

Rewards Improve Medication Compliance for HIV Treatment

VISN 1 MIRECC researchers have demonstrated that patients with human immunodeficiency virus (HIV) infection can improve their proper usage of anti-HIV medicines when personalized feedback and rewards are added to standard prescribing practices. While there is no cure for HIV infection, combined use of two or more anti-HIV medications can dramatically reduce the amount of virus in the body and slow down or prevent the development of Acquired Immunodeficiency Syndrome (AIDS). If taken properly, these combined treatments can keep HIV patients healthy for long periods of time or even completely prevent the progression of disease. A problem with combined treatment regimens is that many patients have trouble taking the medications properly, because 2-4 different types of medicines must be taken at 2 or more times each day. Failure to take medications properly can undermine the effectiveness of anti-HIV treatment. The MIRECC study tested two strategies for helping HIV infected patients to take their medicines at prescribed times. The first uses feedback from "smart" prescription bottles that make a record of every time the bottle is opened. Patients are taught to link their medication taking to reminders that are part of their every day routines, such as making coffee for breakfast. The second strategy uses small cash rewards for taking medicines at the right time, as recorded by the smart prescription bottles. In the first study of this kind, the researchers found that combining the rewards with the individualized feedback substantially improved anti-HIV medication compliance. One limitation of this approach is that improvement in compliance tended to drop off after rewards were no longer provided. Further studies are underway to refine the treatment and improve the durability of its effect. Participants in this study included both VA and non-VA patients and the research team combined investigators from VA Connecticut, Yale University and University of Connecticut. VA researchers included Michael Rigsby, Marc Rosen, John Beauvais, Joyce Cramer and Bruce Rounsaville.