

Alas Dose: Addressing Medication Dosage Adherence Challenges among Individuals with Modern Lifestyle Demands

Mariah Louise C. Alba¹, Rachele Joy C. Quinto², John Paul DC. Ramos³, Tyrone Jonel L. Sangalang⁴,
Lech Walesa M. Navarra⁵

College of Engineering/Bulacan State University, Philippines

DOI: <https://doi.org/10.47772/IJRISS.2026.100300359>

Received: 12 March 2026; Accepted: 18 March 2026; Published: 09 April 2026

ABSTRACT

Medication non-adherence affects approximately 50% of chronically ill patients globally which contributes to the increased morbidity and healthcare cost. This study observed the impact of modern lifestyle demands and the factors that contribute to the patients' non-adherence, identify the challenges, and from the findings, provide possible solutions and strategies. Using a mixed-methods approach with a parallel convergence design, data were collected from thirty (30) individuals with chronic illnesses that take maintenance medications aged 18 years old and above in the province of Bulacan through an online survey questionnaire. The study identified irregular sleep, condensed daily schedules, competing responsibilities, and work/study commitments as significant barriers that compound to the non-adherence of patients, with half of the individuals constantly forgetting to take their medications on the prescribed times. While the majority of the respondents reported that they understand the importance and significance of their medications and the detrimental effects of non-adherence long-term, yet they weren't consistent and often missed their doses. Digital notification systems, applications, moral support from loved ones and healthcare workers, and pill organizers were reported to be very helpful by the respondents in adhering to their medication schedules with little variability in their responses. The findings demonstrate that dynamic modern lifestyle demands are a significant factor in patients' non-adherence to their medications due to the static nature of medication regimens. Healthcare providers should conduct comprehensive assessments in patients' dynamic daily lifestyle to accommodate a flexible routine to minimize cognitive burden and medication non-adherence. Developing a new supportive technology can also assist with increasing adherence amidst individuals' modern lifestyle demands.

Keywords: medication adherence, modern lifestyle demands, chronic illness, adherence barriers, maintenance medication

INTRODUCTION

Medication adherence remains as a challenge in the field of healthcare, more specifically individuals who are suffering in a chronic condition. Accordingly, there are several factors that may influence medication adherence, one of which is modern lifestyle demands. As such, when an individual who has to take medications on a daily basis fails to adhere with their prescribed treatment, their health conditions may deteriorate, increasing the risk of hospitalization.

As defined by the World Health Organization (WHO), medication adherence is the degree to which a behavior of a person, including taking medications, following a diet, and lifestyle changes, aligns with the health advice administered by physicians (Religioni et al., 2025).

Modern lifestyle demands pose barriers that disrupt the consistency of health routines by prompting unpredictable work schedules and daily commitments that demand an individual's undivided attention (Patel et al., 2025). In addition, having to adapt to a change of routine and responsibilities brought by modern lifestyle demands, interfere with establishing and maintaining consistent treatment routines necessary to foster an

effective condition for chronic disease management (Kim et al., 2025). The aim of this study is to 1) investigate behavioral factors with regards to an individual's medication intake to address the persisting matter of medication non-adherence particularly in patients with chronic conditions, 2) identify the factors that give rise to disruption and lapses in medication intake, and 3) to guide patients, healthcare providers, and future researchers to develop specific measures that will aid in improving health outcomes amidst modern lifestyle demands.

Objectives of the Study:

- To be able to identify the lifestyle factors and daily obligations that contribute to inconsistent medication dosage adherence among individuals with modern lifestyle demands.
- To be able to examine how daily routines, responsibilities, and time constraints affects individuals' ability to follow prescribed medication schedules.
- To be able to analyze the challenges that individuals commonly encounter in remembering, managing, and following prescribed medication dosages amidst busy and fast-paced routines.
- To be able to evaluate the strategies or solutions that can help improve medication dosage adherence among individuals with modern lifestyle demands.

