Effect of illness acceptance on compliance and adherence in elderly hypertensive patients

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Introduction: Hypertension is considered to be the most prevalent condition in the general population. In order to achieve the desired hypertension treatment outcomes, patients should adhere to medical recommendations and cooperate with medical personnel at every stage of treatment. Unfortunately, with many chronic diseases, lack of compliance and adherence to recommended treatment regimens is one of the most significant factors that contribute to low success rates of medical treatment. This problem constitutes a major barrier to obtaining treatment benefits based on the medical knowledge available. Acceptance of illness is an important factor affecting the levels of compliance and adherence.

Purpose: To assess the effect of illness acceptance on treatment compliance and adherence in elderly hypertensive patients.

Materials and methods: The study was conducted on 300 patients aged 65-91 (mean = 71.75, SD = 7.79 years) diagnosed with hypertension. We analysed medical documentation and used two questionnaires: Acceptance of Illness (AIS) and Hill-Bone High Blood Pressure Compliance Scale for assessing treatment compliance.

Results: The level of illness acceptance in the population studied was high, the mean score being 28.4 points (SD=7.2, Me=29). Illness acceptance had a significant effect on the total score in the Hill-Bone High Blood Pressure Compliance Scale (p<0.001) and its two domains: Appointment keeping (p<0.001) and Medication taking (p<0.001).

Conclusions: Acceptance of illness affects the levels of treatment compliance and adherence in elderly hypertensive patients. The higher the acceptance of illness, the higher compliance and adherence in the population studied.