

ORIGINAL PAPER

Knowledge, Attitude and Practice of Self Medication Among Nurses and Midwives of a Tertiary Care Hospital

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ABSTRACT

Self medication is one of the rapidly growing areas of concern to medical professionals, government and the general public. The study was aimed at assessing the magnitude and factors of self medication among the nurses and midwives of Gauhati Medical College and Hospital. The participants were explained the purpose of study and requested to file up three sets of questionnaires each of knowledge, attitude and practice. Out of a total of 150 nurses, 90 (60%) of them reported of one episode of an illness and 60 (40%) of them practiced self-medication. Most drugs for self-medication were obtained from the pharmacy or drug shops and the most commonly self medicated drugs were Paracetamol, Aspirin, and Pantoprazole. They took this for common illness like fever (20%), headache (30%) followed by common cold and cough (20%). They even took Azithromycin (1 %) for respiratory tract infection. Non-seriousness of their illness with previous experience attributed them for self medication which is facilitated by easy availability of drug and information from textbooks or seniors. Self-medication is one of the rapidly growing areas of concern to medical professional, government and general public. Self-medication among the nurses and mid-wives was practiced with a range of drugs from the conventional drugs for fever (paracetamol) to the antibiotics. Although the practice of self-medication is inevitable, the drug authorities and health professionals need to educate nurses and midwives about the pros and cons of self-medication

Keywords: Conventional drugs, Pharmacy, Questionnaires, General public, Textbooks, Senior

INTRODUCTION

Self-medication involves the use of medicinal products by the individuals to treat self-recognized disorders or symptoms, or the intermittent or continuous use of a medication prescribed by a physician for chronic or recurring diseases or symptoms.

Self-medication involves acquiring medicines without a 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.¹ Self-medication thus forms an integral part of self-care, which can be defined as the primary public health resource in the health care system. It includes self-medication, non-drug self-treatment, social support in illness, and first aid in everyday life.

Use of self-medication is highly prevalent in both urban and rural community varying from 32.5% to 81.5%.² The practice of self-medication in the general population in the form of OTC (over the counter) drugs has been on a rapid rise. Unaware of the appropriate drugs for the particular illnesses, their doses, and adverse effects, the misuse of medications as prescribed by the pharmacist, or a family member, or anyone in general may lead to such people literally playing with their lives at their own mercy.

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But with illiteracy, there is no stop to this. On the contrary, the situation is entirely different in the case of medicos/dental or nursing students.³

Studies on self-medication show that it is influenced by many factors, such as education, family, society, law, availability of drugs and exposure to advertisements.^{4,5} A high level of education and professional status have been mentioned as predictive factors for self-medication.⁶ Self-medication has both benefits and risks. Responsible self-medication can save scarce medical resources from being wasted on minor conditions, reduce the burden on health care facilities, and decrease the cost and time people spend to visit health care facilities for minor symptoms. However, inappropriate self-medication can have a number of potential risks for example delay in seeking appropriate medical advice; failure to recognize or self-diagnose contraindications, interactions with prescribed medicinal products; failure to report current self-medications to the prescribing physician (risk of double medication and/or harmful interaction inappropriate duration of use of medicine; risk of dependence and abuse, etc.).^{6,7,8}

The dangers of self-medication are many such as habituation, allergic reactions that may be severe or even fatal. Under-dosage may not cure the symptom. Over-dosage can produce collateral damage to many organs. By masking the symptom temporarily, it will be difficult for a doctor to arrive at a correct diagnosis. NSAID drugs like ibuprofen increase the risk of stroke.⁶

Self-medication is an important health issue especially in developing countries. Various studies reported that self-medication may lead to delay in care seeking which results in paradoxical economic loss due to delay in the diagnosis of underlying conditions and appropriate treatment. Also, self-medication can lead to interaction between drugs which would be prevented, had the patient sought care from a licensed medical practitioner. Practicing self-medication for drugs like antibiotics might lead to drug resistance; and hence, there needs to be a check on these practices.⁹

The study of self-medication practice among nurses and midwives is very important, as they are a segment of the population that has access to information regarding their health. Self-medication is practiced with a range of drugs from the conventional analgesic to antibiotics. Although the practice of self-medication is inevitable; drug authorities and health professionals need to educate nurses and midwives about the pros and cons of self-

medication. Self-medication is a very widespread practice among nurses and midwives. Several studies have addressed the way doctors and medical students engage in this practice. Only few researches have been carried out in our part of population and it is essential to study in our context the practice among nurses and midwives. So, we have selected this topic. Therefore, self-medication has many demerits which may directly harm to our physical as well as mental health. In this study, we have studied about self-medication among nurses and midwives of Gauhati Medical College. Firstly, we have sought to estimate the prevalence of self-medication. Secondly we have sought to determine the knowledge, attitude and behavior of self-medication.¹⁰

MATERIALS AND METHODS

This study was across - sectional, questionnaire based survey. It was a 6-month study undertaken from the month of May 2015 to Nov 2015. A self developed, pre-validated questionnaire was used. The study population comprised of nurses and midwives of Gauhati Medical College. The participants were explained the purpose of the study and requested to fill up three sets of questionnaires each of knowledge, attitude and practice. A brief description of the nature of the study and the procedure of completing the questionnaire was explained to them, the time given for filling up the form (Questionnaire) was half an-hour. The survey was descriptive and data was summarized as counts and percentage.

