

JOURNAL OF CLINICAL AND DIAGNOSTIC RESEARCH

How to cite this article:

SHANKAR P R, SUBISH P. BOOK REVIEW: ADHERENCE TO LONG-TERM THERAPIES EVIDENCE FOR ACTION. Journal of Clinical and Diagnostic Research [serial online] 2007 October [cited: 2007 Oct 1]; 5:452-453.

Available from

[http://www.jcdr.net/back_issues.asp?issn=0973-](http://www.jcdr.net/back_issues.asp?issn=0973-709x&year=2007&month=October&volume=1&issue=5&page=452-453&id=112)

[709x&year=2007&month=October&volume=1&issue=5&page=452-453&id=112](http://www.jcdr.net/back_issues.asp?issn=0973-709x&year=2007&month=October&volume=1&issue=5&page=452-453&id=112)

BOOK REVIEW

Adherence to Long-Term Therapies Evidence for Action

Eduardo Sabate (editor). Geneva: World Health Organization, 2003. Number of pages: 198. Reference no.: ISBN 92 4 154599 2. Price: US \$27; in developing countries US \$13.5. Free electronic copies available from adherence@who.int.

SHANKAR P R, SUBISH P

Chronic diseases like asthma, diabetes, epilepsy, hypertension, etc. are becoming common in developing countries. HIV/AIDS is spreading rapidly and is forming a diabolical partnership with tuberculosis. These diseases require lifestyle changes and prolonged treatment, and patient adherence (compliance) to treatment may become a problem.

This book is written by a group of writers. They are academicians, clinicians, WHO personnel, and research scientists. The book is edited by Eduardo Sabate, WHO Medical Officer in charge of coordinating WHO Adherence to Long-term Therapies Project, Management of Non-Communicable Diseases Department. This report provides a critical review of what is known about compliance. The report promotes discussion of issues related to compliance. It articulates ethical and evidence-based policy. It also helps to manage information related to compliance. Most chronic diseases have common issues to be addressed and common approaches to improve patient adherence. Factors at both the individual (health professional and patient) and the health system levels are important. The issues are linked to the way health systems are structured, financed, and operated. The book meets its stated objectives to a large extent. It gives an excellent overview of the concept of 'adherence' in general and with reference to important diseases. The term 'compliance' is today considered to have

authoritarian overtones, and the terms 'adherence' and 'concordance' are used as alternatives.

The first section sets the scene. Defining adherence is the focus of the first chapter. Adherence to long-term therapy has been defined as 'the extent to which a patient's behaviour – taking medication, following a diet and/or executing lifestyle changes corresponds with agreed recommendations from a healthcare provider'.

Chapter II states that:

'A number of rigorous reviews have found that in developed countries, adherence among patients suffering chronic diseases averages only 50%. The magnitude and impact of poor adherence in developing countries is assumed to be even higher given the paucity of health resources and inequities in access to health care.'

Problems of access to health-care resources make compliance a bigger problem in developing countries. This shows that poor adherence is a major problem.

The various subsections that will be covered in a particular chapter are listed right at the beginning. This is a very good feature. The third chapter deals with the effect of poor adherence on policy makers and health managers. Three chronic diseases, diabetes, hypertension, and asthma, are selected as examples.

The second section concentrates on 'Improving adherence rates: guidance for countries'. Various lessons learned are enumerated as discussed. The fifth chapter talks about

Department of Pharmacology, Manipal College of Medical Sciences, Pokhara, Nepal

Correspondence to: Dr. P. Ravi Shankar, Manipal College of Medical Sciences, P. O. Box 155, Deep Heights, Pokhara, Nepal.

E-mail: ravi.dr.shankar@gmail.com

'Towards the solution'. The diagram showing the five dimensions of adherence encapsulates various issues in a nutshell. Health system factors and condition-related factors are two dimensions; others are patient-related, therapy-related, and the social and economic factors. Improved adherence translates into health and economic benefits. This has been demonstrated for hypertension, diabetes, and asthma in chapter VI.

The third section deals with disease-specific reviews. Asthma, cancer (palliative care), depression, diabetes, epilepsy, HIV, hypertension, tobacco smoking, and tuberculosis are the diseases covered. DOTS strategy has been highlighted as a means to improve adherence to TB treatment. The complexity of the antiretroviral regimens can make adherence difficult.

The annexes are interesting and informative. Annex I deals with behavioural mechanisms explaining adherence. These are important for every health professional. The five general theoretical perspectives on adherence are very interesting. Annex I concludes that:

'Adherence is a behavioural problem observed in patients, but with causes beyond the patient. It occurs in the context of treatment-related demands that the patient must attempt to cope with. These demands are characterized by the requirement to learn new behaviours, alter daily

routines, tolerate discomforts and inconveniences, and persist in doing so while trying to function effectively in their various life-roles.'

This statement identifies many of the key reasons why patients find it difficult to comply with treatment. Adherence to therapy for chronic diseases requires a strong commitment on the part of the patients.

Annex II covers statements by stakeholders like general practitioners, industry, nurses, pharmacists, and psychologists. Annexes III and IV are tables. The Global Adherence Interdisciplinary Network (GAIN) is covered in Annex V.

We also liked the 'Take-home messages'. A few of them are 'Adherence is an important modifier of health system effectiveness', 'Patients need to be supported, not blamed', 'Patient-tailored interventions are required', and 'Health professionals need to be trained in adherence'. The main target audiences are policy makers, health managers, clinicians in their daily practice, and scientists.

The book has been excellently and aesthetically produced, blue being the dominant colour. Accessing information is easy, but a comprehensive index would have made it easier. The book should be an essential read for all health professionals and will be very helpful for those dealing with chronic diseases.

About the Reviewers

Dr. Shankar and Mr. Subish are keenly interested in the problem of patient adherence. They are members of the Drug Information Centre at the Manipal Teaching Hospital, Pokhara. The department of hospital Pharmacy runs a Medication Counseling Center in the hospital as a step towards improving patient adherence to treatment.