



Structured Education and Medication Adherence in Oncology Patients Prescribed Oral Chemotherapy



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BACKGROUND/SIGNIFICANCE

- Less than 50% of patients adhere to their prescribed medications and healthcare recommendation's. ¹
- Non-adherence to medication causes approximately 125,000 deaths per year in the U. S. with non-adherence rates between 33% - 60% as the main contributor. ²
- Oncology patients are more at risk for non-adherence behaviors as they experience increased patient autonomy and less healthcare support in the outpatient setting. ³

PROBLEM STATEMENT

Problem Statement:

The use of oral chemotherapeutic agents continues to increase, and these medications have complex dosing schedules that require counsel, education, and support to promote medication adherence.

Clinical Question:

Do structured patient education sessions utilizing the Medication Oral Agent Teaching Tool (MOATT) improve medication adherence in oncology patients' prescribed oral chemotherapy?



ROL/Framework

- Patient beliefs are significant predictors when assessing risks and barriers to medication adherence.⁴
- Advanced Practice Nurses that incorporate The MOATT during patient education support and improve medication adherence.⁵
- The use of oral chemotherapy is more common and comprising 25% of all new chemotherapy medications in development for the outpatient setting.⁶

Health Belief Model



PROJECT DESIGN/METHODS

- **Design & Sample:** A descriptive quantitative pilot study a one group pretest posttest design, convenience sample: 10 adult oncology patients; 50% Male and 50 % Female
- **Setting:** An outpatient adult oncology private physician office in Brooklyn, New York
- **Procedure:** Four structured patient education sessions incorporating the Medication Oral Agent Teaching Tool (MOATT)
- **Instruments:**
- The Medication Oral Agent Teaching Tool (MOATT)
- Adherence Starts with Knowledge-12 Survey(ASK12)
- Patient Diary of Adherence
- Field Notes Themes of Adherence

RESULTS

| Paired t Test | Mean | N | Std. Deviation | Sig. |
|------------------------------|------|----|----------------|---------|
| Session 2 Total MOATT Scores | 5.4 | 10 | 1.65 | p< .001 |
| Session 4 Total MOATT scores | 8.7 | 10 | .483 | P< .001 |

A positive correlation indicated that age, education, and pre MOATT scores were responsible for 60% of variance found in post MOATT Scores. $r = .60$ $p < .001$

Qualitative Themes of Adherence



DISCUSSION

- The MOATT improved medication adherence in patients prescribed oral chemotherapy. The MOATT fostered and improved healthcare provider relationships supporting and increasing the use of positive self care strategies. Structured education and the MOATT increased identification of behaviors and beliefs that can impede medication adherence

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⁷ Gatti, M., Jacobson, K., Gammoran, J., Schmotzer, B., and Kripitani, S. (2009). Relationships between beliefs about medications and adherence. *American Journal of Health System Pharmacy*, 66(6), 467-468. doi:10.2146/ajhp080064