**Project title:**

To examine the effectiveness of the New Medicine Service (NMS), a national community pharmacy service to support medicines-taking in people starting a new medicine for a long-term condition, compared with normal practice.

**Outcomes:**

Results At 10 weeks, 53 patients had withdrawn and 443 (85%) patients were contacted successfully by telephone. In the unadjusted analysis of 378 patients still taking the initial medicine, 61% (95% CI 54% to 67%) and 71% (95% CI 64% to 77%) patients were adherent in the normal practice and NMS arms, respectively (p=0.04 for difference). In the adjusted intention to-treat analysis, the OR for increased adherence was 1.67 (95% CI 1.06 to 2.62; p=0.027) in favour of the NMS arm. There was a general trend to reduced NHS costs, albeit, statistically nonsignificant, for the NMS intervention: saving £21 (95% CI −£59 to £100, p=0.128) per patient.

**Project aims:**

The aim of this study was to evaluate the effectiveness of the NMS compared with normal practice in changing medicines-taking behaviour, using a robust, pragmatic randomised controlled trial (RCT) in community pharmacies in England.

**Cost:**

Stratified across primary and secondary care – please see costings resource table 1.

Overall savings of £21 per patient