
**EXPLORING OPPORTUNITIES FOR IMPROVING ADHERENCE TO TREATMENT IN ADOLESCENTS
WITH BRONCHIAL ASTHMA**

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Abstract

The article represents an analysis of the published data and our personal experience in studying possibilities for improving adherence to treatment in patients with bronchial asthma. Emphasis is placed on the especially vulnerable to low adherence category of patients – adolescents. Adolescents often experience emotional lability, express negative attitudes to long-term treatment, and are unwilling to look ill in front of their peers. These factors do not only contribute to the low level of patient-physician cooperation but also worsen their contact with parents. At the same time, there is evidential data that specifically adolescents are the highest risk group of death during an attack of bronchial asthma. The described situation has identified the relevance and purpose of the study – to increase the effectiveness of treatment of adolescents with bronchial asthma with the help of the implementation of a complex program that is aiming to improve the patients' adherence to treatment.

Our study included 86 adolescents, who were observed during 6 months. The research allowed to systematize the main reasons of poor adherence to treatment in patients with bronchial asthma, and they were distinguished as the following: difficulties in using the inhalers, inconvenient medication regimen (3-4 times a day), side effects of medication, fear of the possibly occurring side effects, cost of the medication, lack of patient awareness about their condition, upbringing in a single-parent family, low compliance with the treating physician, the underestimation of the severity of the disease, the indifference to one's health conditions (teenage negativism), and the lack of quality monitoring of the patient's condition throughout the course of the disease.

Considering the explored data, we have presented a special program aimed at improving adherence to treatment, which included: a detailed notification of the patient about one's illness (through individual interviews), clear and concise instructions about the basic treatment and the algorithm of actions during an asthma attack, provided in a written form, a clear system of monitoring the progress of the disease with control assessment and calculation of the risks of relapses.

The implementation of this complex program allowed to achieve improved indicators of adherence to treatment, to increase the control of bronchial asthma, achieve better results of spirometry and reduce the pharmacological load within the 6 months period.

Key words: bronchial asthma, adolescents, adherence, treatment.

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