Abstract

iMedPub Journals
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Journal of Renal Medicine

2022
Vol 6. No. 5

Strategies for Taking Medicines in Adult Patients with Renal Transplantation

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Abstract

Adherence to the immunosuppressant medications is important for the proper function a renal graft, but there are factors that make this difficult. This study describes strategies and barriers to adequate intake of these medicines based upon 177 surveys in renal transplant patients. Medication adherence was reported to be high (84%), but there were barriers to taking medications (64.95%): the most common were that the pharmacy did not work medicines (28.81%), changes in medication or dose (24.29%), failure to remember (9.6%), and lack of time (6.78%). The most common strategies for taking medications were: the use of cell phone alarms (15.25%) or alarm clocks (9.04%), schedules (5.65%), drug-related meals (5.08%), drug use book (2.26%), and visibility on the table (2.26%). Proper understanding of the barriers to medication adherence and strategies used by recipients may help physicians more adequately educate patients, thereby reducing the risk of rejection related to nonadherence and suggest, specific interventions for improvement.

Received: May 15, 2022; **Accepted:** May 20, 2022; **Published:** May 25, 2022

Biography

Jamil Azzi is an associate physician at the renal transplant division at the Brigham and Women's Hospital, director of the kidney transplant fellowship and an associate professor of medicine at Harvard Medical School. His research focuses on understanding the immune-regulatory arm of the immune system in transplantation, autoimmunity and cancer with the goal of developing more targeted and safer therapeutic strategies. A major focus currently is regulatory T cells and their activation induced cell death in addition to engineering cell therapies. Dr. Azzi's laboratory is also exploring multiple genomics and proteomics approaches to develop biomarkers that noninvasively detect rejection in kidney transplant recipients and measure the immune function of immunosuppressed patients..