COMMENTARY:

Self Medication Practices in Pakistan
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ABSTRACT:
Self medication is defined as consumption of medicinal products by a person to treat self recognized disorders, symptoms, recurrent disease or minor health problems. Globally, self-medication has been reported as being on the rise. According to WHO, self-medication must be correctly taught and controlled. To assess self medication practices in Pakistan various key words and phrases were used with search engines Google scholar and PakMednet from the year 2010-2014. A total of five studies were found. Prevalence of self medication is found to be high in our country. Common reasons found for self medication were mild nature of the illness, high fee of private consultants and prior familiarity with the disease. Community based surveys and studies may be conducted to have exact figures of self medication prevalence of our country. Standard laws regarding the use of self medication should be made and implemented in true sense to promote rational use of drugs.

Keywords: Self medication Practices, Pakistan, Prevalence

INTRODUCTION:
Self-medication which is a major form of self care is widely practiced worldwide. It is defined as the consumption of medicinal products by a person to treat self recognized disorders, symptoms, recurrent disease or minor health problems. It also includes acquiring medicines without an authorized prescription, resubmitting old prescriptions to purchase medicines, sharing medicines with relatives or members of one’s social circle or using leftover medicines stored at home. Globally, self-medication has been reported as being on the rise. In developing countries, people are not only using non-prescription drugs but also prescription drugs, as self-medication products, without supervision. The World Health Organization has emphasized that self medication must be correctly taught and controlled.

Increased access to non-prescription medicines may encourage patients for misuse and abuse of such drug products. Misuse is defined as using an OTC product for a legitimate medical reason but in higher doses or for a longer period than recommended, e.g. taking more of a painkiller than recommended to treat headache. Abuse is the non medical use of OTC drugs, e.g. to use high dose of a drug to lose weight. Studies have documented that increase in self-medication is due to a number of factors like socioeconomic factors, lifestyle, ready access to drugs, increased potential to manage certain illnesses through self care, educational level, age, gender, high cost of private doctor’s consultations, prior familiarity and mild nature of the illness. The negative outcomes as a consequence of self medication may include wastage of resources, increased resistance to pathogens, and generally entails serious health hazards such as adverse reactions, drug interactions and prolonged suffering. Although, OTC (over the counter) drugs are intended for self-medication and are of established efficacy and safety, their inappropriate use due to lack of knowledge of their side effects and interactions could have serious results, especially in children, elderly, pregnant and lactating mothers. Some OTC medicines may have severe interactions with prescribed medicines such as interaction of omeprazole and folic acid. Other hazards of self-medication may also include drug dependence and addiction like addiction of cough syrups, problems due to misdiagnosis as sinusitis is often misdiagnosed as allergy, over and under dosing like over dose hepatic toxicity with acetaminophen (paracetamol) and problems related to the side effect profile of specific drugs for example sedation with antihistamines. Use of NSAIDs and aspirin are associated with an increased risk of adverse drug events, hospitalization and death, with the elderly being particularly vulnerable. Patients taking non steroidal anti-inflammatory drugs or anti-platelet drugs (prescription medicines) for a long period of time without follow up of physicians frequently experience gastrointestinal toxicity. The use of antibiotics without prescriptions is a source of great

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Antimicrobial resistance is a current problem worldwide particularly in developing countries where antibiotics are often available without a prescription. Self-medication whether it is of non-prescription medicines or prescription medicines can mask the signs and symptoms of malignant and potentially fatal diseases. Gender difference appears to be important factor in self-medication patterns. Studies conducted in Spain showed that self-medication is more prevalent among women, persons who live alone, and persons who live in large cities. FDA have strongly advocated that labeling of the OTC drugs should be easy to understand by the consumer and should contain the list of active ingredients, warnings, directions and inactive ingredients.

Using the key words, Pakistan, Self medication, Population, and Prevalence on search engines Google scholar and Pak medinet from 2010-2014, a total of 40 studies were found related to self medication in Pakistan. Refining the search by using phrases, Self medication Pakistan and cities of Pakistan self medication curated the available number of articles to 5 that is 2010 (1), 2011(0), 2012(1), 2013(2), 2014(1).

In 2011, a randomized, cross-sectional, questionnaire-based, multicenter study of the prevalence of self-medication was performed in 4 large cities in Pakistan i.e. Rawalpindi, Islamabad, Abbottabad and Peshawar and their adjacent rural areas. The most commonly used drugs were antibiotics (20.5%), analgesics (18.0%), vitamins/minerals (8.6%), NSAIDs (6.6%), cough syrups (6.1%) and ORS (4.1%). Self-medication was reported in 7.1% cases of rural population as compared to urban areas at 2.6%. Common reason found for increased tendency to self medicate was mild nature of the illness.

In 2012, a study conducted on female students of two private sector institutes for higher education in Karachi revealed that the prevalence of self-medication practices was alarmingly high in the educated youth, despite majority being aware of its harmful effects.

In 2013, a survey conducted in 4 areas of Karachi has documented self medication practice to be increasing in the youngsters of Karachi, mostly in males and undergraduate youngsters between 18-22 years of age. The reason was lack of time or not consulting to the doctor despite of the fact that majority of the respondents were aware that self medication can be hazardous. Dania in 2013 on the basis of literature review reported that the prevalence of self medication in Pakistan is 51%. In 2014, a study conducted on urban and rural population of Islamabad showed 61.2% prevalence of self-medication and it was more between 15-30 years of age group. Analgesics were the most commonly used medicines (61.1%) mainly acetaminophen (paracetamol) Common reasons for self medication were found to be prior familiarity with the disease and high fees of private consultants.

A report published on 24th June, 2013 in daily Dawn newspaper had highlighted that an excessive and irrational drug use across the health sector in Pakistan is creating resistance to frontline antibiotics used to control infections. The report also pointed out low checks on registration and marketing of drugs in Pakistan that accounts to easy supply of drugs to the pharmacies and drug selling stores leading to easy accessibility of drugs by the consumers. In nut shell, it is all business that is flourishing at the cost of patients health.

Thus prevalence of self medication in Pakistan is increasing. Common reasons found for increasing prevalence of self medication in our country are documented to be mild nature of the illness, high fee of private consultants and prior familiarity with the disease. Standard laws regarding the use of self medication should be made and implemented in true sense to promote rational use of drugs. Furthermore drug authorities and health professionals need to educate people about the pros and cons of self-medication. At the same time community based surveys and studies may be conducted to have exact figures of prevalence regarding self medication in our country.

REFERENCES:


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