

УРОВЕНЬ КОМПЛАЕНСА: ОДИН ИЗ ФАКТОРОВ, ОПРЕДЕЛЯЮЩИХ ЭФФЕКТИВНОСТЬ ТЕРАПИИ

COMPLIANCE LEVEL: ONE OF THE FACTORS DETERMINING THE EFFECTIVENESS OF THERAPY

**N. Selezneva
E. Semeleva
A. Gorshkov
K. Kashtanova**

Summary. The article discusses the problems of patients' compliance with the prescribed medication regimen that arise in the treatment of various diseases. There are also social consequences of noncompliance: family and work problems of patients that reduce their quality of life. The degree of patients' trust in the healthcare system (primary outpatient polyclinic network) has been determined, which makes it possible to make appropriate management decisions and programs for improving the health of the population. The practical significance of the study allows for effective prevention of diseases.

Keywords: compliance, violations of the medical treatment regime, health protection, non-compliance.

Селезнева Наталья Михайловна

Доцент, к.м.н. ФГБОУ ВО «МГУ им. Н.П. Огарёва»

Семелева Елена Владимировна

Профессор, д.м.н. ФГБОУ ВО «МГУ им. Н.П. Огарёва»

Горшков Артем Александрович

ФГБОУ ВО «МГУ им. Н.П. Огарёва»

Каштанова Кристина Сергеевна

ФГБОУ ВО «МГУ им. Н.П. Огарёва»

shtanina37@mail.ru

Аннотация. В статье рассмотрены проблемы соблюдения пациентами режима приема предписанных лекарств, которые возникают при лечении различных заболеваний. Также выделяют социальные последствия некомплаентности: семейные и производственные проблемы пациентов, снижающие качество их жизни. Определена степень доверительного отношения пациентов к системе здравоохранения (первичная амбулаторно-поликлиническая сеть), что позволяет принять соответствующие управленческие решения и программы оздоровления населения. Практическая значимость исследования позволяет провести эффективную профилактику заболеваний.

Ключевые слова: комплаенс, нарушения режима медикаментозного лечения, охрана здоровья, некомплаентность.

Relevance of the work: the problem of patients' consent and fulfillment of medical prescriptions prescribed by a doctor — what is designated by the term compliance, is currently extremely relevant [1]. The importance of studying the level of compliance lies in the growing importance of preventive medical measures, in improving the standard of living and health of patients who are given great importance by the national project "Healthcare". Preventive measures remain a priority in the healthcare system. There are five groups of factors affecting compliance (table 1). The effectiveness of the work carried out by outpatient clinics depends on the degree of trust of patients [2; 3].

Objective

To assess the level of compliance in surgical patients.

Materials and methods

700 respondents who applied for specialized consultative and diagnostic assistance to the consultative polyclinic of the State Medical Institution "Mordovian Republican Central Clinical Hospital" for 2022 took part in

our sociological study. The age group is from 14 to 84 years old, 53% of women, 47% of men. Most of the respondents (68.3%) were persons with secondary specialized and higher education who have a clear definition of their attitude to conducting a sociological study. The level of education received by respondents forms a certain understanding of their lifestyle. Thus, persons with secondary education indicate the dominance of family circumstances and work in their lifestyle (36.2% and 36.0%), those with secondary special education — work and family environment (33.7% and 32.4%, respectively), while those with higher education — work and their own behavior (45.3% and 31.8%).

In order to make managerial decisions and programs for improving the health of the population, it is important to study the attitude of patients to doctors of the outpatient network, their medical activity and awareness of the importance of compliance with medical prescriptions prescribed by a doctor [4]. According to our research, more than half of the respondents (63.9%) have confidence in the doctor, 39.6% of men and 45.2% of women from students, 53.4% of men and 42.6% of women working and temporarily unemployed. 73.2% of men and

Table 1. Five groups of factors affecting compliance

Factor category	Zone of influence
Social and economic	Financial situation, low cultural level, illiteracy, old age, distance from a health care institution
Systemic (related to the healthcare system)	Doctor — patient relationship, paramedic education, healthcare system capabilities, duration of medical consultation, distribution of medicines
Related to the disease	Severity of symptoms; stress associated with physical suffering, stage of disease progression, comorbidity, availability of effective therapy
Caused by therapy	The complexity of the regimen, the duration of treatment, difficult selection of therapy, adverse reactions to drugs, ineffectiveness of the prescribed therapy
Due to the characteristics of the patient	Fear of unwanted side effects, premature termination of treatment, unreasonable expectations, forgetfulness, knowledge about the disease

