

Attitudes of patients with schizophrenia spectrum or bipolar disorders towards medication self-management during hospitalisation

Background

Medication self-management (MSM) is defined as a person's ability to cope with medication treatment for a chronic condition, along with the associated physical and psychosocial effects that the medication causes in their daily lives. For many patients, it is important to be able to self-manage their medication successfully, as they will often be expected to do after discharge.

Aim(s)

The aim of this study was to describe the willingness and attitudes of patients with schizophrenia spectrum or bipolar disorders regarding MSM during hospital admission. A secondary aim was to identify various factors associated with patient willingness to participate in MSM and to describe their assumptions concerning needs and necessary conditions, as well as their attitudes towards their medication.

Methods

A multicentre, quantitative cross-sectional observational design was used to study the willingness and attitudes of psychiatric patients regarding MSM during hospitalisation.

Results

In this study, 84 patients, of which 43 were patients with schizophrenia spectrum disorders and 41 were patients with bipolar disorders, participated. A majority of the patients (81%) were willing to participate in MSM during their hospitalisation. Analysis revealed negative correlations between willingness and age (Pearson's r , $r=-0.417$, $p<0.001$) and between patients' willingness and number of medicines (Pearson's r , $r=-0.373$, $p=0.003$). Patients' willingness was positively associated with the extent of support by significant others during and after hospitalisation (Pearson's $r=0.298$, $p=0.011$). Patients were convinced that they would take their medication more correctly if MSM were to be allowed during hospitalisation (65%).

Discussion

Most of the patients were willing to self-manage their medication during hospitalisation, however, under specific conditions such as being motivated to take their medication correctly and to understand the benefits of their medication. Patients needed to be motivated to take their medication correctly and to understand the benefits of their medication.

Implications and future perspectives

Future research should focus on the development of a feasible MSM procedure that begins with the assessment of a patient's willingness to participate in shared decision-making. Processes of shared decision-making emphasise patients as people, taking into consideration their preferences, needs, beliefs and concerns about treatment, while incorporating their experiential knowledge. Ongoing medication counselling and regular consultations help build confidence and understanding that could help patients adhere to their treatment plans.

References

1. Haddad, P., Brain, C., & Scott, J. (2014). Nonadherence with antipsychotic medication in schizophrenia: challenges and management strategies. *Patient Relat Outcome Meas.*, 5, 43–62.
2. Loots, E., Goossens, E., Vanwesemael, T., Morrens, M., Van Rompaey, B., & Dilles, T. (2021). Interventions to Improve Medication Adherence in Patients with Schizophrenia or Bipolar Disorders: A Systematic Review and Meta-Analysis. *Int. J. Environ. Res. Public Health* 2021, 18, 10213. <https://doi.org/10.3390/ijerph181910213>.
3. Medina, E., Salvà, J., Ampudia, R., Maurino, J., & Larumbe, J. (2012). Short-term clinical stability and lack of insight are associated with a negative attitude towards antipsychotic treatment at discharge in patients with schizophrenia and bipolar disorder. *Patient Prefer Adherence.*, 6, 623–629.

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