











Impact of Patient Education and Follow-Up With Pirfenidone in Patients With Idiopathic Pulmonary Fibrosis

This was actually a fascinating study done by Huggins and colleagues on the impact of patient education and persistence with continuing pirfenidone therapy in patients with IPF. It was done initially as a survey of US pulmonologists to determine the impact of educational intercession on continual use of pirfenidone, which has a fairly well known side effect profile and some patient tolerance issues. They limited this to pulmonologists who treated at least 10 IPF patients per year or more, and had some experience with treating that. And they actually surveyed a cohort of people who were ILD specialists as pulmonologists and general pulmonologists to determine if there were any differences between technique and education and compliance or continual therapy. They defined lower persistence as taking pirfenidone for less than 12 months before patient discontinuation or persistent use as greater than 24 months, which makes an impact on outcomes and progression of fibrosis.

And they determined that pulmonologists who provided direct or with other physician provided education to the patient about the medication's potential side effects, things to expect with this drug, that there was a much higher compliance or patient adherence use at 24 months. Comparatively speaking, they also had more support staff involved in the patient care with this study that was linked to longer use of the drug in patients and more in-person visits rather than telephone calls actually was related as well to patients continuing the drug past 12 months. And so they have a fairly robust cohort to look at this with.

So I think what really is the most important part for this study is that patients do better with remaining on pirfenidone. If they have pulmonologists that see them more frequently in person and provide more educational materials and have more support staff involved in their care, particularly in explaining ways to maneuver or deal with side effects with the medications. And that means more patient visits, more educational materials provided upfront, more use of support staff in a collaborative way to be more successful at remaining on this anti-fibrotic medication.