ORIGINAL RESEARCH PAPER

Volume-8 | Issue-8 | August - 2019 | PRINT ISSN No. 2277 - 8179

INTERNATIONAL JOURNAL OF SCIENTIFIC RESEARCH

STUDY OF PREVALENCE,ATTITUDE AND FACTORS ASSOCIATED WITH THE PRACTICE OF SELF- MEDICATION IN THE FIELD PRACTICE AREA OF A TERTIARY CARE HOSPITAL IN A METROPOLITIAN CITY

Community Medicine

Dr. Vandana Nikumb Prof & Head, Dept. of Community Medicine, Terna Medical College,Nerul

Dr.Jaya Madhukar Tale* Assistant Professor, Dept. of Community Medicine, Terna Medical College,Nerul.
*Corresponding Author

ABSTRACT

Objectives:
1. To assess the prevalence and pattern of self- medication.
2. To find out the common ailments ,common drugs used for self- medication and the reasons for it.
4. To study the association of self- medication with various factors such as age, gender, education, previous experience with the symptoms, previous prescriptions and home- kept drugs.

Methodology: Cross sectional study including 150 subjects above 15 years of age of either sex after taking informed consent were included.
Study period: November 2018 to March 2019

Results and Conclusions: Overall prevalence of self medication was 65%.and most common reason favoring it were unavailability of any health-care facilities near area of residence.

KEYWORDS

Self medication, common reason

INTRODUCTION:

Self- medication is the treatment of common health problems with medicines that are taken on patient's own initiative or on advice of a pharmacist or a family member or a friend, without proficient medical advice and supervision (1) . According to the WHO's definition, self-medication is the use of drugs to treat self- diagnosed disorders or symptoms, or the intermittent or continued use of a prescribed drug for chronic or recurrent diseases or symptoms (2) . Self- medication is widely practiced in many developing countries like India as it provides a low cost alternative for people (3) . It might be due to number of factors like socioeconomic status, lifestyle, ready access to drugs and greater availability of medicinal products which are existing in developing countries (4) . It is the growing trend of 'self- medication' that has both positive and negative aspects. Self- medication is an important issue as far as the health of an individual is concerned. The practice of self- medication must be based on authentic medical information to avoid irrational use of drugs which, in turn can cause wastage of resources, increased resistance of pathogens and can lead to serious health hazards like prolonged sufferings, drug reaction and drug dependence (5) . On the contrary if practiced properly, it can be used positively to treat various minor ailments, can save time and money, and can save lives in acute conditions.

The World Health Organization (WHO) has also pointed out that self medication can help prevent and treat ailments that do not require medical consultation and provides a cheaper alternative for treating common illnesses (6) . Hence, the aim of our study is to assess the prevalence and attitude of self- medication practice among the study population and also assess the various factors associated with the same.

OBJECTIVES:

1. To assess the prevalence and pattern of self- medication.
2. To find out the common ailments ,common drugs used for self-medication and the reasons for it.
4. To study the association of self- medication with various factors such as age, gender, education, previous experience with the symptoms, previous prescriptions and home- kept drugs.

MATERIALS AND METHODOLOGY:

Study Design : Cross sectional.
Sample size : 150
Study period: November 2018 to March 2019
Study subjects: Inhabitants in the field practice area of a Tertiary Care Hospital above 15 years of age of either sex.
Sampling method: Census sampling, **Study tools** Interview schedule
Inclusion criteria: Individuals above 15 years of age of either sex.
Exclusion criteria: 1) Individuals below 15 years of age.
2) Individuals not giving consent.

Statistical Analysis: SPSS version 20.0. The data was analyzed using 'Chi square test'

RESULTS:

95 participants (63.3%) of the total study population practice self medication.

Out of 150 participants enrolled, 69 (46%) were males and 81 (54%) were females. The prevalence of self- medication practice in both the genders is equal. The prevalence of self- medication was found to be common in the younger age group between 20- 24 years .

Self medication was more common in the highly educated population (graduates and above) and least common in the illiterate population and the difference is stastistically significant. **(Table-1).**

Table no.1

Educational level of the respondents	Practice of Self-Medication			Chi square Test	P-value
	Yes	No	Total		
Illiterate	1	7	8	12.150*	0.016
Primary	13	12	25		
SSC	15	6	21		
HSC	17	7	24		
Graduate & Above	49	23	72		
Total	95	55	150		

*Statistically Significant at 5% level i.e., P<0.05

The most common conditions/symptoms for self- medication were fever (44.7%), upper-respiratory tract symptoms (40.7%), and aches and pain (31.3%), followed by gastrointestinal problems (16.7%), vomiting (3.3%), wounds and burns (2.7%). There was one case that self- medicated for delayed menses.

