Statin Therapy Experience in Saudi Arabia: Identifying Predictors of Non-Adherence, Patient Attitudes, and the Influence of Patient-Doctor Communication

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ABSTRACT

Introduction: Dyslipidaemia is a modifiable medical condition characterized by an abnormal distribution of lipids in the blood. Non-adherence significantly increases the risk of adverse cardiovascular events due to persistently elevated cholesterol levels. This study aimed to assess patients' adherence towards statin therapy and its associated predictors.

Methods: A cross-sectional online survey study was conducted in Saudi Arabia between August and September 2024 to examine patients' adherence towards statin therapy and its associated predictors. This study utilized previously developed questionnaire tool. The predictors of higher medication adherence were determined using binary logistic regression.

Results: A total of 417 patients were involved in this study. Around 58.5% of the patients were diagnosed with dyslipidaemia since more than 24 months. Around half of the patients (49.6%) reported that they practice daily exercises for less than 30 minutes. The most common comorbidity among the participating patients was hypertension (30.7%). The mean adherence score for the patients was 45.4 (SD: 10.7) out of 60; which reflects high adherence for statin therapy (75.7%). The statement that showed highest mean score was that "patients stopped taking medication based on my own judgment (not including times when I forgot to take my medication" with a mean score of 4.3 (1.1). The statement that showed the lowest mean score was that patients sometimes get annoyed that I have to keep taking medicine every day "with a mean score of 3.2 (1.4). Binary logistic regression analysis identified that there is no statistically significant difference in patients' adherence to statin therapy based on their demographic characteristics (p>0.05).

Conclusion: This study shows the generally high adherence to statin therapy among dyslipidemia patients despite the presence of common comorbidities like hypertension in Saudi Arabia. Importantly, the adherence of the patients does not relate to demographic factors-meaning there could be other variables affecting adherence more significantly, such as attitude toward medication and health behavior. Health care providers should provide a rationale to the patient regarding the need for consistent therapy and then propose individualized interventions to overcome the barriers for adherence, including lifestyle changes and education of the patients.

Keywords: Adherence; Dyslipidaemia; Saudi Arabia; Statin

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