

COMPLIANCE WITH ANTIINFLAMMATORY THERAPY AND GUIDELINES IN ALLERGIST AND PRIMARY CARE PHYSICIAN SETTINGS. D.A. Bukstein, MD; A.T. Luskin, MD*; Madison, WI.

Purpose: This study was designed to investigate compliance with guidelines by specialists and primary care physicians and compliance with antiinflammatory therapy by their patients.

Method: 2019 asthmatics were categorized. Group I: seen and followed by allergy group. Group II: seen but not actively followed by allergy group. Group III: followed by primary care only. Similar asthma severity was self-reported between groups and confirmed by chart review. Pharmacy records and charts of 150 randomly selected patients and 150 patients prescribed antiinflammatory therapy from each group were reviewed for medication use and provider compliance with 7 guideline criteria. Compliance was defined as 6/7 of guideline criteria and refill of >50% of puffs prescribed.

Results:

	<u>Group I</u>	<u>Group II</u>	<u>Group III</u>	<u>p</u>
Antiinflammatory / bronchodilator Rx :	<u>1.6</u>	<u>0.68</u>	<u>0.46</u>	0.005
Compliance with anti- inflammatory Rx:	67%	32%	39%	0.005
No refill after 1 st :	8%	24%	26%	0.001
Guideline compliance:	13%	--	2%	0.001
Scheduled follow-up:	57%	--	12%	0.001

Conclusions: Results suggest that the factors resulting in improved outcomes with specialty care include increased likelihood of antiinflammatory prescriptions, routine scheduled visits and increased compliance with antiinflammatory therapy. This effect is lost if patients are not actively followed by allergy group. Provider compliance with guidelines is higher among specialists but is still very low suggesting that improved outcomes can be achieved without strict compliance with guidelines.