

# FREQUENCY AND PATTERN OF SELF MEDICATION PRACTICES AMONG THE STUDENTS AND LOWER STAFF OF MUHAMMAD MEDICAL COLLEGE

Sohaib Azhar<sup>1</sup>, Bariha Zehra<sup>1</sup>, Javeria Manzoor<sup>1</sup>, Sehrish Nawaz<sup>1</sup>, AB Raja<sup>2\*</sup>

## Abstract

**Background:** Self medication can be defined as obtaining drugs without the advice of doctor (need to write full definition with reference as some books say that self medication means self-administration of prescribed medication. It is common in developing countries especially in Pakistan (reference?). Any other comparison? Objective of our study is to determine the reason, extent and (Not sure it makes sense)of self medication practices among the medical students and lower staff member (define lower staff)

Need to write why did you choose this question

**Keywords:** Self medication, students, Para medical staff (you haven't used this word before), MMCH.

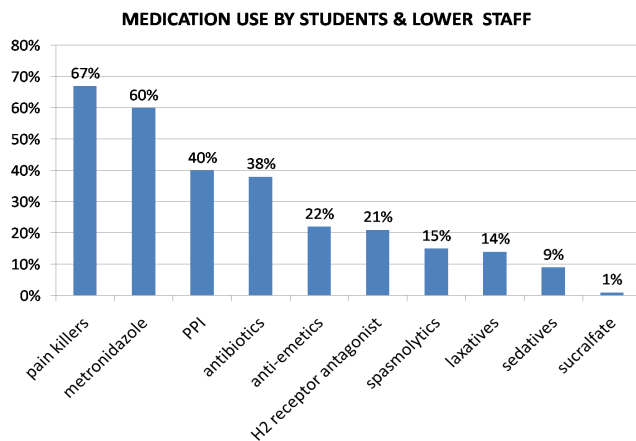
## Abstract:

### Methodology:

A cross sectional study was conducted in which pre tested questionnaire was administered to 100 students and 100 non doctor staff members of MMCH. Why 100. convenience sample? Over how many months? Which year? If you picked 100, these are out of how many total population (number of staff). Otherwise how do you comment on prevalence. Did you ask someone to look at protocol (e.g., governance committee and ethics committee)? Where is your sample questionnaire?

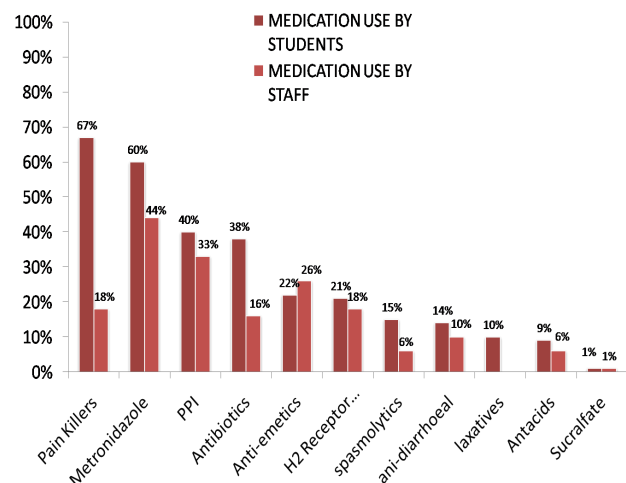
### Results:

For medical students sample size was 100 and Participants were equally selected gender and Year wise. 81/100 students do self medication The most commonly used medication is pain killer (67%), metronidazole (60%) PPI (40) antibiotic (38) Anti emetics (22%) H2 receptor antagonist (21%) spasmolytics (15%) anti diarrheal (14%) Laxatives (10%), antacids and sedatives (9%)



Sucralfate and anti depressants (1%) Need number with median and mean. (44%) of them

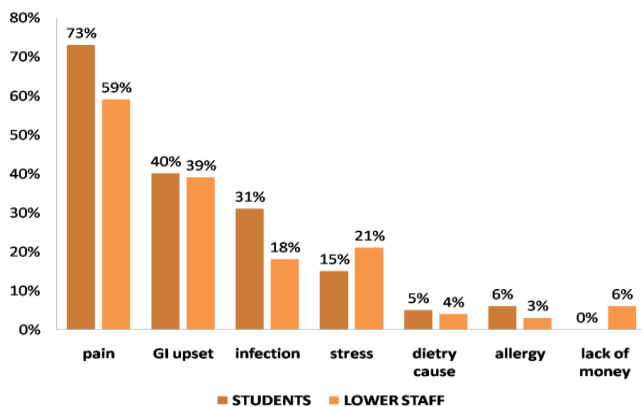
Take daily (5%) take weekly. (54%) take when Symptoms occur. (57%) 1/day. (25%) twice/day (19%) > 3/day reason of self medication is pain (73%), GI upset (40%), infection (31%), stress (15%) dietary cause (%). (8%) faced side Effects like allergy, intolerance etc. among lowers



