**Association between Medication Non-Adherence and Indirect Costs among Patients with GERD**

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**Introduction**

GERD is a prevalent, chronic disease affecting millions of people worldwide. Non-adherence to medication regimens can contribute to symptom recurrence and increased healthcare costs. This study aimed to evaluate the relationship between medication non-adherence and indirect costs among patients with GERD.

**Methods**

Analyses included patients diagnosed with GERD by a physician (N = 4,344). Analyses for indirect costs included patients currently employed (N = 1,011).

**Results**

- Non-adherent patients were more likely to experience GERD symptoms 4 or more times per week (p < 0.0001) than adherent patients.
- Non-adherent patients were more likely to be male (p = 0.0156; see Figure 3).
- Non-adherent patients were more likely to be employed (p = 0.0001) or to possess insurance (p < 0.0001) compared to patients with GERD symptoms.

**Discussion**

Combining previous research, approximately 1/3 of patients with GERD reported some level of non-adherence with their medications. In comparison to patients with diurnal and nocturnal symptoms, patients with both diurnal and nocturnal symptoms were significantly more likely to be non-adherent, mostly due to their increased healthcare needs and lack of adherence.

**Limitations**

- All data were reported and thus subject to recall biases and other forms of measurement error.
- Although the NHWS is broadly representative of the US population, the GERD subsample examined here may differ in meaningful ways from the US GERD population.

**References**


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