

The use of MEMS technology to monitor medication adherence in the Tina Trial: a double-blind randomised placebo-controlled trial of mirtazapine for methamphetamine use disorder.

Palmer L¹, Keygan J¹, Degan T¹, Saunders L¹, Morrison C², Wrobel A², Thomas T³, Hatton E³, Turner A², Dean O², Kelly P³, Sinclair B⁴, Reid D⁴, Cordaro F⁴, Hayllar J⁵, Christmass M⁶, Berk M², Hill H⁷, Lundin R⁷, Arunogiri S⁸, Colledge-Frisby S^{1,9}, Dore G¹⁰, Shoptaw S¹¹, Goodman-Meza D¹², Clare P¹², Koeijers J¹, Farrell M¹, Degenhardt L¹, McKetin R¹.

Background

Accurately measuring and monitoring medication adherence in clinical trials is critical to their success [1]. Poor medication adherence is particularly problematic in pharmacotherapy trials for stimulant use. Currently there is no consensus on how best to monitor trial medication adherence [2]. Self-report diaries are commonly used but rely on participant recall and place a high burden on trial participants. Electronic monitoring systems have come to the fore as a potentially more accurate and convenient way of monitoring medication adherence [3].

We have adopted a Medication Event Monitoring System (MEMS) to monitor medication adherence in the Tina Trial, a Phase 3 clinical trial to determine the safety and efficacy of take-home mirtazapine for methamphetamine use disorder (ACTRN12622000235707).

Aim

We describe how MEMS is used in the Tina Trial to monitor medication adherence and we provide examples of data output from the MEMS system.



Figure 1. Medication bottles in the Tina Trial.



Figure 2. Activation of the MEMS SmartCap® using the MEMS Reader and the adherence dashboard on the MEMS software.

Methods

Trial medication bottles are each fitted with a MEMS® SmartCap® (AARDEX Group) which captures data on the date and time of each bottle opening (Figure 1).

An adherent dose is defined as at least one bottle opening within a 24-hour period (from 3 am each day).

At each assessment, medication adherence data can be taken from the MEMS® SmartCap® using a MEMS reader or a near field communication enabled device (Figures 2 and 3).

Data is displayed on a dashboard that shows overall medication adherence as well as a calendar display (Figures 4 and 5). This data is used to discuss medication adherence with the participant and counsel them on strategies to improve adherence.

The MEMS® SmartCap® also has a Liquid Crystal Display showing participants how many times the bottle has been opened each day, so participants can see if they have already taken their dose for that day (Figure 1).

Results

The MEMS® SmartCap® technology has been helpful in monitoring medication adherence in the Tina Trial. Showing participants the calendar and data plots has helped to identify and discuss lapses in medication adherence.

Advantages of this system include the provision of summary adherence data that can be easily captured with minimal participant burden. Participants also find the novelty of the technology engaging.

Limitations of the system include the cost, the need for a PC to access the full data dashboard (with a limited view of adherence data on mobile devices), and the reliance of the technology on the bottle with the MEMS® Smartcaps® being returned.

Implications

MEMS technology provides useful insights into medication adherence in the Tina Trial. This technology may be particularly useful to promote trial engagement in more regional and remote areas (in conjunction with other digital health technologies, such as telehealth), because it can provide a means of remotely monitoring medication adherence.

Additionally, the use of electronic monitoring systems to track adherence of clinical trial participants, further promotes take-home medications in clinical trials.

