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A Study on Therapeutic Compliance of Hypertensive Patients in a Rural Health Subcenter

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= ABSTRACT =

Hypertension is the most frequent disease of chronic circulatory diseases and major intermediate cause or risk of the cerebrovascular disease which is a leading cause of death in Korea. Therefore, management of hypertension is an important issue in Korean healthcare. Especially, therapeutic compliance of hypertensives is very important because the hypertensive patients should receive anti-hypertensive treatment as long as the condition exists. However, many patients drop out of treatment, which is a major problem that needs to be solved through a hypertension control program. This study was carried out to provide basic data and counter measure for the hypertension control program in the community which aimed to keep the patients receiving treatment continuously.

In order to investigate compliance of hypertensive patients during three months follow-up and the rate of control of hypertension, the data were collected during February, 2001, by reviewing medical records of 295 hypertensive patients who had been registered to Gunnam-myeon health subcenter before November, 2000. The author also study the dropout reasons by interviewing 58 patients among 68 dropout patients.

The results were as follows:

1. Among the 295 subjects, 108(36.6%) were male and 187(63.4%) were female. Statistically, female hypertensives had a higher mean age than male(64.6 vs 66.3, $p<0.05$).
2. The 54.9% of the patients took anti-hypertensive medicine continuously for the past three months. And 19.3% had drug intermittently, and 25.8% dropped out of treatment.
3. Among several variables, such as sex, age, health insurance, the time taken from a patient's village to the health subcenter, only the last one was found to be significantly related to therapeutic compliance in the

contingency table analysis.

- 4. The dropout reasons by multiple response were as follows, 'no symptom or no problem'(23.9%), 'change to other hospitals'(19.4%), 'geographical barrier'(17.9%), 'change to a neighborhood drugstore'(14.9%), 'immobility'(7.5%), 'economic barrier'(6.0%), 'unsatisfactory services of the health subcenter'(4.4%).
- 5. The mean blood pressure of 295 subjects was $144.9 \pm 12.9/86.88 \pm 8.6$ mmHg.
- 6. The 32.5% of the subjects were controlled below 140/90mmHg.

Conclusions: In order to improve the low rates of treatment and control of hypertension in rural hypertensives, a more active and systematic hypertension control program, including out-reaching follow-up management, is required in rural area. Especially, for health education of hypertensive patients, emphasis should placed on correcting wrong attitude toward hypertension.

KEY WORDS: Hypertension, Compliance, Health subcenter, Rural area

가

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, 가

(, 1993; , 2001).

, 가

, , , ,

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가

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가

1.

2000 10

2)

4,965 가 295 2,573 , 14.8% 2,392 가 65 가

3.

2.

1)

3,255 SPSS 10.0 for windows, MS Excel , p 0.05 2000 11

295

2001 2 , 1. 295 가 108 (36.6%), 가 187 (63.4%) 가 60-69 가

42 (38.9%), 81 (43.3%) 가

645 , 663 가

(p<0.05)(1, 2).

3

2000 11 가

254 (86.1%) 가

, 32 (10.8%)

9 (3.1%)

가

가

가 77 (26.1%) 가

가 10 (3.4%) 가 가

51 35

2000 11 1

가 가

(1).

140/90mmHg

1. n=295

| | (%) |
|--|------------|
| | 108 (36.6) |
| | 187 (63.4) |
| | 254 (86.1) |
| | 32 (10.8) |
| | 9 (3.1) |
| | 71 (24.1) |
| | 34 (11.5) |
| | 10 (3.4) |
| | 77 (26.1) |
| | 26 (8.8) |
| | 11 (3.7) |
| | 15 (5.1) |
| | 51 (17.3) |

2. : (%)

| | | | (%) |
|-------|-----------|-----------|------------|
| 30-39 | 2(1.9) | 1(0.5) | 3(1.0) |
| 40-49 | 12(11.1) | 8(4.4) | 20(6.8) |
| 50-59 | 20(18.5) | 24(12.8) | 44(14.9) |
| 60-69 | 42(38.9) | 81(43.3) | 123(41.7) |
| 70-79 | 22(20.4) | 52(27.8) | 74(25.1) |
| 80 | 10(9.1) | 21(11.2) | 31(10.5) |
| | 108(36.6) | 192(63.4) | 295(100.0) |

2. 295
 162 54.9%
 , 57 (19.3%)
 76
 25.8%
 65.2 , 66.4 ,

67.4 (3).

3.

| | (%) | () |
|--|------------|------|
| | 162(54.9) | 65.2 |
| | 57(19.3) | 66.4 |
| | 76(25.8) | 67.4 |
| | 295(100.0) | |

, , ,
 ,
 가 .
 가
 가
 가 (4).
 3.
 76 67
 ,
 '가 23.9% 가
 ,
 가 19.4%, 14.9% . ' ,
 17.9% 가 '
 가 ' 가 75%, ' '가 60% .
 가 4.4% (5).

4.

