IIHMR UNIVERSITY, JAIPUR — MBA (HEALTHCARE ANALYTICS)

Patient Compliance and Satisfaction in Integrative Ayurvedic Dermatology Care

A Mixed-Method Analysis of Patient-Generated Feedback at Kayakalp Global

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ROADMAP

What We'll Cover

Background & Context

Adherence theory and Kayakalp Global's clinical model

Literature Review

WHO adherence model, dermatology adherence evidence, review mining

Research Objectives

What this study set out to answer

Methodology

3,821 GMB reviews, coded into 7 themes

Key Results

Satisfaction levels and the drivers behind them

Recommendations

Five evidence-based actions for Kayakalp Global

BACKGROUND

Why Compliance Is the Real Challenge

Treatment adherence — sustaining a prescribed regimen over time — is shaped by five interacting factors (WHO, 2003): the patient, the condition, the therapy, the healthcare system, and socioeconomic context.

~80% of Indian patients report lifetime use of Ayurvedic therapy alongside or instead of allopathy

Vitiligo & psoriasis are slow to respond visible, stigmatising, relapsing conditions where results take months

Compliance becomes organisational in a multi-city, partly remote-delivery provider — not just clinical

Kayakalp Global

- Founded 1992 by Dr. Shailender & Dr. Suman Dhawan
- Integrative Ayurveda + Allopathy dermatology provider
- Clinical focus: vitiligo, psoriasis, fungal skin conditions
- Multi-city: Delhi-NCR, Lucknow, Mumbai, Indore, Pune, Jaipur & more
- 30,000+ vitiligo and 10,000+ psoriasis patients treated to date
- Hybrid in-person + telemedicine patient engagement model

LITERATURE REVIEW

Grounded in Three Bodies of Evidence

Adherence Theory

- WHO's 5-dimension model of adherence (2003)
- No single factor predicts adherence — healthcare-system continuity matters most (Kardas et al., 2013)

Dermatology-Specific Evidence

- Topical psoriasis adherence as low as 35–72% (Devaux et al., 2012)
- Long-term adherence “abysmal” within weeks (Alinia et al., 2017)
- Vitiligo's slow repigmentation linked to adherence decline (Picardo et al., 2022)

Review Mining as a Method

- Google Maps review sentiment validated for primary care
- Online review text explains 85%+ of variance in service quality

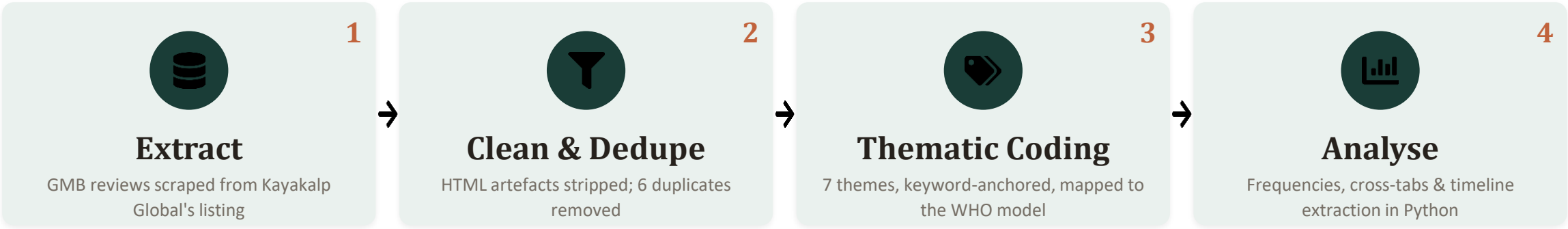
RESEARCH OBJECTIVES

Primary Objective

To assess satisfaction and identify the thematic drivers of treatment compliance and non-compliance for Kayakalp Global.

- **Quantify satisfaction** via star ratings, benchmarked against reported improvement
- **Build a coding framework** grounded in the WHO model, for compliance-relevant themes
- **Compare positive vs. negative reviews** to isolate specific service failures
- **Benchmark against the literature** on adherence in vitiligo, psoriasis & integrative care
- **Recommend evidence-based actions** to strengthen compliance and satisfaction

