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PREDICTORS OF LIFESTYLE MODIFICATION ADHERENCE AMONG HYPERTENSIVE PATIENTS ATTENDING TWO TERTIARY HYPERTENSION CLINICS IN NIGERIA

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Background: Lifestyle modification is an integral component of hypertension management. The predictors of adherence to lifestyle modification prescription varies widely and remain poorly characterised in sub-Saharan African populations. This study evaluated independent predictors of lifestyle modification adherence among hypertensive patients attending two tertiary hypertension clinics in Ibadan, Nigeria.

Methodology We conducted a cross-sectional study among 225 adults with hypertension attending two Nigerian tertiary hypertension clinics. A composite Lifestyle Modification Adherence Score (0–8) was derived from eight guideline-recommended behaviours and categorised as good (6–8) or moderate/poor (0–5). Sociodemographic and clinical characteristics were compared by adherence status. Univariable and multivariable logistic regression identified independent predictors of good adherence. P value was set at <0.05.

Results Among 225 participants (mean age 65.2±11.1 years; 73.5% female), 177 (78.7%) demonstrated good lifestyle modification adherence, while 48 (21.3%) had moderate adherence; none had poor adherence. Most participants had received lifestyle counselling (97.3%). Monthly income >?100,000 was the only variable independently associated with good adherence in both univariable (OR 6.63, 95% CI 1.89–23.31; p=0.003) and multivariable analyses (adjusted OR 6.79, 95% CI 1.82–25.38; p=0.004). Age, sex, educational attainment, hypertension duration, frequent stress, and lifestyle counselling were not independently associated with adherence.

Conclusion Higher income independently predicted better lifestyle modification adherence, highlighting socioeconomic disparities requiring targeted behavioural support among Nigerian hypertensive patients.

Keywords: Hypertension, Life Style, Patient Compliance, Health Behavior, Risk Factors, Nigeria