

Understanding medication adherence among hypertension patients using health belief model

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ADMINISTRATIVE INFORMATION

Support - NIL.
Review Stage at time of this submission - Preliminary searches.
Conflicts of interest - None declared.
INPLASY registration number: INPLASY202570033

Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 8 July 2025 and was last updated on 8 July 2025.

INTRODUCTION

Review question / Objective To explore medication adherence among patients with hypertension using health belief model constructs.

Condition being studied Hypertension.

METHODS

Search strategy (((Medication Adherence[MeSH Terms]) OR (Patient compliance[MeSH Terms]) OR (Health regimen adherence) OR (Follow-through with treatment) OR (Regimen compliance)) AND ((Health belief model[MeSH Terms]) OR (Behavioral change model[MeSH Terms]) OR (Perception-based health model) OR (Individual health behavior theory) OR (Health motivation framework)) AND ((Hypertension[MeSH Terms]) OR (Masked Hypertension[MeSH Terms]) OR (Hypertensive disease[MeSH Terms]) OR (Increased vascular resistance[MeSH Terms]))).

Participant or population Patient with hypertension and taking at least one drug for it.

Intervention Not applicable.

Comparator Not applicable.

Study designs to be included Qualitative studies, cross sectional studies.

Eligibility criteria Involve adult patients (≥18 years) diagnosed with hypertension
Assess medication adherence as a primary or secondary outcome
Use the Health Belief Model (HBM) as a conceptual framework, either fully or partially (e.g., perceived barriers, benefits, etc.).

Information sources Pub Med, Google Scholar, EMBASE, Scopus.

Main outcome(s) Assess the association between constructs of the Health Belief Model (HBM) - such as perceived susceptibility, perceived severity,

perceived benefits, perceived barriers, cues to action, and self-efficacy , and medication adherence among patients with hypertension.

Quality assessment / Risk of bias analysis
ROBINS -E, JBI.

Strategy of data synthesis Studies will be grouped according to:
Type of study design (cross-sectional, qualitative, etc.)
Specific HBM constructs assessed (e.g., perceived severity, barriers, benefits, etc.)
Measurement tools/scales used for adherence and HBM constructs.

Subgroup analysis Not applicable.

Sensitivity analysis Not applicable.

Country(ies) involved India.

Keywords Medication adherence; Hypertension; Health belief model.

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