

## A new Lebanese medication adherence scale: validation in Lebanese hypertensive adults

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### Abstract

**Background:** Hypertension control reduces cardiovascular risk. Yet, lack of adherence to medication reduces this control. Therefore, tools to measure medication adherence are needed. A new Lebanese scale measuring medication adherence considered socioeconomic and cultural factors not taken into account by the eight-item Morisky Medication Adherence Scale (MMAS-8). **Objectives:** The objectives of this study were to validate the new adherence scale and its prediction of hypertension control, compared to MMAS-8, and to assess adherence rates and factors. **Methodology:** A cross-sectional study, including 405 patients, was performed in outpatient cardiology clinics of three hospitals in Beirut. Blood pressure was measured, a questionnaire filled, and sodium intake estimated by a urine test. Logistic regression defined predictors of hypertension control and adherence. **Results:** The result showed that 54.9% had controlled hypertension. 82.4% were adherent by the new scale which showed good internal consistency, adequate questions (KMO coefficient=0.743), and four factors. It predicted hypertension control (OR=1.217; p value=0.003), unlike MMAS-8, but the scores were correlated (ICC average measure=0.651; p value<0.001). Stress and smoking predicted non-adherence. **Conclusion:** This study elaborated a validated, practical, and useful tool measuring adherence to medications in hypertensive patients.

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### Biography

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