



## REVISTA IBEROAMERICANA DE PSICOLOGÍA Y SALUD

Revista Oficial de la Federación Iberoamericana de Asociaciones de Psicología (FIAP)  
[Official Journal of the Latin-American Federation of Psychological Associations]

[www.elsevier.es/rips](http://www.elsevier.es/rips)



# Adherence to treatment after coronary bypass surgery: Psychological aspects



Maria V. Iakovleva

Department of Medical Psychology and Psychophysiology, Saint Petersburg State University, Saint Petersburg, Russian Federation

Received 9 September 2015; accepted 19 October 2015

Available online 5 December 2015

### KEYWORDS

Clinical psychology;  
Coronary bypass  
grafting;  
Adherence  
to treatment;  
Attitude  
toward illness;  
Way of coping

**Abstract** Poor adherence to treatment is a problem of great importance and striking magnitude. Its consequences are increased health care costs and poor health outcomes. It defined the objective of this research, which is the study of psychological characteristics of patients with different degrees of adherence to rehabilitation treatment after coronary bypass surgery. Ninety male and female patients with CHD, aged 46–71, were examined. The study was carried out using the questionnaire of ways of coping and the technique for diagnosing the types of attitude toward the disease, and the study of medical history. The analysis of the types of attitude toward the disease revealed that adherent patients show higher values on the harmonious type; patients with poor adherence show higher values on the apathetic, as well as the melancholic type of attitude toward illness. This study shows that wide range of psychological characteristics is significant for the definition of adherence to treatment. It is essential to consider the patient's personality and his characteristics, such as attitude toward the disease, because they influence the adherence and, therefore, the effectiveness of therapy in the postoperative period.

© 2015 Sociedad Universitaria de Investigación en Psicología y Salud. Published by Elsevier España, S.L.U. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

### PALABRAS CLAVE

Psicología clínica;  
Cirugía de derivación  
coronaria;  
Adherencia a la  
terapia;

### Adherencia a la terapia después de la cirugía de derivación coronaria: aspectos psicológicos

**Resumen** La escasa adherencia a la terapia es un problema de gran importancia ampliamente extendido. Sus consecuencias son el aumento de costes del tratamiento y su baja eficacia. El objetivo de la investigación fue el estudio de las características psicológicas de pacientes con diferentes grados de adherencia al tratamiento de rehabilitación después de la cirugía de derivación coronaria. Se recogieron datos clínicos de 90 pacientes de ambos sexos con cardiopatía coronaria, sometidos a cirugía de derivación coronaria, con edades comprendidas entre

E-mail address: [mariaiakovleva@mail.ru](mailto:mariaiakovleva@mail.ru)

<http://dx.doi.org/10.1016/j.rips.2015.10.003>

2171-2069/© 2015 Sociedad Universitaria de Investigación en Psicología y Salud. Published by Elsevier España, S.L.U. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

Actitud hacia la enfermedad;  
Estilo de afrontamiento

46-71 años. Los cuestionarios administrados fueron el cuestionario de estilos de afrontamiento y la técnica de diagnóstico de tipos de actitud hacia la enfermedad. Además se realizó un estudio del historial médico. Se reveló que los pacientes adherentes mostraban puntuaciones más altas en el tipo "armonioso" de actitud hacia la enfermedad, y los pacientes con escasa adherencia, en los tipos "apático" y "melancólico". El estudio confirma que las características psicológicas son significativas para la definición de la adherencia. Es imprescindible tener en cuenta tanto la personalidad del paciente y sus características como su actitud hacia la enfermedad, ya que ésta influye en la adherencia y, por lo tanto, la eficacia de la terapia en el periodo postoperatorio. © 2015 Sociedad Universitaria de Investigación en Psicología y Salud. Publicado por Elsevier España, S.L.U. Este es un artículo Open Access bajo la licencia CC BY-NC-ND (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

Nowadays the problem of adherence to long-term treatment in patients with chronic diseases is actual and significant (World Health Organization, 2014). This issue is relevant to a wide variety of diseases such as diabetes, depression, cancer, asthma, etc. According to the statistics of the World Health Organization, about half of patients with chronic diseases do not comply with medical prescriptions (World Health Organization, 2003).

