P-155 - PERCEIVED BARRIERS RELATED TO PKU TREATMENT IN BRAZIL

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INTRODUCTION: According to studies with phenylketonuria (PKU), Brazilian population metabolic control presented unsatisfactory indexes since childhood. Studies with similar chronic conditions had showed that individual decisions are influenced by perceived barriers, and it can impact in adherence to treatment. OBJECTIVE: To inventory perceived barriers to PKU treatment and to evaluate if they are associated with adherence. METHODS: Twenty three patients with PKU (M 18.0; SD 7.3; 6 – 34 y. o.) with Classical (n=10), Mild (n=12) and Undefined type (n=1) and 11 caregivers participated. 69% were early-treated. An inventory developed to this study was used to assess perceived barriers to treatment which was answered by patients (13 years or older) and caregivers (of patients 6 to 17 years). This study was approved by the Research Ethics Review Committee of the University Hospital. Written consent was obtained from participants. RESULTS: Considering blood Phenylalanine (Phe) collected in 12 months prior to the study, 54.5% of patients showed a median value above recommended one. An association was found between age and Phe level (rs = 0.47, p = 0.027). However when considering the perceived barriers as a control variable it is observed that the correlation becomes statistically non-significant (rs = 0.30, p = 0.187). Adult patients reported a higher number of perceived barriers compared to the other participants (i.e. adolescents and parent proxy-report of their children) (U = 20.500; p = 0.005). In contrast, the number of barriers did not differ according to patients’ gender, caregiver’s level of education, IQ < 80 / IQ ≥ 80 classification of patients, PKU type, nor early or late treated PKU status. Phe level was also associated with the frequency of perceived barriers (rs = 0.50, p = 0.016). CONCLUSION: These results suggest that adults are in higher risk to perceived barriers related to the dietary treatment of PKU. Perceived barriers are related to worst control of Phe levels, which corroborate with the hypothesis of association between barriers and nonadherence. These findings support the need for further research about barriers perceived by PKU patients. To tailor interventions to decrease these barriers may be beneficial to PKU patients.