

# ACHIEVING BETTER BP CONTROL WITH BETTER ADHERENCE

*Eka Harmeiwaty*

*National Cardiovascular Center, Harapan Kita Hospital, Jakarta*

Although effective control of BP reduces the risk of cardiovascular even in patients with hypertension BP control rate (< 140/(90 mmHg) among treated patients in actual clinical practice are less optimal . According most recent result from the National Health and Nutrition Examination Survey (NHANES) 2005-2006 th estimate BP control rate among all hypertension patients is 44 % and among treated patients is 64 %.Typically about 50 % of patients discontinued antihypertension therapy after 1 year and one study assumed the median time to overall discontinuation of antihypertension drug was 3,07 years.

Non-adherence is thought to be a factor in lack of control of blood pressure and may lead to unnecessary adjustments of drug regimens and increased health care costs.Studies suggest that a treatment's efficacy is attenuated by patient non-adherence with medication and lifestyle advice.

Recognizing patient nonadherence to medical therapy as a factor leading to poor blood pressure control and adverse outcomes remains a key challenge for clinicians caring for patients with hypertension. Factors contributing to lack of adherence and persistence with antihypertension therapy have been grouped into 5 categories, ie patient related, condition related, therapy related, health system related and socioeconomic factor. Most patients need 2 or more antihypertension drug to achieving BP control and may have 1 or more comorbidities such as type 2 DM that necessitate the use of additional medication. Simplifying regimen can be accomplished by using combination therapy. Drug cost also provider another barrier to adherence to medical therapy.

To achieve better BP control need the strategy to improve the adherence and persistence to treatment ie a)prescribed drug(s) like placebo tolerability, b)use long acting drugs, c)simplifying dose regimen that can taken once daily, d) prescribe low dose combination drugs,and e)improving patient monitoring , increase acces to support and enchance patient educational