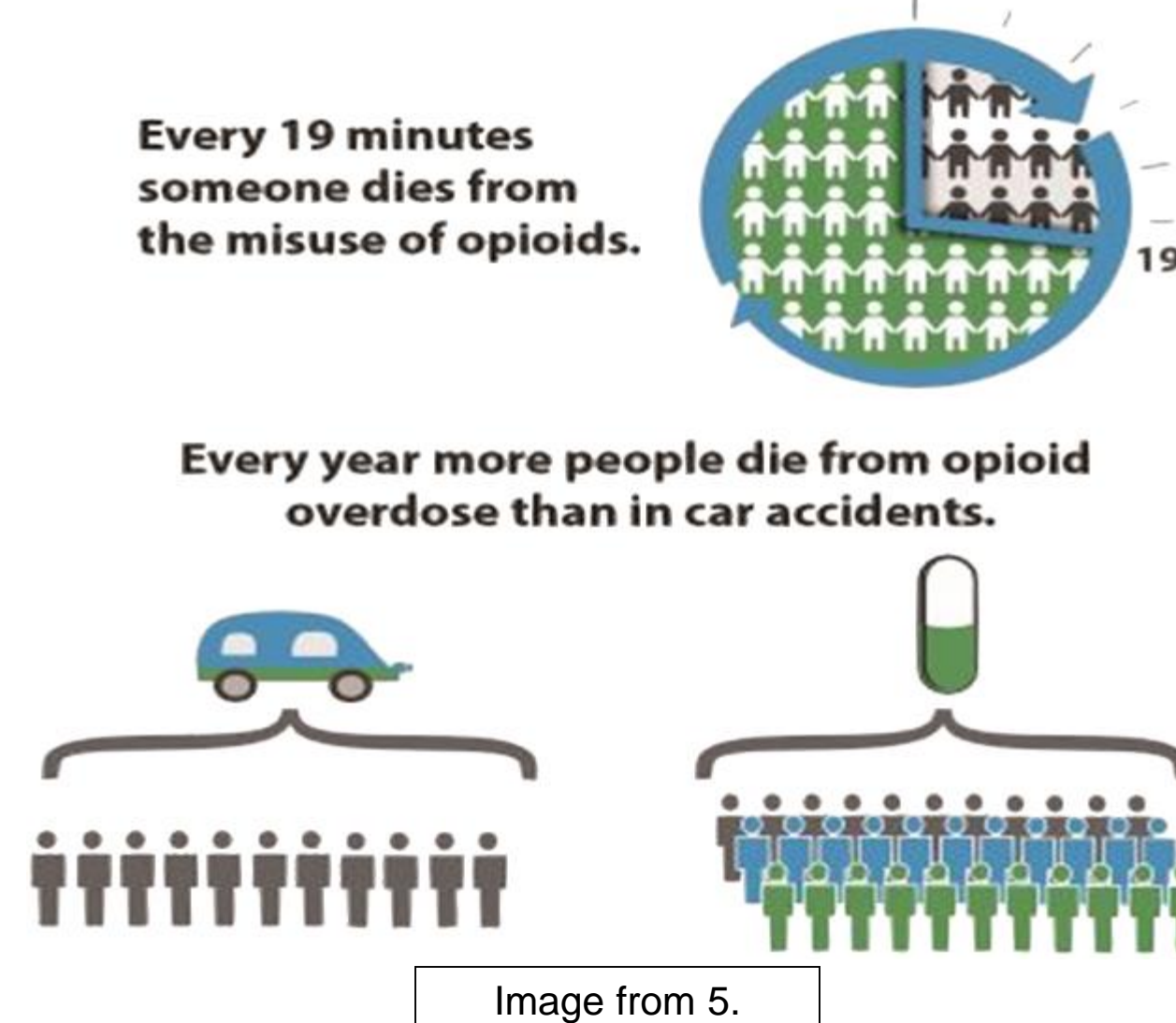


INTRODUCTION

- There are 40 deaths every day from prescription opioids^{1a}.
- 1 in 4 people using long term opioids struggles with addiction^{1a}.
- 75% of Americans have difficulty complying with daily meds².
- Medication adherence problems in America are estimated to cost \$100 to \$300 billion³.
- Poor medication adherence leads to poor outcomes and increased usage of healthcare services and increased cost³.
- To break the non-adherence cycle, patients, in partnership with their doctors and pharmacist, need to commit to a mutually agreed schedule for optimal medication compliance
- Adherence is a team effort involving the patient, healthcare providers, and other supportive individuals (spouse, friends, etc.).



Medication non-adherence is often hidden from healthcare providers. There is generally a lack of objective data to verify adherence⁴. Using a patient sensitive manner of discovering medication usage information is crucial for discovering non-adherence⁴. Developing a method for objectively measuring the non-adherent behaviors of taking too much of a medication or taking a medication too early will help facilitate more honest conversations between providers and patients.



BACKGROUND

Three existing medication compliance apps were reviewed:

- **Medisafe**⁶
Popular and robust app for chronic medication usage