METHODOLOGY



From Raw Export to Analysis-Ready Corpus

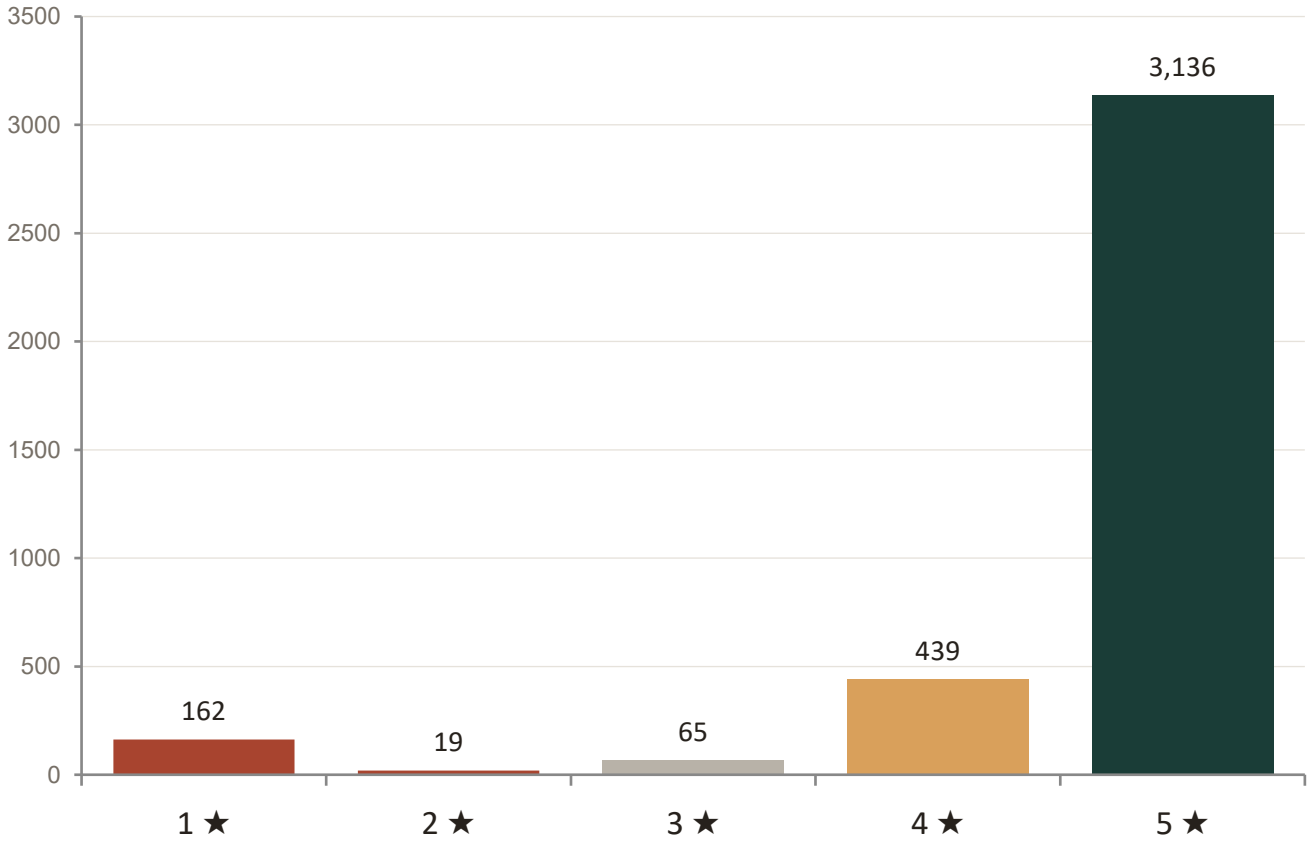
3,827
raw reviews extracted

3,821
after deduplication

3,094
include written text (81%)

RESULTS — PART 1

Patients Are Overwhelmingly Satisfied



Star Rating Distribution (N = 3,821)

