



Medication Non-Adherence and Health-Related Outcomes in Patients with Pulmonary Arterial Hypertension: The Pulmonary Hypertension Association Registry

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Medication non-adherence in patients with PAH is associated with more ED visits, hospitalizations, and worse HRQoL

Rationale

- PAH is associated with significant morbidity and mortality
- We sought to determine:
 - relationship between non-adherence and clinical outcomes
 - predictors of medication non-adherence



Results: Predictors

	OR (95% CI)	p Values
Insurance	2.1 (1.5—2.9)	<0.001
Education	1.7 (1.1—2.9)	0.004
Poverty	1.7 (1.2—2.3)	0.005
Unpartnered	1.5 (1.1—1.9)	0.009
Male sex	1.4 (1.0—1.9)	0.02

Methods

- Data: Pulmonary Hypertension Association Registry (a national registry of patients with PAH and CTEPH)
- Enrollment questionnaires included self-reported non-adherence, demographic factors, functional status
- Predictors modeled using generalized estimating equations (GEEs) assuming binary distribution
- Outcomes modeled using GEEs with Poisson distribution

Results: Outcomes

	Non-Adherence	Adherence	p Values
Overall Rate (%)	6.1%	—	<0.001
ED Visits (#)	0.9	0.6	<0.001
Hospital Visits (#)	1.7	1.5	0.03
Hospital Stays (#)	3.4	2.2	0.006
SF-12 Score	46.7	49.3	0.002
EmPHasis-10 Score	22.9	20.8	0.02

Conclusions

- Participants who were non-adherent had 64.0% more ED visits, 18.7% more hospital visits, and 60.0% more hospital stays
- Non-adherence was associated with worse self-reported physical functioning and more limitations in patients' daily lives