PIII-37: Nursing Interventions for Improving HIV Medication Adherence

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Introduction: For HIV positive patients, adherence to their medication regimen can significantly improve their health status and reduce mortality. The purpose of this project was to identify evidence based methods nurses could implement to improve adherence to HART medication regimens by HIV patients.

Method(s): We performed a systematic review of the literature to answer the question: What methods for improving medication adherence are most effective with HIV positive patients? A search of CINAHL, Science Direct, Cochrane, Web of Science, OVID, and Science Direct was conducted using the following key terms: HIV, medication adherence, and compliance. The initial search produced 175 papers. We excluded any that did not directly test medication adherence interventions in HIV populations, were not in English, and/or were published before 2004. We critically analyzed the remaining 20 papers which included two systematic (Cochrane) reviews and 18 randomized control trials (RCT). These papers could be categorized into 2 groups: psycho-educational interventions or mechanical interventions. The RCTs were characterized by adequate samples sizes, equivalent control and experimental groups, and well-described interventions.

Results: The Cochrane review of mechanical interventions included 4 trials and found no significant change in medication adherence. Results from 7 RCTs employing mechanical interventions (cell phones, alarms) were mixed with 4 having an increase, 2 having no effect, and 1 having a decrease in adherence. The Cochrane review of psycho-educational interventions found an overall improvement in medication adherence. In 10 of the 11 RCTs testing psycho-educational interventions (cognitive/behavioral therapy, and education) there was an increase in adherence.

Discussion & Conclusions: There is high level evidence to support use of psycho-educational interventions to increasing medication adherence. A combination of cognitive behavior therapy, education and telephone follow-ups appeared to effect the most adherence. Mechanical interventions were less effective when used in the absence of behavioral therapies. Nurses working with HIV patients should consider initiating adherence programs using a combination of individualized psycho-educational interventions.
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