REVIEW OF RELATED LITERATURE

Relevant Theories

Theory of Planned Behavior (Lin et al., 2016): the theory explains how a person's behavior is strongly influenced by their intention to do certain actions. It suggests that the person's intention is controlled by 3 things: attitude toward behavior – this is the evaluation of the individual to into doing the action by first assessing if the said behavior will be positive or negative; Subjective Norms – similar to peer pressure, it the understanding of norms and how individual are force to blend in with the majority therefore copy what others tend to do; and Perceived Behavioral Control – it is the perception of a patient on how difficult or easy it is to follow certain behavioral pattern. The theory provides understanding on how patients are more willing to take their medication if they really intend to follow a prescription and if the patient views it as important to them, they are supported by others, and if they believe they can manage to stick with the given routine. It also highlights the implication that the intentionality of a person controls their action. With that statement, this study makes use of this theory to discuss how, because of a lack of time or resources in a modern lifestyle, patients lose their sense of control over their treatment. It is important to recognize this element, as this study is trying to understand the variable that affects the ability of an individual to adhere to prescription.

Related Literature

Understanding Medication Adherence Challenges (Sharma et al., 2025). People have a time taking their medicine as they should because of things like being very busy forgetting, not having a routine and not really understanding how to take the dose. People with a lot of things to do every day have trouble following the rules for taking their medicine. Doctors and nurses can help by teaching people about their medicine and giving them tips to remember to take it.

This literature suggests that the demands of modern life can make it hard for individuals to take their medications consistently and correctly. It puts the emphasis on the necessity of strategies, which would assist patients in keeping their medication schedules despite the stressful schedules. The knowledge of medication adherence issues is relevant as it highlights the necessity to find the solutions that can fit into the everyday life of a person. In general, the idea of comprehending medication adherence issues is aimed at simplifying the process on the part of individuals to comply with their treatment programs, notwithstanding their numerous duties and obligations.

Medication Adherence: Taking Your Meds as Directed (American Heart Association, 2024). This article talks about how important it is to take medication as prescribed to manage long-term health conditions and avoid serious complications. A lot of people with diseases do not follow their medication instructions. In fact, more than half of them do not. This can lead to outcomes like heart disease, stroke and kidney failure. Some common reasons people do not take their medication as directed include forgetting to take their medicine, not believing the medication will work, being afraid of side effects, and financial constraints.

In this article, it discusses the importance of taking medication as utilization to treat chronic illnesses and to prevent severe complications. A lot of people with diseases do not adhere to their medication. In fact, more than half of them do not. This can result in such outcomes as heart disease, stroke, and kidney failure. The most frequent explanations of why people fail to take their medication as prescribed include failing to take their medicine, not thinking the drug will be effective, being afraid of side effects, and financial limitations.

According to the article, speaking to a doctor and reminders/support tools can assist patients to take medication as prescribed. It reveals that failing to take medication as prescribed is a health issue with severe outcomes. It also shows the necessity to determine what prevents busy people from taking their medication on a regular basis.

Understanding Treatment Adherence in Chronic Diseases: Challenges, Consequences and Strategies for Improvement (Patel et al. 2025). This article discusses the difficulty of taking medication as prescribed by people with chronic diseases. The literature concludes that the failure to take treatments appropriately results in health outcomes such as the disease getting worse, individuals feeling ill, increase in hospitalization and even dying. Patient misconceptions, lack of understanding with medical professionals, forgetfulness, and social or economic factors are some of the reasons why people fail to take their treatments as required. Another point that is emphasized by the article is the necessity to teach patients more, to enhance the communication between physicians and patients, and to design strategies to assist every individual in taking his/her medication.

Related Studies

Adherence to medication is a long-known key to success in the attainment of positive health outcomes. Venditti et al. (2023) claim that appropriate compliance with medication regimes is critical in the prevention of complications and providing efficiency in the treatment of chronic diseases.

