Joint Event

Public Health, Women's Health, Nursing and Hospital Management

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Notes:

Chronic patient compensable medication adherence

Introduction: Due to the introduction of the electronic Health system in Latvia from January 1, 2018 general practioners are able to check if patients had bought prescribed medications. Non- using of prescription drugs is actual problem all over the World. For example in United States about 35% of chronic patients do not use their medicaments. Using statins were about just 40% patients. Despite medication using indications, many patients do not use it, or use irregular. Medication nonadherence increase the risks to the patient healt and leads to negative consequences, causes financial loss and increases hospitalization rate. There are many reasons for not taking medications, for example-multimorbidity, being not able to afford them, despite of compensation, misunderstanding about ilness, asymptomatic diseases, patient cognitive status, mistrustin to their general practioner. It has been proven that patient adherence has been less in long term therapy and if the amount of prescribed medication increases. Patient adherence in case of using one medication is 81%, but if they have to use 4 medications, adherence decreases to 33%.

Aim: The aim of the study is to compare medication nonadherence for chronic patients among seven diagnosis- arterial hypertension, first type of diabetes, second type of diabetes, hyperlipidaemia, chronic obstructive lung disease, bronchial astma, depresion.

Materials and methods: There was done retrospective longitudinal study data of 229 patients. Patients were selected from two family doctors practices among seven diagnoses during the period from first january 2018 until 31 of July 2018. In study were included patients at least 18 years old, who had one or more diagnosis from selected seven diagnosis-arterial hypertension, first type of diabetes, second type of diabetes, hyperlipidaemia, chronic obstructive lung disease, bronchial astma, depresion and who were prescribed compensable medications. The data obtained were verified in the electronic Health system and analyzed in SPSS system.

Results: In this study were included patients, who had at least one from the mentioned diagnosis and who had visited their primary practioner from 1January 2018 until 31July 2018- total 217 patients. 127 patients(58,5%) were women and 90 patients (41,5%) were men. All seven diagnosis didnt have any of patients. Most patients had just one diagnosis-46,1%; two diagnosis had 35% and three diagnosis had 13,4% of patients. During period from 1st January until 31st July 2018 have been prescribed 1524 medications, but from all prescribed medications just 78,9% have been also bought. 21,1% medications havent been bought. The range of prescribed medications for one person during period ranges from one to 35 medications. The most patients have been prescribed two medications-13,4%. Statistically significant difference (p= 0,033) occurs for most nonadherent diagnosis- 19,2 % of Chronic obstructive lung disease havent bought prescribed medications. In the second place for medication nonadherence is patients with depression-10,8%. Than goes patients with diagnosis hypercholesterinemiae- 10,4% are nonadherent. In this study there wasnt statistically significant difference in prescribed medication group (p=0,331). Nonadherent were patients with prescribed statins-10,3%, than goes rescue medicaments(salbutamolum, nitrendipinum) -7,5% have not been bought.

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