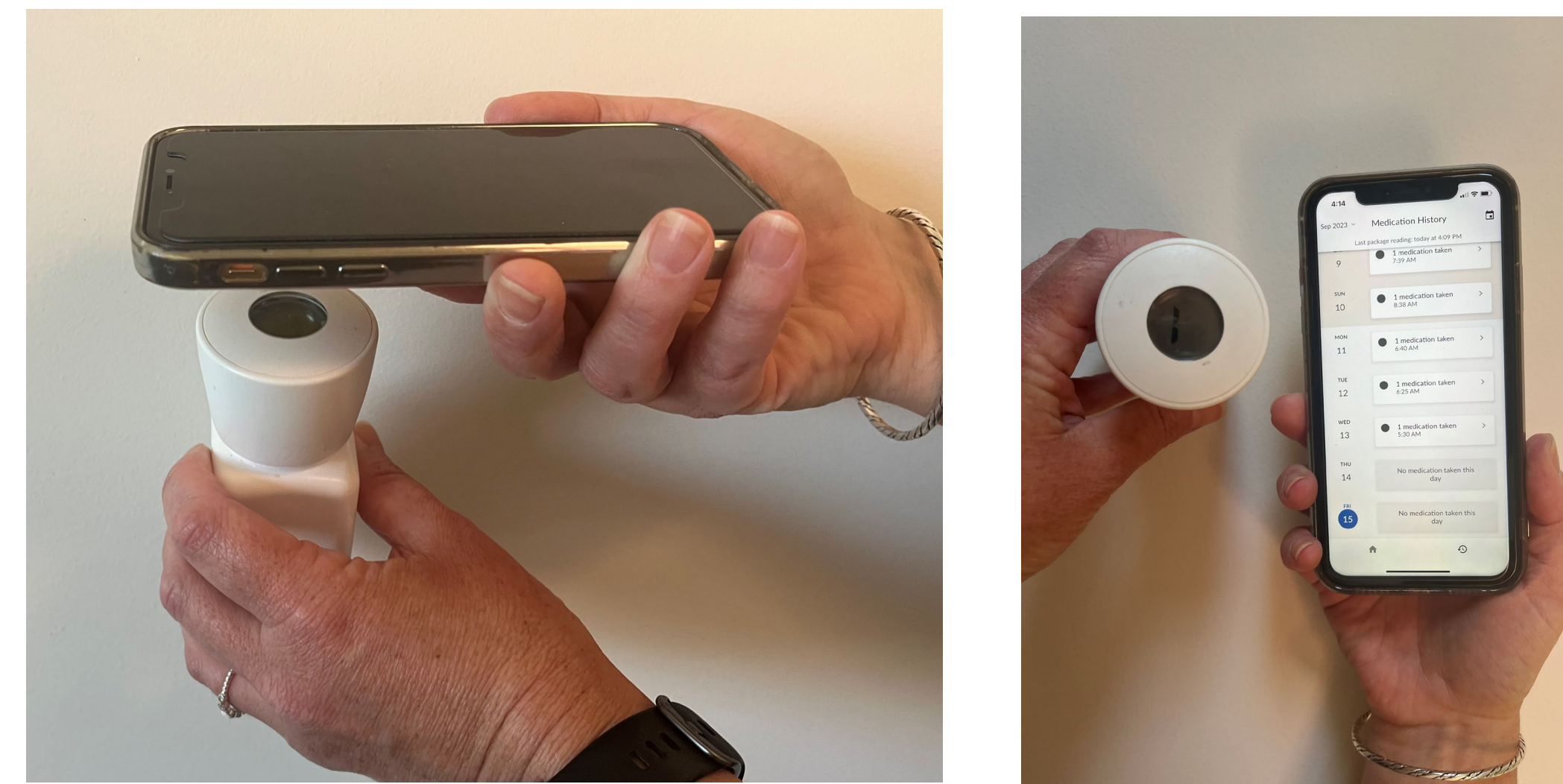


Figure 3. Uploading adherence data from the MEMS Smartcap® using a Smartphone with Near Field Communication

