



**Service Priorities and Programmes**  
**Electronic Presentations**

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**A New Model in Patient Medication Adherence - the Relationship between Adherence and Beliefs about Medicine**

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MMAS-8

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**Introduction**

Medication adherence is important in the efficacy of a medication therapy. Beliefs about medicines may influence the medication adherence of the patient.

**Objectives**

- 1) To investigate the relationship between medication adherence and beliefs about medicines
- 2) To investigate any associations between medication adherence and the demographic factors of patients respectively.

**Methodology**

Patients who had attended the Specialized Out-Patient Clinic in Ruttonjee Hospital were invited to fill in two questionnaires, the 8-item Morisky Medication Adherence Scale (MMAS-8) and the Beliefs about Medicines Questionnaire (BMQ), to assess their medication adherence and beliefs about medications in the waiting area of Pharmacy Department.

**Result**

274 participants were successfully recruited. 187 patients (68%) had a good adherent rate while 87 patients (32%) reported poor adherent rate. There were statistical differences among all sections in BMQ between the good and poor medication adherence group (P-value <0.001). Pearson's bivariate correlation showed a positive correlation between medication adherence and specific necessity (e.g. assesses patients' views of the necessity and importance about their current medications) and general benefits (e.g. assess the beliefs about medication that can bring positive influence to their disease state) ( $r = 0.271$ ,  $r = 0.257$  respectively, p-value <0.001) and negative correlations between medication adherence and specific concerns (e.g.

evaluate patients' beliefs about the negative influence by their own medications), general overuse (e.g. assess the beliefs about the medication prescribed by doctors), general harm (e.g. assesses the extent of the perception that the medicine can bring harm to patients) and sensitive soma ( $r = -0.407$ ,  $r = -0.303$ ,  $r = -0.230$ ,  $r = -0.328$  respectively,  $p$ -value  $<0.001$ ). There were correlations between medications adherence and demographic data of participants such as age, occupation status, number of medications, self-perceived health status, self-perceived health status compared a year ago, self-perceived eyesight and hearing ( $r = 0.127$ ,  $r = 0.176$ ,  $r = 0.130$ ,  $r = 0.151$ ,  $r = 0.188$ ,  $r = 0.188$  respectively,  $p$ -value  $<0.05$ ).