

# BEYOND PATIENT FACTORS: HOW FORMULATION ACCEPTABILITY PREDICTS ADHERENCE TO CALCIUM-VITAMIN D

Daniel Gómez Costas, Covadonga Iznola, Anais Carrillo Burdallo, Ana De Lorenzo Pinto, Ana Herranz Alonso  
Pharmacy Department. Hospital General Universitario Gregorio Marañón. Instituto de Investigación Sanitaria Gregorio Marañón (II+G-M). Madrid, Spain.

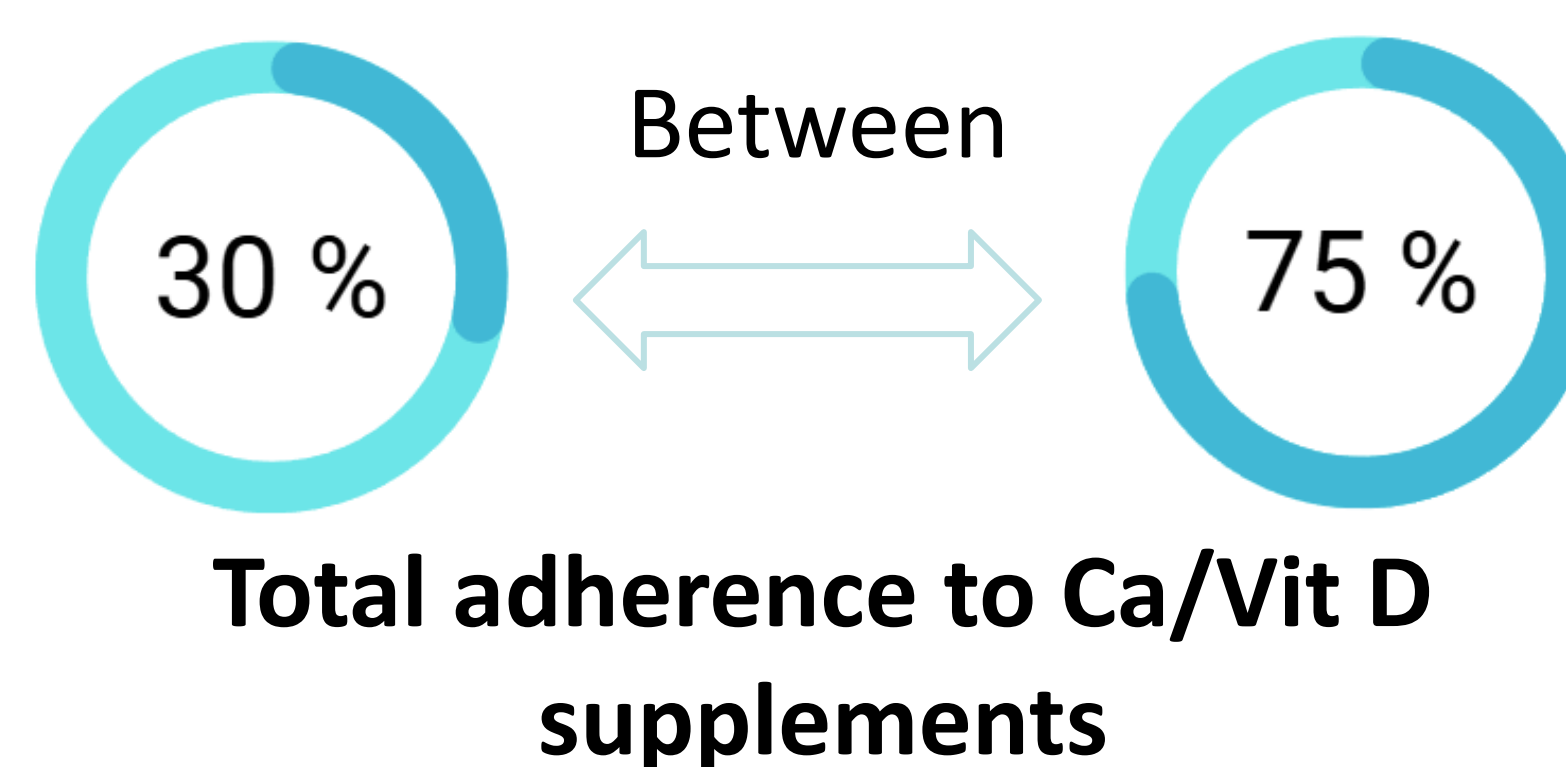
4CPS-049

## AIM AND OBJECTIVE

1. Characterize adherence to Ca/vit D
2. Identify risk factors (patient-related, treatment-related, and formulation-related) for non-adherence.



