

# Psychosocial factors play a role in the adherence of adult patients with hemophilia

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## Introduction and Objective

The success in treatment of hemophilia is based on the prevention of bleeding (joint and / or muscle). A good adherence in hemophilia patients is the key to preventing bleeding, and therefore, a good quality of life of these patients. The objective is to determine which psychosocial factors influence adherence in young people and adults with hemophilia.

## Results

The mean age was 37 years (SD=15.20); 56% had a severe phenotype, 35% were on prophylaxis, 13% used inhibitor, 56% had arthropathy, 48% had no co-infections, while 11% had HIV, 24% had HCV and 18 % had HCV-HIV. Significant difference obtained depending on the degree of arthropathy and in the presence of inhibitor. Table 1. The correlation between adherence and perception of disease in Treatment Control (p=.475) Illness Coherence (p=.423), Timeline Cyclical (p=.536).The correlation between adherence and QoL in Treatment Satisfaction (p=.483) Treatment Difficulties (p=.472), Mental Health (p=-.512) Social Relationships (p=-.437) Emotional Functioning (p=-.672). The correlation between adherence and illness behavior in Affective Inhibition (p = .510) and Affective Disturbance (p=.417) .The correlation between adherence and coping strategies in Desiderative Thought (p=.578), Social Support (p=.458) and Cognitive Restructuring (p=-.609).

## Material and Methods

We recruited 63 adults with hemophilia. The measurement of adherence was performed using Veritas-Pro, Psychosocial factors with: the Coping Strategies Inventory, A36-Hemophilia-QOL, SF-36, IPQ-R, IBQ and BMQ. For statistical analysis were used Student's t, ANOVA and Pearson correlation coefficient. We were also obtained as measures of effect size Cohen's d and the coefficient partial eta squared.

**Table 1**

		Degree arthropathy	Inhibitors
VERITAS-Pro	Timing	P<.01	
	Planning		P<.05

## Conclusions

According to the results, the complications of the disease as arthropathy and the inhibitor determine the degree of adherence. However, it should be paid attention to psychosocial variables as perception and illness behavior and coping strategies when assessing the degree of adherence to the disease.