The most commonly used drugs for self- medication were paracetamol (52%), drugs for upper respiratory tract symptoms (29.3%), other analgesics (22%), drugs for gastrointestinal problems (16.3%), followed by anti-emetics (2%) and treatment for wounds and burns (2.7%). 14.7% of the respondents also used the following remedies for quick symptomatic relief: vicks, strepsils, Zandu balm, iodex, D-cold and home remedies like turmeric milk and drops of onion juice in the nose for cough and cold respectively. One case preferred ayurvedic treatment over allopathic drugs. 35.3% cases bought antibiotics without medical prescription.

Out of 95 cases that practice self medication, 90 cases have not suffered any side-effects or adverse drug reactions. However, 5

cases(5.26%) have suffered unwanted side-effects of the medication, mostly allergic reactions to the drugs

Out of 95 cases that practice self- medication, 53 cases (55.78%) have used medication that was previously prescribed for an infection, which recurred later **(Table-2).**

Table no.2

Practice of self-medication	Used medication that was originally prescribed for an infection, which recurred later			Chi square Test	P-value
	Yes	No	Total		
Yes	53	42	95	22.329	<0.001
No	9	46	55		
Total	62	88	150		

*Statistically Significant at 5% level i.e., P<0.05

11 cases (11.58%) used medications that were originally prescribed for another type of infection, for quick symptomatic relief. One case used Foracort puffs as previously prescribed by the doctor, to relieve acute breathlessness.**(Table 3)**

Table no.3

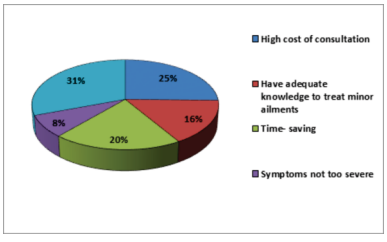
Practice of self-medication	Used medication that was originally prescribed for another type of infection			Chi square Test	P-value
	Yes	No	Total		
Yes	11	84	95	4.509	0.034
No	1	54	55		
Total	12	138	150		

*Statistically Significant at 5% level i.e., P<0.05

Out of 150 participants member or friend, without consulting the doctor .

In our study, most common reasons for favoring the practice of self-medication **(Fig 1)** were unavailability of any health-care facility near area of residence (30.7%), high cost of consultation (25.3%), time saving (20%), have adequate knowledge to treat minor ailments (16%), followed by 12% cases who feel that the symptoms/ condition is not too severe to consult a doctor.

Fig.



89 cases (59.3%) keep or use left over medications without consulting the doctor. 42 cases (28%) have used medications that were originally prescribed for another family .

DISCUSSION:

Self- medication is widely practiced in many developing countries. The practice of self- medication is widespread all over the world especially urban and educated population (7, 8) . In our study as well, the prevalence of self- medication is higher among the highly educated people. Previous studies have shown that the prevalence of self-medication in other developing countries is 12.7-95% (9, 10) . Prevalence of self- medication has been found among 81.5% individuals in a rural area inMaharashtra (11) . In our study, the prevalence of self- medication was found to be 63.3%. Although a similar proportion of males and females practiced self- medication, previous studies have reported that

females practiced self- medication more diligently than males, which are also similar to western reports(10, 12, 13). Among the self-medicators, majority followed the allopathic system of medication except one case that felt better with ayurvedic medication and two cases that preferred using home- remedies for the minor ailments than taking medications. The commonest illnesses that led to self-medication in this study were usually self- limiting 'minor illnesses' that have been reported in studies on self- medication as the most common indications (5, 9) . Fever, respiratory problems and pain followed by gastrointestinal problems, vomiting, wounds and burns were the most common symptoms for which people have used self-medications. Paracetamol was themost commonly used drug, both as an anti- pyretic and analgesic. Ibupara, Diclopara and Combiflamwere the other commonly used analgesics to relieve acute aches and pain. Cough expectorant syrups and cetrizine were used most commonly to relieve acute cold and cough. The use of antibiotics in this study was limited. More than half the study population that practiced self-medication used previous prescription in case of recurred infection. Previous studies have also reported previous doctor's prescription as the most common source of self- medication (14, 15, 16) . More than half the study population uses home-kept/ left-over medication without consulting a doctor. The most common reason for practicing self- medication in this study was unavailability of health-care facilities near the residence, followed by time- saving and high cost of consultation being the other two common reasons. Other studies have shown time-saving to be the most common reason for practicing self-medication (16) .

CONCLUSION AND RECOMMENDATIONS:

The respondent shows good knowledge towards self medication and positive attitude towards self
medication favoring it is acceptable. Paracetamol followed by drugs for respiratory symptoms (cough expectorant syrups and cetrizine) and analgesics, were the most commonly used drugs. Self medication is more prevalent in highly educated population. However, there is no significant association between prevalence of self medication and sex of respondents, as the prevalence is equal in both genders. Although the self medication practice is inevitable, there is great responsibility of drug regulatory authorities and health care professionals about the control of self medication by public health education, increasing awareness and for making self medication safe and useful. This has also been noted by WHO (4)and by Hughes (5) . Several studies show that self medication is a global phenomenon. Self medication can be prevented or minimized by increased awareness and education in society.

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