Medication non-adherence is common in spite of its significance. Nelson et al. (2024) identified medication non-adherence as an international issue where health is in question. The study emphasized that this is because non-adherence is usually not recognized in clinical practice, although it is something of great importance and has an effect on clinical outcomes.

Medication adherence is a measure of the degree at which the patient adheres to treatment, as well as instructions on how medications should be taken, the dose, and the frequency (Aremu et al., 2022). Adherence is however, subject to a number of psychological and behavioral factors. According to Bilondi et al. (2022), cognitive and perception aspects, including emotions, perceptions of risk, and individual attitudes to health practices, can impact on patient's adherence to treatment plans.

Besides the psychological aspects, there are lifestyle-based challenges that are also of a significant role in medication adherence. Mostafavi et al. (2021) have discovered that occupational stressors and work schedules under severe conditions may greatly lower the capacity of patients to receive medications regularly. The respondents in the research indicated that extended working hours and the excessive workloads tended to forget or postpone the medication intake.

These results show how the needs of modern lifestyle can disrupt adherence to medications especially among those who need to combine work, accountabilities, self-responsibilities and health management. Such challenges underline the necessity of working out strategies that help to keep the medication routines in line with day-to-day activities and lifestyle patterns of individuals.

METHODOLOGY

Research Design

The study utilized a mixed-method approach to integrate both quantitative and qualitative research strategies. Mixed-method research is an approach that integrates both qualitative and quantitative methods within a single study to provide a more comprehensive understanding of complex research problems by combining numerical data with in-depth contextual insights (Taherdoost, 2022). Specifically, a convergent parallel design was used to conduct the study. A convergent parallel design involves the concurrent collection of qualitative and quantitative data, which are analyzed independently and then integrated to triangulate and compare findings and provide a more comprehensive and validated understanding of the research problem (Dawadi et al., 2021).

Participants and Sampling Technique

The population of the study consists of individuals above the age of 18 years old with chronic illnesses or taking any maintenance medications in the province of Bulacan. The study utilized a purposive sampling technique to select appropriate respondents relevant to the objectives of the study. Purposive sampling is a commonly used non-probability technique that intentionally selects criteria for the sample based on their relevance to the research's aim (Tajik et. al., 2024). The selected sample size was 30 respondents as it is methodologically sound for attaining the necessary data for the objectives of the study. In accordance with the Central Limit Theorem, a sample size of $n \geq 30$ is considered sufficient for the results to be statistically valid and for the theorem to hold (Islam, 2018).

Research Instrument

The study utilized a structured questionnaire as its primary research instrument, specifically designed to address the objectives and to identify the factors contributing to the problem observed within the population. The questionnaire consists of open-ended and close-ended questions, allowing flexibility in the structure and flow of the instrument.

Data Gathering Procedure

Prior to the data collection phase, the questionnaire was validated by professionals in the field. The data were collected using Google Forms, an online questionnaire survey, consisting of both quantitative and open-ended questions. The validated questionnaire survey was disseminated through social media platforms such as Facebook to reach the target respondents.

Data Analysis Procedure

The data collected from the sample respondents was carefully organized by the researchers. For the quantitative data, responses from the closed-ended questions and Likert-scale items were encoded and tabulated. Frequency and percentage were used for analysis. Furthermore, to strengthen the data, the researchers utilized standard deviation. This enables the researcher to analyze the correlation of each variable and understand their overall value to the mean. For the qualitative data, responses from the open-ended questions were analyzed using thematic analysis. The data gathered were processed and analyzed and the results were used for interpretation and by incorporating all the information available it will be used to provide a more comprehensive understanding in the field of study.

Ethical Considerations

Prior to data collection, the researchers informed the respondents regarding their rights to their own data, including data confidentiality, a right to withdraw, and a right to request for total deletion of all collected personal data. The respondents were also briefed that their information shall only be used for academic and research purposes only.

