The impact of medication adherence on men's health

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Dr Snezana Kusljic PhD (Melb) BSci (Hons) Senior Lecturer - Department of Nursing The University of Melbourne Level 6, Alan Gilbert Building 161 Barry Street Carlton VIC 3053, Melbourne, Australia Tel: +613 8344 9428 Fax: +613 8344 5391 Home: +613 9308 8313 Email: skusljic@unimelb.edu.au Benign enlargement of the prostate gland is an age related phenomenon that occurs in all men, with about 50% of men experiencing irritating and obstructive lower urinary tract symptoms. With the increasing ageing population the prevalence of this condition is expected to rise further. Pharmacological therapies are considered first-line treatment for prostate enlargement. However, due to delayed clinical efficacy of currently available medications, poor medication adherence often occurs. Reasons for this lack of adherence are not well documented.

Recently, we identified factors that help explain this lack of medication adherence (Kusljic et al., 2013). Patients' age, language background, co-morbidities and medication-taking management style affected medication adherence. Patients younger than 65 years of age were more likely to have complaints regarding their medication compared with older patients. Older patients were more likely to receive assistance of caregivers in managing their medication-taking. Men from a linguistically diverse background were less likely to report having issues with their medications compared to those from an English-speaking background. In addition, men receiving help from their caregivers for medication-taking were considerably less likely to have complaints regarding their medications as opposed to those not requiring assistance from caregivers. These findings highlight the importance of supporting men to improve medication adherence and reduce the risk of developing serious and painful complications further down the track.

Nurses are well placed to help men with prostate enlargement to improve medication adherence. Following a comprehensive health assessment to establish the degree of symptoms resulting from an enlarged prostate, nurses can carefully explore men's understanding and attitudes to treatment of the condition. There are many reasons why people do not take their medications. People take their medications if they believe there is a need, the medications are safe and effective, they have a ready supply, routine, and remember to take them and receive feedback that supports continual adherence (Johnson, 2002). Unfortunately, prescribers do not have sufficient time to address these barriers to adherence in consultations. By developing a therapeutic relationship with patients, nurses can promote medication adherence by ensuring patients are offered explanations that target their risk factors for non-adherence, engaging an interpreter where necessary. Perceived effectiveness of medications is a strong predictor of adherence, where nurses can reinforce the necessity to persist with the medication to obtain desired effects and relief of uncomfortable urinary symptoms. Reminders such as mobile phone alarms and dose administration aids can also be of assistance.

References

Johnson, M. 2002. The medication adherence model: a guide for assessing medication taking. *Research and Theory for Nursing Practice: An International Journal.* 16(3):179-192. Kusljic, S., Manias, E., Tran, B & Williams, A. 2013. Enablers and barriers affecting medication-taking behaviour in aging men with benign prostatic hyperplasia. *Aging Male.* (in press)

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