



'Managing difficult conversations' podcast series

Episode 1: Managing adherence and patient preference

We caught up with Lead IBD Nurse Specialist **Kay Greveson** and Consultant Gastroenterologist **Dr Christian Selinger** to hear their thoughts on the factors affecting treatment adherence in IBD and how to manage these factors while considering patient preferences.

Open communication between patients and their treatment teams is key to facilitating treatment adherence and optimising treatment outcomes in IBD.¹ However, the recent IBD Global Assessment of Patient and Physician Unmet Needs Survey (IBD GAPPs)² highlighted some notable disparities between patient and physician understanding of the factors affecting patient quality of life,² thus illustrating the importance of open communication with patients about their treatment priorities and goals. Since these conversations can be challenging, the aim of this podcast series is to provide helpful tips on how to manage them.

"We are looking at the whole of the patient and trying to help them with developing the skills that they need to deal with their disease and adherence is one part of the puzzle, although a quite crucial part."

Dr Christian Selinger, Consultant Gastroenterologist, IBD Service, Leeds Teaching Hospitals NHS Trust, Leeds



In this 16-minute podcast, you will hear expert insights into:



Factors affecting treatment adherence in IBD



Initiating a conversation on treatment adherence with patients



Patient preferences and how to consider these in IBD treatment strategies


Understanding of the behaviours that drive treatment adherence or a lack thereof is key to providing patients with the support that they require

Due to the chronic nature of IBD, the aim of current treatments is to control inflammation and sustain remission.¹ However, patients may begin to have misconceptions regarding the necessity or effectiveness of medication while in remission.

The Necessity-Concerns Framework model can be used to gauge patient beliefs and understand their motivations for adherence. A recent study by Chapman S, et al. concluded that this knowledge can be used to create a personalised treatment approach and support patients with IBD in overcoming barriers to treatment adherence.³

Patient-centric tools are available that can empower patients with IBD to take ownership of their disease and treatment – for more detail, see the ‘Guidance and useful information from patient advocacy groups’ section in the IBD guidance repository on our [Resources](#) page.

Are you interested in hearing more insights into the importance of open communication on IBD treatment and how best to facilitate such conversations? Listen to **Kay Greveson**’s discussion with a leading IBD Advanced Clinical Nurse Practitioner, **Aileen Fraser**, on our [Hot topics](#) page.



“It all goes back to having effective communication and empowering the patient in whatever way you can.”

Kay Greveson,
Lead IBD Nurse Specialist,
Royal Free Hospital, London

Listen to the full podcast episode [here](#) for more expert insights into patient preferences and treatment adherence. Make sure to listen to the other episodes in this ‘Managing difficult conversations’ podcast series too!

1. Chew D, et al. *Intest Res* 2018;16:509–521.
2. Rubin DT, et al. *Inflamm Bowel Dis* 2021; doi:10.1093/ibd/izab006 [Epub ahead of print].
3. Chapman S, et al. *J Crohns Colitis* 2020;14:1394–1404.