RESULTS AND DISCUSSION

Table 1. Medication Adherence Behaviors Results and Interpretation

Medication Adherence Behaviors								
Item	Respondents					Weighted Mean	Standard Deviation	Verbal Interpretation
	5	4	3	2	1			
I forget to take my medication at the prescribed time.	4	11	8	5	2	3.33	1.10	Neutral with Moderate Variability
I often miss a dose when my daily routine changes (e.g., overtime, events, and travel).	5	16	5	4	0	3.73	0.89	Agree with Minor Variability
I tend to miss doses during weekends or holidays.	5	11	4	9	1	3.33	1.16	Neutral with Moderate Variability
I delay taking my medication because I am busy with work or personal tasks.	6	15	4	5	0	3.73	0.96	Agree with Minor Variability
I have difficulty following my medication schedule consistently.	3	12	5	9	1	3.23	1.08	Neutral with Moderate Variability

The table above shows the behaviors of the respondents with regards to their medication adherence. With a weighted mean of 3.73, on average, the respondents agreed that they often miss their medication dosage when changes to their daily routines occur and they tend to delay their medication intake due to heavy workloads and personal responsibilities. The items “I forget to take my medication at the prescribed time” and “I tend to miss doses during weekends or holidays” received a weighted mean of 3.33, reflecting a neutral response from the respondents. Similarly, with a weighted mean of 3.23, the responses demonstrated neutrality regarding the difficulty that comes with following medication schedules consistently.

Table 2. Lifestyle Related Factors Affecting Adherence Results and Interpretation

Lifestyle-Related Factors Affecting Adherence								
Item	Respondents					Weighted Mean	Standard Deviation	Verbal Interpretation
	5	4	3	2	1			
My busy schedule makes it difficult to take medication on time.	8	12	5	3	2	3.70	1.16	Agree with Moderate Variability
Irregular sleep or mean schedules affect my medication intake.	8	13	1	7	1	3.67	1.19	Agree with Moderate Variability
Stress and fatigue affect my ability to remember my medication.	11	10	4	4	1	3.87	1.15	Agree with Moderate Variability
Completing responsibilities cause me to prioritize tasks over my medication.	4	17	3	5	1	3.60	1.02	Agree with Moderate Variability
Managing multiple responsibilities makes medication adherence challenging.	8	12	7	3	9	3.83	0.93	Agree with Minor Variability
Being away from home (e.g., commuting, traveling) leads to missed doses.	8	15	5	1	1	3.93	0.94	Agree with Minor Variability

The table above shows the lifestyle-related factors that contribute to the respondents’ medication adherence. The item “Being away from home leads to missed doses” garnered the highest weighted mean of 3.93, indicating that lapses on medication adherence tend to occur when an individual is away from the comfort of their homes as they are outside their usual environment and do not have access to convenient places where they can store and take their medications. Subsequently, a weighted mean of 3.87 shows that the respondents agreed that stress and fatigue are among the factors that contribute to their ability to keep their medication regimen in mind. As for busy schedules, a weighted mean of 3.7 indicates that the respondents find it difficult to take their medication in time when their schedule and workloads are demanding. A weighted mean of 3.67 reflects that disruption in

daily routines affects medication intake including irregular sleep schedules and meals. Additionally, with a weighted mean of 3.6, the item “Managing multiple responsibilities makes medication adherence challenging” shows that when people are juggling multiple tasks, their attention and time may be divided and in turn, taking medication will not be their top priority.

