

## **Abstrac**

**Background and purpose:** Cardiovascular diseases are one of the most common chronic diseases and one of the causes of disability in affected people. These patients are subject to recurrence of the disease and development of disability. On the other hand, adherence to treatment is one of the most effective ways to prevent complications and progression of cardiovascular diseases, which are affected by various factors. Therefore, this study was conducted with the aim of determining the relationship between social adequacy and treatment adherence in discharged cardiovascular patients.

**Research method:** In this descriptive correlational study, 270 cardiovascular patients discharged from Imam Khomeini (RA) Ardabil Medical Education Center in 1400 were selected by stratified random method. The data collection tools included the social adequacy questionnaires of Flenner and compliance with Madanlo's treatment in addition to the demographic questionnaires which were completed by the samples. Data were analyzed using SPSS software and descriptive (frequency, mean, percentage and standard deviation) and inferential (correlation) statistical methods.

**Results:** The social adequacy variable had a significant relationship with treatment adherence ( $R=0.677$ ,  $P<0.05$ ). Also, between dimensions of cognitive skills ( $R=0.370$ ,  $P<0.05$ ), behavioral ( $R=0.663$ ,  $P<0.05$ ), emotional adequacy ( $R=0.05$ ,  $P<0.05$ ) and attitudes Motivational ( $P<0.05$ ,  $R=0.449$ ) significant relationship was observed with adherence to treatment. The results showed that the variables of education, blood lipids, place of residence and drug control by the family had a significant relationship with social adequacy and adherence to treatment.

**Conclusion:** The results showed that there is a significant relationship between social adequacy and its dimensions with compliance with treatment. Based on this, it is suggested that the social adequacy of these patients be evaluated at the time of discharge and according to the needs of the patients, training and necessary measures to empower and increase Their social sufficiency should be implemented so that they have higher treatment compliance.

**Key words:** social adequacy, adherence to treatment, cardiovascular disease