"Zahraei Method" for Reminding and Easy Education of Medical Indications for Patients with Lack of Knowledge or Unable to Notice Medical Orders

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Abstract - Medicines are futile unless we take them and follow the treatment. Adherence to the prescribed therapy is a key determinant of the extent of treatment success. Poor adherence impedes optimum clinical outcome and results in lesser benefit of therapy. World Health Organization has defined adherence as “the extent to which a person’s behavior – taking medication, following a diet, and/or executing lifestyle changes, corresponds with agreed recommendations from a health care provider”.

Keywords - Zahraei Method, Medical Indications, Patients with Lack of Knowledge.

I. INTRODUCTION

Medicines are futile unless we take them and follow the treatment. Adherence to the prescribed therapy is a key determinant of the extent of treatment success. Poor adherence impedes optimum clinical outcome and results in lesser benefit of therapy. World Health Organization has defined adherence as “the extent to which a person’s behavior – taking medication, following a diet, and/or executing lifestyle changes, corresponds with agreed recommendations from a health care provider”. However, in developed countries, only 50% of patients suffering from chronic conditions manage to go through prescribed medications (1). This condition is much worse in developing countries where low adherence, poor health care facilities, and lack of suitable diagnosis lead to exacerbation of the patients’ condition. Studies have reported that only 43% of patients with hypertension in China follow their medications (2). The rate of adherence depends on different socio-economic, cultural, educational, therapy- and illness-related factors. Poor instruction and inability of the patient to provide medications are other contributing factors. Illiteracy is an important factor that causes low adherence of the patients after hospital discharge or even during hospitalization. They usually try to recognize the drug by its shape or box or its color. Unfortunately, most instructions for these patients are limited to verbal instruction which they receive from their doctor. In this paper, we introduce a new method called “Zahraei method” for the first time that helps illiterate patients adhere to their prescribed medication regime.
II. METHOD

Small sheets depicting different medication were handed to illiterate patients in psychiatry ward of Shiraz University of Medical Sciences hospitals. This method was tested on antidepressant which was prescribed to patients in psychiatry ward. A quarter of the first drug was colored with three straight lines next to it, which means to consume a quarter of that drug for three consecutive days. For the next three days, a drug was colored in half with three straight lines next to it. Different sheets were made according to each patient’s prescription. A 2-weeks follow-up showed that no illiterate patient had difficulty in adhering to the medical regime.

III. DISCUSSION

Paying attention to illiterate patients is of paramount importance. They may encounter consequences because they may not obtain sufficient information about their condition and prevention of different disease, they may have problems reading prescription and they are more likely to have accidents because they cannot read instructions. An important obstacle in approaching illiteracy is that most patients do not reveal that they illiterate because of embarrassment or any other reason, so it is hard to spot. Doctors should pay attention to verbal and visual signs; for instance, does the patient fill the forms by him/herself our other relative does that. There are different ways that can help illiterate patients not to get confused while taking medications like asking and instructing relatives, applications, or helping the patient memorize and repeat the drug that should be consumed. We introduced an active method to tackle the problem. Our sheets provide a convenient and portable method for illiterate patients. Moreover, patients feel that they have an active role in this method and they do not feel ashamed of their condition.

REFERENCES
