# EVALUATION OF SELF-MEDICATION PRACTICES IN PATIENTS COMING TO GOVERNMENT HOSPITAL VIJAYPUR FOR OPD CONSULTATION

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### **ABSTRACT**

Self-medication is an important health issue especially in developing countries like India. This study aims to evaluate the practice of self-medication in the patients coming to A.H Vijaypur for OPD consultation. The study was conducted on a total of 100 patients and data was collected by interview using a questionnaire. Our study revealed the demographic profile of the people who resorted to self-medication, the drugs used as self-medication, reasons behind the practice, the source of information regarding the self-medication and the depth of knowledge if any about the drugs used as self-medication. It is hoped that this study will stimulate more attention towards research on the practice of self-medication which is an important but controversial medication issue.

Key words: Consultation, Self-medication

### INTRODUCTION

Self- medication has been defined as the use of medication (modern and/or traditional) for self treatment without consulting a physician either for diagnosis, prescription or surveillance of treatment<sup>1</sup>. As per WHO, self-medication is the selection and use of medicines by individuals to treat self recognized illness or symptoms<sup>14</sup>. Self-medication is an important health issue especially in developing countries like India<sup>8,6</sup>. In developing countries, where universal access to healthcare is yet to be achieved, self-medication is one of the common and preferred modes resorted by the patients<sup>5</sup>. Internationally, self-medication has been reported as being on the rise <sup>16,3,4</sup>. The prevalence rates are high all over the world, more so in the developing countries <sup>13</sup> as in developed countries, the medicines which are available only on prescription of a medical practitioner are easily available over-the-counter in developing countries <sup>9</sup>. This study presents to know the results of people visiting the OPD of A.H. Vijaypur regarding their knowledge, attitude and practice of self-medication. The study also aims to estimate the prevalence of self-medication and also to look for association between

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self-medication and socio-demographic characteristics in patients coming to A.H Vijaypur for OPD consultation.

### AIMS AND OBJECTIVES

To evaluate the self-medication practices in patients.

- a) To find out the demographic profile of the patients who resorted to self-medication.
- b) To find out the drugs which patients took for self-medication and the diseases for which they took those drugs.
- c) To find out the reasons for self-medication.
- d) To find out the source of information for the drugs taken as self-medication.
- e) To find out how many patients read and understood the prescribing information while resorting to self-medication.

### MATERIALS AND METHODS

The study was conducted on a total of 100 patients attending the OPD at Government Hospital Vijaypur in 2019. Data was collected by interviews using a structured, pre-tested questionnaire. The questionnaire consisted of a total of 28 questions in English. It was in 3 sections; general information, self-medication habits and self-medication with anti-infective. The data was collected on the questionnaire and it was ensured that the information taken was complete, accurate and clear.

### OBSERVATIONS/RESULTS

64% of the respondents had taken self-medication. Self-medication was more common in males than females i.e. 74.07% and 52.17% respectively. Self-medication was more frequent in age groups of 18-40 yrs and 41-60 yrs i.e. 50% and 43.7% respectively. None of the respondents above 80 yrs had taken self-medication.

Our study also revealed that the practice of self-medication was prevalent more in higher educated groups than in lesser educated groups. The rates were 18.75%, 21.81% and 59.37% for education up to 8<sup>th</sup> standard, 12<sup>th</sup> standard and up to graduation respectively. 81.2% of the respondents who had taken self-medication had a family income of 1-10 lakhs/annum so it was lesser seen in economically weaker section and in people whose annual income was above 10 lakhs.

Fever, cough and cold were found to be the most frequent indications for self-medication. Most commonly used self-medications were antibiotics (62.5%) followed by NSAIDs (39.06%), anti-allergic (28.12%) and anti-pyretic (23.43%) medications. 50% took the self-medications by telling the symptoms to pharmacists. 40.62% however took the drug using an old prescription or even without a prescription if they happened to remember the name of the medicine previously used.

The major reasons for self-medication were the perception that it was a minor illness (42.18) and that it saved time (35.93%). 32 out of 64 patients took whatever was given by pharmacist for self-medication. 85.93% respondents who had self-medicated, never read the prescribing information and of those who read it nearly 90% understood it only partially.

62.5% had taken antibiotics for self-medication and out of these 65% took it only for 2 days and 17.5% for 3 days. 17.5% also changed their dosage during the course of antibiotics and

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35% changed the antibiotics on not getting the expected relief from symptoms after 2-3 days of initial antibiotic therapy.

