

A COMMUNITY-BASED STUDY ON HYPERTENSIVE MEDICATION ADHERENCE

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ABSTRACT

Background: Poor adherence to medication among hypertensive patients is a major concern in Malaysia. It limits the effectiveness of the treatment and leads to an increase in health costs. This study aims to assess the medication adherence among treated hypertensive patients and to assess the association between the adherence status and blood pressure control. **Methods:** This cross-sectional study was done in a community in Sepang, Selangor. A face-to-face interview was conducted using a pre-tested questionnaire to measure the adherence status among 55 hypertensive patients. The blood pressure was measured and was categorized as non-controlled blood pressure if having an average of systolic BP/diastolic BP $\geq 130/80$ mmHg. Fisher's Exact Test was performed to test the association between adherence and blood pressure. **Results:** The prevalence of adherence to medication in the community was 69% and the major contributors of poor adherence were the used alternative medicine as a replacement of prescribed hypertensive medication and worried about the side effect of the drug. However, there was no association between adherence status and blood pressure. **Conclusion:** Effective health education programs on the importance of medication adherence should be done in the community to improve adherence to hypertensive medication.

Keywords: adherence, hypertension, Malaysia, community-based

INTRODUCTION

From the Global Burden of Disease study, among the metabolic risk factors, defined as potentially modifiable causes of disease, hypertension contributes to the most deaths and disabilities in Malaysia in 2015¹. From the National Health and Morbidity Survey (NHMS) 2015, one of every three adults in Malaysia suffer from hypertension, showing a downward trend as compared to the previous NHMS surveys in 2006 and 2011².

Poor adherence is one of the major problems in therapeutics, especially for asymptomatic diseases such as hypertension. Nonadherence reduces the optimal clinical benefit of the medication and patients can develop complications from the uncontrolled disease. This poses problems not only for the patients themselves, but constitutes a burden to the society at large and health providers, as there are economic and treatment costs attached. The mean total cost of hypertensive treatment per patient visit was RM 289.42 and 72.2% of the total cost goes to anti-hypertensive drugs³.

Patient nonadherence to medication contributes to inefficiency in health spending which impacts directly on delivery of health services and in the current climate of finite resources will burden the country. Moreover, untreated and uncontrolled hypertension in the long term can lead to renovascular, retinovascular, cardiovascular and cerebrovascular complications with its increased treatment costs and impacts on the quality of life of the population.

Several studies have been done to determine the prevalence of noncompliance towards anti-hypertensives in Malaysia. The compliance ranged from 68% in the primary care clinic setting⁴ to 49% in the hospital setting⁵. In the year 1999, a study was conducted amongst hypertensive patients in Melaka Tengah District which showed that 44 % of the patients were compliant⁶.