Table 3. Attitude and Perceptions Toward Medication Results and Interpretation

Attitude and Perceptions Toward Medications									
Item	Respondents					Weighted Mean	Standard Deviation	Verbal Interpretation	
	5	4	3	2	1				
I believe missing an occasional dose will not affect my health	5	5	6	10	4	2.90	1.32	Neutral with Moderate Variability	
I feel confident in managing my medication schedule	5	11	11	3	0	3.60	0.89	Agree with Minor Variability	
I believe consistent medication intake is essential for my health.	22	5	3	0	0	4.63	0.67	Strongly Agree with Minor Variability	
I feel overwhelmed by my medication routine.	1	10	8	8	3	2.93	1.08	Neutral with Moderate Variability	

The table above shows the attitude and perceptions of the respondents toward medications. The average of the participants responded that they strongly agree with the item “I believe consistent medication intake is essential for my health” with a mean of 4.63. Furthermore, a weighted mean of 3.6 reflects that the respondents feel confident in their ability to manage their medication schedule. The items “I feel overwhelmed by my medication routine” and “I believe missing an occasional dose will not affect my health” received weighted means of 2.93 and 2.9 respectively, indicating an impartial response among the participants. This points out that while the respondents are aware of how consistent medication intake is vital to their health and despite feeling capable of managing their schedule, they may still experience uncertainty when it comes to encountering minor miscues in taking their medications.

Table 4. Strategies and Possible Solutions Results and Interpretation

Strategies and Possible Solutions									
Item	Respondents					Weighted Mean	Standard Deviation	Verbal Interpretation	
	5	4	3	2	1				
Medication reminder applications are helpful to me in taking my medications.	10	13	5	1	1	4.00	0.98	Agree with Minor Variability	
Support from family members or caregivers is helpful to me in taking my medications.	8	15	6	0	1	3.97	0.89	Agree with Minor Variability	
Mobile phone alarms or reminders are helpful to me in taking my medications.	10	17	3	0	0	4.23	0.63	Strongly Agree with Minor Variability	
Simplifies medication schedules (e.g., fewer daily doses) are helpful to me in taking my medications on time.	13	11	4	2	0	4.17	0.91	Agree with Minor Variability	
Pill organizers or labeled containers assist with making sure I take my medications.	11	13	5	1	0	4.13	0.82	Agree with Minor Variability	

The table above presents the possible solutions and strategies that could assist in the patient’s adherence to their medication schedules. All of the known strategies provided received a positive remark wherein the respondents affirm that they were effective and helpful for assisting with keeping their medication intake regular and on schedules with minimal variability between responses, with mobile alarms and reminders were presented as the

most favored among most of the respondents with a weighted mean of 4.23. This finding indicates that these strategies contribute to the patients' adherence by either constantly reminding them through their digital devices or structured and simplified organizers and schedules.

SUMMARY OF FINDINGS

This study examined the medication dosage adherence of individuals with chronic illnesses who experience the demands of modern lifestyles. Particularly, the study aimed to (1) determine lifestyle issues and day-to-day duties that lead to inconsistent medication adherence, (2) determine how routines and time constraints affect individuals' ability to follow prescribed medication schedules, (3) recognize typical difficulties in the treatment of medication intake in busy schedules, and (4) identify the measures that could improve medication adherence.

The researchers employed a mixed-method research design, which combines both quantitative and qualitative approaches. Thirty (30) respondents aged eighteen (18) and above who were either diagnosed to have chronic illnesses or were taking maintenance in the province of Bulacan were sampled. Respondents were selected through purposive sampling. A structured questionnaire was used to collect data, conducted using Google forms and distributed over social media platforms.

Particularly, as the analysis of the received data revealed, the following results were found:

Medication Adherence Behaviors

The findings indicate a significant number of respondents had gone through difficulties in adhering to their medication regimes regularly. Approximately half of the respondents claimed to forget to take the medication at the prescribed time. Also, 70 percent of the respondents reported missing medication doses because of the hectic schedules and daily responsibilities. Also, 53.4% reported missing their medications even during weekends, holidays, or days off. This implies that medication commitment issues still remain in spite of employment or school work.

