OBJECTIVE
Outpatients given antidepressants discontinue treatment at a high rate during the first few months. In 2009, Highmark Health Services evaluated the effectiveness of its use of interactive voice response (IVR) to improve antidepressant medication adherence.

TAKE-AWAY POINTS
- Evaluations of the effectiveness of intervention programs must carefully account for potential confounding by 1 or more of study factors including age group, which may be related to both the intervention group and the intervention outcome.
- Our age-adjusted evaluation of the effectiveness of interactive voice response (IVR) calls as an intervention strategy for improving antidepressant medication adherence found that IVR calls had little impact on antidepressant medication adherence rates. However, we did find that adherence rates increased markedly with increasing age.
- This result helped us to identify that IVR calls had little to no impact on adherence rates and that adherence rates generally increased markedly with age, a key finding that may help other intervention strategies.

CONCLUSION
Highmark Health Services evaluation of the effectiveness of IVR calls as an intervention strategy for improving antidepressant medication adherence was confounded positively by age group. This result helped us to identify that IVR calls had little or no impact on adherence rates and that adherence rates generally increased markedly with increasing age, a key finding that may help others to target other intervention strategies.

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