EPIDEMIOLOGICAL EVALUATION AND DEGREE OF ADHERENCE TO THE TREATMENT OF PATIENTS ATTENDED AT CEDMAC IN SÃO JOSÉ DO RIO PRETO

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BACKGROUND

The treatment of autoimmune rheumatic diseases has evolved significantly since the emergence of immunobiological therapies. In order to achieve greater therapeutic efficacy, it is of extreme importance that the patient adheres to the prescribed treatment. The infusion center (CEDMAC) of the Hospital de Base of São José do Rio Preto attends patients from public and private health care, with different diseases. We evaluated the demographic profile of the patients, most frequent pathologies, most used and immunobiological drugs and the degree of adherence to treatment.

METHODS

The study was conducted at CEDMAC with 311 patients who were present for infusion of immunobiological therapy. The selection of patients was made considering the inclusion criteria of having a rheumatologic pathology and using immunobiological therapy. The interviews were carried out only once, using a structured and standardized questionnaire, containing epidemiological data and the Morisky test. From the data obtained, patients were classified as high, medium and low adherence.

RESULTS

The demographic analysis identified a predominance of women, with an average age of 53.4 years, with elementary education, average income of 1 to 3 minimum wage, retired and not working and who were followed up in the rheumatology service of Hospital de Base. The most common pathologies are rheumatoid arthritis (60.1%), ankylosing spondylitis (14.4%), psoriatic arthritis (12.2%) and systemic lupus erythematosus (3.8%) and the most used immunobiologicals were tocilizumab (20.2%), adalimumab (18.6%) and golimumab (15.4%). Of the 311 patients, 67.7% showed high adherence, 24.2% medium adherence and 8.1% low adherence. The main variable influencing adherence was being a private health care patient ($p < 0.05$). Other variables included age ($p = 0.23$), education ($p = 0.052$) and income ($p = 0.06$), but they did not show statistical significance.

CONCLUSION

In patients with rheumatologic diseases who are followed up in a specialized immunobiological service, high adherence to treatment is frequent. Low adherence behavior does not depend on individual characteristics, diagnosis or medication used, and may be related to educational level or income. This shows the need for educational measures by health professionals, aiming to increase treatment adherence.

KEYWORDS

Immunobiological therapy, Epidemiology, Public health, Infusion center.