These results are consistent with the existing literature on the American Heart Association (2024), which reported that over half of the individuals with chronic diseases do not adhere to proper instructions on medication. In the same way, studies by Sharma et al. (2025) and Patel et al. (2025) have investigated it and report that forgetfulness and demanding day-to-day schedules as significant contributors to medication non-adherence.

Lifestyle-Related Factors Affecting Medication Adherence

The results indicated that various lifestyle-related issues have an effect in medication adherence. Approximately 70% of the respondents indicated they had difficulties in following medication because of sleeping irregularities, stress, exhaustion, and conflicts between personal duties and business-related activities.

In addition, 76.67% of the respondents reported that absence or being away from home made it less convenient to be able to take medications in time. This implies that the environment changing and erratic schedules also lead to medication non-adherence. These findings also correlate with the study conducted by Mostafavi et al. (2021), which found that occupational stress or pressures and work overloads as elements that restrict the ability of people to follow their medication regimen.

In general, the results show that modern lifestyle demands, such as being busy, multiple responsibilities, various commitments, unpredictable schedules and outside interferences, have a major effect on the capacity of individuals to adhere to medications consistently.

Attitudes and Perceptions Toward Medication

Another aspect that the study also explored is the perceptions and attitudes of the respondents about medical adherence. The findings indicate that the majority of the respondents were aware of the value of taking medications in order to keep them healthy. Approximately 46% admitted that nonadherence to medication doses might result in poor health.

Moreover, 53.37% of the respondents were confident about their capability to be able to control their medications in spite of their hectic schedules. However, the findings also showed a difference between perception and behavior, with lots of respondents still reporting they missed the doses, either because of forgetfulness, or because of schedule, or change of routine.

This result is in line with the Theory of Planned Behavior, according to which indicates that the individuals' perceived control in behavior affects the intention to engage or perform in a behavior. Although they realize the importance of taking medication and they believe they can manage their schedules, actual behaviors of respondents do not always reflect their intentions.

Strategies and Possible Solutions for Improving Medication Adherence

Strategies that respondents feel would assist in enhancing medical adherence were also identified in the study. Most of the participants concurred that digital reminder, such as applications, alarms, pill organizers, as well as simplified medication schedules, emotional support of family members or close people are effective in reminding the individual and keeping a check on their medication intake.

These measures emphasize the possible importance of the technological tools and supportive conditions in the treatment of medication adherence challenges among people with busy daily schedules.

CONCLUSION

Based on the findings of the study, the following were concluded:

1. The demand of modern lifestyle includes the following variables: work, responsibility, personal commitments, and busy schedules. Those enlisted variables are the contributing factors in why individuals with chronic illness commit mediational non-adherence.
2. Based on the information, it is seen that individuals that have no work commitment during times like vacation, weekend, and holidays had still failed to comply with their medical prescriptions. This suggest that medication adherence challenges do not only come from work or academic responsibilities.
3. Other factors in the lifestyle of an individual that contributed to to medication non-adherence are irregular sleep schedules, stress, fatigue, and multiple responsibilities. Those factors made it challenging for an individual to follow a certain routine.
4. It is observed that most individuals recognize the importance of following medical prescription and they understand its impact on their overall health. However, their level of understanding does not reflect their day-to-day choices when it comes to following their regimen.
5. Many individuals suggested that they are confident in managing their medication prescription and stay consistent with their routine, yet barriers such as forgetfulness, routine disruptions, and time constraints still lead to missed doses which in long term can negatively influence their health.
6. It is recognized that tools such as reminder applications, alarm notifications, pill organizers, and emotional support systems are among the best strategies that individuals implore therefore improving medication adherence among groups of people.

RECOMMENDATION

Upon arriving at the findings and conclusions of the study, the following recommendations are proposed:

1. Conducting a thorough lifestyle evaluation should also be a part of prescribing medications as the healthcare provider would get to know the daily routine of the patients and would formulate an individualized medication management plan.
2. The regimens the patients take should be made as easy to understand as possible and made flexible to allow patients to have less cognitive burden and better adherence to the rules.
3. Healthcare professionals ought to promote the use of digital reminder apps, alarm clocks, or medications monitoring solutions by patients to maintain medication compliance.

