A Cross-Sectional Evaluation of Illness Perception About Asthma Among Asthma Patients at a Referral Tertiary Care Public Chest Hospital in Delhi, India

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ABSTRACT

Adult patients visiting emergency room (March 2009-December 2009) of the public chest hospital for asthma exacerbation completed interviewer-administered questionnaires on sociodemographics, clinical history, disease beliefs, use of inhaled corticosteroids (ICS), and self-management of asthma after stabilization of their condition. Overall 87% patients believed that they had asthma when they are having symptoms, which is called as no symptoms, no asthma belief. No association was found between no symptoms, no asthma belief with gender, income, family history of asthma, and co-morbidity. Younger patients in the age group 18-29 years had four to five-fold greater odds and patients with education above 10th grade had three to four-fold greater odds of having the no symptoms, no asthma belief or the acute episodic belief. Acute episodic belief was negatively associated with beliefs about always having asthma, asthma being a serious condition, having lung inflammation, or the importance of using ICS, and was positively associated with expecting to be cured. All patients irrespective of their belief of acute or chronic nature of asthma had poor adherence to the treatment and other self-management behaviors.

Keywords: Adherence, Asthma, Behaviors, Beliefs, India, Self Management

INTRODUCTION

Asthma is one of the common chronic diseases in India whose prevalence is increasing (Chowgule et al., 1998). From the public health perspective, uncontrolled asthma is associated with high morbidity and mortality and is especially worrying because there is consensus by the experts that much of it could be prevented by consistent use of proven ef-
Effect therapy mainly in the form of inhaled corticosteroids (ICS) and self-management to achieve asthma control (Adams et al., 2001; GINA, 2007). Still optimal treatment of asthma remains elusive mainly due to non-adherence to daily use of controller medications and other self-management behaviors (Chapman et al., 2000; Fish & Lung, 2001). Patients play an important and instrumental role in managing their own condition as mentioned in the report of National Heart, Lung, and Blood Institute (2008). Studies from developed world suggest that ICS adherence ranged from 40% to 60% (Bender & Bender, 2005; Breekveldt-Postma et al., 2004) and non-adherence is common amongst low-income families (Celano et al., 1998). Patient perception and understanding of the disease and treatment is commonly believed to be an important modifiable factor in determining intentional adherence. Not much work is reported concerning adherence to asthma treatment in India. The first step would be to find out the belief of asthma patients about chronic nature of the disease and necessity of the daily medication. Hence, the present study was conducted.

A study was conducted by Halm et al. (2006) in New York City using the Leventhal Common Sense Self-Regulation Model to examine patients’ underlying beliefs about asthma and its treatment. Role for emotions in health behavior, an approach put forth in Leventhal’s Common Sense Model is very well studied (Leventhal et al., 1998, 2003) and adaptive in many chronic conditions that have both symptomatic and asymptomatic components (Horne & Weinman, 2002; Horowitz et al., 2004). According to the theory, the most common mental model of illness is based on experience with acute illnesses, like colds, flu, and urinary tract infections. These experiences of acute episodes encourage patients to believe illnesses as acute episodes rather than chronic conditions. Applying this to asthma, authors of New York City studied the acute episodic belief as no symptoms, no asthma disease belief. Based on the study conducted by Halm et al. (2006) in New York City hospital on admitted asthma patients, the present study was designed with objectives to find out: 1. Patients’ beliefs about whether asthma is a chronic or acute episodic illness; 2. The characteristics of patients with the acute episodic no symptoms, no asthma disease belief; and 3. Associations between the no symptoms, no asthma belief with other chronicity beliefs, medication adherence, and self-management behaviors.

MATERIAL AND METHODS

Study Design and Study Population

This cross-sectional questionnaire based study was carried out in a referral chest public hospital of Delhi. Patients attending the emergency room (ER) for treatment of their acute attack were enrolled for the study. After the patients were clinically stable, were asked to participate in the study. Patients, 18-60 years of age, previously diagnosed of persistent asthma with spirometry, having at least one prescription of inhaled corticosteroids and registered as out-patient in the study hospital for at least one year were included in the study. Non-cooperative patients were excluded from the study. The protocol of the study was approved by the institutional ethics committee. Patients were enrolled after obtaining written informed consent.

Study Questionnaire, Measures, and Data Collection

The questionnaire for the study was developed from a questionnaire used in a similar study conducted on hospitalized adult asthma patients in New York City by Halm et al. (2006). The questionnaire used for our study was little modified to suit local needs and behavior. Questions about ethnicity, insurance status, and primary language spoken were not asked instead total family members and details of education including illiteracy were added which was relevant in our set up. Few more questions on self-management were included since self-management is poor in India. The questionnaire...
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