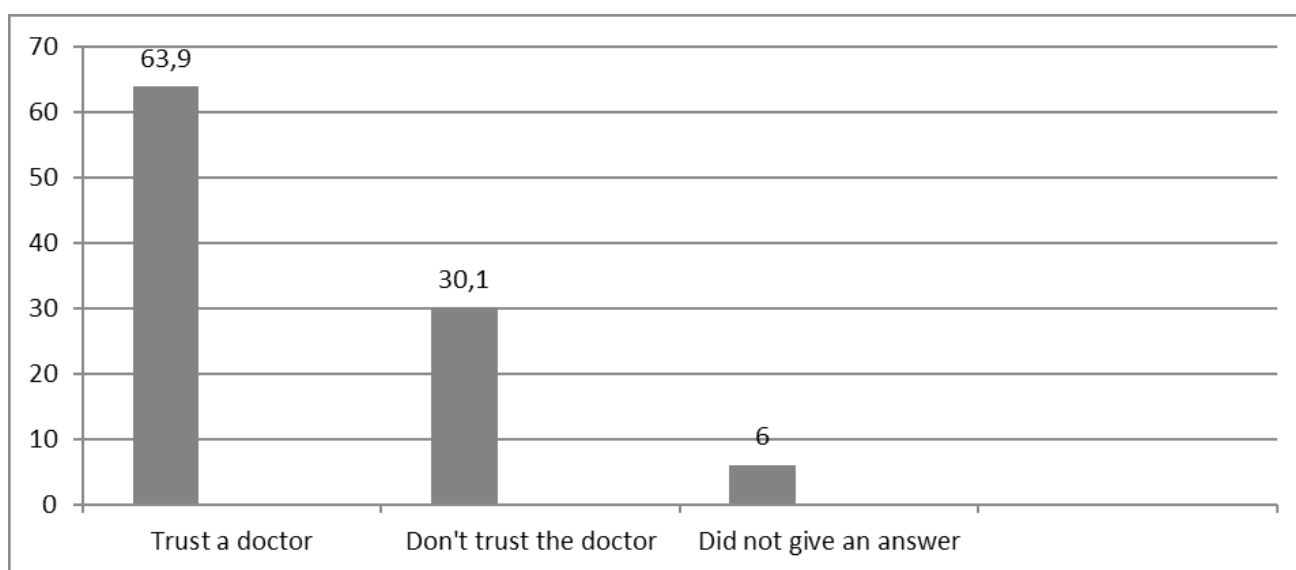


Figure 1. Do you trust your doctor?

51.5% of women express confidence in the doctor among pensioners and disabled people. It should be noted that 42 (6.0%) of the respondents did not give an answer to this question at all (figure 1).

Persons with secondary and specialized secondary levels of education express confidence in the doctor to a greater extent, and women are also more trusting than men (64.2% and 42.7%; 63.8% and 43.2%).

Of students and workers, due to their employment in certain activities, 21.4% seek medical help when their condition worsens; 13.6% and 27.3%; 22.8% of men and women, respectively.

Although among the respondents there was a rather trusting attitude to the doctor and awareness of the need to seek medical help early in case of deterioration

of health — patients still delay a visit to the outpatient network and resort to medical care only in severe cases (33.9%).

The respondents to a greater extent (85.2%) take medications prescribed by a doctor, there are no significant differences in the groups considered. Compliance is largely assessed by the effectiveness of medical examination, the leading indicator of which (in the cohort under study) is the coverage of annual examinations (figure 2).

The result of treatment largely depends on a trusting attitude to the doctor, strict compliance with the recommendations that are observed in 54.6%. Thus, pensioners and disabled 78.3%, 61.6% of men and women, respectively, are more committed to full compliance with the recommendations, 57.4% of men and 43.9% of women strictly follow the recommendations among students

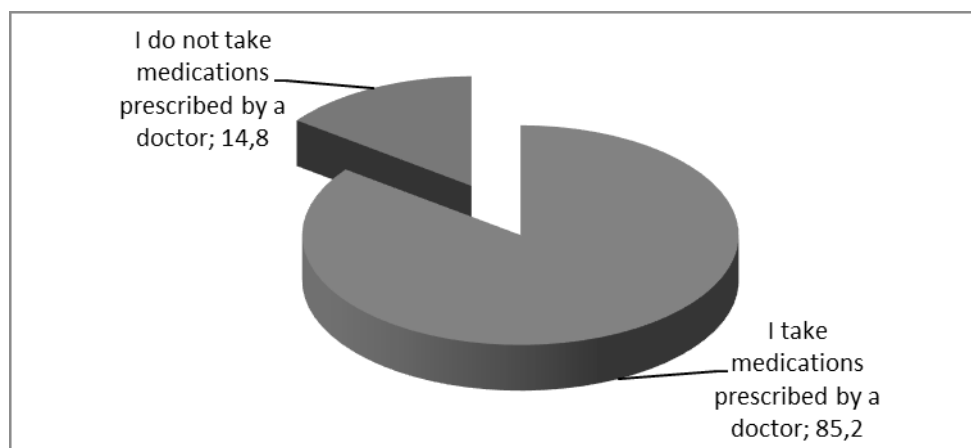


Figure 2. Are you taking medications prescribed by a doctor?

