

SCREENING OF PATIENT ADHERENCE IN THE TREATMENT OF CHRONIC NON-INFECTIOUS DISEASES

Khodjieva G.S.

Djumaev A.A.

Bukhara State Medical Institute

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Introduction. Today, the problem of chronic non-communicable diseases (CND) in modern society remains socially and medically relevant due to significant prevalence, high level of disability and mortality. The studied data of long-term studies indicate insufficient secondary prevention of CND both at the population level and among individuals with a high risk of its development. Among the reasons for this situation, a special place is given to insufficient patient adherence to drug and non-drug therapy. The study of patients' attitudes to the prescribed therapy and the degree of its compliance is a fairly new area of scientific research. The development of this area is due to the large role of the paradigm of interaction between doctor and patient, the transition from a paternalistic model to partnerships and the patient's awareness of his own active role in therapy.

Patient adherence, or compliance, to treatment is usually defined as the degree to which patients follow doctors' orders. Poor compliance is a common phenomenon and a problem for health systems in many countries. According to WHO, in developed countries only 50% of patients with chronic diseases strictly follow doctors' recommendations over a long period of time, and in developing countries the figure is even lower.

One of the most difficult groups of patients in terms of achieving adherence to treatment is the group of elderly patients with CND. Low adherence to treatment occurs in 15.3–25% of patients with CND, and in old age its frequency increases to 50% [4, 7, 8]. Adherence of patients with CND to additional treatment measures ranges from 0 (pneumococcal vaccination) to 82%, and does not reach 100% for any indicator.

Purpose of the study. Adaptation and implementation of questionnaires designed to monitor medication intake in the process of treating patients with chronic neurological disorders, and evaluation of their effectiveness in terms of increasing patient compliance.

Material and research methods. The study included 68 patients with CND. The average age of patients was 45.28 ± 0.70 years. Distribution by gender: 36 women (52.9%) and 32 men (47.1%). All patients received outpatient treatment (average days of treatment - 4.36 ± 0.15).

According to medical records, most of the examined patients had polytherapy and polypharmacy. At the same time, for the treatment of chronic pulmonary diseases, each patient received, on average, 2.2 ± 1.1 drugs of the main group.

Results. Observations of patients for 3 months who received treatment showed that patients in the main group had significantly higher compliance rates according to the Morisky-Green scale, a more pronounced increase in blood indicators and higher quality of life indicators compared to patients in the control group. Based on the demonstrated effectiveness, availability and simplicity, the proposed method can be recommended for implementation in wide medical practice.

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