

## MedTap: Clinical consultations at a patient's fingertips

**Developed by: Gayle Campbell** Senior Cardiovascular Pharmacist Guy's and St Thomas' NHS Foundation Trust









Non adherence is a powerful confounder of evidence based practice and can affect daily patient management, resulting in inappropriate therapeutic escalation with greater costs and potential for harm<sup>1</sup>.

In the UK, ~1/3 of patients are already non adherent just 10 days after starting a medicine. Of these 55% don't realise they are not taking their medicines correctly, whilst 45% are intentionally non-adherent<sup>2</sup>.

Just **66% of patients reported taking key medications after AMI**, according to the PREMIER Registry<sup>3</sup>.







Healthcare professionals instruct more than they elicit<sup>4</sup>.

Local research has demonstrated that **patients may become non adherent** to their medicines if insufficient information is provided<sup>6</sup>.

Patients now have much greater access to information from lay sources. This information can be more persuasive than that of healthcare professionals<sup>5</sup>.



## Why MedTap



People want access to accurate and trusted information when and where they want it.

Analysis of our patient information videos on direct oral anticoagulants in atrial fibrillation found that **patients were more satisfied with information on their medicines after watching the videos**.

There is an overwhelming amount of online medication information. But usually this requires reading large sections of text or watching long videos to access the specific piece of information needed.

Launched in August 2019, MedTap was designed to give patients and their families control over the medicines information they need – whenever they need it.

- · How and when to take medications
- · Side effects and what to do
- Ordering more pills (and the cost)

- Atrial fibrillation
- Heart attacks
- Skin conditions
- Commonly asked questions





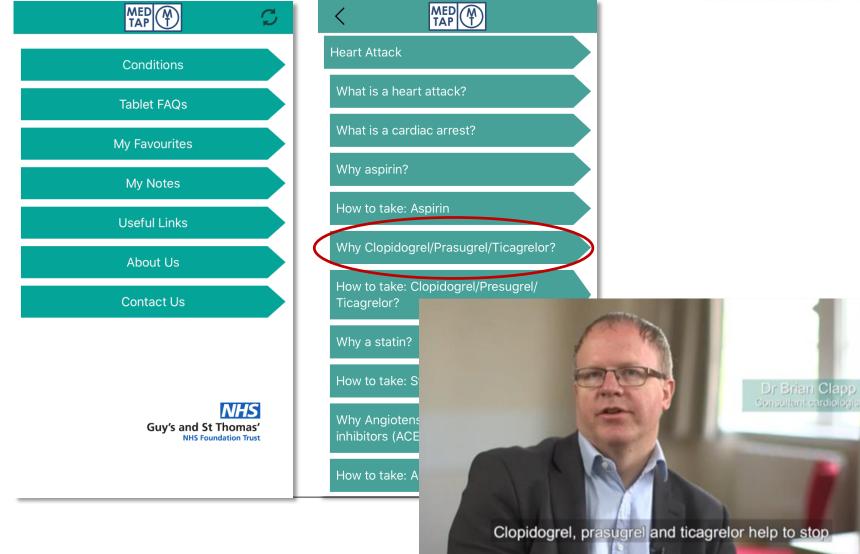


- Evaluation of MedTap's usability
- Further conditions / medicines to be added (already in progress)
- Review of the use of electronic apps for supporting long term health conditions



## **Screenshots**

## Guy's and St Thomas'













- 1. Kumaran Kolandaivelu, Benjamin B. Leiden, Patrick T. O'Gara, Deepak L. Bhatt, Non-adherence to cardiovascular medications, *European Heart Journal*, Volume 35, Issue 46, 7 December 2014, Pages 3267–3276, <u>https://doi.org/10.1093/eurheartj/ehu364</u>
- N Barber, J Parsons, S Clifford, R Darracott, R Horne. Patients' problems with new medication for chronic conditions. Qual Saf Health Care
  2004; 13: 172-175. <u>http://qualitysafety.bmj.com/search?author1=R+Horne&sortspec=date&submit=Submit</u>
- 3. Ho PM, Spertus JA, Masoudi FA, Reid KJ, Peterson ED, Magid DJ, Krumholz HM, Rumsfeld JS. Impact of medication therapy discontinuation on mortality after myocardial infarction. Arch Intern Med 2006;166:1842–1847
- 4. Makoul G, Arntson P, Schofield T. Health promotion in primary care: physician-patient communication and decision making about prescription medications. Soc Sci Med. 1995;41(9):1241–54.
- 5. Auyeung V, Patel G, McRobbie D, Weinman J, Davies G. Information about medicines to cardiacin-patients: patient satisfaction alongside the roleperceptions and practices of doctors, nurses and pharmacists. Patient Education and Counseling, 2011;83: 360–366
- 6. Elliot-Binns CP (1986) An analysis of medicine. Journal of the Royal College of General Practitioners 36, 542-544