

FACTORS INFLUENCING ADHERENCE TO THERAPY IN CARDIOLOGICAL PATIENTS

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Annotation. Failure to follow medical recommendations and prescriptions is a common cause of disability and high mortality in cardiac patients. WHO experts analyze in detail the reasons for inadequate implementation of the recommendations.

Keywords: adherence to therapy, non-compliance with medical recommendations.

Introduction: WHO report, opinion of patients Introduction. The questionnaire used was devoted to the factors influencing adherence to therapy. The response options were represented by a self-assessment rating scale with five positions. Results: Patient-related factors are of the greatest importance. The patient's knowledge of his disease, motivation for long-term therapy and expectations of treatment play a positive role, in turn, forgetfulness of taking the drug and fear of side effects have a negative impact. Equally important are the positive factors related to the healthcare system and medical personnel: the education of medical personnel, the patient, and the time allotted for communication with the patient. The factors related to the therapy are neutral.

The aim of the study was to evaluate the attitude of patients with cardiovascular diseases to the factors influencing adherence to long-term treatment using a questionnaire of patients according to WHO parameters.

Research materials and methods: According to the surveyed patients, the following factors positively influence the continuation of therapy: socio-economic status of 27 (29.3%) people; the degree of development of the medical system - 31 (33.7%); education of medical staff - 30 (32.6%); education of patients - 36 (39.2%); time time allocated for consultation by a doctor - 38 (41.3%); patient's knowledge of the disease - 55 (59.8%); motivation for treatment - 43(46.7%); expectations from treatment - 41 (44.6%); severity of symptoms of the disease - 30 (32.6%); availability of effective treatment methods - 37 (40.2%). Such a factor as the previous treatment experience in 29 (31.5%) of the responding patients has a positive role, and the same number of patients find it difficult to answer about the influence of this parameter.

The neutral attitude of the interviewed patients is influenced by such factors as race, age, the development of the medical service system, the complex regime and the number of drugs used, the duration of treatment, the frequency of therapy changes, the rate of effect, side effects of the drug, the rate of disease progression, and the patient's condition (physical, mental, and social).

Results: When calculating the total conditional index and the index of attitude to the studied factor, it was revealed that the factors associated with the patient that affect adherence to therapy are of the greatest importance. Thus, the patient's awareness of his disease, motivation for long-term therapy and expectations of treatment have a positive effect.

Forgetfulness when taking medications and fear of side effects have a negative role. Equally important are the positive factors related to the medical staff and the healthcare system as a whole. A less significant, but also positive influence on the continuation of therapy by patients is played by socio-economic status and the availability of effective treatment methods. Military actions have a strong negative impact on adherence to therapy. As for the factors related to the therapy, for patients with cardiovascular pathology, their influence on the degree of implementation of the recommendations is neutral. A neutral position is also occupied by some factors related to the patient's condition at the time of hospitalization, namely the severity of the symptoms of the disease, the state of health and the rate of progression of the disease. And only the presence of concomitant pathology has a negative impact.

Conclusion: When analyzing the attitude to the factors influencing the adherence to long-term treatment of patients with cardiovascular pathology using a self-assessment rating scale, it was revealed that the most significant factors are those related to the patient himself, and not those related to the therapy. Taking into account the data obtained, the problem of studying adherence to therapy and the role of patients themselves in this process requires further study.

References:

1. The World Health Organization. Commitment to long-term therapy: evidence for action. Geneva: WHO, 2003. 211 p.
2. Chazova I.E., Zhernakova Yu.V., Oshchepkova E.V. Prevalence of risk factors for cardiovascular diseases in the Russian population of patients with arterial hypertension // *Cardiology*. 2019;54(10):4-12.
3. Osterberg L., Blaschke T. Adherence to drug treatment // *N English J Med*. 2020;353:487-97.
4. Lukina Yu.V., Martsevich S.Yu., Kutishenko N.P. Adherence to treatment: a modern view on a familiar problem // *Cardiovascular therapy and prevention*. 2021;16(1):91-5.
5. Di Matteo M.R. Differences in patients' compliance with medical recommendations: a quantitative review of 50 years of research // *Medical Care*. 2019; 42:200-9.