

Treatment acceptability and patients' expectations regarding arterial hypertension: results from an online European patient community pilot survey

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Context and Objectives

- Arterial hypertension (AHT) is a widespread disease in developed countries and one of the main cardiovascular risk factors, increasing the probability of having a heart attack, stroke or kidney failure and thus making AHT the second factor decreasing life expectancy after smoking and before alcoholism¹. Patients are often required to take several medications to manage this silent disease, although they may already be under treatment due to other age-related conditions. However, half of patients have uncontrolled blood pressure.²
- The objectives of the survey were to better understand: (1) patients' perception of AHT (2) their difficulties regarding their treatment (3) their expectations to improve their adherence

Methodology

PRESENTATION OF THE CARENITY.COM PLATFORM

- CARENITY is an **international online patient community** for patients with chronic diseases, founded in 2011. This platform allows patients and caregivers to share their experience as well as information, to follow the course of their disease and to contribute to medical research in various therapeutic areas by generating real-world patient insights through online surveys.
- CARENITY performs studies for private and public health-care-related stakeholders:** healthcare professionals, scientists, patient advocacy groups and pharmaceutical companies.
- A **scientific committee** helps to address any ethical or scientific issues.

METHODS

- An online questionnaire was submitted to the members of the Carenity community via the Carenity European platforms (France, UK, Germany, Spain and Italy). The questionnaire was provided in the local language.
- The respondents were invited to participate in the study by email.
- Participants were patients with arterial hypertension.
- The survey was conducted from October to November 2017.²

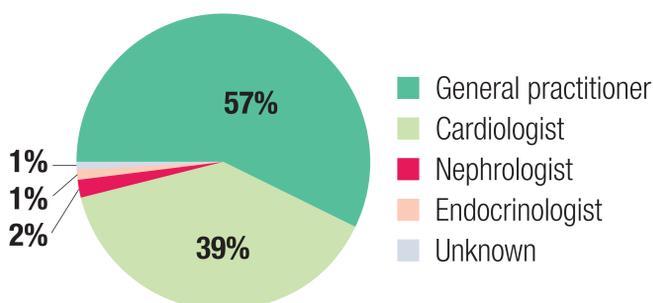
Results

Respondents' profile

- This study reports data from 153 participants with AHT.
- Mean age was 61 years old (minimum: 35, maximum: 85).
- 44% of patients were women and 36% were men (20% unknown).

	France	Italy	UK	Germany	Spain
n	50	43	25	20	15
Mean age	62	61	59	61	61
Male	34%	44%	32%	35%	33%
Female	58%	28%	48%	45%	40%
Unknown	8%	28%	20%	20%	27%

Profile of the doctors in charge of following the AHT treatment



Perception of AHT



- Among the 73% of patients who perceive AHT as a serious disease, **38%** consider it to be difficult to control.
- 20% consider AHT to be a benign disease, mainly because they do not perceive any specific physical manifestation (**87%** of them).

Barriers to adherence to hypertension treatment

	Global	France	Italy	UK	Germany	Spain
Too many pills to take every day	22%	6%	37%	28%	35%	7%
Presence of side effects	18%	26%	16%	24%	10%	0%
Risk of long-term toxicity of the product	17%	14%	26%	20%	5%	13%
Doubts about the efficacy of the treatment	14%	12%	14%	16%	20%	13%
Burdensome frequency of administration	7%	4%	12%	12%	0%	0%
No obstacle	53%	64%	40%	48%	40%	80%

Multiple answers were possible.

- The **main barrier was too many pills to take every day (22%)**, followed by side effects (18%) and the risk of long-term toxicity (17%).

Modification of the treatment without telling the doctor



Main solutions to improve treatment acceptance

	Global	France	Italy	UK	Germany	Spain
A single tablet per day	38%	36%	37%	52%	30%	33%
Easier access to a doctor	25%	16%	28%	36%	20%	33%
Mobile applications for smartphones and pads (e.g.: follow-up calendar, consultation reminders, etc.)	19%	12%	21%	20%	40%	7%
Leaflet on the consequences of not following the prescription	16%	16%	9%	24%	15%	20%
Call centre with nurse for the follow-up of the treatment	15%	8%	9%	36%	10%	27%
Dose reminder service by text message or email	12%	6%	14%	32%	10%	0%
Electronic pill dispensers	12%	8%	19%	8%	25%	0%
Videos on a website about the effects of the treatment and the consequences of not following the prescription	10%	8%	5%	24%	20%	0%
Paper follow-up diary	9%	12%	2%	8%	10%	20%
None	27%	30%	21%	24%	40%	20%

Multiple answers were possible.

- The **main solution would be to have a single tablet per day (38%)**, followed by an easier access to a doctor (25%) and mobile applications (19%).

Conclusion and perspectives

- Even though patients are well-aware of the seriousness of their disease, about half of them report obstacles to the follow-up of their treatment and 14% report modifying or stopping their treatment on their own initiative.
- Single-pill combinations are viewed by patients as the most helpful solution to encourage treatment adherence. Other solutions to address unmet needs were considered useful by patients, such as mobile applications, leaflet or call centres.
- Online communities for chronic patients allow a new methodology for collecting and analysing patient-reported outcomes in a real-world setting.

Disclosures: JJM: Fees for consultancy from Servier; YA: None declared; OW: Employee of Carenity. Study sponsored by Servier. **Acknowledgements:** The authors thank all patients and caregivers involved in the study. **References:** 1. Global Health Observatory. 2. Wang YR, Alexander GC, Stafford RS. Outpatient Hypertension Treatment, Treatment Intensification, and Control in Western Europe and the United States. *Arch Intern Med.* 2007;167(2):141-147. doi:10.1001/archinte.167.2.141

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