

19. MEDICATION ADHERENCE AMONG PATIENTS WITH COMMUNITY ACQUIRED PNEUMONIA IN PRIMARY CARE IN THE REPUBLIC OF MOLDOVA

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Introduction. Low therapy adherence is a major cause of the therapeutic objective's failure, in chronic and acute disease. Although community acquired pneumonia (CAP) is considered the most common infectious disease encountered in clinical practice, the level of adherence to treatment and the factors associated with low adherence remain unclear.

Aim of study. The study aimed to determine the factors related to adherence to the treatment of patients with community acquired pneumonia in primary care, from the patient perspective.

Methods and materials. We performed a cross-sectional study in which data were gathered from 45 interviews of patients with CAP treated in primary health care facilities, from 21 family physicians' practices. There were reviewed medical records for the last episode of CAP to evaluate demographics dates, clinical manifestations, the results of investigations and treatment outcomes. At the end of the treatment of the current episode of CAP the adherence was assessed by Medication Adherence Report Scale (MARS). The dates were analyzed using the Excel program.

Results. There were 45 patients included in the study, 30 females (66,6 %), the mean age was $52,8 \pm 2,62$ (range 24- 73) years. The predominant symptom of CAP was fever, cough the mean disease duration $14,3 \pm 1,46$ (range 7- 30) days. The average number of comorbidities in one patient was $1,7 \pm 0,21$ (range 1-5). In the 38 (84%) cases the CAP was caused by COVID 19. The patients took different schemes of treatment, in 85% of cases it was oral intake, the mean number of daily drugs was $4 \pm 1,2$ per day. The medication adherence is considered as a medium in 23 (51,1%) and poor compliance in 19 (42%) patients. It was found that the higher number of drugs and the frequent daily use of the medications negatively affected the adherence, and the higher level of education determines a better compliance to treatment.

Conclusion. The level of adherence in study patients was medium in 51.1% cases, we identified a set of factors that negatively influence the adherence to treatment of patients with community acquired pneumonia. Taking into account the most important factors that have a high potential for low compliance may be helpful in the improvement of the patient's outcomes.