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**PATIENTS HEALTH INFORMATION AND HYPERTENSION MANAGEMENT  
AT KENYATTA NATIONAL HOSPITAL; KENYA**

**ALEMBI OSANYA AYUB (Bsc.HSM)**

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**A RESEARCH THESIS SUBMITTED IN PARTIAL FULFILMENT OF THE  
REQUIREMENTS FOR THE AWARD OF THE DEGREE OF MASTER OF  
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Bartram, Brendan  
*International and  
comparative education:*




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**DECLARATION**


This Thesis is my original work and has not been presented for a degree in any other University.

Signature.......... Date ..24/5/2023.....

Alembi, Osanya Ayub - (Q141/CTY/PT/25430/2018)

**SUPERVISORS**

We confirm that the work in this thesis was carried out by the candidate under our supervision and has been submitted with our approval as University Supervisors.

Signature.......... Date ..24/05/2023.....

**Dr. Joyce C. Kirui**

Department of Health Management and Informatics

Kenyatta University

Signature.......... Date ..24/05/2023.....

**Dr. Eliphias Gitonga**

Department of Population, Reproductive Health and Community Resource Management

Kenyatta University

**ABSTRACT**

Hypertension is a grave medical disorder that increases the risk of heart ailment, cardiovascular accidents, renal complications and blindness, and it was observed that in 1.13 billion hypertensives, about 1 in 5 have the condition under control, (WHO. 2019). Inadequacy of health information available to patients creates a gap that affects management of their conditions. Broad objective: To determining health information needs for patients on hypertensive management. Specific objectives: Determine treatment, diagnostic and medication adherence health information needs. This was a cross-sectional analytical study, systematically random sampled (N=259), a structured questionnaire and a key informant guide were used among patients and health workers respectively. Chi square tests where a p-value of  $\leq 0.05$  and 95% CI, were conducted. Target population: All hypertensive patients without any co-morbidities. Study population: six hundred (600) ambulatory hypertensive patients aged eighteen (18) years and above, and had attended the clinic for at least six months prior to commencement of this study. Information gaps on normal blood pressure range and self-blood pressure monitoring were observed. Non-pharmacological and lifestyle change (Exercise and diet) uptake were at 6.2% and 12.8% respectively. Lack of knowledge on rationale for treatment and risks of high blood pressure were significantly associated with high blood pressure with  $p=0.003$  and  $p=0.007$  respectively. Medication adherence and diagnostic information was observed to be inadequate, and affected patients were outside normal blood pressure ranges on the clinic day; 88.7% ( $p=0.000$ ) forgot to take medicine the previous day, 71.9% ( $p=0.001$ ) of patients stopped or changed medication dosage without doctor's advice, 79.4% ( $p=0.000$ ) didn't take medication for 2 weeks prior to clinic day. Patients who stopped or skipped using medicine whenever blood pressure was normal (66.7%), and 61.3% ( $p=0.000$ ) of patients forgot to take their medication, and 55.4% ( $p=0.038$ ) sometimes had challenges of remembering to take their medication and were outside normal blood pressure ranges on the day of clinic respectively. Patients not aware of the risks of non-adherence to medication plan, had their blood pressure outside normal range (70.8%,  $p=0.000$ ), 64.8% did not understand the medication instructions, while 64.6% ( $p=0.001$ ) indicated lack of information on the side effects as reason for non-adherence to medication plan. Patients forgetting to take medication 60.9% ( $p=0.000$ ) and medication unavailability 48.7% ( $p=0.0047$ ) were other reasons given for medication non-adherence. Conclusion: Information gaps were present in the following areas: Information on hypertension condition, treatment and risk(s) of high blood pressure and the importance of self-blood pressure monitoring, not only during clinic visits. There was a strong statistically significant association between high blood pressure levels and unavailability of medication and patients having challenges remembering to take your medication. Recommendations: Kenyan Ministry of Health should develop strategies to increase awareness on medication adherence health information through enhanced health education programmes. The management of healthcare facilities should develop strategies to increase awareness of importance of medication adherence through enhanced health education programmes. Ministry of Health, healthcare facilities, ministry departments and all the stakeholders should develop strategies to enhance availability of hypertensive medicines. Further research should be done on information needs for other conditions complicated by high blood pressure.