

# Parental problems prevent children taking much-needed asthma medication

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Vienna, Austria: Parental problems and a chaotic home environment could be preventing children from taking their prescribed asthma medication.

A new study, which will be presented today (3 September 2012) at the European Respiratory Society's Annual Congress in Vienna, has shown that children's [asthma symptoms](#) could be worse due to issues in their home.

Non-[adherence](#) to [asthma](#) medication is a common problem, although it is not yet understood what the major barriers are for patients. In this new study, researchers have, for the first time, recorded and analysed a large range of commonly suspected reasons for children taking their asthma medication ineffectively.

As part of an on-going project aiming to assess determinants of adherence to asthma, researchers in the Netherlands electronically measured how well children took their maintenance medication to control their asthma. The project has already produced results showing that children with high adherence rates have well-controlled asthma with fewer symptoms, such as [breathlessness](#) and wheeze.

Despite the testing centre offering patients a comprehensive [asthma care](#) programme, many children still had low adherence to asthma medication. To understand what could be preventing children following a treatment plan, researchers conducted in-depth interviews with the

parents of 20 children; those with the lowest adherence rates and those with the highest. They compared the results of these interviews with the [electronic monitoring](#) rates.

Although all parents in the group who had children with low adherence rates expressed the intention to strictly follow the treatment plan at the outset, they failed to do so during the course of the study. When asked about the barriers preventing their child's adherence to their medication, parents presented a number of [lifestyle factors](#) as the reason behind their child did not follow their treatment plan effectively.

These factors included chaotic family life, parenting problems, financial problems, or parents being too busy to remember to give their child the medicine in a morning. A further frequent problem was that a number of children between the ages of 8 and 12 years were given full responsibility for taking their medication, without parental support, which often resulted in low adherence.

Lead author, Professor Paul Brand, said: "As part of this qualitative study, we have recorded and analysed a number of factors within the home and associated with family lifestyles which could be causing low adherence to [asthma medication](#). It is crucial that healthcare professionals treating children with asthma carefully assess what these potential barriers could be so that appropriate interventions can be put in place to help correct the problems."

David Supple, the parent of an asthma sufferer, said: "Long-standing experience in our household certainly backs this research up. It can be chaotic having four children and when we have given our son, Alex, responsibility over his medication to control his asthma, we have found his adherence slip away. We are conscious of this now and would encourage other parents to keep a close eye on their child's level of adherence and to spot potential barriers before they become a problem."

Provided by European Lung Foundation

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