

Study of Compliance of Patients on Oral Hypoglycemic Agents

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Introduction

Non-compliance with oral hypoglycemic agents (OHA) is a central issue in patients of type II DM, as it decreases the efficacy of treatment and leads to development of long-term complications. The prescribed drugs are usually to be taken 20-30 minutes prior to a meal, which is ordinarily missed by patients resulting in the declining health of diabetic patients due to development of complications. As such, little data is available on compliance specifically to OHA in type II DM, but previous studies have reported it to be poor to satisfactory.

Methods

Type of study- Prospective observational study
Duration- 2 months
Place- AVBRH, Sawangi (Meghe), Wardha
A total of 45 patients of type II DM from department of Medicine, that were on oral hypoglycemic agents (OHA) were included in the study. Patients receiving insulin were excluded. The selected patients were interrogated for symptoms of DM, nature of drug therapy, compliance of drugs & were examined to find any complication of DM. Patients were studied on Urine Examination, Blood Sugar, Kidney Function Tests (KFT) & Fasting Lipid Profile (FLP). These

patients were then followed up for 1 month to check for their compliance.

Results

The majority of patients were of age- group 51-60 years with male : female ratio of 2.24 : 1. Nature of OHA used were, Metformin being the most commonly used (55.56%) compared to other agents like Glimepiride, Glipizide, Glibenclamide & Voglibose. 93.33% cases had uncontrolled diabetes at the time of admission with associated complications of diabetes- Hypertension 40%, Cataract & Retinopathy 31.11%, Hyperlipidemia 31.11%, IHD 15.56%, Neuropathy 13.33%, Nephropathy 11.11%, Diabetic foot 11.11%, Stroke 11.11% & diabetic ketoacidosis 4.4%. On follow-up after 15 days & 1 month, 55.56% cases were found compliant while 44.44% were non-compliant. Reasons for non-compliance as enquired on contact were reported as, being forgetful by maximum patients, negligence, financial problems, self-management & restricted understanding of disease & importance of adherence to treatment.

Discussion

The present study stresses on the significance of regular follow-up of cases who are on treatment. The reasons for non-compliance can be detected at the earliest and remedial measures can be taken to minimize it. It is recommended to undertake regular follow up of cases of DM on drugs every month to avoid or delay the complications.