



# Addressing nonadherence to chronic obstructive pulmonary disease (COPD) treatment: A team-based challenge

Nonadherence is not just a patient problem—it's a health care team challenge. System-level barriers, limited time for patient and family education, and changes in medication insurance coverage can all contribute to nonadherence to chronic obstructive pulmonary disease (COPD) treatment.<sup>1</sup> A proactive, nonjudgmental approach that integrates the entire care team can identify and address nonadherence before it leads to worse symptoms or avoidable exacerbations.

## Common patient-based reasons for nonadherence

Nonadherence to treatment is common among patients with COPD and is often underrecognized as a cause of disease progression, frequent exacerbations (i.e., lung attacks) and hospitalizations. Supporting adherence in COPD treatment begins with recognizing that every patient's challenges are different. Some patients may struggle with the cost of treatment or complex regimens, while others face stigma, fear or lack of understanding about their condition.

Common factors for nonadherence to treatment among patients with COPD may include:

- Inadequate understanding of COPD or medications
- Forgetfulness or complex regimens
- Poor inhaler technique
- Access barriers (i.e., cost, transportation, refills)
- Comorbidities (i.e., depression, arthritis, cognitive decline)
- Prioritizing other needs
- Fear of steroids or perceived side effects
- Lack of perceived benefit (e.g., The patient says, "I don't need it every day.")

- Stigma or feelings of guilt or shame (e.g., The patient believes, "I caused this myself.")
- Desire for independence from any therapies

## Practical strategies to address nonadherence

Assessing and supporting adherence at every visit can prevent inappropriate escalation of therapy and improve patient outcomes. A consistent, team-based approach grounded in empathy, education and system support can make adherence discussions part of routine care rather than an afterthought.

The following five strategies can help family physicians and care teams identify and address the most common barriers to adherence to COPD treatment:

### 1. Normalize and explore

- Assume nonadherence is common and ask about it routinely
- Frame questions nonjudgmentally (e.g., "Many people find it hard to take inhalers regularly. How has that been for you?" "How many days a week are you able to take your inhalers?")
- Use the EHR refill history to inform the discussion

### 2. Educate and engage

- Clarify rescue versus daily maintenance inhalers and explain expected benefits
- Consistently use the [teach-back method](#) and regularly observe inhaler technique
- Provide links or handouts for patient and staff training on inhaler technique demonstrations (e.g., [COPD Foundation Educational Video Series](#))

### 3. Simplify and support

- Prioritize once-daily dosing where possible
- Suggest using reminders (e.g., phone alerts, Alexa, fridge notes)
- Explore the costs and access supports (e.g., coupons, delivery, pharmacy auto-refills)
- Include family or caregivers in care planning

### 4. Address emotional barriers

- Screen for depression, anxiety and stigma
- Reinforce that COPD is treatable and adherence supports independence
- Offer pulmonary rehabilitation, COPD support groups or cognitive behavioral therapy for depression

### 5. Team-based solutions

- Engage nurses, pharmacists, respiratory therapists, social workers, caregivers and families in treatment and support plans
- Leverage pharmacy partnerships for refill synchronization (e.g., auto-refill) and counseling
- Advocate for system-level support in your office (e.g., time, staffing, medication access)

The consequences of nonadherence can spiral downward, leading to poor health outcomes, as illustrated in *Figure 1*. The figure highlights the importance of taking time to assess nonadherence and implementing potentially helpful strategies.

### Clinical reminder

Issues of nonadherence to treatment should be addressed before escalating COPD therapy. Even the best regimen fails if it is not used correctly or consistently. Address nonadherence at every visit and remind patients that each effort toward consistent treatment can help prevent future exacerbations (i.e., lung attacks) and improve overall outcomes.

### References

1. Bourbeau J, Bartlett SJ. Patient adherence in COPD. *Thorax*. 2008;63(9):831-838.

**Figure 1. Spiral of nonadherence to COPD treatments<sup>1</sup>**