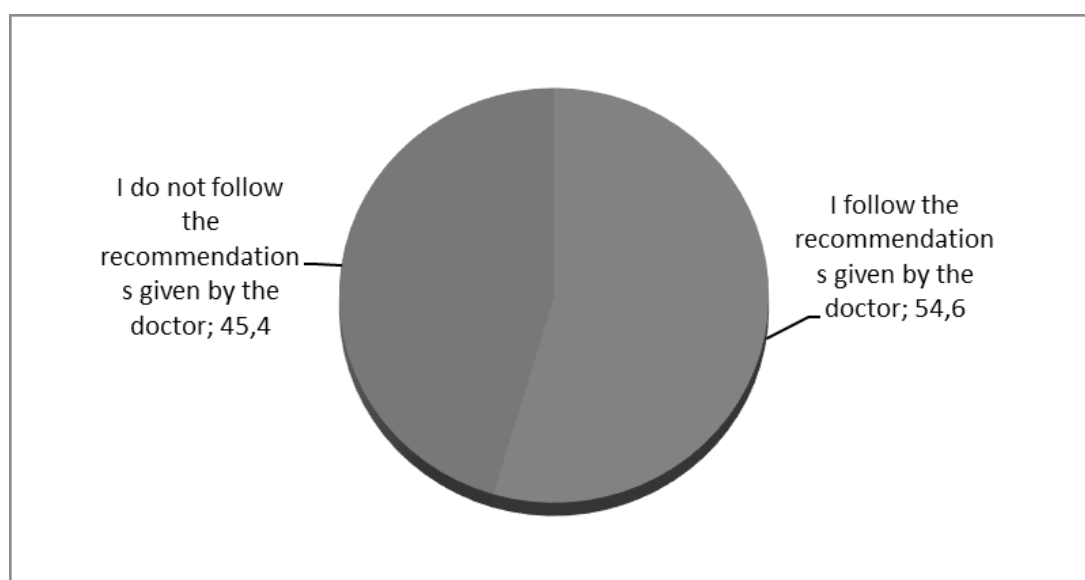


Figure 3. Follow the recommendations given by the doctor?

(figure 3). More than half of the respondents do not follow the doctor's prescriptions, which does not create prerequisites for high treatment results.

The main reason for contacting the polyclinic was the disease of 71.2%, for the purpose of preventive examination or to obtain a medical certificate — 28.8% (figure 4). The high percentage of passing a fluorographic examination in the general cohort of respondents and in the examined groups, over 90%, is explained by the inclusion of this study in the mandatory minimum of medical examination. To assess the completeness of the coverage of medical examination of respondents, the frequency of annual fluorographic examination (included in the mandatory minimum of medical examination) was analyzed. It was

found that 92.9% undergo fluorography once a year, and less than once a year — 7.1% of the surveyed. Vaccination is neglected by 65.8% of respondents, of whom 41.2% are men, 24.6% are women.

The time elapsed from the onset of the disease (injury) to the attempted medical tactics affects both the tactics themselves and the prognosis and outcome of the pathology. Among all groups of respondents a few hours after the onset of the disease: students — 11.9%, working and temporarily unemployed — 11.3%, pensioners and the disabled — 17.1%. The majority of respondents indicated the deadline for applying to the outpatient network after a week and a month. The shortest period from the onset of the disease to treatment in the outpatient network is observed in students.

