

Survey on Self Medication on Young Volunteers of Kharagpur

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(Received: June 09, 2012; Accepted: July 05, 2012)

ABSTRACT

The survey was done to know about the cause, and spread awareness among the young students about self-medication, which effectively infected them. The study was done on questionnaire basis during the month of October-November in the year 2008-2009. The survey was conducted in the town of Kharagpur in West Bengal. All the volunteers were in the age group of 14 to 18 years. The total number of volunteers (male and female) was three hundred and ninety four (394). The data obtained were screened and analyzed and the following observations were made- 32.99% practiced prescribed medication but in the rest self-medication was prevalent (66.24% of candidates). 72.58% of the same population agreed that self-medication is dangerous though they practice it. The cause of self-medication being parental advice (16.61%), lack of time (25.78%), lack of consciousness about the disease (37.82%), Cheap (6.5%), reuse of old prescription (2.57%), quick relief (3.43%), and easy availability (2.0%). Most of the population thinks that the doctor whom they visit will exploit them commercially (69.43%). The common medicines used were Aspirin, Paracetamol, Ranitidine, some Antacids, Diclofenac, Sulbutamol etc. After analyzing the data we came to the conclusion that despite majority being aware of harmful effects of self-medication, its use is high in the educated youth due to several causes. Hence, to ensure safe practices the first step is to eradicate the causes of self-medication. Strict policies need to be implemented on the advertising and selling of medications to prevent this problem from rising. Stricter 'drug control' should be employed country-wide.

Key word: Self-medication, Educated youth, Causes of Self-Medication.

INTRODUCTION

Medication of oneself without professional supervision to alleviate an illness or condition, as by using an over-the-counter drug or preparation is known as self-medication. Today we are a crazy pill-popping generation. It is rightly said that the desire to take medicines, is one feature that distinguishes man from animals. Today over 7000 drugs and drug combinations are available. Many of them have been released for general use, and are sold directly to the public as over-the-counter (OTC) remedies. A large number of potent drugs are thus available to the individual for self-medication. There is an obvious difference between drugs and other commodities of life. The consumer has no way to judge the efficacy of a drug or its hazards, and therefore these judgments have to be made for him by physicians. We have noticed

that a large number of people, when they fall sick, do not bother to consult the physician, instead they obtain a medicine from their own shelf, for the ailments. Medicines are important to help us get cured at the right time. But popping medicines on our own, without the doctor's consult can become fatal².

The young students of today will be the backbone of future India. They have the ability to learn and acquire knowledge from their surrounding but do not have the intelligence to distinguish between evil and good. Hence it is this segment of the population, which is infected by the disease of self-medication through their parent's advice. Thus they follow it which later develops as a habit³⁻⁶.

The present survey was aimed to determine the cause of self-medication and spread

the knowledge of self-medication among the young students and a sustained awareness to the society regarding the risks of self-medication.

Methodology

Pharmacist developed a well-designed validated questionnaire for the survey. The questionnaire was distributed to the young students from classes IX to XII (between the age group of 14 - 18 yrs). The candidates were taken irrespective of their sex for the survey from various schools of kharagpur. Totally there were Three hundred and ninety four students (both male and female) of various schools who participated in the survey. The volunteers were advised by our co investigators to answer the questionnaire according to their perception. Our co- investigators also took the pain of seeing whether the students understood the questions, and that the answers they wrote were not influenced by anyone else. The data obtained was first screened and were divided into two study groups according to their pattern of drug use: self-medication and medical prescription, if the respondents used self medication then the reason

behind it was noted, analyzed and studied statistically and the observation and conclusion was made accordingly⁷⁻⁹.

RESULTS AND DISCUSSION

The data collected from the young respondents was validated statistically which indicated that 72.58% of the young respondents thought that self-medication is not correct but lack of awareness and education increases the trend of self-medication dramatically (66.24%). (Table 1, Fig. 1 and 2.)

The main causes of self-medication are advice from neighbors, parents, friends, and relative or even medical shopkeepers. The other reasons are various reasons behind self-medications which include lack of time to visit doctors (25.78%), Cheap(6.5%), in emergencies (0.57%), lack of consciousness about the disease (37.82%), Parents advice (16.61%), reuse of old prescription (2.57%), distance (1.14%), less time spent by doctor (0.57%), quick relief (3.43%) and

Table 1: Medication Pattern and opinion of respondents on self-medication

Number of participants	Medicine taken		Opinion regarding Self medication			
	Self medication	Prescribed medication	Not answer	Correct	Not correct	Not answer
394	66.24%	32.99%	0.76%	26.64%	72.58%	0.76%

Table 2: Reason for self-medication

S. No	Reason	% of population
1.	Lack of time	25.78
2.	Cheap	6.5
3.	Emergencies	0.57
4.	Lack of consciousness about the disease	37.82
5.	Parents advice	16.61
6.	Distance	1.14
7.	Less time spent by doctor	0.57
8.	Reuse of old prescription	2.57
9.	Quick relief	3.43
10.	Easy availability	2.0
11.	Not answer	2.8

Table 3: Opinion of patient about the doctor's profession

Sl no	Opinion	% of population
1.	Noble	10.45
2.	Social service	20.12
3.	Commercial	35.04
4.	Commercial and Social service	34.39

easy availability (2.0%) respectively. These should be taken care of properly to stop the growth of self-medication (Table 2, Fig. 3.).

The most important factor among all these is the doctor patient relationship, which has become more commercial rather than a novel service. Hence people feel its either waste of time or money or both to visit doctors for small ailments according to them (Table 3. Fig. 4.).

