

Antipsychotic Medication Adherence and Satisfaction Among Palestinian People with Schizophrenia

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Abstract: *Background:* In Arab and Muslim-dominated countries, spirituality and religiosity shape the belief and practices toward chronic illnesses. No previous studies were published to assess adherence to and satisfaction with antipsychotic medications in persons with schizophrenia in the Arab world.

Objective: To assess medication adherence and treatment satisfaction with antipsychotics in a sample of Palestinian people with schizophrenia.

Methodology: Medication adherence was assessed using the 8-item Morisky Medication Adherence Scale (MMAS-8). Treatment satisfaction was assessed using the Treatment Satisfaction Questionnaire for Medication (TSQM 1.4). Psychiatric symptoms were assessed using the expanded Brief Psychiatric Rating Scale (BPRS-E). Data were entered and statistically analyzed using SPSS 16 for windows.

Results: A convenience sample of 131 persons with schizophrenia was studied. Based on MMAS-8, 44 persons (33.6%) had a low rate, 58 (44.3%) had a medium rate and 29 (22.1%) had a high rate of adherence. Age was significantly correlated ($P=0.028$) with adherence score. However, variables like use of monotherapy or atypical or depot antipsychotics were not significantly associated with higher adherence. The means of satisfaction with regard to effectiveness, side effects, convenience and global satisfaction were 72.6 ± 20.5 , 67.9 ± 31.47 , 63.2 ± 14.3 and 63.1 ± 18.8 respectively. There was a significant difference in the means of effectiveness ($P<0.01$), convenience ($P<0.01$), global satisfaction ($P<0.01$), but not side effects domains ($P=0.1$) among persons with different levels of adherence. Furthermore, there was a significant difference in the means of positive symptom score ($P<0.01$), manic ($P<0.01$) and depression ($P<0.01$) but not negative symptom score ($P=0.4$) among persons with different levels of adherence.

Conclusions: Medication nonadherence was common and was associated with low treatment satisfaction scores and poor psychiatric scores. Medication related factors had insignificant effects on adherence scores.

Keywords: Medication adherence, palestine, schizophrenia, treatment satisfaction,.

INTRODUCTION

Schizophrenia is a chronic psychiatric disorder that impairs the quality of patients' lives [1-3]. Antipsychotic drug therapy has been reported to successfully minimize the frequency of acute schizophrenic episodes and hospitalization [4]. Adherence is a necessary element to achieve such success [4, 5]. Furthermore, adherence has been reported to lead to

considerable cost savings for the health system [6]. However, nonadherence to antipsychotic medications is common and is considered as an integral barrier to the successful treatment of schizophrenia [7-9]. Several factors can contribute to medication non adherence in patients with schizophrenia [10-13]. Such factors include race, culture and religion. For example, a review article about psychotropic medications found that rates of nonadherence were higher among Latinos than Euro-Americans and clinical and research interventions to improve adherence should be culturally appropriate and incorporate identified factors [14]. Another study examined how religious beliefs and practices can affect medication and illness representations in chronic

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