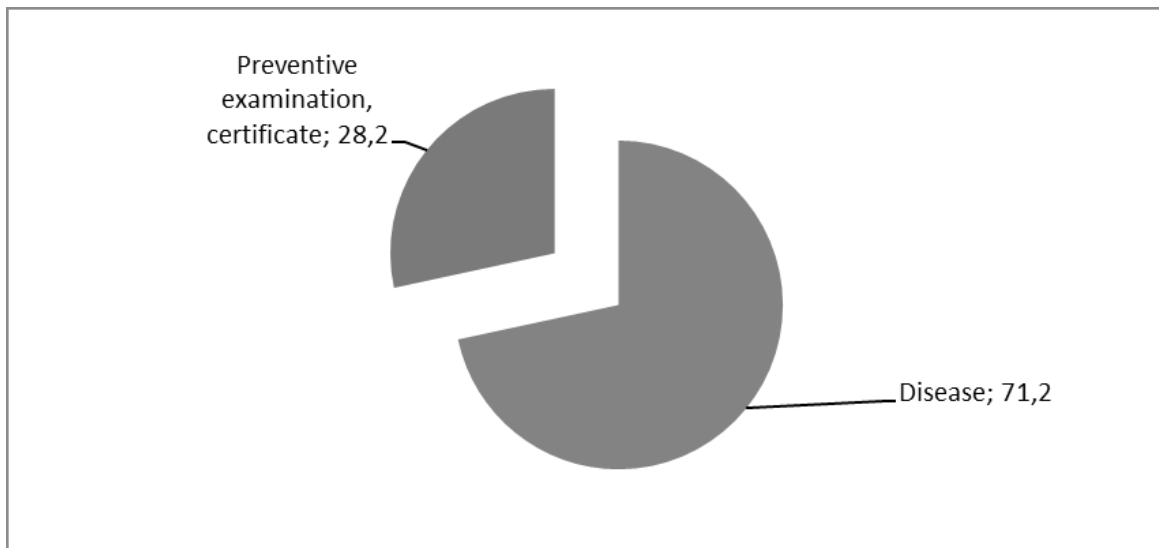


Figure 4. The reason for going to the doctor

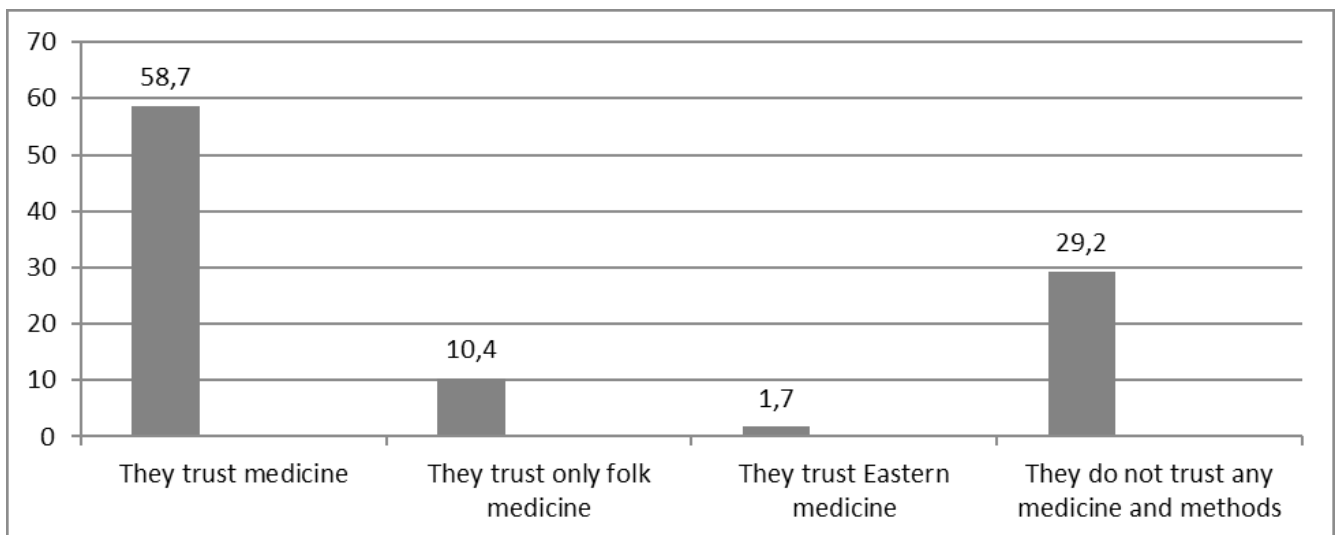


Figure 5. Attitude to medicine

Nevertheless, despite a fairly good level of medical examination, only 27.5% of respondents will immediately turn to a doctor if they feel worse, 38.7% rarely do so, and 33.8% — only in an extremely serious case.

Despite the fact that patients are quite well informed about the issue of medical care, there is no demand for outpatient care, this is probably due to the imperfection of work in polyclinics (long queues to specialist doctors, inconvenient work schedule, unavailability or long queues for individual diagnostic research methods, etc.). The data also indicate and about the fact that although most patients undergo medical examination in due time, but

the appeal for outpatient medical care in connection with the existing disease is low. However, the absolute majority of patients (411 (58.7%)) they trust scientifically-based methods of treatment, 73 (10.4%) prefer folk methods, 12 (1.7%) supporters of oriental medicine, and 29.2% do not trust any methods of improving the body (figure 5).

