Clinical Update: February 2024

MEDICATION MONITORING IN BEHAVIORAL HEALTH

Mental illness is common in the United States, with an estimated 52.9 million people – about 1 in 5 adults – experiencing mental illness.[1] Of those 52.9 million individuals, about 14.2 million experience a serious mental illness, equating to nearly 1 in every 20 adults.[1] In addition to these staggering statistics, reports have shown a strong association between SUD and mental illness, with an estimated 17 million affected individuals.

Despite medication having shown to be effective in the treatment of mental illness, on average, only half of those with mental illness take their medications as prescribed.[2] This may be due to a variety of adherence barriers such as medication side effects, out-of-pocket costs, forgetfulness, disbelief in treatment efficacy, and others. Research has reported clients with schizophrenia are adherent to their medications 10-76% of the time, clients with depression 28-52% of the time, clients with bipolar disorder 20-66% of the time, clients with anxiety disorders 57% of the time, and clients with attention deficit hyperactivity disorder (ADHD) 13-85% of the time.[3-5] Research has determined risk factors for non-adherence include: young age, low level of education, male gender, low socioeconomic status, substance abuse or dependence, social/environmental factors, medication-related factors (e.g. adverse effects), and psychological factors such as cognitive impairment, poor insight, and denial of illness.[4]

Studies have shown that non-adherence increases risk of relapse, hospitalization, suicide, incarceration, and overall costs.[6-7] Individuals with a mental illness who are not adherent to their medications have a 77% chance of symptom recurrence after one year, and a 90% chance after two years.[6] There are reports of over $190 billion in lost earnings experienced each year by those with serious mental illness.[8] These statistics raise many questions regarding ways to assess and improve adherence.

One way to gain insight into medication adherence is through appropriate utilization of AcuRise ID™, a behavioral health medication adherence monitoring test developed by Aegis. AcuRise ID™ is a definitive testing solution designed for the unique needs of mental health and recovery care providers. Liquid chromatography/tandem mass spectrometry (LC/MS/MS) is utilized to identify and quantify drugs and/or metabolites present in biological specimens. This test is an objective tool to monitor medication adherence and promote well-being. By providing accurate, confident, and impactful laboratory results, AcuRise ID™ can assist providers in making optimal clinical decisions.

Clinicians have complete freedom to customize testing according to their determination of medical necessity. AcuRise ID™ offers testing profiles tailored to SUD and mental health diagnoses for focused testing options. More than 320 drugs and metabolites are available to be tested, allowing for enhanced patient safety and improved outcomes. AcuRise ID™ SUD and mental health profiles are offered in urine testing, and many of the same medications and classes can be ordered for oral fluid testing as well. Aegis's full suite of medication monitoring services – from medication adherence testing to novel psychoactive substance and drug-drug-interaction testing – may be utilized at clinician discretion to create a more detailed clinical picture for making treatment decisions.

Definitive testing for the right substances can provide the necessary information to differentiate between nonadherence, treatment failure, and symptom progression. Identifying non-adherence can help patients avoid the potentially unnecessary costs of added medication and the side effects that may accompany dose increases. Identification of new substance misuse can show if patients are transferring misuse behaviors to another substance they may believe cannot be detected by drug testing. The goal of testing is not to reach a punitive outcome but rather to open a two-way conversation between prescriber and patient that builds trust and helps achieve treatment goals.

NOTICE: *The information above is intended as a resource for health care providers. Providers should use their independent medical judgment based on the clinical needs of the patient when making determinations of who to test, what medications to test, testing frequency, and the type of testing to conduct.*

References:

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