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CROSS-CULTURAL VALIDATION AND
PSYCHOMETRIC EVALUATION OF THE SELFMEDICATION ASSESSMENT TOOL (SMAT)
FOR ASSESSING AND OPTIMIZING
MEDICATION THERAPY MANAGEMENT OF
OLDER PEOPLE

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ABSTRACT

Background, rationale and objectives: The assessment of medication management ability in the elderly can be performed using specific tools, such as the Self-Medication Assessment Tool, which considers real and simulated regimens. The objective of this study was to perform the linguistic and cultural adaptation of the Self-Medication Assessment Tool to European Portuguese and determine its psychometric properties.

Methods: The adaptation commenced with the translation/back translation cycle completed by 4 independent bilingual experts. The cultural component was accomplished through an external expert meeting and a longitudinal screening of concepts and construct. The pilot study was carried out in a sample of 150 Portuguese community-dwelling elders. Descriptive data, correlations, internal reliability, response consistency and exploratory factor analysis was conducted using SPSS Statistics (v22).

Results: The pilot study was carried out in a sample of 150 community-dwelling elders: 112 (74.7%) participants were women; mean age was 74.73 ± 6.43 years. The Self-Medication Assessment Tool (Portuguese version) standard regimen (simulated medication regimen) mean scores were 20.92 ± 6.83 in functional ability and 38.75 ± 5.92 in cognitive ability; the real regimen (medication taken by the elderly) mean scores were 83.74 ± 15.86 in medication recall, 96.96 ± 11.39 in adherence self-report and 4.82 ± 10.1 in intentional non-adherence. Cronbach's α were 0.87 (functional ability), 0.84 (cognitive ability), 0.57 (medication recall), 0.94 (adherence self-report) and 0.79 (intentional non-adherence). The response consistency between test and re-test was verified.

Conclusions: We have developed the European Portuguese version of the Self-Medication Assessment Tool with acceptable psychometric properties which can now be employed in the study of the elderly in clinical and research contexts.

KEYWORDS

Aged, complex medication regimens, coping strategies, cross-validation, geriatric assessment, medication adherence, medication therapy management, person-centered healthcare, polypharmacy,

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