

Editor's Desk



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Concordance and Hyper Tension

Compliance is defined as: 'The extent to which the patient's Behavior matches the prescriber's recommendations.' However, its use is declining as it implies lack of patient involvement.

Adherence is defined as: 'The extent to which the patient's Behavior matches agreed recommendations from the prescriber.' It has been adopted by many as an alternative to compliance, in an attempt to emphasize that the patient is free to decide whether to adhere to the doctor's recommendations and that failure to do so should not be a reason to blame the Patient. Adherence develops the definition of compliance by emphasizing the need for agreement.

Concordance is a relatively recent term, predominantly used in the United Kingdom (UK) In 2003 World health organization who emphasized that there is a need to differentiate adherence from compliance. The patients should be active partners with health professionals in their own care and that good communication between patient and healthcare professional is mandatory for effective clinical practice, as mentioned by WHO. Concordance is shared decision-making process through which patients and clinicians make treatment decisions together.

Concordance is sometimes used, incorrectly, as a synonym for adherence.

Poor adherence has been identified as the cause of failure to control hypertension in up to two - third of patients. That improving concordance could represent both an important potential source of Health and economic advancement.

Five interacting dimensions affecting concordance:

The common belief that patients are solely responsible for "adhering" to their therapy is misleading and most often reflects a misunderstanding of how other factors affects people behavior and capacity to adhere to their treatment. Concordance is a multi-dimensional phenomenon determined by the interplay of 5 sets of factors of which patient related factors are just one determinant

Socio economic - related factors:

are illiteracy, low level of education, unemployment lack of effective social support networks, unstable living conditions, long distance from treatment center, expense of transport, costly medication, changing environmental situations culture and lay believes about illness and treatment and family dysfunction.



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Healthcare team and system - related factors:

These include poorly developed health services, poor medication distribution system, lack of knowledge and training for health care providers on managing chronic diseases such as hypertension, overworked Healthcare providers, short consultations, poor capacity of the system to educate patients about their conditions and provide them with timely follow-up and lack of knowledge and adherence and of effective interventions for improving it

Conditions- related factors:

In general hypertensive patients have little or no symptoms, which increase the difficulty in convincing the patients that they need life-long treatment

Therapy- related factors:

Those related to the complexity of the medical regimen, previous treatment failures and/ or side effects, frequent changes in treatment, and the immediacy of the beneficial effects

Patient-related factors:

- Forgetfulness
- Forgetfulness
- Psychosocial stress
- Anxieties about possible adverse effects
- Low motivation
- Inadequate knowledge and skill in managing their disease and treatment
- Lack of self-perceived need for treatment
- Lack of perceived effect of treatment
- Negative believe regarding the efficiency of the treatment
- Lack of perceptions of the health risk related to their hypertension
- Misunderstanding of medication instructions
- Lack of engagement in monitoring of their blood pressure
- Low treatment expectations
- Low attendance at follow up appointments
- Anxiety over the complexity of the drug regimen
- Feeling stigmatized by the disease.

The use of simple urine-based assay to evaluate the prevalence of non-adherence to antihypertensive treatment could be employed to guide further investigations and interventions. Impact of mobile phone apps self-administrations techniques as well as nurse involvement is ongoing to improve concordance so that we can achieve better Hypertension control.

Best wishes
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