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Take Medications as Directed, Reduce Overall Healthcare Costs

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Description

Spend the money on medications now and save close to \$4,000 in annual healthcare costs. So says a new study of older adults who regularly refilled prescriptions to treat overactive bladder syndrome.

Newswise — Spend the money on medications now and save close to \$4,000 in annual healthcare costs.

So says a new study of older adults who regularly refilled prescriptions to treat overactive bladder syndrome. These patients were less likely to incur more costly health-related expenses, such as doctor visits, even if they were also taking medications for other, unrelated health conditions, said Rajesh Balkrishnan, the study's lead author and the Merrell Dow professor of pharmacy at Ohio State University.

With every 10 percent increase in the number of overactive bladder medication prescriptions filled, the researchers saw a 5.6 percent decrease in annual healthcare costs.

During the final year of the three-year study, the people who routinely took their medication saved about \$3,700 in overall healthcare costs compared to the participants who didn't take their medication as prescribed.

The study appears in the March issue of the *Journal of Urology*.

The study's findings may have important implications for people enrolled in Medicare's new drug benefit program that went into effect on January 1.

"In the new plan, more prominence and financial support may be allotted to medications that treat prevalent, well-known conditions like diabetes and hypertension," he said. "Although a condition like overactive bladder affects millions of people, it generally isn't considered as important to treat as those

other diseases.”

Even so, a non-life threatening condition like overactive bladder syndrome can have a huge impact on healthcare spending by elderly people: Treatment costs for the syndrome hover near \$13 billion annually.

Overactive bladder syndrome – a sudden and frequent urge to urinate – affects an estimated 34 million people in the United States. The majority of people with the disorder are 65 or older, and more women than men are affected.

The study included 275 older adults with overactive bladder syndrome. Each participant was enrolled in the same Medicare health maintenance organization (HMO) continuously for one to three years. Participants’ average age was 74.

Upon enrollment in the HMO, the participants filled out a questionnaire describing any medical conditions they had as well as their use of previous healthcare services.

Balkrishnan and his colleagues used information from the claims paid by the HMO for all health care services to determine each participant’s total healthcare costs. Total health care costs included all health care service use and prescription charges for which the HMO reimbursed the participant.

The researchers used prescription refill patterns to measure medication adherence.

“We assumed that a prescription filled was a prescription taken,” Balkrishnan said.

He and his colleagues combined the cost data with health status variables such as quality of life, depression, physical activity and an individual’s perception of his own health. These data came from the comprehensive health risk assessment questionnaire administered at the time of enrollment in the HMO plan.

How often a patient refilled a prescription to treat overactive bladder syndrome was the strongest predictor of decreased health care costs, even when medications for other medical conditions were factored in.

In the third and final year of the study, the average healthcare costs of those patients who took their medication properly at least 90 percent of the time was \$3143.58, compared to more than twice that – \$6,872.27 – for those participants who took their overactive bladder medications as instructed less than half of the time. That’s a difference of about \$3,700.

“Lower medication adherence with increased age is common among elderly people, as most take several medications daily for various health conditions,” Balkrishnan said. “Still, taking medication as prescribed for overactive bladder syndrome was associated with significantly lower health care costs.”

Overactive bladder syndrome often goes undiagnosed largely because it’s an embarrassing topic to

bring up – many patients are uncomfortable telling their doctors about it.

Nor is it life-threatening, unlike uncontrolled hypertension or diabetes. This may make drugs for treating overactive bladder syndrome less likely to get covered by an HMO.

“There is a need for comprehensive drug coverage, not just related to the essential medications which are already covered in most cases, but also medications that may be considered non-essential,” Balkrishnan said.

“Regularly taking medications for overactive bladder syndrome and other such disorders seems to really be the driver of better health in the older population in general.”

He conducted the study with Ohio State colleague Monali Bhosle, a graduate research associate in the department of pharmacy practice and administration, and with Fabian Camacho and Roger Anderson, both with the Wake Forest University School of Medicine.

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