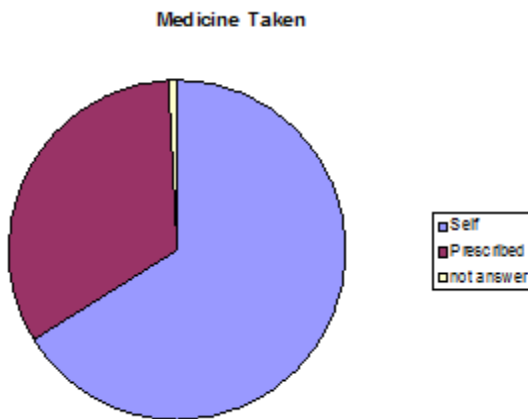


Fig. 1: Medication Pattern

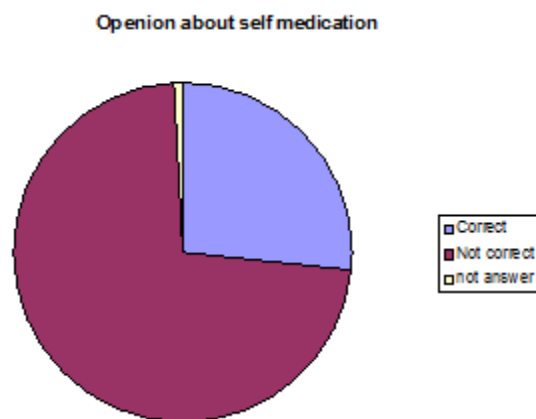


Fig. 2: Opinion of respondents on self-medication

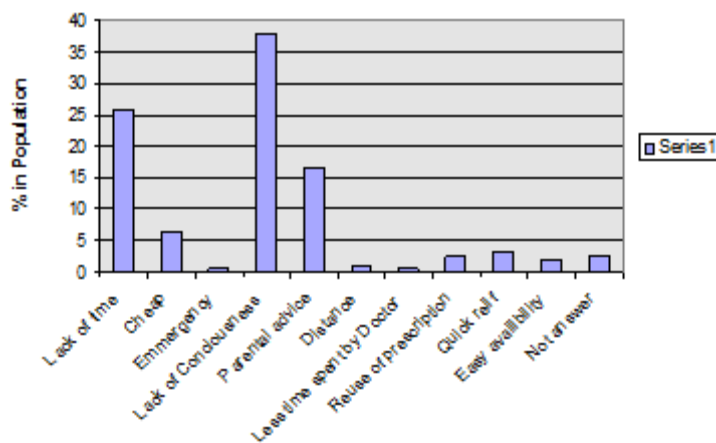


Fig. 3: Reason for self-medication

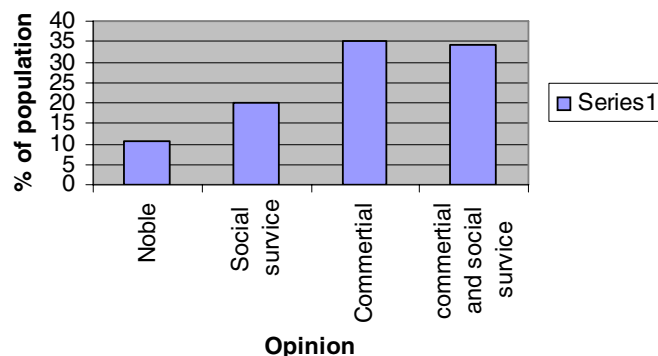


Fig. 4: Opinion of patient about the doctor's profession

The groups of self-prescribed drugs started from analgesic/antipyretic to non-hormonal anti-inflammatory drugs, to drugs acting on the respiratory tract, to anti ulcer agent, gastrointestinal drug, and systemic antibiotics. The test candidates used to take several medicines to cure their ailments without knowing the proper disease condition, proper use of drug, dose and frequency of administration, side effects and the adverse reaction on their body. Finally they fall prey to the side effects and obtain serious diseases, addiction and drug dependence^{9, 10}.

CONCLUSION

The prevalence of self-medication in children and adolescents was high, which reinforces the need for public health interventions aiming at reducing the main cause of this problem. To avoid or minimize the dangers of self-medication, *firstly*, the lay person should be educated about the dangers of indiscriminate use of drugs. *Secondly*, the physicians should be more judicious in prescribing, and must insist on drugs being supplied by the chemist only on a valid prescription. *Thirdly*, a proper statutory "Drug Control" must be implemented, rationally restricting the availability of drugs to the public. These *three* measures would definitely reduce the incidence of drug-related

mishaps, and help in maintaining good health of the individual and society. For this the community health care pharmacist, pharmacy teachers with school teachers should join hands with other healthcare workers and social workers to communicate the information about the awareness of self medication. It is also recommended to have at least one subject as pharmacy education in their academic syllabus to spread awareness among the youth of today. Mass awareness programmes among the youth with the Financial Assistance from Ministry of Health and Family Welfare, WHO, UNICEF, World Bank, DANIDA should be conducted in schools of rural and urban areas to enlighten the youth community about the dreadful disease of self- medication. If these measures are employed vigorously the practice of self-medication can be uprooted from its base.

ACKNOWLEDGEMENTS

The authors acknowledge Prof Dr LVG Nargund, Chairman, Nargund college of pharmacy, for providing necessary facilities to carry out the survey in an effective manner. We also thank the principals of St. Agnes School, S.E Railway Mixed Higher Secondary School, kendriya vidyalaya II, kharagpur, West Bengal for providing their students as our participants.

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