4. Developers and healthcare institutions should promote the development of adaptive and context-aware digital health technologies that can be integrated in people's lifestyles to remind them about medication use.
5. Patients should be encouraged to use medication adherence with the help of family members and support systems, which should remind and encourage and support patients.
6. Researchers in the future are recommended to perform longitudinal studies on patterns of medication adherence through time to obtain a better idea regarding the change of behavior and long-term adherence strategies.

REFERENCES

1. Aremu, T. O., Oluwole, O. E., Adeyinka, K. O., & Schommer, J. C. (2022). Medication adherence and compliance: Recipe for improving patient outcomes. *Pharmacy*, 10(5), 1–5. <https://doi.org/10.3390/pharmacy10050106>
2. Bilondi, S. S., Noghabi, A. D., & Aalami, H. (2022). The relationship between illness perception and medication adherence in patients with diabetes mellitus type II: illness perception and medication adherence. *Journal of Preventive Medicine and Hygiene*, 62(4), E966–E971. <https://doi.org/10.15167/2421-4248/jpmh2021.62.4.2277>
3. Kim, S. K., Hwang, H. R., Byun, K. S., Park, S. Y., Moon, S. H., & Lee, H. (2025). Development of a Digital Intervention Incorporating Habit Formation Techniques for Medication Adherence. *INQUIRY the Journal of Health Care Organization Provision and Financing*, 62. <https://doi.org/10.1177/00469580251343785>
4. Lin, C.-Y., Updegraff, J. A., & Pakpour, A. H. (2016). The relationship between the theory of planned behavior and medication adherence in patients with epilepsy. *Epilepsy & Behavior*, 61, 231–236. <https://doi.org/10.1016/j.yebeh.2016.05.030>
5. Medication Adherence: Taking Your Meds as Directed. (2016, September 2). *Www.heart.org*; American Heart Association. <https://www.heart.org/en/health-topics/consumer-healthcare/medication-information/medication-adherence-taking-your-meds-as-directed?>
6. Nadal, C., Sas, C., & Doherty, G. (2020). Technology Acceptance in Mobile Health: Scoping Review of Definitions, Models, and Measurement. *Journal of Medical Internet Research*, 22(7), e17256. <https://doi.org/10.2196/17256>
7. Nelson, A. J., Pagidipati, N. J., & Bosworth, H. B. (2024). Improving medication adherence in cardiovascular disease. *Nat Rev Cardiol*, 21, 417–429. <https://doi.org/10.1038/s41569-023-00972-1>
8. Patel, S., Huang, M., & Miliara, S. (2025). Understanding Treatment Adherence in Chronic Diseases: Challenges, Consequences, and Strategies for Improvement. *Journal of Clinical Medicine*, 14(17), 6034–6034. <https://doi.org/10.3390/jcm14176034>
9. Religioni, U., Barrios-Rodríguez, R., Requena, P., Borowska, M., & Ostrowski, J. (2025). Enhancing therapy adherence: Impact on clinical outcomes, healthcare costs, and patient quality of life. *Medicina*, 61(1), 153–153. <https://doi.org/10.3390/medicina61010153>
10. Sharma, A., Sharma, S., Sunita, Lakshmi, P., & Sharma, A. (2025). Understanding Medication Adherence Challenges. *Bentham Science Publisher*. <https://doi.org/10.2174/9789815324457125010004>
11. Venditti, V., Blevé, E., Morano, S., & Filardi, T. (2023). Gender-Related Factors in Medication Adherence for Metabolic and Cardiovascular Health. *Metabolites*, 13(10), 1087. <https://doi.org/10.3390/metabo13101087>