.

(Norway)

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All of the authors have no conflicts of interest to declare.

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relationships.

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Descriptive results from this study were presented at the 15th International Social Pharmacy Workshop in New Zealand (8–11 July 2008) and the 12th European Symposium on Patient Adherence, Compliance and Persistence in Switzerland (5 September 2008). Abstracts have been published nationally in the Norwegian Pharmaceutical Journal (September 2008).

Notes

*The 90% confidence interval for the ratios of the test:reference log-transformed mean AUC and C_{\max} values is within the range from 0.8 to 1.25. The guidelines also enable a bibliographic application procedure for pharmaceuticals that have been in clinical use for more than 10 years based on data on absorption and effect from international publications.

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