

Non-Adherence to Antidepressant Treatment and Its Predictors among Outpatients with Depressive Disorders

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Abstract : In Ethiopia, there is inadequate information on non-adherence to antidepressant treatment in patients with depressive disorders. Having awareness of the pattern of adherence is important in future prognosis, quality of life, and functionality in these patients. This hospital-based cross-sectional quantitative study was done on a sample of 216 consecutive outpatients with depressive disorders. Data were collected using questionnaires through in-person and phone call interviews. The 8-item Morisky scale was used to assess the pattern of medication adherence. Other specially developed tools were used to obtain sociodemographic and clinical information from electronic medical records and patient interviews. Data were analyzed using the Statistical Package for the Social Sciences Version - 25. Univariate and multivariable analyses were carried out to assess factors associated with non-adherence. 90% of the participants had a primary diagnosis of major depressive disorder. Based on the 8-item Morisky Medication Adherence Scale, the prevalence of non-adherence was found to be 84.7%. Living distance between 11 to 50 km from the hospital (AOR= 11, 95% CI (29,46.6)), post-secondary level of education (AOR= 8.3, 95% CI (1, 64.4)) and taking multiple medications (AOR= 6.1, 95% CI (1, 34.9)) were found to have significantly increased odds of non-adherence. Non-adherence was significantly associated with factors such as increased living distance from the hospital, relatively higher educational level, and polypharmacy. Proper and patient-centered psychoeducation, addressing the communication gap between patients and doctors, adherence to prescribing guidelines, avoiding polypharmacy unless indicated & working on accessibility of treatment is essential to decrease non-adherence.

Keywords : depressive disorders, Ethiopia, medication adherence, Addis Ababa

Conference Title : ICPPMH 2021 : International Conference on Psychiatry, Psychopathology and Mental Health

Conference Location : Vancouver, Canada

Conference Dates : August 05-06, 2021