The Difference is Research

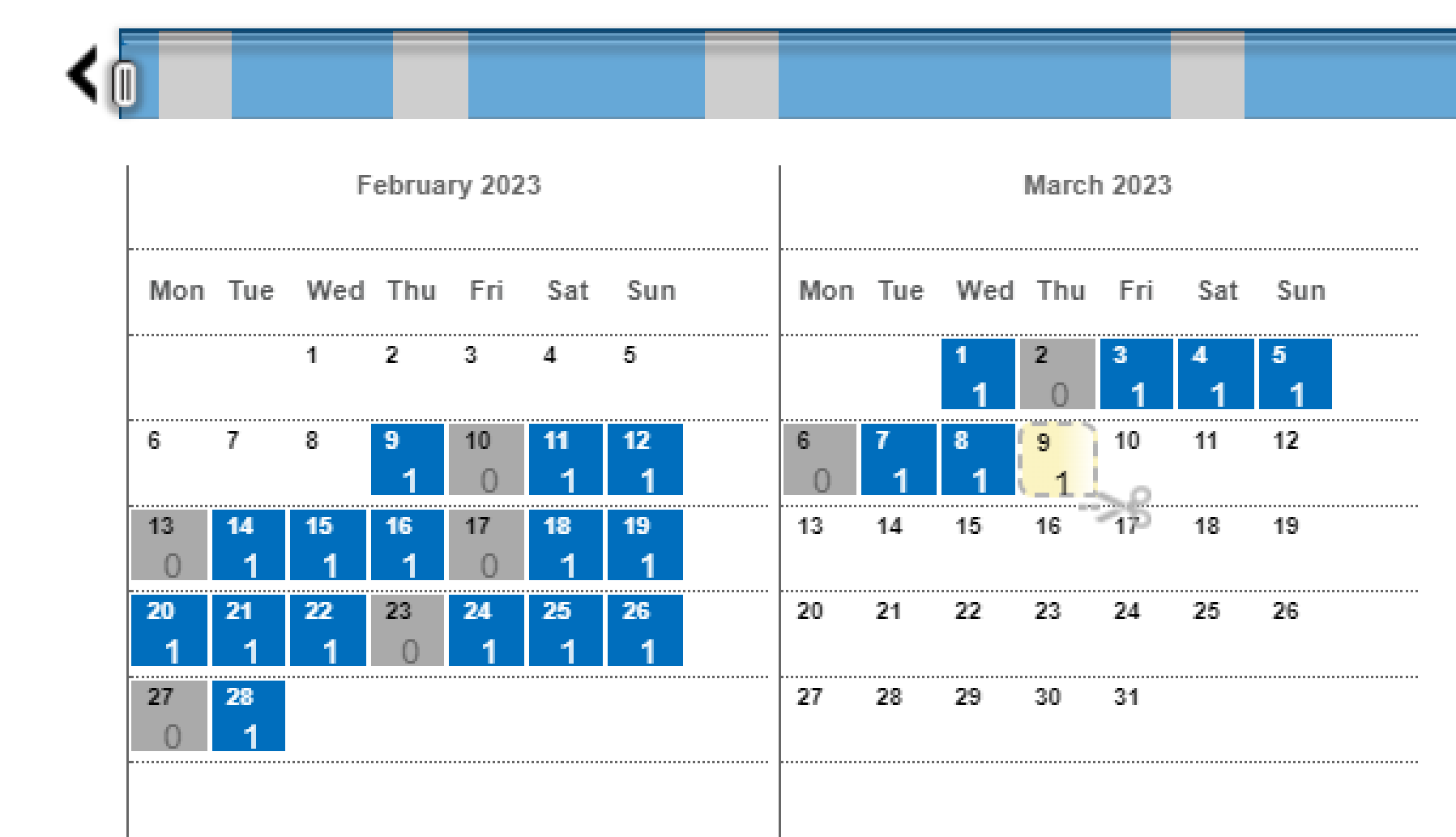


Figure 4. A 'calendar' view of medication adherence.

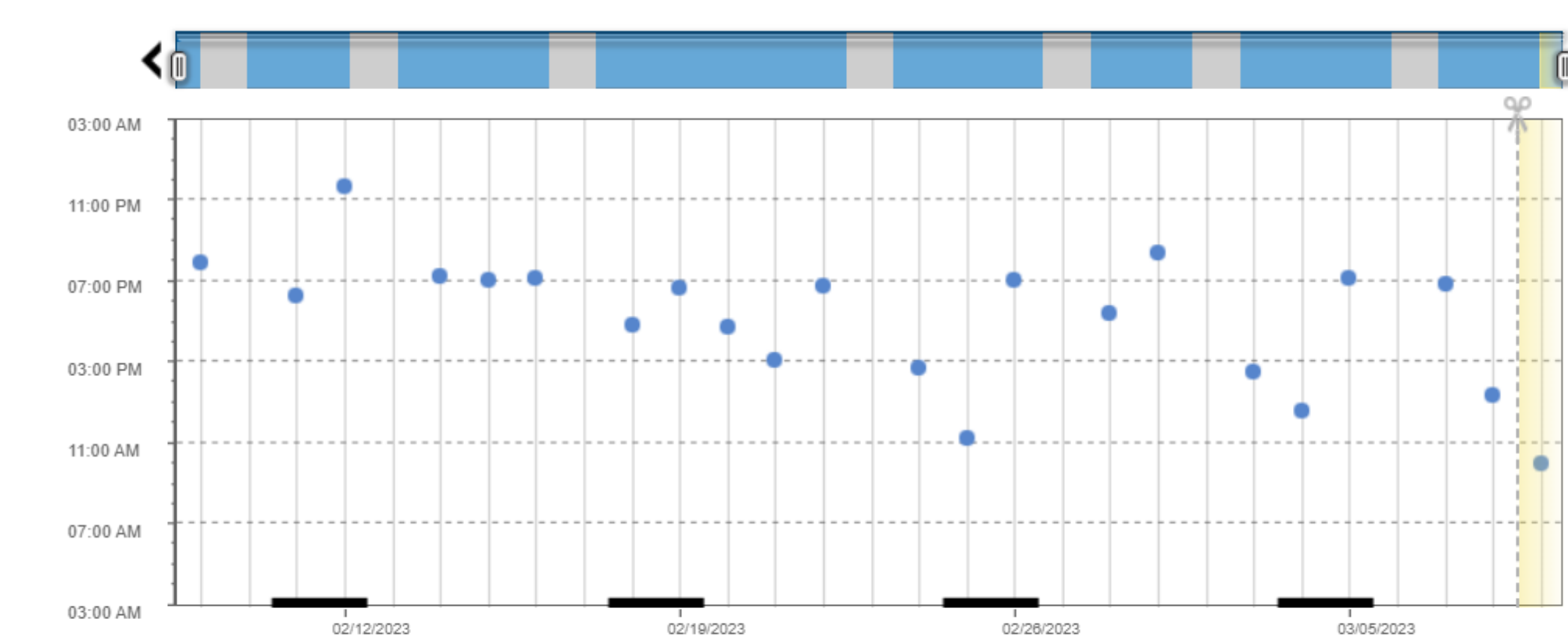


Figure 5. A 'chronology' view of medication adherence.

References

- [1] Eliasson L, Clifford S, Mulick A, Jackson C, Vrijens B. How the EMERGE guideline on medication adherence can improve the quality of clinical trials. *Br J Clin Pharmacol* 2020;86:687-97
- [2] Mason M, Cho Y, Rayo J, Gong Y, Harris M, Jiang Y. Technologies for Medication Adherence Monitoring and Technology Assessment Criteria: Narrative Review. *JMIR mHealth and uHealth* 2022;10:e35157
- [3] Park LG, Howie-Esquivel J, Dracup K. Electronic measurement of medication adherence. *West J Nurs Res* 2015;37:28-49