

# Disparity between health care professionals and low socioeconomic patients with respect to factors associated to medication non-adherence in Karachi

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## Abstract

Medication non-adherence has great implications on health outcomes and economics in terms of individual patients and national basis. In Developing countries, like Pakistan, physicians are solely responsible for the patients' health outcomes. Assessment of non-adherence and its interventions is also considered the physician's responsibility. It is imperative to understand current perception of health professionals, however, in order to develop medication adherence programs. As a pilot study, we attempted to compare health care professionals' perceptions of medication non-adherence to the patients' data. 22 health professionals were interviewed and compared with the result of 32 patients were included were interviewed to conduct a cross-sectional descriptive survey remote area of Karachi, Sikandarabad. For both primary non-adherence and non-persistence, health professionals considered cost (78%) and patient considered 'feeling better' as most common factor. The health professionals also considered that most low socioeconomic patients used an alternative therapy along with allopathic medication, whereas patients reported that they preferred allopathic treatment alone. Health professionals suggested that a low socioeconomic patient would least prefer information relating to medicines and their side effects, while information regarding the disease and cost of medicine, would be preferred the most. When patients were asked which information they would prefer, they considered all information mandatory; including information about the disease, drug, its side effects, and cost. With respect to non-adherence interventions, the health professionals considered that low socioeconomic patients would prefer to receive drug information from medical store personnel verbally for at least 20 minutes. When patients were asked the same question, most of them responded that they would prefer to receive drug information from physicians in both written and verbally for at least 20 minutes.

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## Biography

Muhammad Amir studied pharmacy at Baqai Medical University, Karachi, graduating in 2004. He started his career as hospital trainee pharmacist in Orthopedics & Medical Institute (Pvt.) Ltd (OMI). His tenure in OMI fueled University of Sunderland to pursue a Masters in Medicine

Management. Medicine Management is synonym to his passion for Clinical Pharmacy, which led him to pharmacotherapy, a specialty in clinical pharmacy. He also has an MBA degree in Pharmaceutical Business Management from Bahria University Karachi. Later, he had worked as Assistant Professor & Clinical Pharmacist in different universities of Pakistan. Presently, he is working as Clinical Pharmacist at Al-Sharq Hospital, Fujairah and working on his Ph.D.