Comparisons of Medication Adherence in Adult Stroke & Hypertension:
Implications for Applying the Health Self-Management Evidence in Disability

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PURPOSE: Half of adults with stroke do not take antihypertensive medication as prescribed increasing their risk for recurrent stroke. Limited information describes best medication adherence practices for adults with stroke, so clinicians leverage the broader antihypertensive medication adherence literature. The similarities and differences between adults with stroke and hypertension is unclear. The purpose of this study is to compare adults with stroke and hypertension on factors affecting medication adherence.

DESIGN: 45 adults with hypertension and 15 adults with stroke completed this exploratory study.

METHOD: Participants completed the Performance Assessment of Self Care Skills Medication Management Subtest (PASS), Stroke Knowledge Test, and Medication Knowledge Evaluation. Participants also used a Medication Event Monitoring System (MEMS) cap to monitor their antihypertensive medication adherence for 30 days. Researchers used descriptive statistics, independent sample t-tests, and Mann-Whitney U Tests to describe differences between groups.

RESULTS: As compared to adults with hypertension, those with stroke demonstrated significantly ($p<.05$) worse scores on the PASS (Hypertension: M=8.15, SD=1.03; Stroke M=6.25, SD=1.57), Stroke Knowledge Test (Hypertension: M=73.77, SD=12.28; Stroke M=54.21, SD=19.09), Medication Knowledge Test (Hypertension: M=89.63, SD=4.06; Stroke M=84.71, SD=7.84), and medication adherence (Hypertension: M=93.51, SD=8.70; Stroke M=86.27, SD=12.37).

DISCUSSION: These findings indicate that in terms of medication adherence, adults with stroke are a different population than those with hypertension alone. Stroke-specific interventions are needed to improve adherence after stroke and reduce the risk of recurrent stroke. Occupational therapy practitioners, with their expertise in stroke and self-management occupations, can play a significant role in developing and implement stroke specific adherence interventions.

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