■ Article

Factors Influencing Oral Adherence: Qualitative Metasummary and Triangulation With Quantitative Evidence

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Background: Concern about adherence to oral agents among patients with cancer has grown as more oral agents are being used for cancer treatment. Knowledge of common factors that facilitate or inhibit adherence to oral medication regimens can be beneficial to clinicians in identifying patients at risk for nonadherence, in planning care to address barriers to adherence, and in educating patients about ways to improve adherence.

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Objectives: The focus of this review is to synthesize the evidence about factors that influence adherence and identify implications for practice.

Methods: Literature was searched via PubMed and CINAHL®. Evidence regarding factors influencing adherence was synthesized using a metasummary of qualitative research and triangulated with findings from quantitative research.

Findings: Forty-four factors influencing adherence were identified from 159 research studies of patients with and without cancer. Factors associated with adherence in oncology and non-oncology cases included provider relations, side effects, forgetfulness, beliefs about medication necessity, establishing routines for taking medication, social support, ability to fit medications in lifestyle, cost, and medication knowledge. Among patients with cancer, depression and negative expectations of results also were shown to have a negative relationship to adherence.

Lack of patient adherence to prescribed oral medications in the setting of chronic disease is not a new problem, and a substantial amount of literature is devoted to this issue. In oncology practice, the growth of oral versus IV chemotherapy has brought the concern of adherence to the forefront in cancer care. The problem of nonadherence involves numerous contributing factors that have been documented, predominantly in the setting of chronic disease. Many of these factors may be applicable to patients with cancer. Understanding the reasons why patients do not adhere to prescribed medication regimens, and the factors that appear to facilitate adherence, can be helpful to develop strategies to improve adherence.

The purpose of this article was to synthesize the evidence regarding factors that inhibit or facilitate medication adherence in patients with chronic disease and patients with cancer. Inhib-iting factors identified may be helpful to clinicians to recognize those patients who are at increased risk for nonadherence and in need of intervention to address this problem. Identification of the factors that are associated with improved adherence can be incorporated into interventions with patients to promote adherence.

Methods

Literature Search and Inclusion Criteria

Three initial literature searches were conducted to retrieve evidence from qualitative studies exploring medication adherence, studies of technology applied to the problem of oral adherence, and studies of adherence interventions in patients with and without cancer from PubMed and CINAHL®. Inclusion