



**First European Congress on Adherence to Therapy
Rimini - Palacongressi
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Persistence with therapy for Lower Urinary Tract Symptoms

Prof Mirone

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Prof Carrieri

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Top 5 conditions in UROLOGY

- Prostate Disease (benign)
- Incontinence
- Stones
- Impotence
- Cancer - Prostate

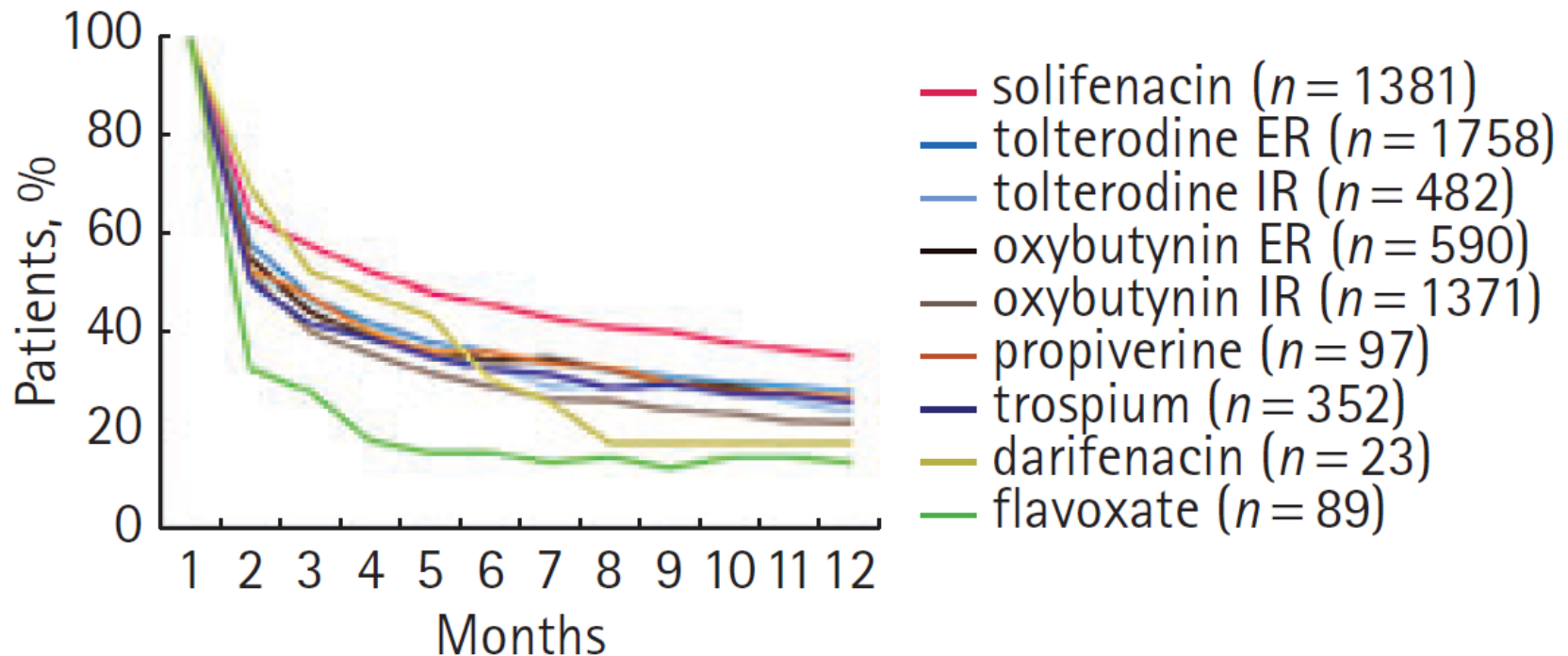
EPIDEMIOLOGY

- BPH has a prevalence of 40% amongst men 60 years or older and 90% for men 80 years or older..
- Left untreated, men with symptomatic BPH/BPE have a 23% lifetime risk of developing acute urinary retention (AUR)
- In 2000, BPH generated \$1.1 billion in healthcare costs



Antimuscarinic Therapy of OAB

Persistence with Treatment - UK



- Why?

- Information overload
- Not scientifically verified
- Commercial influence
- Difficult wording

Why do we need Guidelines?

- too much information
- reduce bias
- reduce random error
- explore variability in published research
- provide reliable basis for making good clinical decisions
- inform and influence future research and clinical practice

- Every urological patient in Europe should have access to
 - the highest quality patient information.
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- Based on the latest scientific evidence -> EAU Guidelines
 - Patient centric
 - Consistent in content and quality -> Visuals
 - Relevant to patients living in different countries

TOPIC	LANGUAGES	
Prostate Cancer	<ul style="list-style-type: none"> • Bulgarian • Czech • English • German 	<ul style="list-style-type: none"> • Polish • Spanish • Turkish
Nocturia	<ul style="list-style-type: none"> • Croatian • Czech • English • German 	<ul style="list-style-type: none"> • Slovakian • Spanish • Turkish
OAB	<ul style="list-style-type: none"> • Croatian • Czech • English • Latvian 	<ul style="list-style-type: none"> • Slovakian • Spanish • Turkish
Urinary Incontinence	<ul style="list-style-type: none"> • Bulgarian • Chinese • Czech • English 	<ul style="list-style-type: none"> • German • Spanish • Turkish
Erectile Dysfunction	<ul style="list-style-type: none"> • Chinese • Croatian • Czech • English 	<ul style="list-style-type: none"> • German • Spanish • Turkish

*“**Poor adherence** to a therapeutic regimen has been identified as **a major public health problem** that may have a major **impact on clinical outcomes!**”*

“Adherence to medication is fundamental prerequisite for the effectiveness and safety of treatments”.

- BPH patients are old with other morbidities
- Global analysis of prescriptions : 2.000.000 BPH patients :
 - Median number of medications associated with BPH treatment : **5 other medications**
 - **25% of patients take more than 8 other medications**

**This aspect of reality is far from RC studies
using stringent criteria**



**unknown and underestimated interactions
between drugs are never considered**

**Evidence
Based
medicine**

*Clinical
guidelines*

**Care
providers**

practitioners

All parameters impacting
guidelines application

- National healthcare organisation
- Reimbursement policies
 - Doctors payment
 - Balance between private/public healthcare
 - Accessibiliy....
 - Firm marketing....

**Clinical
practice**

Very different of
EBM

*Must be analysed to
improve adherence
to therapy*

- mnemonic “SIMPLE”:
- **S** simplifying regimen characteristics
- **I** imparting knowledge
- **M** modifying patient beliefs
- **P** patient communication
- **L** leaving the bias
- **E** evaluating adherence

1. Frank and open approach recognising that non-adherence is the norm (or is at least very common)
2. Good communication between healthcare professionals and patients is essential.
3. It should be supported by evidence-based written information tailored to each patient's needs.
4. Establish what level of involvement in decision-making the patient would like.
5. Accept that the patient has the right to decide not to take a medicine, even if you do not agree with the decision

- suggesting that patients record their medicine-taking
- encouraging patients to monitor their condition
- simplifying the dosing regimen
- using alternative packaging for the medicine
- using a multi-compartment medicines system.

*The main difference
is that adherence
requires the patient's
agreement to the
recommendations.*