4.68 / 5

Average star rating across all reviews

93.6%

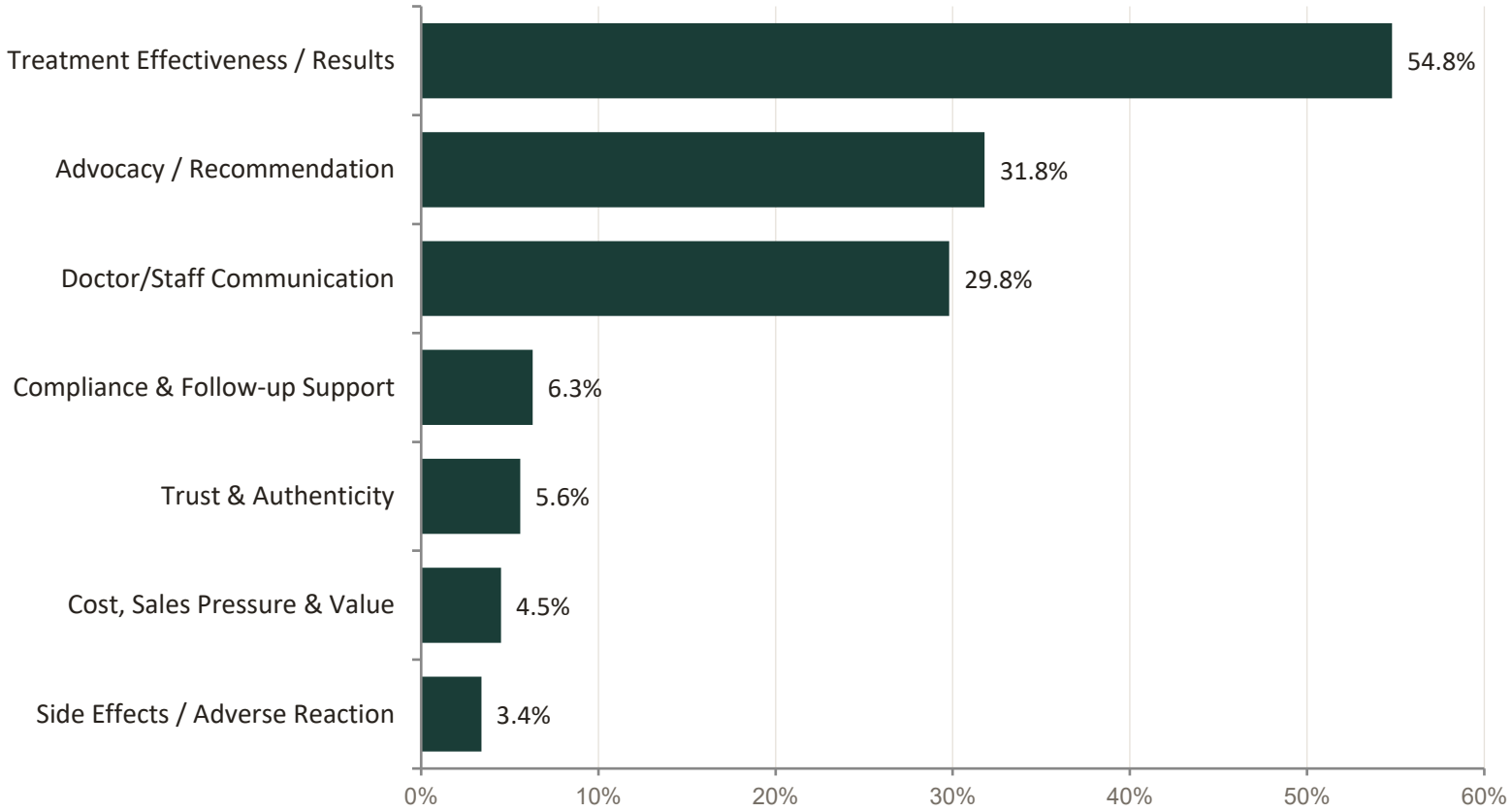
of reviews are positive (4–5 ★)

81%

of reviews include written feedback, not just a rating

RESULTS — PART 2

What Patients Actually Talk About



Thematic Mention Frequency Across All Text-Bearing Reviews (n = 3,094)