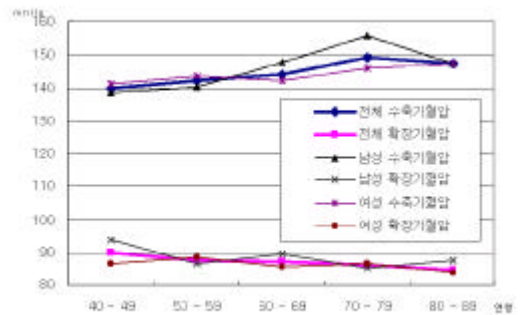
| | | | | | | (%) |
|----|----|-----------|-----------|------------|-------------|-------|
| | | | | | | P |
| | | 22 (20.4) | 20 (18.5) | 66 (61.1) | 108 (100.0) | 0.205 |
| | | 54 (28.9) | 37 (19.8) | 96 (51.3) | 187 (100.0) | |
| 30 | 49 | 4 (17.4) | 2 (8.7) | 17 (73.9) | 23 (100.0) | 0.066 |
| 50 | 69 | 39 (23.3) | 30 (18.0) | 98 (58.7) | 167 (100.0) | |
| 70 | | 33 (31.4) | 25 (23.8) | 47 (44.8) | 105 (100.0) | |
| | | 63 (24.8) | 49 (19.3) | 142 (55.9) | 254 (100.0) | 0.281 |
| | | 12 (37.5) | 7 (21.9) | 13 (40.6) | 32 (100.0) | |
| | | 1 (11.1) | 1 (11.1) | 7 (77.8) | 9 (100.0) | |
| 5 | | 11 (10.4) | 24 (22.6) | 71 (67.0) | 106 (100.0) | 0.001 |
| 5 | 15 | 26 (29.9) | 16 (18.4) | 45 (51.7) | 87 (100.0) | |
| 15 | | 39 (38.2) | 17 (16.7) | 46 (45.1) | 102 (100.0) | |

5.

| | | (%) |
|---|--|-----------|
| | | 16(23.9) |
| | | 13(19.4) |
| | | 12(17.9) |
| | | 10(14.9) |
| 가 | | 5(7.5) |
| | | 4(6.0) |
| | | 3(4.4) |
| | | 4(6.0) |
| | | 67(100.0) |

4. $144.9 \pm 12.9 / 86.9 \pm 8.6$ mmHg

가
가 (p<0.01)(1).



(, 1986)

가 50%

(, 1998) (34.0%),

(Becker , 1980; (28.2%), 가 (15.4%),

Counte , 1981; Eraker , 1984; Glanz , 1990). 가 (6.4%)

가 17.9%

54.9%

(1986)

52%

(1997)

3-5 52% 가 75%

44-55% (, 가

1994; , 1997; , 2000; 가

2000),

() 54.9%

140/90mmHg

96

'가 23.9% 가 32.5%

가 25-40%

(, 1997; , 2000;

, 2000)

42-45%

(1991) (Burt , 1995; Joffress ,

(21.9%),

(16.9%), 가

(10.4%), (9.4%)

가 (6.0%), ‘ (4.4%)

4. 295 144.9±
12.9/86.9±8.6mmHg ,
140/90mmHg
32.5% .

가

1. , , , , .
1996; 18(1): 55-63

2000 11 295 ,
1997; 23(1): 79-100

1. 295 가 108 (36.6%), 가 187
(62.7%) 64.6 , 66.3 1993; 18(1):
(p<0.05). 31-34

2. 54.9%가 19.3%,
25.8% . 4. , , , , .
1981; 3(1): 37-43

3. , , , , . 5. , , , , , , , ,
2000; 33(1): 56-68

(p<0.01). 6. , , , , , , .
12

3. ‘ : . 1999; 32(4): 435-442

가 23.9% ‘ 7. , , , . , 가 1986;
(18.4%), ‘ (17.9%), ‘ , 가 1986;
(14.9%), ‘ 가 (7.5%), ‘ 7(1): 1-11

8. , , , , .
2001: 34(4): 417-426
9. , , .
1999; 56(3): 21.
299-316 1993; 35(2): 164-168
9. , , .
. 가 1986; 7(12): 10-21
10. , , , , .
1999; 32(2): 215-227
11. , , , , .
. 1993
, 1993. 11
12. , , , , , , .
1994; 4(1): 25-48
13. , .
1998,
15(2): 23-41
14. .
1993
15. .
2000: 171-198
16. .
1994; 19(2): 97-106
17. . 99 , , , 2000
18. , , , , .
1997;
40(4): 86-90
19. , , , , , , .
2000; 33(2): 215-225
20. , .
21. .
1993; 35(2): 164-168
22. , , , , , , .
, .
'99 , 1999; 45
23. , , . 60
,
24. , , , , .
1994; 19(2): 129-140
25. , , , , , .
1991; 12(10): 1-12
26. , , , , , .
1993
27. , .
2000; 33(4): 513-520
28. , , , , , , .
. 가
1999; 20(12): 1761-1769
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