

Distributing essential medicines for free resulted in a 44% increase in adherence

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Dr. Nav Persaud, a clinician-scientist at the Li Ka Shing Knowledge Institute of St. Michael's and lead author of the study. Credit: St. Michael's Hospital

A new study out of St. Michael's Hospital's MAP Centre for Urban Health Solutions found that distributing essential medicines at no charge to patients resulted in a 44 per cent increase in people taking their medications.

The study, published today in *JAMA Internal Medicine*, also found that participants experienced a reduction in [systolic blood pressure](#) and that free distribution of essential medicines led to a 160 per cent increase in the likelihood of participants being able to make ends meet.

The list of 128 essential medicines made available in the study was adapted from the WHO Model List of Essential Medicines and based on Canadian clinical practice guidelines, suggestions from clinicians and patients, prescribing volumes and evidence syntheses. The medicines in the study included treatments for acute conditions, such as antibiotics and pain relievers, as well as [chronic conditions](#), such as antipsychotics and HIV-AIDS medications.

"It is sad that in a high-income country like Canada, millions of Canadians cannot afford their prescribed medications—including life-saving medicines such as insulin," said Dr. Nav Persaud, a clinician-scientist at the Li Ka Shing Knowledge Institute of St. Michael's and lead author of the study.

"We hope that our findings help inform public policy changes. This is no longer a question of whether free distribution of medicines can improve health outcomes. It is a question of whether governments will act."

A total of 786 patients across nine primary care sites in Ontario who reported cost-related non-adherence to medications participated in the study. They were assessed at 12 months into the three-year study. Participants in the intervention arm of the study were randomly allocated to receive free distributions of [essential medicines](#), while others in the control arm of the study had only their usual access to [medication](#).

Dr. Persaud said Canada is considered a suitable setting to measure the effects of free [medicine](#) distribution because [health care services](#) such as physician visits and hospitalizations are publicly funded while there are cost barriers to medications.

Provided by St. Michael's Hospital

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