- **Dosecast**⁷
Not as refined as *Medisafe*; has some “as needed” functionality
- **Memo Health**⁸
Utilizes sensors, automated interface with a pill box

All three apps worked well, but lacked usefulness for assisting compliance with as needed opioid medications.

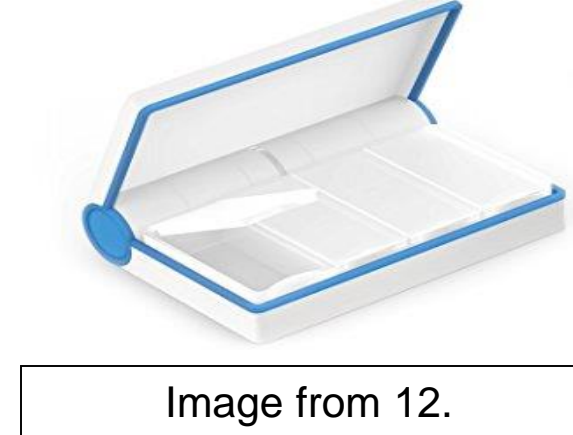
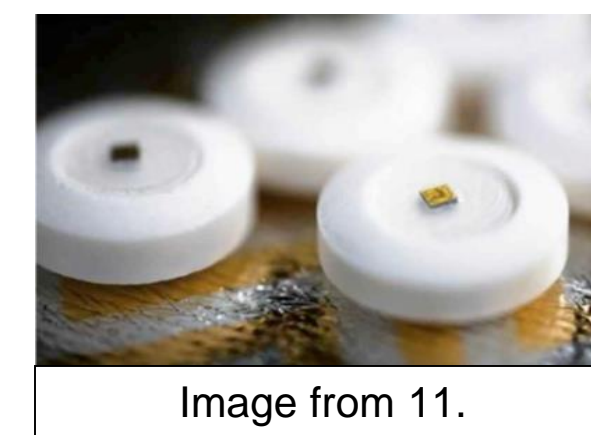
- We need to “provide tools and information for healthcare professionals working on overdose prevention and treatment,” and “increase awareness and share best practices with providers and patients”^{1b}
- Using digital health technology for medication tracking does improve adherence at a relatively low cost for implementation⁹.
- Using digital health technology can help patients track their medication usage and disease progression resulting in a better understanding of appropriate medication usage and support their medication self-management¹⁰.

PROJECT FOCUS

Mission Statement

Helping involved individuals take control of their opioid usage

- Develop a smartphone app to assist individuals with tracking usage of as needed medications including opioids.
- Help individuals to improve medication compliance.
- Maintain objective data about a person’s medication usage.
- Improve communication between patients and providers.
- Research automation methods of tracking medication usage.



