



Pharmacotherapy for Hypertension and Diabetes in a National Health Care System in Brazil: Emphasis on Patient Access to Prescription Medications

Silvana C. TRAUTHMAN *¹, Anna P. PIOVEZAN ¹,
Indianara R.T. BECKER ², Leonardo P. MARTINS ³ & Dayani GALATO ¹

¹ Pharmacy School and Postgraduate Program in Health Sciences at the University
of Southern Santa Catarina (UNISUL).

Research Center for Pharmaceutical Care and Use of Medicines (NAFEUM). Tubarão, SC (Brazil).

² Pharmacy School at the University of the

Extreme South of Santa Catarina (UNESC), Criciúma, SC (Brazil).

³ Pharmacy School at the Barriga Verde University Center (UNIBAVE). Orleans, SC (Brazil).

SUMMARY. The purpose of this study is to determine the pharmacotherapeutic profile of hypertensive and diabetic subjects and examine factors associated with access to medications. This is an epidemiological cross-sectional study with patients attending urban primary health care units in three municipalities in southern Brazil. We interviewed 931 subjects, of whom 98.8% had access to all the medications. Most (91.8%) of the prescription drugs were included in the Municipal Essential Drugs List and 64.6% of the participants were considered to be adherent. The prevalence of control of diseases was 34.4%. Access to medicines exclusively through the public health system was directly associated with age up to 62 years ($p = 0.004$) and use up to two medications ($p < 0.001$), and was inversely associated to the presence of complications ($p < 0.001$). High access to medicines did not improve medication adherence and disease control.

RESUMEN. El propósito de este estudio es determinar el perfil farmacoterapéutico de pacientes hipertensos y diabéticos y examinar los factores asociados con el acceso a los medicamentos. Es un estudio epidemiológico transversal, con pacientes que acuden a las unidades de atención primaria de salud urbanas en tres municipios del sur de Brasil. Entrevistamos a 931 sujetos, de los cuales 98.8% tenían acceso a todos los medicamentos. La mayoría (91.8%) de los medicamentos con receta se incluyeron en la Lista Municipal de Medicamentos Esenciales y el 64,6% de los participantes fueron considerados como adherentes. La prevalencia de control de las enfermedades fue del 34,4%. El acceso a los medicamentos exclusivamente a través del sistema público de salud se asoció directamente con la edad hasta los 62 años ($p = 0,004$) y el uso de un máximo de dos medicamentos ($p < 0,001$), y se asoció inversamente con la presencia de complicaciones ($p < 0,001$). El elevado nivel de acceso a medicamentos no mejoró la adherencia a los mismos ni el control de enfermedades.

KEY WORDS: Brazil, diabetes mellitus, Drug utilization, hypertension, Medication adherence, Public Health System.

* Author to whom correspondence should be addressed. E-mail: silvana.trauthman@unisul.br