### **DISCUSSION**

Out of the total of 100 patients 64% had taken self-medication in the past three months. This is comparable to the prevalence rate of 71% in Puducherry<sup>2</sup> as revealed by a study conducted by E.Balamurugan et al in 2011. Self-medication was found to be higher among males(74.07) than in females(52.17). Study reports from other parts of India<sup>6</sup> and neighbouring countries like Sri Lanka and Nepal had opine the same<sup>13,15</sup>. This could be due to neglect of minor illness by males and to avoid loss of time and wages by spending time in hospitals.

80% of respondents from the age group of 18-40yrs and 87.5% of respondents from the age group of 41-60 yrs had taken self-medication in the past three months. The percentages for the respondents who took self-medication declined sharply for the ages of 61-80yrs and >80 yrs and the rates were just 16% and 0% respectively for older groups. This is comparable to the results shown by Selvaraj K et al<sup>7</sup> (2012), self-medication rates were 89.4% in respondents from 18-40 yrs and a percentage of 91% in respondents from age group of 40-60yrs. The higher rates of self-medication in people of 16-80 years may be explained by the fact that this is the working class of a society who mostly runs short of time and attending hospital for minor illnesses also means loss of wages for many of them. Our study also revealed that this practice was more so seen in educated groups than in lesser educated groups. This is consistent with the findings of Selveraj K et al<sup>12</sup> 2012 who also found self-medication prevalent in people who were educated to a higher level than those who were illiterate or were educated up to primary level.

Fever, cough, common cold, headache and abdominal pain were found to be the most common conditions for which people have used self-medication. In this study, some of the chronic conditions like hypertension and diabetes were also managed by self-medication. Selveraj K et al<sup>12</sup> revealed fever, headache and abdominal pain to be the most common conditions for self-medication. However cough and cold were the commonest conditions for self-medication followed by headache, fever and throat infection in an online exploratory study among pharmacy graduates in India as reported by Pahuja R et al<sup>10</sup>. Antibiotics, NSAIDs and antipyretic were the most common allopathic drugs for self-medication in decreasing order. Antibiotics and NSAIDs were reported o be the commonest drugs to be used in self-medication by Selveraj K et al<sup>12</sup>as well. Our finding of antibiotics being most commonly used drug for self-medication is supported by the study conducted by WHO in India, which concluded that 53% of Indians take antibiotics without prescription <sup>16</sup>.

In our study, the main source of information while self-medicating was from the pharmacist when he was told the symptoms(50%) followed by information from previous prescription/by remembering name of medicine taken for similar symptoms in the past(40.62%). Information by advertisements and internet contributed towards self-medication in only 1.56% each. These results are quite similar to results obtained by Pahura R et al<sup>15</sup>. One important finding of that study was that many respondents used the medication without prescription and gave same medication to their family members also for similar kinds of ailments. Rajput MS et al<sup>11</sup> claimed that previous prescription and information by the pharmacist was the main source of information for self-medication. In our study, the predominant reason for self-medication was

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the perception that it was a minor illness(42.18%) and saving time(35.93%) respectively. Similar results were given by Rajput MS et al<sup>11</sup> in 2010.

Research has demonstrated that individuals have their own ideas and belief about drug use which are important determinants of their use. Although it is true that self-medication can help treat some minor ailments that do not require medical consultation can help treat some minor ailments that do not require medical consultation and hence reduce pressure on medical services particularly in the underprivileged countries with limited healthcare resources but this practice often has many adverse effects and can lead to many problems including the global emergence of multi-drug resistant pathogens, drug dependence and addiction, masking of malignant and potentially fatal diseases, problems relating to overdosing and under-dosing, drug interactions and tragedies related to the side effect profile of specific drugs. In the ideal setting the only justifiable rationale for self medication would be urgency of the problems<sup>11</sup>.

### **CONCLUSION**

The issue of self-medication needs to be addressed by the responsible authorities in India. We recommend a holistic approach which must be taken to prevent this problem from escalating and that could involve awareness programs and educational fairs regarding the complications of self-medication and strategies to prevent the supply of medicines without prescription by the pharmacies. It is recommended that the dispensing procedure in India needs improvement through educational, regulatory and managerial strategies. There is a dire need for authorities to be pro-active regarding over-the-counter, prescribed and non-prescribed drugs so as to ensure rational scale. It is hoped that this study will stimulate more attention towards research on the practice of self-medication which is an important but controversial medication issue.

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