

## **The Adherence in Chronic Diseases Scale (ACDS)**

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Below is a set of 7 questions with answers. Please rate, which response best reflects your behaviour, your situation and your opinions. Please provide honest answers by checking the appropriate one with X.

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1. Do you always remember to take all your medications according to your doctor's instructions?
  - a) Always
  - b) Almost always
  - c) Sometimes
  - d) Hardly ever
  - e) Never
  
2. Do you happen to change the dosing of your medications without prior consultation with your doctor?
  - a) Never
  - b) Only occasionally
  - c) Sometimes
  - d) Frequently
  - e) I do not adhere to my doctor's recommendations at all
  
3. Do you adjust the dosing of your medications according to how you feel?
  - a) No, I strictly follow the prescribed dosing, no matter how I feel
  - b) Yes, I reduce the dosage of some medications when I feel good
  - c) Yes, I skip doses of some medications when I feel good
  - d) Yes, I temporarily discontinue some medications when I feel good
  - e) Yes, I discontinue all medications when I feel good
  
4. On the appearance of medication-related side effects (e.g. stomach pain, liver pain, rash, lack of appetite, oedema):
  - a) I seek medical attention instantly
  - b) I reduce the dosage of the medication and attempt to expedite the elective appointment with my doctor
  - c) I discontinue the medication and attempt to expedite the elective appointment with my doctor
  - d) I discontinue the medication and wait for the next elective appointment with my doctor
  - e) I discontinue all my medications and wait for the next elective appointment with my doctor
  
5. Do you find all your medications necessary for your health?
  - a) Yes, I do
  - b) I find most of my medications to be beneficial for my health
  - c) I find only some of my medications to be beneficial for my health
  - d) I find some of my medications to be beneficial for my health, while the others to be harmful for me
  - e) I find the majority of my long-term medications to be harmful for me

6. Does your doctor inquire about medication-related problems that you might possibly experience?
- a) Yes, on every appointment
  - b) Yes, he/she usually does
  - c) Yes, but only sometimes
  - d) Yes, but only occasionally
  - e) No, never
7. Do you tell truth when asked by your doctor about medication-related problems?
- a) Yes, always
  - b) Almost always
  - c) I try to be honest, but sometimes it is hard to admit to non-compliance with doctor's recommendations
  - d) Sometimes yes, another time no
  - e) No, I don't. I find it my own private business

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**Score**

A — 4  
B — 3  
C — 2  
D — 1  
E — 0

TOTAL SCORE : .....

Total score	Centile standards
<20	Low adherence
21-26	Medium adherence
≥27	High adherence

### **The ACDS assumptions**

Only high adherence according to the ACDC reflects good execution of the therapeutic plan with regard to pharmacological treatment.

### **Description and application**

The ACDS is a 7-item questionnaire. Each question is associated with 5 predefined propositions of answers. The questions are related to patients' behaviour directly determining adherence (items 1-5) or to situations and opinions which may influence adherence (items 6-7). The ACDS is dedicated to adherence evaluation in adult patients treated due to chronic diseases. This scale is supposed to reflect real-life adherence to pharmacological treatment and explain mechanisms determining patients adherence. The results of this scale may help to undertake adequate actions aimed to improve adherence to medication in clinical practice.