



Pediatric Adherence: Don't Forget About Our Kids

By Ursula Chizhik, PharmD

Medication adherence is a public health issue that has everyone talking. While there are social and economic consequences of non-adherence, we tend to focus on the adult population and ways to overcome adult barriers to adherence. But we should not forget about our kids. Pediatric non-adherence is a major concern for many reasons; most notably the spread of illness, slower recovery, health complications, school absenteeism, antibiotic resistance, and costs incurred by additional doctor visits and therapeutic drug changes if children don't take their medications as prescribed by their pediatrician.

Duration, schedule, formulation, palatability, cost, and adverse effects of medication are all factors that contribute to poor adherence. For the pediatric population, taste and poor palatability are identified among the most significant barriers to adherence. Focus groups and nationwide surveys show 67 percent of mothers say their children either dislike or hate the taste of liquid medications.* Taste alone can be enough to deter a child from ingesting a medication, taking medications properly, or fully completing medication regimens.

While it may seem as if the child is being difficult, this rejection is rarely the result of a child's desire to be picky or fussy. Instead, it is an actual physical inability to swallow an unpalatable substance. Subsequent arguments about taking medication, kicking, screaming, and spitting become part of a daily struggle for parents trying to get their children to take their medication. To lessen the stress and anxiety of taking medications, parents have resorted to improving palatability through refrigeration, or by mixing medications with milk, juice, soda, or syrup. Unfortunately, these "home remedies" can compromise the stability, efficacy, and potency of many liquid medications.

A more feasible option is to have a liquid prescription flavored at a community pharmacy. Flavoring not only

helps mask the unpleasant taste of a medication but also customizes the medication to satisfy the individual child's taste preferences. Allowing them to choose how their medication will taste encourages a child to take charge of their own health and is yet another way to promote adherence. In fact, flavoring has been shown to increase medicinal compliance in children from 53 percent to more than 90 percent.* That reassures children, parents, and health care providers that patients are properly taking their medications so they get better sooner.

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For children, better taste may be the only motivation to take a medication and complete a full treatment program. Medicines can't work if adults or children don't take them! As parents, doctors, and pharmacists alike have identified that taste and poor palatability of liquid medications can present significant barriers to medication adherence in children, why not start there? Flavoring is a quick and simple service that can be very effective in improving adherence in children. **ap**

*Source: FLAVORx internal study/survey.

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