The present-day medicine is at a high level of development. The process of treatment now is characterized by numerous restrictions for patients, by many limitations of their habits. Currently, the widespread use of drugs leads to the transition of the responsibility for the results of treatment from the health care professional to the patient.

Among the various branches of medicine, the problem of adherence to treatment in cardiology is particularly important, for the cause of existence of a vital threat among patients due to their disease. According to the World Health Organization statistics, cardiovascular diseases are the leading cause (48%) of death from non-communicable diseases among people aged 30–70 years (World Health Organization, 2013). In cardiovascular mortality the first position is occupied by the coronary heart disease, the rates of which in the Russian Federation reached 53.1% of all causes of death from cardiovascular diseases (Federal'naya sluzhba gosudarstvennoy statistiki, 2013; Surinov, 2011).

Today, in cardiology the surgical methods of treatment based on myocardial revascularization are recognized as the most promising in terms of improving the quality of life and prognosis of patients with severe coronary heart disease (Bockeria, Gudkova, & Stupakov, 2010), which is currently treated very effectively by surgical methods. In the last ten years the number of bypass operations, especially coronary artery bypass grafting, or CABG surgery has increased 5.2 times, and they allow to achieve very good health indicators in patients (Botnar, 2009). However, the recovery process after the surgery often does not lead to the expected results. Patients do not return to work, health indicators do not improve and relapses of the disease that cause rehospitalizations occur. Despite the efficacy of surgical treatment and objective health improvement, markers of the physical health and quality of life in some patients worsen because of their lack of adherence to the rehabilitation process. Therefore, adherence to treatment is an important determining factor of overall health outcomes also after surgery.

Therefore, it is necessary to pay attention to the postoperative recovery period and also to the patients' willingness to accept treatment, their level of awareness of the disease severity and, consequently, the degree of adherence to therapy.

The literature on the subject finds the lack of adherence to treatment among patients with coronary heart disease after coronary bypass surgery. There are several reasons for it, the patients' firm belief that they are completely healthy after surgery is one of them. In fact, the surgery allows to restore fully the blood flow in the myocardium, therefore the result of the surgery is a radical cure of coronary heart disease (Shal'nova & Deev, 2011). However, patients should take the prescribed medication lifelong in order to avoid relapses of the disease. Their wellbeing after surgery, the complete restoration of body functions and the underestimation of the importance of maintenance therapy cause a very poor adherence among patients undergoing this type of surgery.

The term *adherence to therapy (treatment)* first of all requires determination. The World Health Organization presents its definition in the report "Adherence to longterm therapies, evidence for action" (World Health Organization, 2003). Adherence to long-term therapy is considered as the extent to which a person's behavior –taking medication, following a diet, and/or performing the life-style changes, corresponds with agreed recommendations from a health care professional. It should be emphasized that, however the drug treatment (adherence to it is usually evaluated excluding other factors) is important, it is essential to consider adherence also to the prescribed diet, the rejection of harmful habits (such as smoking or alcohol consumption), increase of physical activity, and so on. In the case of lack of attention to any of them, the treatment effect may be impaired, often the patient is rehospitalized and the cost of treatment increases.

We should also pay attention to the differences between the concepts *adherence* and *compliance*, which have also been defined in the report of the World Health Organization (World Health Organization, 2003). The main difference is that adherence to therapy requires the patient's consent to the recommendations. Patients should be active partners with medical care professionals on the issue of their own health care, and good communication between the patient

Download English Version:

<https://daneshyari.com/en/article/895210>

Download Persian Version:

<https://daneshyari.com/article/895210>

[Daneshyari.com](https://daneshyari.com)