PROJECT DESIGN

Selected User Stories

Persona: All Users

Scenario 0: Taking Medication

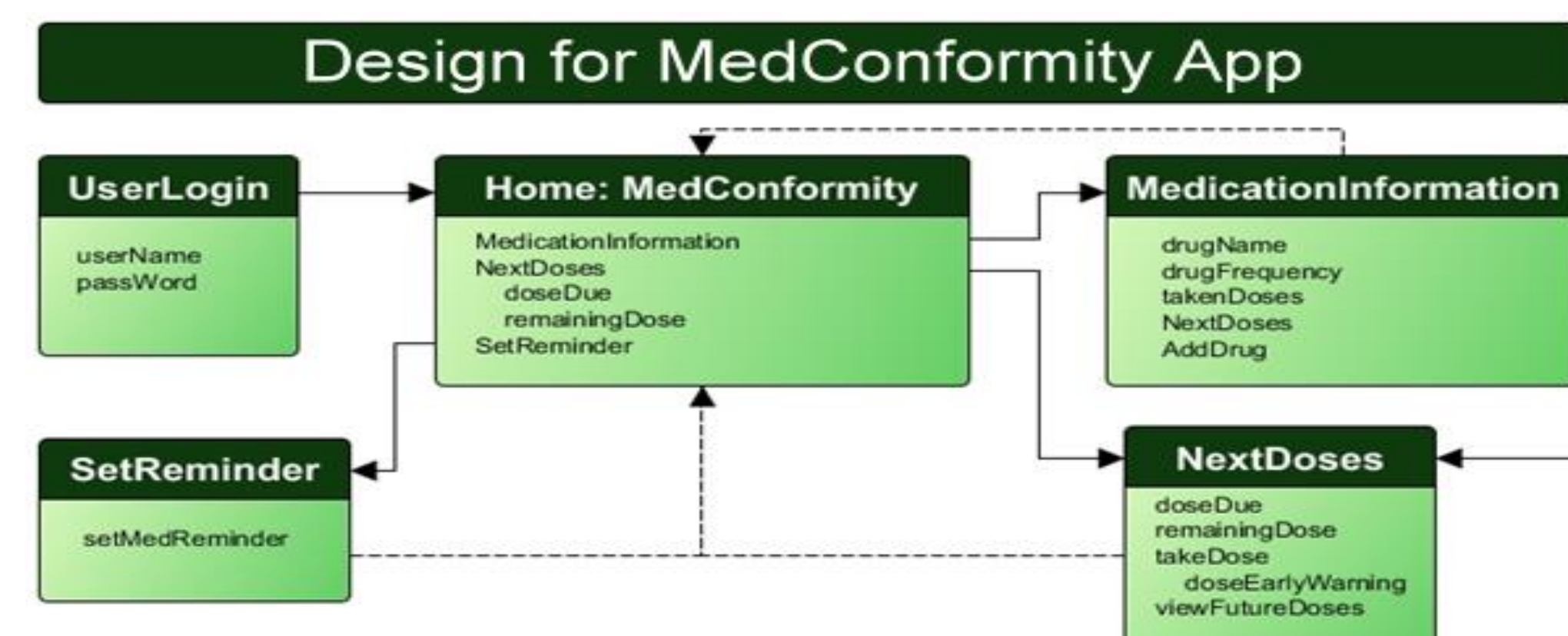
Given that I am prescribed medication
And *MedConformity* has accurate medication information.
When I notify *MedConformity* that medication is taken,
Then I am informed when my ‘Next Dose’ is due to be taken.

Persona: “As Needed Medication” Users

As a user of as needed medications
I want a tool like *MedConformity*
So that I can keep track of the medications I have taken and when my next dose is due.

Scenario 1: Next Dose Lookup.

