

## Editorial Article

## Factors affect in patient adherence to medication regimen

**Antonia Kalogianni**

The medication regimen of the chronic diseases demands long term drugs administration and following up. It is well known that the treatment failure caused by poor medication adherence leads to frequent re-hospitalizations, poor outcome of the disease and increased health care costs.

According to the World Health Organization (WHO), non-adherence to the medical regimen consists a major clinical problem in the management of patients with chronic illness.<sup>1</sup> Rates of nonadherence with any medication treatment may vary from 15% to 93%, with an average estimated rate of 50%.<sup>2</sup>

Adherence with medication usage is defined as the proportion of prescribed doses of medication actually taken by a patient over a specified period of time.<sup>3</sup> Compliance, a synonymous term which was commonly used in the past, implies a passive role and simply following the demands of a prescriber, and non-compliance has been regarded as associated with deviant or irrational behavior.<sup>4</sup> The term "Adherence", implies an active role in collaboration with a prescriber, and "non-adherence" encompasses the diverse reasons for patients not following a treatment recommendation.

Adherence is a multidimensional phenomenon determined by the interaction of five sets of factors, termed "dimensions" by the WHO. These dimensions are:

- Social/economic: People who have social support from family, friends, or caregivers to assist with medication regimens have better adherence to treatment. Unstable living environments, limited access to health care, lack of financial resources, cost of medication, and burdensome work schedules have all been associated with decreased adherence rates.
- Provider-patient/health care system: The relationship of the doctor-patient is one of the most important health care system-related factors impacting adherence. A good relationship between the patient and health care provider, which features encouragement and reinforcement from the provider, has a positive impact on adherence. Poor or lack of communication concerning the benefits, instructions for use, and side effects of medications can also contribute to nonadherence, especially in older adults with memory problems.<sup>5</sup>
- Condition-related: Long term drugs administration for many chronic illnesses and adherence to such treatment regimens often declines significantly over time. This often happens when patient have few or no symptoms and the absence of them is a barrier for people to take their medication. It is important for the patient to understand the illness and what will happen if it is not treated.
- Therapy-related: The complexity of the medication regimen, which includes the number of medications and number of daily doses required; duration of therapy; therapies that are inconvenient or interfere with a person's lifestyle and side effects have been associated with decreased adherence.
- Patient-related factors: Physical impairments and cognitive limitations may increase the risk for nonadherence in older adults. Lack of knowledge about the disease and the reasons medication is needed, lack of motivation, low self-efficacy, and substance abuse are

associated with poor medication adherence.

Improving adherence enhances patients' safety. It is crucial for health professionals both to assess the patient and foresee the possible causes of nonadherence and follow a policy for increasing medication adherence and achieving the best health outcome .

## Bibliography

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