## BACKGROUND AND IMPORTANCE



Hypocalcemia + Fractures



39 different formulations

Are there any modifiable risk factors?

## MATERIALS AND METHODS



- Dispensing of Ca/vit D between 2022 and 2025
- ≥ 6 months of treatment
- Sample enough for adequate significance and potency

Independent variables

Result variables

Definitions

- Global adherence: Self-reported + Morisky-Green + Dispensing
- Organoleptic groups: 1° Sweetener + 2° Flavour
- Organoleptic evaluation: Likert scale 1-5 (patient): Taste + Texture + Global score

Patient Treatment Formulation

Adherence

Tolerance

Organoleptic score

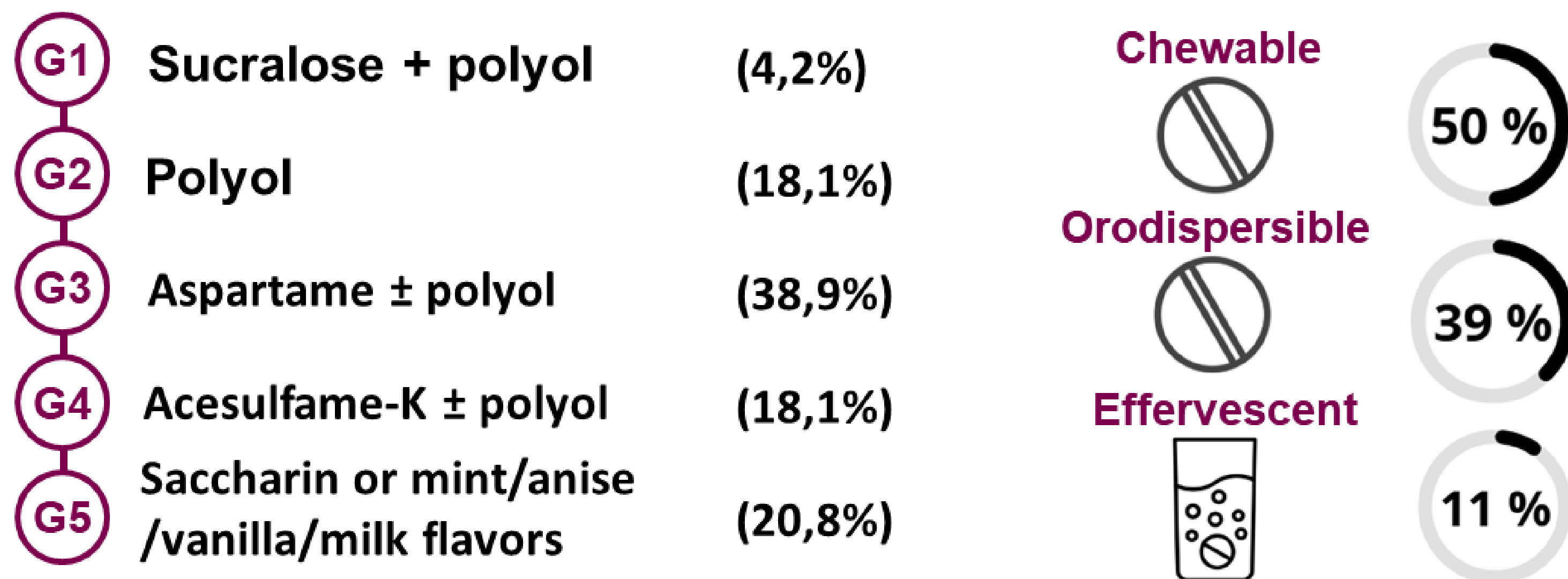
STATA 19

Descriptive + Univariate + Stepwise multivariate

## RESULTS



360 Patients included 22 Ca/vit D different presentations 71,9 Years (Median age)



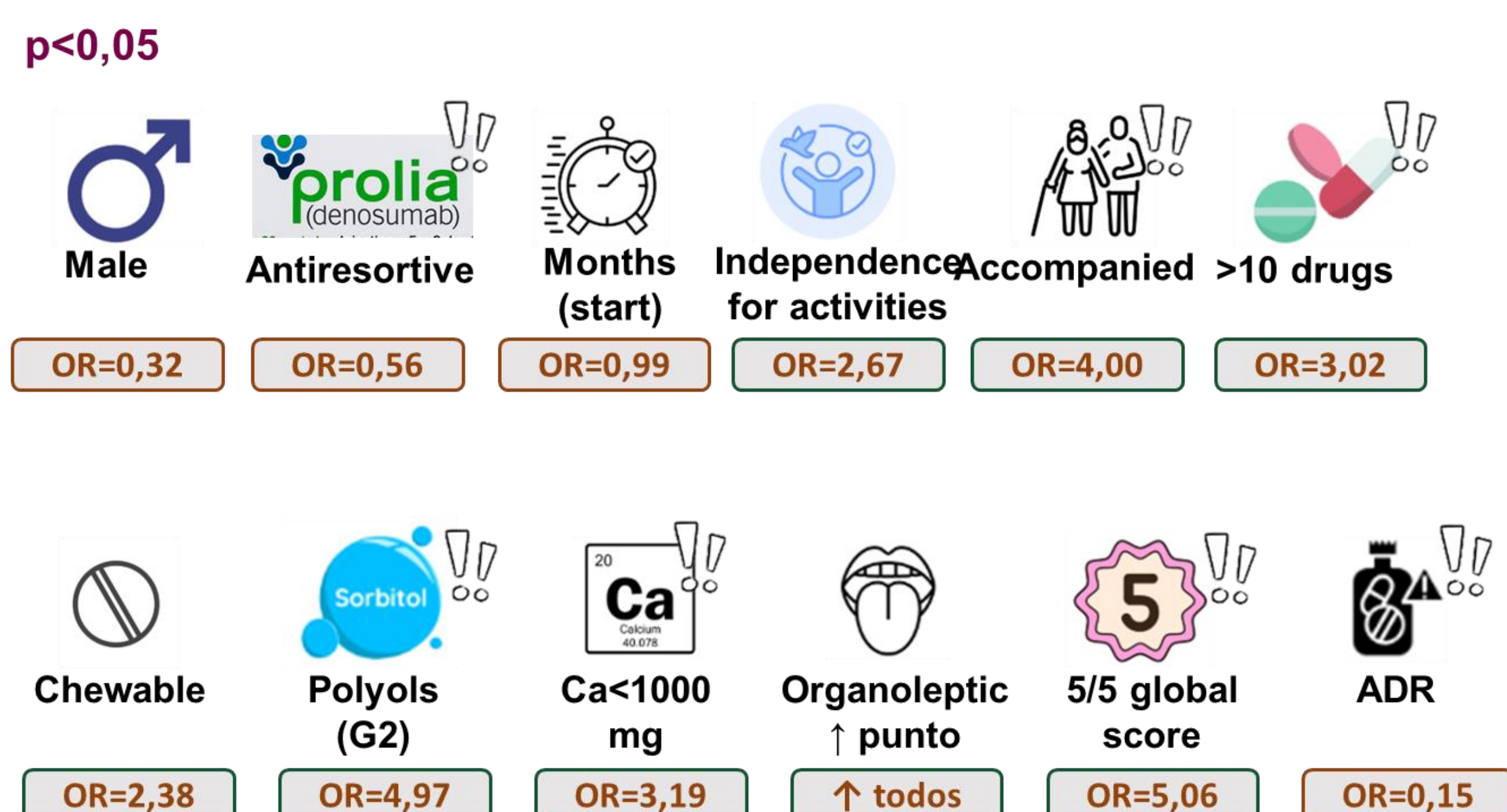
### 2. Tolerance



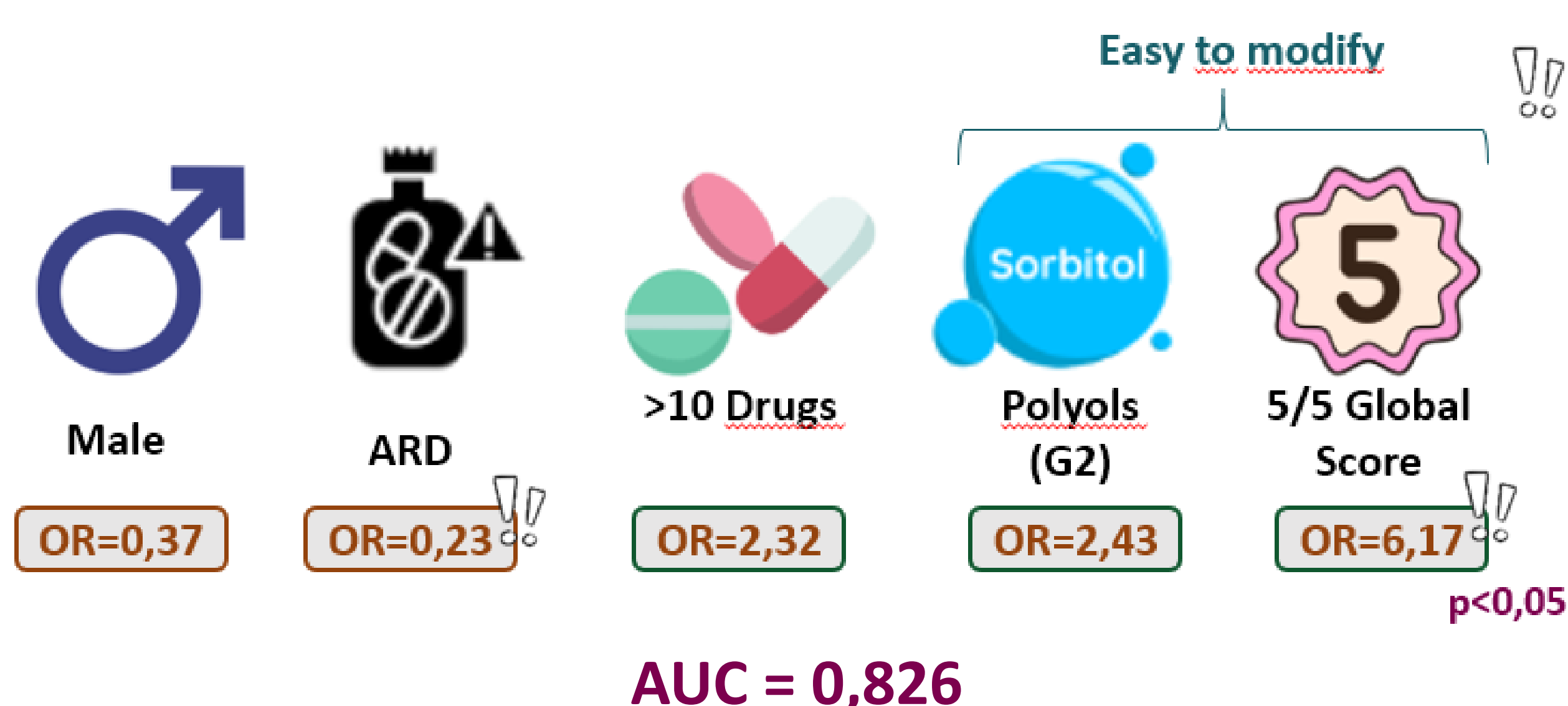
### 3. No adherence reasons

Forgetfulness >>> organoleptic issues / ADRs

Risk factors (Univariate)



Risk factors (Multivariate)



## Conclusions

1. Adherence to Ca/Vit D is low, and must be studied from various points of view, not relying solely on self-reporting.
2. Diverse risk factors exist, including several modifiable ones dependent on the formulation; treatments must be individualized.
3. Hospital Pharmacy must maintain and reinforce its leadership role in patient adherence.

