Scholars Academic Journal of Pharmacy

Abbreviated Key Title: Sch Acad J Pharm ISSN 2347-9531 (Print) | ISSN 2320-4206 (Online) Journal homepage: http://saspublishers.com/sajp/ **3** OPEN ACCESS

Pharmacology

Assessment of Medication Adherence in Psychiatric Patients in a Tertiary Care Hospital

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DOI: 10.36347/sajp.2020.v09i06.001 | **Received**: 15.04.2020 | **Accepted**: 27.04.2020 | **Published**: 06.06.2020

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Abstract Original Research Article

Medication adherence is a serious challenge for providers treating patients with many types of illness. Patients with acute conditions are more likely to be adherent than those with chronic disorders. In the Present study out of 201 patients enrolled, the medication adherence assessment was conducted in 59 patients who were selected based on the study criteria. The baseline score was taken and later the scores are taken at the First month and Second month. Among 59 patients the base line score was, 0 patients with score 0, 9 patients with score 1, 8 patients with score 2, 12 patients with score 3, 12 patients with score 4, 10 patients with score 5, 6 patients with score 6, 2 patients with score 7, 0 patients with score 8. The first follow up score was 0 patients with score 5, 2 patients with score 1, 16 patients with score 7, 0 patients with score 8. The second follow up score was 0 patients with score 0, 21 patients with score 6, 0 patients with score 2, 17 patients with score 3, 2 patients with score 4, 3 patients with score 5, 2 patients with score 6, 0 patients with score 7, 0 patients with score 8. The p-value between the base line and 1st follow up, 1st follow up and 2nd follow up, base line and 2nd follow up shows 1.00 which shows no significance; but descriptively it can be observed that, the patients are getting adhered to their medication, as the patients are coming to the group of moderately adherent and highly adherent.

Keywords: Adherence, Psychiatric, Follow-up.

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Introduction

Mental health refers to a broad array of activities directly or indirectly related to the mental well-being [1]. The good news about the psychiatric illness is that the recovery is possible. Mental illness can affect persons of any age, race, religion and income [2]. Psychiatric out-patient setting is an ideal venue for screening, triage and assessing the psychiatric morbidity [3]. The patient on psychotropic drugs needs to take drug as prescribed and regular follow up is necessary to regulate long term therapy [4]. Adherence to a medication regimen involves behavioral change on the part of the patient. Compliance and behavioral changes are positively influenced by the patient's level and stability of family support, level of self-awareness about their health status, and the efficacy of treatment. Self-efficacy can also affect motivation and behaviour. Patients with a high degree of self-efficacy are more likely to be actively involved in developing and completing tasks related to a medical or treatment regimen [5]. Some patients do not follow the prescribed

treatment because of various reasons. One of the major factors for re-hospitalization is found to be non-compliance in taking drugs. Noncompliance is a personal behaviour that deviates from health related advice given by health care professional [6]. So, there is a need to evaluate the drug adherence in psychiatric patients.

MATERIALS & METHODS

A Prospective-Observational Study was conducted in the Out-Patients of Psychiatry Department of Basaveshwara Medical College & Hospital, Chitradurga, which is a tertiary care hospital providing health care services. Moresky medication adherence scale was used in assessing the medication adherence in psychiatric outpatients. This study was approved by the Institutional Human Ethics Committee of S.J.M College of Pharmacy, Chitradurga (SJMCP/IEC/677B/2013-14 Date-14/11/2013). The study was conducted for a period of six months with the following study criteria.

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Inclusion Criteria

- Out patients attending psychiatric department
- Age group: 18-60 years
- Pregnancy & Lactating mothers suffering from psychiatric illness

Exclusion Criteria

• All In-patients of psychiatry department

Patients who satisfy above study criteria were included into the study. The signed informed consent form by the patient or by their representatives was taken. Patient's demographic detail, medical diagnosis, therapeutic category were collected and was documented in a suitably designed data collection form.

STATISTICAL ANALYSIS

The data was entered in Microsoft Excel-2010 version and the results are analyzed using Statistical Package for Social Services (SPSS 19.0). Descriptive statistical methods were applied for analysis.