Compliance comes in two variations. It can be an independent goal of any scientific research or a determinant already under investigation after statistical processing of all data. The level of compliance in patients suffering from chronic diseases is much higher (67.3%) than in those who sought medical help with an acute illness.

Conclusions

The results obtained based on the results of the survey show that medical care is given a small place by respondents in maintaining the level of health and quality of life. It has been established that the insufficient degree of trust in outpatient care of the population largely depends not on the competence of medical personnel, but in general on the low organization of labor and primary care work [5]. This fact requires the adoption of appropriate management decisions in order to increase the efficiency of the outpatient network. Within the framework of the project, educational and informational

events have been developed and conducted for patients, for healthcare professionals, as well as for the interaction of these two groups in order to achieve an acceptable level of patient adherence to doctors' recommendations [6; 7]. Experts suggest that the use of compliance-enhancing measures may affect the protection of public health to a greater extent than even increasing the effectiveness of specific drugs [8; 9]. Noncompliance affects not only the patient's health, but is also associated with an additional burden on the economy of the healthcare system. All measures taken by medical professionals should be aimed at improving patient safety and reducing the cost of pharmacotherapy.

ЛИТЕРАТУРА

1. Кечемайкина М.И. Анализ показателей деятельности хирургических отделений в Республике Мордовия / М.И. Кечемайкина, Е.В. Семелева // Вестник Смоленской государственной медицинской академии. — 2021. — Т. 20. — № 1. — С. 131–136. — DOI 10.37903/vsgma.2021.1.20.
2. Комплаенс как интенциональное качество личности пациента в диагностическом процессе / Д.А. Карпова, Е.Н. Песоцкая, Л.А. Белова, Ю.А. Макарова // Science Time. — 2016. — № 12(36). — С. 325–331.
3. Песоцкая Е.Н. Интенциональность личности пациента в диагностике: комплаенс / Е.Н. Песоцкая, В.И. Инчина // Парадигмальный характер фундаментальных и прикладных научных исследований, их генезис: Сборник научных статей по итогам Национальной научно-практической конференции, Санкт-Петербург, 29–30 марта 2019 года. — Санкт-Петербург: Общество с ограниченной ответственностью «Редакционно-издательский центр «КУЛЬТ-ИНФОРМ-ПРЕСС», 2019. — С. 57–60.
4. Смирнова О.А. Анализ деятельности хирургической службы на стационарном и амбулаторно-поликлиническом этапах / О.А. Смирнова, М.И. Кечемайкина, Е.В. Семелева // Эффективный менеджмент здравоохранения: стратегии инноваций: II МЕЖДУНАРОДНАЯ НАУЧНО-ПРАКТИЧЕСКАЯ КОНФЕРЕНЦИЯ, Саратов, 23–24 сентября 2021 года. — Саратов: Саратовский государственный медицинский университет имени В.И. Разумовского, 2021. — С. 242–246.
5. Федотова, А.В. Комплаенс: эффективная коммуникация «врач — пациент» / А.В. Федотова // Эффективная фармакотерапия. — 2009. — № 18. — С. 16–17.
6. Christensen A, Christrup LL, Fabricius PE, Chrostowska M, Wronka M, Narkiewicz K, et al. The impact of an electronic monitoring and reminder device on patient compliance with antihypertensive therapy: a randomized controlled trial. *J. Hypertens*, 2010 Jan; 28(1):194–200.
7. El Malla H, Ylitalo Helm N, Wilderng U, El Sayed Elborai Y, Steineck G, Kreicbergs U. Adherence to medication: A nation-wide study from the Children's Cancer Hospital (Egypt). *World J. Psychiatry*, 2013; 3(2):25–33.
8. Jekle C. Das Ot-CMTM-System zur elektronischen ComplianceMessung. Qualit?tsuntersuchung der OtCMTM-Blister und eDispenser Validierung und Nutzevaluation im Vergleich mit MEMS®. Diss. Mainz, 2011. 152.
9. Sua'rez FJO, Plumed JS, Valenta'n MA, et al. Validation on the simplified medication adherence questionnaire (SMAQ) in renal transplant patients on tacrolimus. *Nefrologia*, 2011; 31(6):690–696

© Селезнева Наталья Михайловна, Семелева Елена Владимировна,
Горшков Артем Александрович, Каштанова Кристина Сергеевна (shtanina37@mail.ru).
Журнал «Современная наука: актуальные проблемы теории и практики»