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Factors affecting adherence to Antihypertensive medication regimen among hemodialysis patients attending a private hospital in Mombasa

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Introduction: Patients with chronic kidney disease undergoing hemodialysis are usually co-morbid with hypertension that contributes to increased cardiovascular morbidity and mortality if not controlled. A number of factors targeted as influencing agents to uncontrolled hypertension but adherence to treatment is counted as a major factor contributing to poor control of hypertension.

Methodology: A cross-sectional study conducted a renal unit of a private hospital in Kenya amongst a sample size of 144 hypertensive patients aged 18 years and above, respondents were identified using simple random sampling. Data was collected using a semi-structured questionnaire. Data analysis using Chi-square test was applied to establish significant relationships between the dependent variable (adherence) and independent variables (knowledge and perception), logistic regression was used to predict independent variables that influence adherence, and results with p values ≤ 0.05 were considered statistically significant. Results: Factors that influenced adherence to antihypertensive medication were; age $p=0.23$ (OR=1.02, CI=0.98-1.07), female gender had better adherence than males $P=0.98$ (OR=2.58, CI=1.09-6.16), patients with health insurance $p=0.92$ (OR=0.35, CI=0.15-0.84), knowledge of side effects of medication $p=0.58$ (OR=2.02, CI=0.44-9.27), perception of severity $P=0.69$ (OR=3.61, CI=1.02-12.78), perception of benefit $p=0.30$ (OR=3.22, CI=1.06-9.79), and perception of barriers $p=0.75$ (OR=0.23, CI=0.08-0.64).

Conclusion: Healthcare workers should formulate interventions tailored towards scaling up adherence in those subgroups of hypertensive patients mentioned above in order to avert morbidities and mortalities as informed by the study.