ABSTRACT

Cardiovascular disease (CVD) causes 30% of deaths globally and has been reported to be on the increase in sub-Saharan Africa. Medications prescribed for CVD are largely an ongoing lifetime commitment aimed to preserve optimal heart function for as long as possible and as a result patients must adhere to their prescription. However, prescription adherence is influenced to a large part by prescription awareness, which is having information about prescribed drugs and their side effects and the manner of administration of these medicines. Although prevention and control are anchored on prescription awareness and have been shown to prevent at least 250,000 CVD-related deaths annually, estimates of prescription awareness and of factors that influence it are largely unknown in developing countries such as Kenya. The goal of the study was to investigate factors that influence the level of prescription awareness among patients with cardiovascular diseases (CVD) at the Moi Teaching and Referral Hospital (MTRH). Specifically, the study determined the level of prescription awareness, the association between prescription awareness and socio-demographic characteristics of patients, and whether prescribing clinicians explain the nature of prescriptions given to patients with CVD. The study used a cross-sectional study design with a sample size of 204 as was derived from the target population of 344. Data was collected using questionnaires. On the level of prescription awareness, there was a significant difference ($x^2 = 144.75$, p = 0.000) in the frequencies between those who were aware and those who were not with more respondents having high level of awareness. However, gender (p=0.562), age (p=0.575), marital status (p=0.957), employment status (p=0.358), educational level (p=0.592), settlement (p=0.577), the respondents living arrangement (p=0.504) were not associated with prescription awareness. Nearly 98% of respondents indicated that clinicians explained prescriptions to them. However, there was a significant association between the language of communication by the respondents and level of prescription awareness (p=0.043). Consequently, it was concluded that CVD patients at the MTRH had a high level of prescription awareness implying they were aware of their medication. Further prescription awareness was found to be influenced by language used by prescribing clinicians perhaps because the use of language patients are versed in influenced their ability to communicate with the medical personnel. It is recommended that prescribing clinicians should ensure that they choose a language of communication that their patient is well-versed in or employ an interpreter if that is not the case. To the extent that prescribing clinicians are the primary source of prescription awareness to patients and further that key socio-demographic and economic factors were not significantly associated with prescription awareness, it can be concluded that prescribing clinicians were communicating with patients indiscriminately. Overall, the results suggest that clinicians' communication of prescription plan to cardiovascular patients at the MTRH was effective.