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Barriers to medication adherence in patients with cardiovascular disease from 12 countries: survey results from the EUROASPIRE V collaborative study

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Background: Adherence to cardiovascular medications is an imperative for reducing mortality after a cardiac event.

Purpose: To measure barriers to adherence to cardiovascular medications in participants with cardiovascular disease.

Methods: As part of the EUROASPIRE V study conducted in patients admitted to hospital 6-24 months earlier with ACS, a sub-sample of 3408 participants (76% male, mean age 64 years) from 12 countries (Egypt, Ireland, Kazakhstan, Lithuania, Netherlands, Poland, Portugal, Russian Federation, Sweden, Turkey, Ukraine, United Kingdom) were asked about their adherence to drugs to modify blood pressure, lipids and glucose: "Since the index event how often did you take your medications as the doctor prescribed?" The options for reply included: all of the time (100%), nearly all of the time (75%), most of the time (75%), about half the time (50%) and less than half the time (<50%).

Results: Overall non-adherence was self-rated at 9% (7% lipid lowering drugs; 5% antihypertensives; 7% hypoglycaemics) varying between 0% in Netherlands and 31% in Ukraine. Higher education was associated with less non-adherence (9% high v. 14% low); as was higher income (7% high v. 14% low). Non-adherence was highest in patients taking one class of drug (14%) compared to those on two (8%) or three (9%): p=0.04. 65% of patients were prescribed more than 2 drug classes. Non-adherence was higher in those not attending cardiac rehabilitation (13% attenders v. 5% non-attenders: p<0.001). Non-adherence was associated with anxiety (HADS r=+0.06) and depression (HADS r=+0.12) and lower ratings of health-related quality of life according to EQ-VAS (r =-0.11) and HeartQol global (r=-0.08).

Conclusion: Non-adherence to cardiovascular medications is associated with adverse psychosocial profiles. Educational initiatives like cardiac rehabilitation provide important interventions to promote adherence.