EVALUATION OF DRUG USE PATTERN USING WHO PRESCRIBING INDICATORS

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ABSTRACT

Medicines are essential requirements for the optimal care of patients. Appropriate use of medicine is an essential element in delivering quality of life for patients and the community as a whole. The aim of this study was to assess the prescription patterns, rationality of analgesics and frequency of antibiotic use at the hospital, using WHO core drug use indicators. A total of 40 prescriptions were collected from a teaching hospital in South India. The majority of patients were male 26 (65%), with female representing 14 (35%) from surgery department, over a period of 2 months, among 40 prescriptions a total of 246 drugs were found. The average number of drugs per encounter was 6.15, 11 drugs (4.4%) were prescribed by generic name, 56 drugs (22.7%) were antibiotics, 55 drugs (22.3%) were analgesics, 176 (71.5%) were injectable preparations. All the medicines encountered during the study was found to be prescribed from Essential Drug List. 11 Analgesics (20%) were found to be irrational. Most commonly used Antibiotic was Metronidazole (13times). Frequency of antibiotic use was 0.2. Most commonly used Analgesic was Diclofenac (22times). Frequency of analgesic use was 0.4. Concurrent administration of Antibiotic was found to be 19. From the study irrational prescribing patterns were identified.

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INTRODUCTION

In 1985, World Health Organisation (WHO) defined that “Rational use of drugs requires that patients receive medications appropriate to their clinical needs, in doses that meet their own individual requirement for an adequate period of time, at the lowest cost to them and their community”. Essential drugs are those that satisfy the health care needs of the majority of the population; they should therefore be available at all times, in adequate amounts and in the appropriate dosage forms.

Common irrational uses of drugs include over or under use of medication, high cost of drugs, more usage of injections and antibiotics, poly pharmacy, violation of standard treatment guidelines or not from Essential Drug List, usage of brands instead of generic names are the major problems of present day medical practice. The consequences of these lead to ineffective treatment, development of resistance to antibiotics, adverse effects and economic burden on patients. A study of prescription pattern is an important tool to determine rational drug therapy and maximize utilization of resources. To improve the overall drug use, in developing countries, international agencies like WHO have applied themselves to evolve standard drug use indicators.

MATERIALS AND METHODS

This study was a prospective observational study conducted to assess the drug prescribing patterns, rationality of analgesics and frequency of antibiotic use at the hospital, using WHO core drug use indicators. In this study 40 prescriptions were collected and analysed.

RESULTS AND DISCUSSION

A total of 40 prescriptions were collected from a teaching hospital in South India. The majority of patients were male 26 (65%), with female representing 14 (35%) from surgery department, over a period of 2 months, among 40 prescriptions a total of 246 drugs were found. The average number of drugs per encounter was 6.15, 11 drugs (4.4%) were prescribed by generic name, 56 drugs (22.7%) were antibiotics, 55 drugs (22.3%) were analgesics, 176 (71.5%) were injectable preparations. All the medicines encountered during the study was found to be prescribed from Essential Drug List. 11 Analgesics (20%) were found to be irrational. Most commonly used Antibiotic was Metronidazole (13times). Frequency of antibiotic use was 0.2. Most commonly used Analgesic was Diclofenac (22times). Frequency of analgesic use was 0.4 .
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CONCLUSION

From the findings of this study the prescribing practices for injections, antibiotics and analgesics shows deviation from standard recommended by WHO. The drug prescribing practices should be improved regardless of the level of health care delivery. The complete outcome of the prescribing desire will be successful only when the patient receives rational treatment for particular disease. Government is promoting generic prescribing but the findings of this were found to be contrary. Irrational prescribing of analgesics are seen. On the other hand all the drugs were prescribed from Essential Drug List. To ensure rational prescribing of drugs continuous education and training of the physicians is required.

REFERENCES