

Determinants of medication adherence to topical ocular hypotensives and application of health belief model among glaucoma patients visiting a tertiary care hospital in coastal Karnataka, India

Sir,

The health belief model (HBM) is a classical behavior theory that explains health behaviors. It contains cognitive constructs (including perceived susceptibility, benefits, barrier; cues to action, and self-efficacy) that predict why people take actions to control their illnesses.^[1-4] Applicability of HBM in glaucoma medication adherence has not been explored fully among the Indian population. An attempt was made to discover this using a semi-structured, pretested, interview schedule based on HBM.

Individual perceptions	Modifying factors	Likelihood of action
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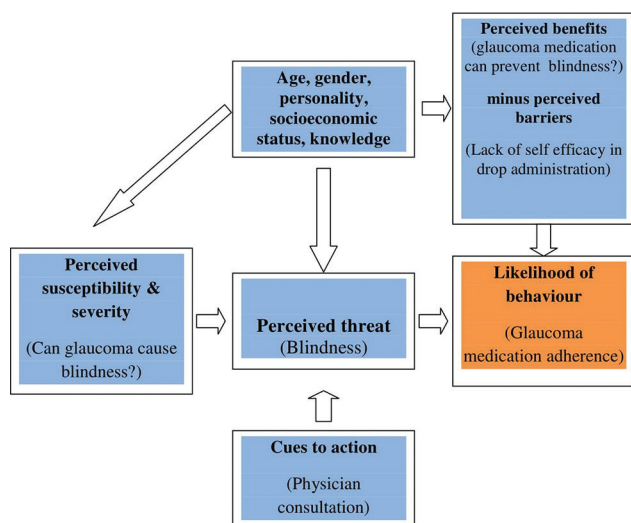


Figure 1: Health belief model and glaucoma medication adherence

The following HBM-related factors [Fig. 1] were associated with low adherence: poor understanding of the disease and importance of medications, lack of self-efficacy (individual belief regarding their capabilities to carry out a specific task to achieve a desired outcome),^[5] side effects of glaucoma medications, additional medications for other comorbidities, lack of family and social support, and no follow-up visit in the past 6 months.

By understanding the cognitive constructs of poor adherence behavior, we can circumvent them by formulating a targeted approach. The physician can play a key role by educating the patient about the nature of the disease, its prognosis with emphasis on the impact of medication and their expected side effects. Patients have to be trained to self-administer the drops. The family of the patient needs to be involved in the treatment plan.

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Conflicts of interest

There are no conflicts of interest.

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