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NEWS

# Smart pills could 'dumb down' medical care

Research suggest that the use of smart pills should be only after carefully evaluating their clinical efficacy against standard of care drugs...



Researchers at the University of Illinois in Chicago have warned health care provider and policymakers to 'slow down' when it comes to allowing this technology in patient care settings.

Smart pills, also known as digital pill, are medications prescribed to patients that are equipped with edible electronic sensors that send wireless message to devices like patches, tablets or smartphones. Smart pills are ingested.

By [Iqra Farooq](#)  
(European Pharmaceutical Review)

21 September 2018

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The first was prescribed as a schizophrenic, bipolar or major depressive disorder drug, and was approved for use in human in 2017 by the US [Food and Drug Administration](#).

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Some hope that the technology will help patients and doctors to track their drug regimen compliance, increasing patient adherence. Estimations suggest this could save around \$100 – \$300 billion annually in the US, whilst other have concerns about the privacy of patients, consent and data sharing.

An expert in legal and ethical issues surrounding health care technology, [Associate Professor Eric Swirsky](#) suggested that both groups have valid arguments, but that neither group is asking the right questions. Prof Swirsky is the clinical associate professor of biomedical and health information sciences in the [UIC College of Applied Health Sciences](#).

“We need to know if smart pills are going to actually improve patients’ lives, which is much more complicated than compliance or privacy,” he said. “It is naive to think that this type of surveilled compliance with provider-recommended drug treatments will function like a magic pill. More likely, it will just challenge the ingenuity of patients.”

He claimed that there was no concrete evidence that suggested smart pills benefit patients, or that the use of the technology outside of clinical trials is beneficial.

“Smart pills are a dangerous reduction of the provider-patient relationship and there is no shortcut to improving patient adherence, which happens in a larger framework of home, work and clinical environments, not to mention perceptions and emotions,” he added.

“This technology dumbs down an issue that is often very complex in the hopes of quickly solving an expensive medical challenge.”

He gave the example of the first smart pill, being used in schizophrenic patients, who already suffer from paranoia about being surveilled and the distrust of medical care providers.

The researchers warn that smart pills sh



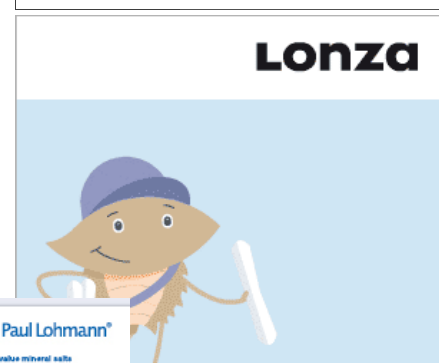
evaluating their clinical efficacy against standard of care drugs – not only based on compliance or cost savings.

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“It’s not just about return on investment – it’s about using technology and data in a way that changes lives for the better,” said Associate [Professor Andrew Boyd](#), co-author of the paper.

“There is nothing more personal than our health, and as health care strives for high-tech innovation, we cannot do it at the expense of trust between provider and patient.”

The paper was published in the [American Journal of Bioethics](#).





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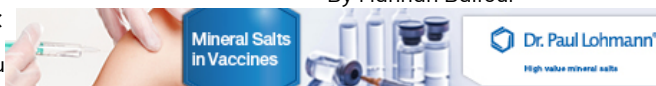
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