

## TREATMENT ADHERENCE AND READMISSION RATES AMONG SCHIZOPHRENIA INPATIENTS AT THE RIGA PSYCHIATRY AND NARCOLOGY CENTRE: A CROSS-SECTIONAL STUDY

Author: *Alīna Bubnova*<sup>1</sup>

Scientific research supervisor: Assist. prof. *Ļubova Renemane*<sup>1</sup>

<sup>1</sup> *Rīga Stradiņš University, Latvia*

**Keywords.** Adherence; Readmission; Schizophrenia

**Objectives.** This study aims to explore the factors influencing treatment adherence among patients with schizophrenia in the inpatient department of the Riga Psychiatry and Narcology Centre and to examine the association between adherence and readmission rates. Non-adherence among patients with schizophrenia is a global challenge, further emphasizing the significance of thorough evaluation. Assessing treatment adherence in clinical settings is crucial due to its implications for patient outcomes, particularly the risk of disease relapse. Identifying factors influencing non-adherence has the potential to mitigate the financial resources expended on treatment, highlighting the importance of targeted interventions to enhance adherence and ultimately improve patient well-being.

**Materials and methods.** A cross-sectional survey was conducted involving inpatients diagnosed with schizophrenia at the Riga Psychiatry and Narcology Centre, with sociodemographic data gathered from medical records and patient interviews. Readmission rates were computed based on hospitalizations and illness duration. Antipsychotic medication adherence was assessed using the Medication Adherence Reporting Scale, and data analysis was performed using IBM SPSS Statistics software, incorporating frequency distribution, cross-tabulation, the Chi-Square test, and logistic regression.

**Results.** The study, encompassing 50 patients, revealed a non-adherence rate of 56%. Non-adherence exhibited a significant association with increased readmission rates ( $p=0.004$ ). Factors significantly linked to non-adherence included alcohol consumption (OR=6.96; 95% CI 1.85–26.09), self-reported dissatisfaction with socioeconomic status (OR=6.96; 95% CI 1.85–26.09), diabetes (OR=3.4; 95% CI 0.98–11.78), and cardiovascular diseases (OR=4.53; 95% CI 1.30–15.77).

**Conclusions.** The study highlights a substantial non-adherence prevalence among Riga Psychiatry and Narcology Centre inpatients. Dissatisfaction with socioeconomic status, alcohol consumption, diabetes, and cardiovascular diseases adversely affects treatment adherence. Non-adherent patients exhibit a higher likelihood of requiring inpatient care compared to adherent counterparts. Addressing these factors can enhance adherence, reduce readmission rates, and optimize treatment cost-effectiveness.