

P03-275

THE EMEA ADHES SURVEY IN SCHIZOPHRENIA: PSYCHIATRISTS' PERCEPTIONS OF REASONS FOR PARTIAL OR NON-ADHERENCE

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Introduction: Partial or non-adherence to medication is high amongst patients with schizophrenia. Many and often overlapping factors are considered to impact on treatment adherence, including: patient-related (lack of insight, psychotic, negative or cognitive symptoms), treatment-related (adverse effects, insufficient efficacy), environmental (living situation, negative attitudes of relatives/friends), and physician-related (patient-healthcare professionals relationship) factors.

Objectives: The objective of the ADHES EMEA (Europe, Middle East and Africa) survey was to collect psychiatrist's perceptions of the assessment, reasons and management of partial and non-adherence to medication.

Aims: To present psychiatrist's opinion through EMEA of potential reasons for partial or non-adherence

Methods: The ADHES survey comprised 20 questions and was conducted in 36 countries across EMEA (over 4500 psychiatrists treating patients with schizophrenia).

Results: Across EMEA 37% of psychiatrists viewed lack of insight as the most important reason for their patients stopping medication. 23% of psychiatrists viewed patient's feeling better and thinking it unnecessary to take medication as the most important reason for their patients stopping medication. 7% or less of psychiatrists viewed undesirable side effects, insufficient efficacy, cognitive impairment or drug/alcohol abuse as the most important reasons for their patients stopping medication.

Discussion: In this survey, psychiatrists estimated that patient's lack of insight and subjective improvement could constitute the main factors explaining poor adherence. Other factors (i.e., side effects, substance abuse) were regarded as less important. Strategies aimed at raising awareness of maintaining treatment, are warranted within EMEA, with the aim of improving clinical outcomes.