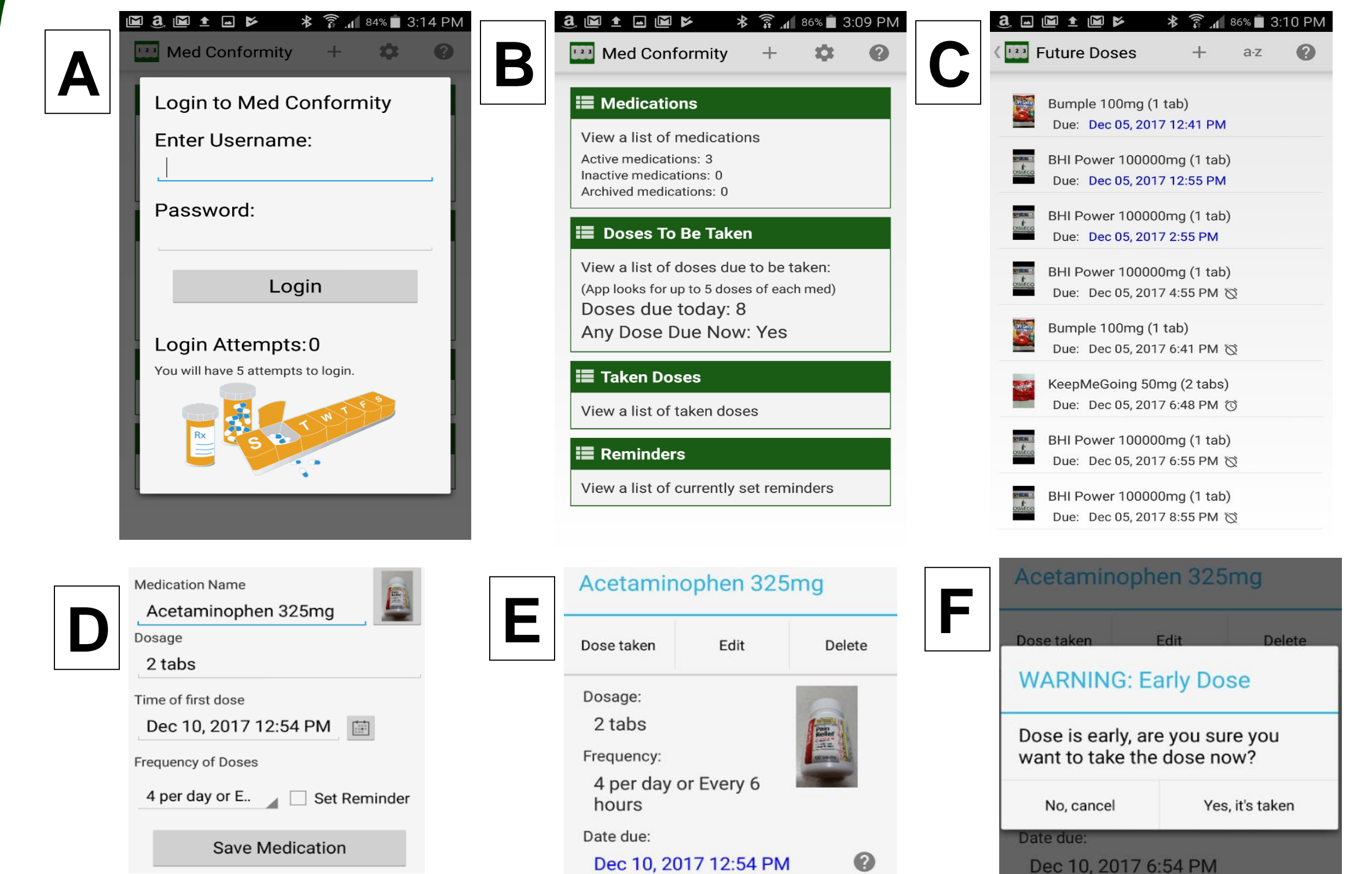
Given that I am prescribed medication
And *MedConformity* has accurate medication information.
And I am concerned about taking too much medication.
When I check *MedConformity* for next dose information,
Then I take my prescribed medication if enough time has elapsed
Or, I can set a timer to have *MedConformity* remind me when my next dose would be due.



