

Abstract

Introduction : Non-compliance to treatment has been identified as a major factor in therapeutic failure in routine practices and scientific therapeutic trials and directly related to poor prognosis.

Eighty percent admissions to mental health wards were caused by non-compliance among patients attending mental health clinic at Teaching Hospital (TH) Kandy for last two years period (TH Kandy, 2018).

Objective : General objective was to determine selected factors associated with treatment compliance among patients attending mental health clinic in TH Kandy.

Methodology : Hospital based cross-sectional descriptive study was carried out at TH Kandy using systematic random sampling technique and the sample size was 427. There study instruments were used namely Interviewer Administered Questionnaire on selected factors associated with treatment compliance (IAQSFATC) for patients. In depth interview 9 (IDI) for Consultant Psychiatrists and a check list for service availability (CISA) that was filed by principal investigator (PI) . Latter two instruments were used to complement the IAQSFATC period of study was one year period from 16.10.2018 to 15.10. 2019.

Results and Discussion : Vast majority of participants were Sinhalese (n=367, 85.9%) , Buddhist (76.3%) and females (55.3%). The mean age was 50.2 years . Two groups studied were those compliant to treatment (n=307, 71.9%) and noncompliant to treatment (n=120; 28.1%) selected factors which were statistically significant at P value <0.05 were determined as associated with treatment compliance . These factors were living alone poor family support , lack of insight , increased waiting time at pharmacy, increased waiting time at clinic , social stigma and social workers' support.

Conclusions: Patient related factors associated with compliance were living alone, poor family support , poor insight, stigma , type of illness, sides effects of drugs , unaffordability of drugs , travelling time, distance to the clinic and living status. Health service related factors associated with treatment compliance were waiting time at clinic, waiting time at pharmacy , unavailability of drugs, discrimination by health staff, unavailability of some staff categories, lack of training of clinic staff and lack of social workers support.

Recommendations : There should be a separate counter at pharmacy for mental health clinic patients and that would minimize waiting time at pharmacy in THK. Strengthen the multi-sectorial collaboration to reduce stigma by media and community programmes through community mental health workers.

Keywords : Selected factors, treatment compliance, mental health, non-compliance.