RESULTS

A total of 201 patients were enrolled in the study in which 59 patients were selected based on the criteria. The baseline score was taken and later the scores are taken at the First month and Second month. Among 59 patients the base line score was, 0 patients

with score 0, 9 patients with score 1, 8 patients with score 2, 12 patients with score 3, 12 patients with score 4, 10 patients with score 5, 6 patients with score 6, 2 patients with score 7, 0 patients with score 8.

The first follow up score was 0 patients with score 0, 14 patients with score 1, 16 patients with score 2, 7 patients with score 3, 14 patients with score 4, 6 patients with score 5, 2 patients with score 6, 0 patients with score 7, 0 patients with score 8.

The second follow up score was 0 patients with score 0, 21 patients with score 1, 14 patients with score 2, 17 patients with score 3, 2 patients with score 4, 3 patients with score 5, 2 patients with score 6, 0 patients with score 7, 0 patients with score 8.

Statistically by applying student-t test, the Mean \pm SD of base line score, 1^{st} follow up and 2^{nd} follow up are 6.56 ± 4.82 , 6.56 ± 6.616 , 6.56 ± 8.338 respectively. The p-value between the base line and 1^{st} follow up, 1^{st} follow up and 2^{nd} follow up, base line and 2^{nd} follow up shows 1.00 which shows no significance; but descriptively it can be observed that, the patients are getting adhered to their medication, as the patients are coming to the group of moderately adherent and highly adherent. The results are depicted in Table 1 and 2.

Table-1: Distribution	based on t	he Medication	Adherence Scores

Level of Adherence	Score	Base line	1st Follow up	2nd Follow up
Highly Adherent	0	0	0	0
Moderately Adherent	1	9	14	21
	2	8	16	14
Low Adherent	3	12	7	17
	4	12	14	2
	5	10	6	3
	6	6	2	2
	7	2	0	0
	8	0	0	0

Table-2: Statistical Results of Medication Adherence Scores

Tuble 21 Statistical Results of Medication Hunter the Section									
Pairs	Paired	T	Df	Sig.					
	Mean	SD	95% CI of	Difference					
			Lower	Upper					
Base line- 1 st Follow up	0.00	4.387	-3.373	3.373	0.000	8	1.00		
1 st Follow up – 2 nd Follow up	0.00	6.185	-4.754	4.754	0.000	8	1.00		
Base line – 2 nd Follow up	0.00	6.837	-5.256	5.256	0.000	8	1.00		

DISCUSSION

Non-adherence to medication regimens is a serious problem. It has many serious effects on prognosis of the illness and overall effectiveness of health systems. Increasing the effectiveness of adherence interventions may have a far greater impact on the health of the population than any improvement in specific medical treatments [7]. In our study, the medication adherence assessment was performed

through 8-point Morisky Medication Adherence Questionnaire. Among 59 patients, the patients with score 1 and 2 who are moderately adherent were 17 patients at the base line but 35 patients were moderately adherent at 2nd month follow up. In a study conducted by Kousalya K *et al.*, where the assessment of medication adherence in psychiatric patients were conducted in 200 patients, shows that 21.50% patients were compliant and 78.50% patients were non-complaint, which was assessed by Drug Attitude

Inventory [8]. The medication adherence assessment in psychiatric out patients conducted by Mahaye *et al.*, shows that 12.6% patients were highly adherent, 50.6% patients were moderately adherent [9]. In our study, in the medication adherence assessment, descriptively it can observed that the number of patients getting moderately adhered was getting increased but there is no statistical significant difference between the baseline and 2nd follow up; which may be due short duration of time and less sample size.

CONCLUSION

According to the analyzed results the conclusions made are Male patients are more prone to Psychiatric illness with age group of 18-40 years. The Improvement in the medication adherence is observed descriptively but not statistically.

ACKNOWLEDGEMENTS

The authors are thankful to the President & management of SJM Vidyapeetha through the Principal of SJM College of Pharmacy, Chitradurga, Karnataka for providing necessary facilities to carry out this work. We are grateful to Clinical and non-clinical staff of Department of Psychiatry. The authors are also thankful to the patients who got enrolled in the study and provided the necessary information for the conduction of the study.

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