

MONITORING OF THE ADHERENCE TO THERAPIES FOR THE TREATMENT OF PULMONARY HYPERTENSION

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OBJECTIVE

Medication adherence of pulmonary arterial hypertension (PAH) is an important aspect of the chronic disease management to improve the efficacy of treatment [1]. The study aimed to evaluate adherence to long-term drug treatments for PAH.

RESULTS

In the study period, 80 patients were treated with medications for PAH. Among them, 34% (27:80) were under therapy with sildenafil, 20% (16:80) with bosentan, 10% (8:80) with ambrisentan. The remaining 36% (29:80) were under multidrug treatment. Twenty-nine patients received at least one year of treatment: 41% (12:29) male and 59% (17:29) female. The 16.7% (2:12) of male aged >60 years had adherence of 88%; 41.6% (5:12) aged between 40-60 years of 91%; 25% (3:12) aged between 30-40 years of 92% and 16.7% (2:12) aged <30 years of 98%. With regard to treated female, 35% (6:17) of them aged >60 years showed adherence of 96%; 47% (8:17) aged between 40-60 years of 96%; 11.7% (2:17) aged between 30-40 years of 100% and 6% (1:17) aged <30 years of 100% (TAB. A). All female patients showed adherence of >95%, while male patients in all category had an adherence >80%.

CONCLUSIONS

It is important to monitor patient treatment to improve the efficacy of drugs. Data were shared with physicians, and it was decided to carry out more specific training sessions targeted at patients aged >60 years in order to ensure greater adherence to treatment.

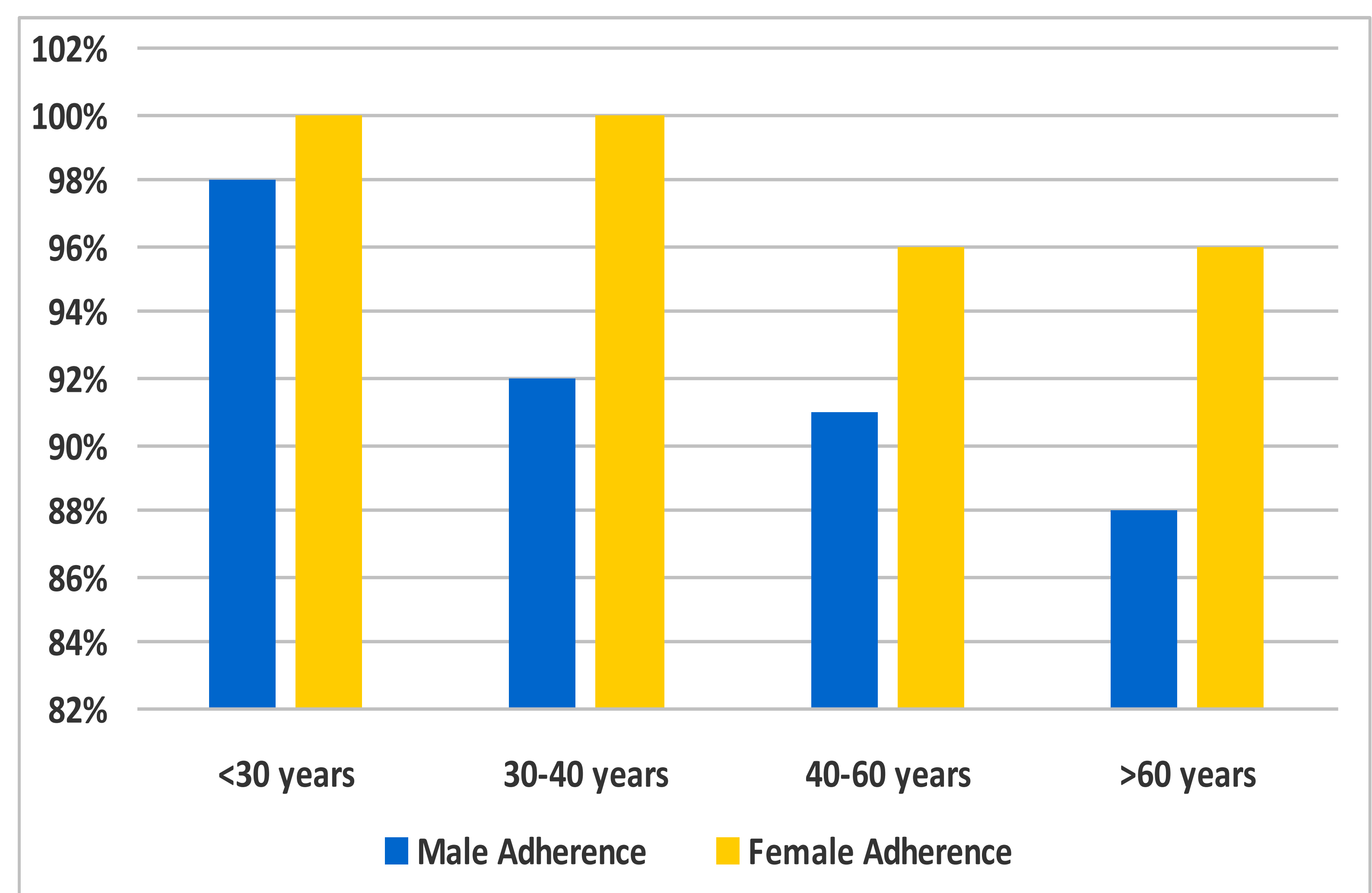
References and/or Acknowledgements

1.The impact of medication regimen factors of adherence to chronic treatment:a review of literature.J Behav Med. 2008;31:213-224

2.Lack of association between retrospectively collected pharmacy refill data and electronic drug monitoring of antiretroviral adherence. Acri T, TenHave TR, Chapman JC, Bogner HR, Gross R.AIDS Behav.Aug 2010;14(4):748-754.

METHOD

From 01/01/2010 to 04/01/2014 a retrospective analysis was done on therapeutic plans and prescriptions related to patients in treatment for at least one year in Pneumology Unit. Dispensations carried out by the Clinical Pharmacy were analyzed through data entered into the database file-F. Mean therapeutic adherence, according to the literature [2], was calculated using the "pharmacy-refill" method: days of dispensed therapy/(days between the first and the last dispensation +90 days)*100.



TAB. A Therapeutic adherence as a function of age and sex

DISCUSSIONS

Analysis showed that patients more adherent to therapy were those of younger age and female gender.

