SOCIODECONOMIC FACTORS INFLUENCE RHGH TREATMENT ADHERENCE AND ITS RESPONSE IN CHILDREN.

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BACKGROUND AND OBJECTIVES

The mean final height attained with GH therapy is influenced by poor adherence to treatment. The main aim of this study was to identify non-adherent patients to GH therapy and to determine the influence of compliance in response to the treatment (IGF-I serum levels and growth velocity). We also evaluated the influence of socioeconomic factors on the therapeutic adherence.

METHODS

- 165 children treated with rhGH (Genotonorm Miniquick) in 2012 were included.
- Age, gender, etiology, Tanner state, duration of treatment, growth rate, IGF-I serum values, daily dose and annual dose data were collected.
- The prescribed dose and the dose administered by the hospital pharmacy were compared.
- Poor adherence was defined as a rate below 92% of prescribed dosage, and very poor as less than 85% of the prescribed dosage.
- A subgroup of 106 patients (53 non-adherent patients and 53 good-adherent ones) was asked to answer a questionnaire to assess social and environmental factors.

RESULTS

34 % of the patients showed moderate-low adherence to rhGH treatment. The dose provided by the pharmaceutical area of the hospital was:
- less than 85% in 36 patients (22%)
- between 92-85% in 20 patients (12%).

CONCLUSION:

- One third of our patients presented poor adherence to GH therapy, which results in suboptimal growth.
- IGF-I levels could be helpful to identify patients with lower adherence.
- Physicians should pay special attention to certain characteristics of the patient and their environment to encourage desirable therapeutic compliance.

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