

THE IMPACT OF SELECTED FACTORS ON COMPLIANCE WITH PHARMACOLOGICAL RECOMMENDATIONS OF PATIENTS WITH CHRONIC OBSTRUCTIVE PULMONARY DISEASE

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Introduction. Chronic obstructive pulmonary disease (COPD) is one of the most important public health problems and a leading cause of death in the world. One of the main reasons for the lack of control over the disease is the low adherence to therapeutic recommendations.

Aim of the study was to assess the impact of selected factors on adherence to recommendations of patients with COPD.

Material and methods. 106 inpatients (42 woman, mean age 70,2±5,9 years) with COPD were enrolled in the study. Patients were examined using an own survey to assess the level of adherence. Socioclinical data were obtained from medical records.

Results. 84% presented low level of adherence to therapeutic recommendations and 16% moderate (mean score 3.17±2.39). In correlation analysis significant factors lowering the level of adherence were: age ($\beta=-0,116$), overweight ($\beta=-0.098$), living alone ($\beta=-2208$), no professional activity ($\beta=-1.104$), number of hospitalizations ($\beta=-2.112$), length of current hospitalization ($\beta=-1.249$), fatigue ($\beta=-1.572$) and sleep disorders ($\beta=-0.961$). The adherence level increased with SABA ((2 short-acting inhaled mimetics) ($\beta=2,127$). In multivariate analysis the independent predictors of non-adherence were loneliness ($\beta=-1,331$) and the number of previous hospitalizations ($\beta=-1,283$).

Conclusions. The independent predictors of non-adherence are loneliness and the number of hospitalizations.

Key words: adherence, COPD, treatment