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Assessment of disability and medication adherence in patients with rheumatoid arthritis**Mona Alqahtani, Saja Almazrou, Hadir Aljohani and Maram Aljbreen**
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Background & Objective: Rheumatoid Arthritis (RA) patient's adherence to pharmacologic therapy is important to achieve therapeutic goals and improve outcomes. Our study objectives are to explore the adherence level, disability index and pain score in patients with rheumatoid arthritis and to understand the relationship between certain patient variables with adherence and disability.

Design & Settings: A cross-sectional study with a self-administered questionnaire to RA patients. Participants gave their consent and were recruited from outpatient pharmacy waiting areas in different tertiary hospitals in Riyadh, the capital city of Saudi Arabia.

Patients & Methods: This study included (126) adults with rheumatoid arthritis. A self-administered questionnaire was given to RA patients using a special tool that collects demographic and clinical information, adherence and outcome assessment. Four pages survey that contains three sections: (1) demographic and clinical data, (2) Adherence measured using 8-item Morisky Medication Adherence Scale (MMAS-8) by using validated Arabic version to assess patient's adherence, and (3) Health Assessment Questionnaire (HAQ) to assess patient's outcomes.

Results: Scores of (MMAS-8 items) ranging from 0 to 8 shows that approximately one-half the participants were (n=66) 52.3% are non-adhered or show low adherence while (n=12) 9.5% of patients were adhered (high adherence), the remaining participants (n=48) shows 38% medium adherence. Those non-adhered, almost (n=23) 18.2% of them shows low adherence after the first 5 years of diagnosis. About (n=35) 27.7% of none adhered had from 2-3 medications used for RA while those had more than three medications shows only (n=19) 15% low adherence. There were no significant differences between clinical and demographic variables between groups.

Conclusion: The vast majority of RA patients have low to medium adherence score. Advanced age, years of diagnosis and number of medication significantly affect disability score. However, there is no relationship between these factors and pain score.

Biography

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