Staff sample size was 100 participants were Equally selected gender wise 93/100 staff do self medication. Most common medication is Metronidazole (44%), PPI (33%) anti emetics (26%) h2 receptor antagonist and pain killer (18%) anti biotic (16%). spasmolytics and antacid (6%), Anti histamine (3%),sucralfate and sedatives (1%). (22%) take daily, (17%) weekly (69%) take when Symptoms occur (64%) take once/day. (27%) 2/day and (8%) more than 3/day. Reasons of self medication is (59%) pain, (39%) GI upset, (21%) stress, (18%) infection, (4%) due to diet, (5%) other causes, (5%) lack of money and (6%) face side effects need to write over how many

1. Student of final year, Muhammad Medical College & Hospital, MPS
2. Assistant Professor of Community Health Sciences MMC Mirpurkhas

months/years, they took these medications? any idea of demography of staff? age? gender? education background? socio-economic background? also the same about students. Although age and education background is clear.



### Conclusion:

In our brief comparative study we have found that the prevalence of self medication is high in staff members (93%) than in students (81%), the number of medications used among students is analgesic, but which type? Are these opioids e.g., codeine, Tramadol which are more addictive than NSAID. metronidazole, PPI and antibiotic while in staff member's metronidazole, PPI anti emetics pain killers and H2 receptor antagonist are common. (This is part of discussion, not conclusion)

### Discussion:

The occurrence of self medication among medical students is considerably high. How do you know? If there are 6000 students at MMC and out of 100, only these people are taking, it is not high. Need to write proper numbers. The major factor associated with self medication are assumed knowledge on diseases and their treatment, prior experience of use of medicine by the medical students and lower staff. If you think, it is bad practice, you must write argument and references here.

- The present study showed that the self medication was widely practice by students and lower staff. Prevalence of self medication was high in staff members (93%) then in students (81%) the most commonly self prescribe medicine were analgesics, metronidazole, PPI and antibiotics in medical students and lower staff members
- Compare with the ration of different studies reveled that self medication of anti malarial drug and antibiotic was high in the **University of South Western Nigeria**, based on the fact that these drugs are readily available. Frequency of use of these drugs in students was high because they live d in malaria endemic region. Reference?
- Another study showed wide use of self medications in first year students (44.8%) in **Bahrain 2006** and (76%) in **Karachi**. Reference?
- A study conducted at **KAMATAKA** where is it? re-

vealed (53%) students practicing self medication. A notable finding in this study was final year practiced self medication more frequently than first year (P value <0.001) reference?

- A study done in **Spain** and **turkey** revealed that the ratio of self medication was (12.7%) and (45%), (57.05%) in medical students of **west Bengal**, (67%) in **India** and (38.5%) in **Ethiopia**. In **Hong Kong** it was (94%) which showed that self medications was not only in under developed countries but in developed countries as well. Reference? Also Spain and Hong Kong may be classified as industrial countries but India/Bengal?
- According to above mention studies with references it is quite clear that self medication is considerably high all over the world having variable factors like previous experienced was the major reason besides non availability of doctors and transport, ability to self manage, assumption of better knowledge, lack of time and cost of treatment were the other contributing factors (**Sogunro and ogunremi 1990, hussain and khanum 2008 and sheriff 2011**) need to use Vancouver referencing as that is standard for JMMC. Additionally fever, cough and headache are considered as condition responsible for self medication by students in **Pakistan** and. The source of drugs was patent medical stores, friends, relatives and left over's from previous prescriptions which are also playing an important role
- WHO considers self medication as part of self care that helps efficient use of burdened health care system, with guidelines of for regulatory assessment of medicinal products for use in self medication. The case of advocating for self medication is quite weak, where the drug resistance is emerging and even prescription medicines are readily available and can be expensed through inexperienced hands. Can self medication cause harm?
- To us self medication may be justified only in safe hands that are aware of the nature of drugs and able to perceive the drug related side effects. This study has an element that indicates toward the risks and hazards perception ability of students, it showed that self medication among youth is equally prevalent regardless of education type and knowledge of drugs. It would be intrusting to know further about the risk and hazard perception of young adults especially regarding self care. Future studies should be directed towards perceived hazards

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