54.8%

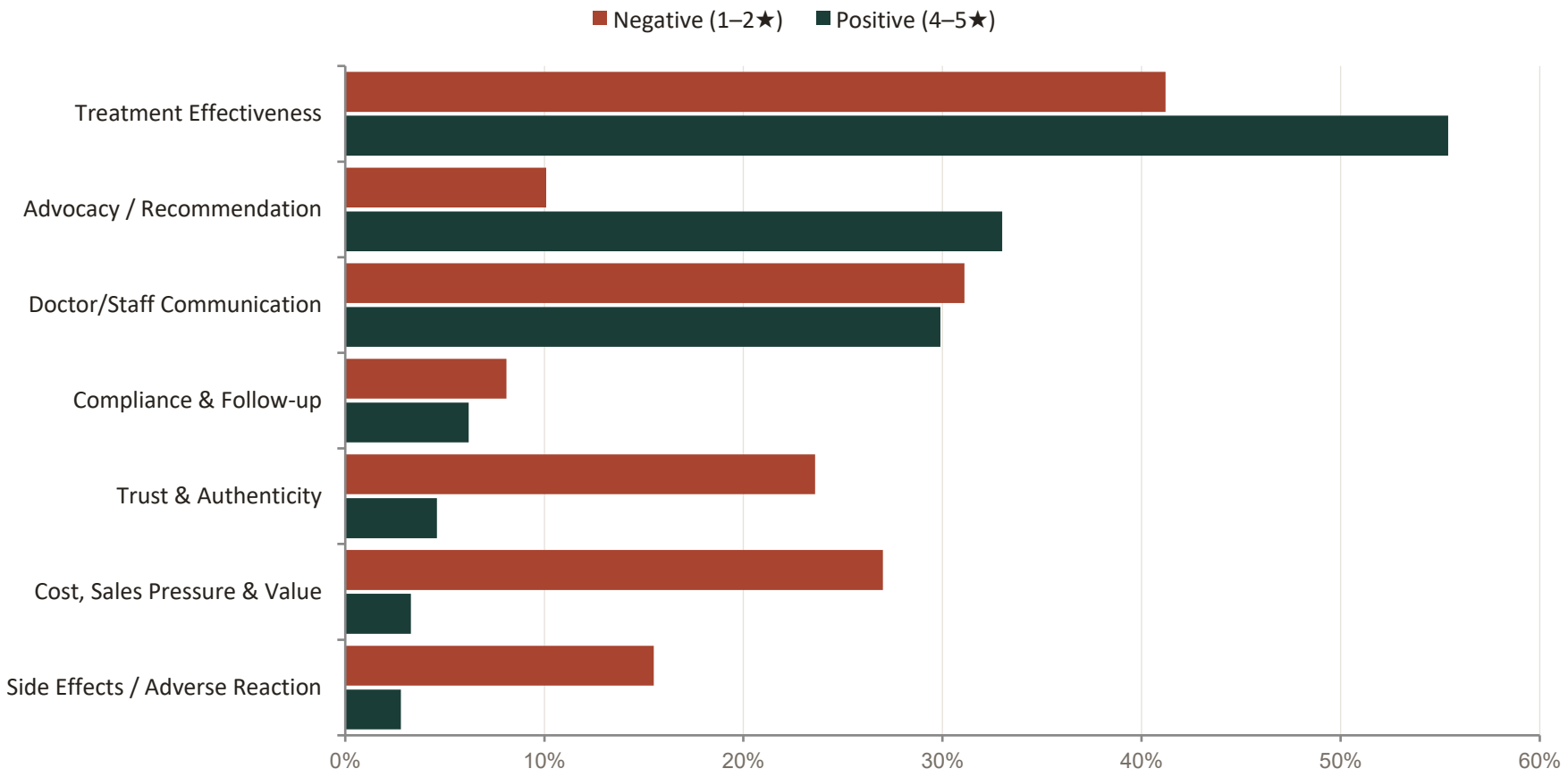
of all reviews mention **Treatment Effectiveness** — the dominant subject of patient feedback

31.8%

spontaneously include **Advocacy language** — recommending Kayakalp Global to others

RESULTS — PART 3

The Real Signal Is in the Negative Reviews



8.2×

Cost & Sales Pressure in negative reviews

5.6×

Side Effects in negative reviews

5.2×

Trust & Authenticity in negative reviews

DISCUSSION

Four Takeaways

Treatment works — but slowly

Median patient-reported time to visible improvement is 3 months, matching the slow repigmentation/clearance trajectories documented in vitiligo & psoriasis literature.

Follow-up breaks down after payment

Compliance & Follow-up Support is 1.3× more frequent in negative reviews — almost always framed as a broken promise of periodic contact.

Cost communication erodes trust

Cost, Sales Pressure & Value is 8.2× more frequent in negative reviews — concentrated around pre-payment transparency, not price itself.

The doctor relationship cuts both ways

Doctor/Staff Communication appears almost equally in positive (29.9%) and negative (31.1%) reviews — the same theme, opposite outcomes.

RECOMMENDATIONS

Five Actions, Mapped to the WHO Adherence Model

Honour the follow-up cadence

Calendarised check-ins at 2, 6 & 12 weeks — identical before and after payment

Healthcare-system

Lead with cost transparency

Itemised pricing & insurance documentation before payment is requested

Socioeconomic

Educate at the 6–8 week mark

Set expectations ahead of the 3-month threshold where compliance risk peaks

Therapy-related

Disclose formulation & escalate concerns

Proactive ingredient transparency and a clear symptom-worsening channel

Therapy-related

Formalise diet-compliance check-ins

Lightweight weekly prompts reinforcing the dietitian's Pathya-Apathya plan

Patient-related

In short: Kayakalp Global's treatment is working for the large majority of patients — the opportunity is to make the organisation as reliable as the medicine, especially through the slow-response middle months of care.

Thank You