

Factors associated with medication nonadherence among ischemic heart disease patients in Malaysia: Focus on erectile dysfunction as an adverse effect of cardioprotective therapy

Ali Y Nori¹, Baharudin Ibrahim¹, M Azmi A Hassali¹, Rahmat Awang¹ and M Ali Seikh Abdul Kader²

¹Universiti Sains Malaysia, Malaysia

²Penang General Hospital (HPP), Malaysia

Ischemic heart disease continues to lead the causes of mortality in Malaysia. Adverse effects of cardioprotective therapy represent one of the main impediments to medication adherence in the ambulatory settings. Erectile dysfunction (ED) is frequently related to beta blockers (except nebivolol) as they decrease the level of testosterone and follicle-stimulating hormones, or to thiazide diuretics through unknown mechanism. We conducted a cross sectional hospital-based survey to estimate different barriers to adherence, and to evaluate adverse effects of secondary prevention regimen reported by ischemic heart disease (IHD) patients. The sample was 187 males consecutively approached within February to June 2013. Gathered barriers were categorized according to WHO multidimensional model of adherence to long-term medications. Among 29 factors all tested for association with poor adherence (measured via MMAS-8) using simple logistic regression, five of them were significant ($P < 0.05$). The same variables except 'having comorbidities to IHD' were independently associated with the outcome upon employing multivariate analysis, namely 'medication-related barrier'; 'reporting ED as an adverse effect'; 'wrong regimen intaking'; and 'use of anti-impotence drugs'. The adjusted OR were 2.97, 3.49, 3.98, and 4.71, respectively. For enhancing overall adherence and proper intake of the prescribed medications, routine and reliable assessment of predictable side effects to the evidence-based cardiovascular medications in the clinic is a necessary action to be undertaken by practitioners. Treatment of underlying conditions to IHD like ED is as important (or may be more) as patient's education about the correct intake of daily doses for augmenting the chance of successful follow-up.

Biography

Ali Y. Nori is a registered pharmacist in Iraq and currently a final year PhD student in the University of Science, Malaysia, discipline of Clinical Pharmacy. He has masters in Health and Educational Psychology, and he wants to pursue his post-doctorate in Clinical Informatics field applied systematically within hospital-based pharmacovigilance services.

alz.m1983@gmail.com

Notes: