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Rectal suppository therapy for gastrointestinal disease; Improving patient compliance through innovative technology

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Abstract

At various times of treatment, IBD patients are prescribed suppositories and rectal medication is the acknowledged first line treatment for mild to moderate active ulcerative colitis and other gastrointestinal disease and ailments. Yet, patient compliance with prescribed rectal medication is abysmal, roughly 30%, leading to advancement of disease and increased healthcare costs. A disposable suppository applicator with patented technology transforms the value proposition for patients when deciding to adhere to their doctors prescribed drug therapy. Patients identify quality of life issues as a leading factor in noncompliance with suppository treatment. Lying on the left side for 30 to 45 minutes to administer the medication and the need for protective undergarments due to leakage are barriers to compliance. The new technology allows gas flow during the administration of the medication and withdrawal of the apparatus reducing the time for administration from 45 minutes to less than 5 seconds and allows immediate resumption of daily activities, without the need for protective undergarments. The applicator increases patient compliance and offers a new conversation with patients for physicians prescribing appropriate suppository medication.

Invented by a patient with firsthand knowledge of the encumbrances of suppository medication, the device is the first and only rectal suppository applicator cleared for marketing and distribution by the FDA. The patented, inexpensive, disposable device fits within the changing healthcare paradigm with a cost effective medical technology that incentivizes a behavioral change on the part of chronically ill patients to become more compliant with their prescribed rectal medication therapy.

Biography

Jennifer Davagian-Ensign is the Founder and CEO of Christcot Medical Company. As a Crohn's patient she knows the daily struggles of IBD patients and compliance decisions affecting healthcare outcomes. Ms Davagian-Ensign has given several talks including patient responsibility in compliance and the importance of new medical device technologies that motivate behavioral changes on the part of the patient. As a thought leader in the area of rectal medication treatment for gastrointestinal disease, Ms Davagian-Ensign led the initiative to have Ulcerative Proctitis categorized as a Rare Genetic Orphan Disease by the NIH and wrote the abstract included in the NIH database.