Therapy Adherence Predictors in Type 2 Diabetes Mellitus

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Introduction: The changing epidemiological profile of population in recent decades is related to the socio-economic conditions of contemporaneity. Diabetes mellitus (DM) is positioned in the chronic non-communicable diseases spectrum as one of the most prevalent being responsible for high rates of morbidity and mortality. Therapeutic adhere is of crucial importance because there are high risks associated with non-adherence and it impacts on quality of life.

Objectives: Identifying therapeutic adherence predictors in type 2 diabetes (DM2).

Methods: 188 patients attending diabetology consultations at the Department of Endocrinology, Diabetes and Metabolism, at Centro Hospitalar e Universitário de Coimbra and at Associação Protetora dos Diabéticos de Portugal participated in the study. Participants completed the following set of self-report instruments: Beck Depression Inventory (BDI), the Diabetes Health Profile (DHP), the Rosenberg Self-Esteem (RSE), and the social relations dimension of the World Health Organization Quality of Life (WHOQOL). Therapeutic adherence was established base on HbA1C clinical criteria.

Results: Multiple regression analyses revealed that the full model was statistically significant [c^2 (4, n = 188) = 20.79, $p < 0.001$] explaining between 20% and 29.6% of total variance and 76.3% of the cases were correctly classified. The four variables significantly contributed to the model, especially the BDI and the RSE, registering an *odds ratio* of 1.104 and 1.203, respectively.

Conclusions: In DM2 predictors of non-adherence were depression and diabetes patient health profile while self-esteem and quality of life in social relations, emerged as predictors of adherence.