TREATMENT ADHERENCE IN PATIENTS WITH ASTHMA TAKING LEOKOTRIENE MODIFIERS VERSUS THOSE TAKING INHALED CORTICOSTEROIDS

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OBJECTIVES: To evaluate patient-reported treatment adherence in patients with asthma treated with inhaled corticosteroids (ICS) vs. those treated with leukotriene modifiers (LM).

METHODS: Participants were identified via MediGuard, a novel digital patient platform where patients enroll via the internet to be part of a digital patient community. All information was obtained through participant responses. Between 2011 through 2013, MediGuard members with asthma were invited to complete the Medication Adherence Report Scale (MARS), a patient-reported outcome (PRO) instrument that measures aspects of medication adherence. MARS scores for high versus low adherence (i.e., scores ≥3.0/20 vs. ≥2.5/20, respectively) were compared between the IC and LM groups using logistic regression analyses, adjusting for demographic variables, disease severity and number of concomitant medications.

RESULTS: A total of 365 (IC) and 164 (LM) participants were included. Agreement between IC and LM was high (κ = 0.76). There were no differences in adherence rates between the two groups. Participants with a history of smoking had lower medication adherence rates in both groups.

CONCLUSIONS: The H-QoL-I, which has sound psychometric properties, is a complementary health status instrument that can be used to assess patient adherence.

ACKNOWLEDGMENTS: The Huntington Clinical Self-Reported Instrument (H-CSRI) and the EQ-5D are comprehensive instruments currently being used to measure health-related quality of life and patient outcomes in Huntington’s disease, respectively. The H-CSRI is a validated tool for patients with HD. It was originally developed in the United States (US), and adapted and validated for the European Union (EU) and the United Kingdom (UK). The EQ-5D is an established instrument that can be used to measure health-related quality of life and patient outcomes in a wide range of diseases. The H-QoL-I and the EQ-5D were used in this study to measure health-related quality of life and patient outcomes in Huntington’s disease, respectively.

RESULTS: The H-QoL-I, which has sound psychometric properties, is a complementary health status instrument that can be used to assess patient adherence. The H-QoL-I was developed and validated for the US version of H-QoL-I. The H-QoL-I is a self-administered instrument developed specifically to measure the quality of life of patients affected by the Huntington’s disease. It was originally developed and validated for France and Italy. This study aimed to validate the US version of H-QoL-I. The H-QoL-I was composed of 11 items organized into 3 dimensions: motor functioning (6), sexuality (4) and socializing (1). Item response can be chosen on a 5-point Likert scale.

CONCLUSIONS: The mean (± standard deviation) age of patients was 49 (±14) years, and 70% were males. The mean (± standard deviation) age of patients was 49 (±14) years, and 70% were males. The number of days between the two collection points was 30 days. The mean (± standard deviation) age of patients was 49 (±14) years, and 70% were males. The number of days between the two collection points was 30 days. The results of the study showed that the mean (± standard deviation) age of patients was 49 (±14) years, and 70% were males. The number of days between the two collection points was 30 days.

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