INPLASY

A systematic review on differences between self-reported medication adherence and indirect measurement adherence in patients with antiretroviral therapy

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ADMINISTRATIVE INFORMATION

INTRODUCTION

Review question / Objective In the measurement of medication adherence, although there is no gold standard, the results of self-reported adherence by patients are usually inaccurate, and several indirect measurements of adherence are considered to be closer to the true adherence. Therefore, this study aims to explore the differences and influencing factors between self-reported compliance and indirect measurement of medication adherence of patients with antiretroviral therapy.

Rationale We will search previous published literatures that reported both self-reported medication adherence and indirect measurement adherence to evaluate the difference with meta-analysis and other methods.

Condition being studied Whether it is the success of the treatment of the individual or the prevention of transmission, the patient's medication adherence is of great significance in the antiviral treatment of AIDS.

METHODS

Search strategy We will search Pubmed use ((Antiretroviral Therapy[MeSH Terms]) OR (antiretroviral*[Title/Abstract])) AND (medication adherence[MeSH Terms]), search Embase and Cochrane library use similar terms with MeSH or Title/Abstract replace by ":ti,ab,kw".

Participant or population Patients with HIV/AIDS.

Intervention No intervention.

Comparator No comparator.

Study designs to be included Retrospective or prospective observational studies.

Eligibility criteria Studies included in this view should report both patient's self-report medication adherence and at least one direct measurement of adherence.

Information sources Electronic databases, trial registers.

Main outcome(s) Differences between self-reported medication adherence and indirect measurement adherence in patients with antiretroviral therapy, and the influencing factors.

Data management We use EndNote X9 to manage articles searched, and use Excel 2017 to manage data extracted from the articles.

Quality assessment / Risk of bias analysis NOS scale was used for quality assessment.

Strategy of data synthesis Meta-analysis and meta-regression will be used for analysis.

Subgroup analysis We will conduct subgroup analysis on different study regions, races, and specific characteristics.

Sensitivity analysis One-by-one elimination method will be used for sensitivity analysis.

Language restriction English full text only.

Country(ies) involved China.

Keywords medication adherence; antiretroviral therapy; self-report; direct measurement; HIV/AIDS.

Contributions of each author
Author 1 - Rujun Liao - Author 1 designed this study and drafted the manuscript.
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