Resources

- Android Studio (version 2.3.3)¹³ was used as the integrated development environment for creating *MedConformity*.
- GitHub was used for importing a similar open-source project (“*DrugBug*”¹⁴) that was designed for tracking chronic medication usage.
 - Logic for *DrugBug* was altered to adapt the application for dealing with as needed medication usage.
 - The *DrugBug* user interface was altered to match the requirements discovered through the User Stories above.

RESULTS



A. Login Screen.

B. Home Screen: emphasis on “Doses due” and “Any Dose Due Now.”

C. List of the earliest times medications can be taken.

D. Record of prescription data.

E. Location to record that a dose was taken.

The date due is printed in red if the dose is too early.

F. Warning indicating that a dose is taken early. If the dose wasn’t taken, the record can be cancelled.

All data is stored in a SQL table and can be retrieved from the “Taken Doses” activity linked from the home screen (‘B’ above).

FUTURE DIRECTION

- Add capability for a user to more easily share data.
- Add capability for free text notes that can be associated with medication usage.
- Incorporate an automated method for recording medication usage.

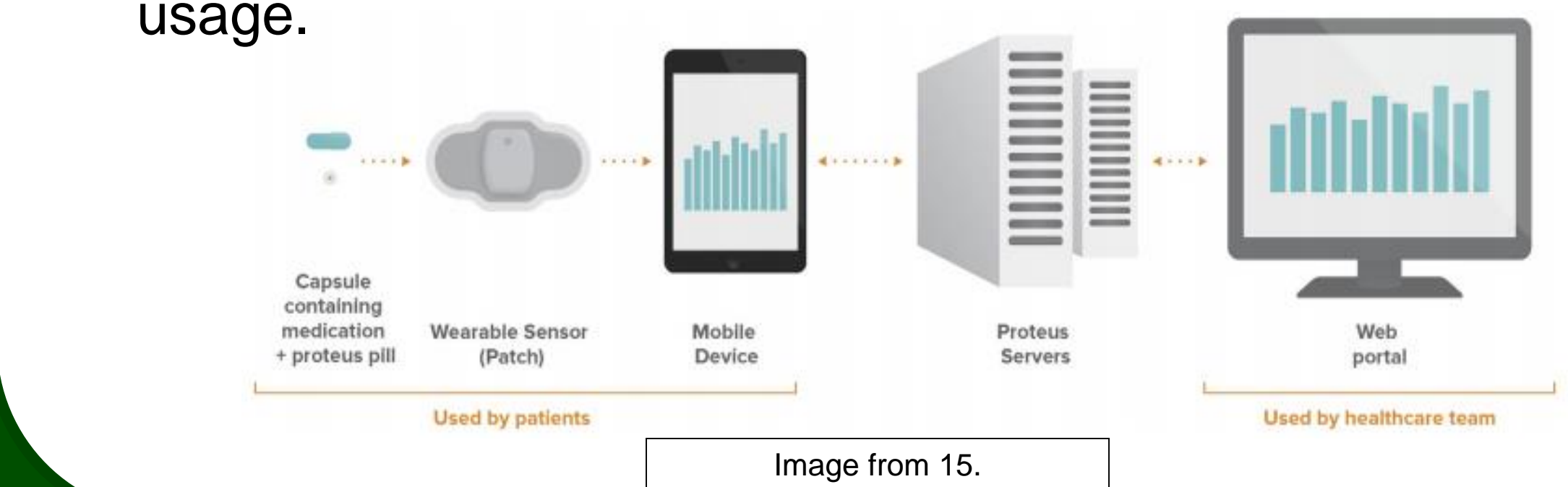


Image from 15.

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