

Identification of psychological factors that interfere in the adherence to the treatment of patients with Haemophilia for the further development of an evaluation instrument

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OBJECTIVES

The hereby research tries to identify those repeated psychological variables that have complicated or impeded the possibility for the patient to adopt the recommended measures by the doctor and therefore omit or have contrary behavior to the protection of his/her health

METHODS

The studied population was of 18 patients between 16 and 25 years old who suffer from moderate or severe haemophilia. Psychological interviews and a questionnaire that show the belief system, motivation, aims and expectations that influence the adherence directly were applied for the evaluation of psychological causals that affect the adherence to the treatment

RESULTS

The adolescents presented a minor feeling of vulnerability and risk of their disease by developing a defiant behavior focused on the treatment. Older patients ended up developing a closed belief system in which the expectations of change and improvement are lived as insignificant, decreasing the motivation and autoefficiency. Their personal previous experience and that of the family are an essential variable in the development of the belief system. The majority of patients blame the obstacles of continuity of the treatment to external aspects, not internal ones. Self-esteem, parents overprotection in the development and growth affect the possibility of developing proactive behavior and therefore the commitment to the indicated medical treatments.

CONCLUSION

When analysing the psychological causes that complicate the adherence to the treatment, it is necessary to revise the belief system by considering: the personal/ family history; acceptance of the haemophilic condition; perception of vulnerability and risks of the disease. Motivation, aims, expectations. The repeated emotional obstacles are: resignation and naturalization/submission of the physical and emotional discomfort. Blaming difficulties to external agents. Low self-esteem. Overprotection during childhood that derives in a passive and dependent attitude.



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