RESULTS AND OBSERVATION

Out of 150 nurses and midwives mostly was General Nursing Midwives from rural background followed by ANM and BSC nursing.

Knowledge: 80% of the participants had good knowledge on self-medication. Books (43.3%) were the most common source of information followed by internet (23.3%) and other sources. Most of them knew about the adverse reactions that might occur due to inappropriate medication though they were not able to specify the particular reaction for the individual drugs.

Attitude: The majority of the participants had a positive attitude towards self-medication. Regarding a change in attitude about self-medication same results were obtained i.e. 45% of the Nursing Midwives were not in favour to change their attitude about self-medication whereas 40% were in favour of change in their attitude towards self-medication.

Practice: Out of 150 participants all practiced self-medication. The common reasons for self medication was saving time (55.6%), doing away with the need to go to a doctor for a minor illness (33.4%), being economical (7.7%) and providing quick relief (3.3%). Headache (72%) was the most common symptom for which self medication was practiced followed cold (57.3%), fever (56%) etc. 53% use self-medication for themselves only, 35.6% practiced self-medication for themselves and family member as well and 11.4% use for someone else (friends, neighbors).

Table 1 Respondents Socio-Demographic Characteristics N=150

AGE IN YEARS	EDUCATION	BACKGROUND
21-25	ANM 50	Rural 96
26-30	GNM 75	Urban 54
30-35	BSc (Nursing) 25	
35-40		

Table 2 Showing source of information regarding drugs (N = 150)

Television	15
Books	65
Internet	35
Print media	10
Friends/Relatives	10
Past exposure	15

Table 3 Reported symptoms

REPORTED SYMPTOMS	FREQUENCY
Headache	108
Cold	86
Fever	84
Diarrhea	30
Sinusitis	15
Insomnia	10

Table 4 Respondent’s level of knowledge on self-medication

POOR KNOWLEDGE	30
GOOD KNOWLEDGE	120



Figure 1 Respondents Socio-Demographic Characteristics in percentage

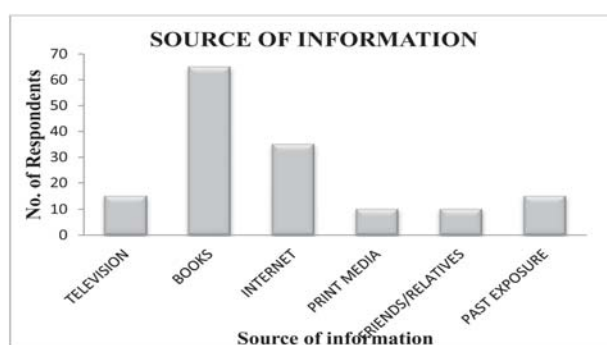


Figure 2 Showing source of information regarding drugs

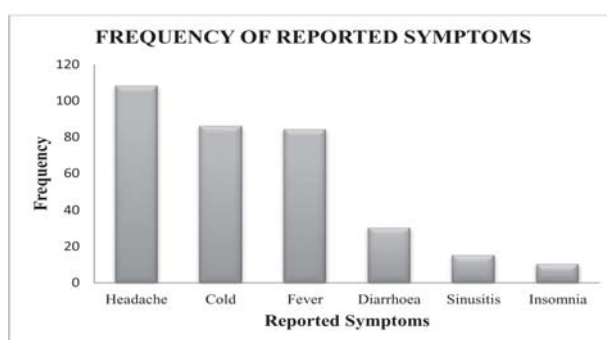


Figure 3 Showing frequency of reported symptoms

DISCUSSION

The International Pharmaceutical Federation defines self-medication as the use of non-prescription medicines by people on their own initiative.

Self-medication is considered an element of self-care.¹¹ Self-care, including self-medication, has been a feature of healthcare for many years and people have always been keen to accept more personal responsibility for their health status. The present study was conducted to evaluate the practices, attitude and perception of self-medication among nursing staff. The prevalence of self-medication in our study was found to be 100%.

In our study the most common reason for self-medication reported by a large number of participants was that it increases the knowledge regarding drugs and their use. Even if most of the participants had good knowledge on the various drugs and their pharmacology, they practiced self-medication with improper dosage and duration. This study is congruence with the study done by James, Handu, Khaja and Otoom,¹² which shows majority of participant, had fairly good knowledge. This could also mean that they had knowledge about side effects, advantages and disadvantages, which they have learned from their academic courses. There was also increase use

of antibiotics in an irrational manner with improper dose, dosage and duration. Antipyretics & analgesics were the most common class of drugs self-medicated by majority of the participants in our study. Paracetamol and other types of NSAIDs were the most common type of analgesics used for self-medication. This is similar to the study conducted by James, Handu, Khaja and Otoom¹² which shows analgesics (81.3%), antipyretics (43%), antibiotics (6%) and antihistamine (13%). Headache (72%) was the most common symptom in our study for which self medication was practiced This study was however different from the findings of Pandya R.N. where 52.5% respondent use medicines for cold/cough, 54% respondent for pain and 48.72% for fever¹³ and in studies from Western¹⁴ and Southern part of India¹⁵, cough & cold was the most common symptom for self-medication.

CONCLUSION

The study showed that nurses during their daily duties became more aware about drugs, their uses, adverse effects and contraindications. This helped them practice self-medication. However, even though most of the nurses still feared having adverse effects due to self-medication, yet not many had any experience. This descriptive study has found that self-medication is very common among nurses, facilitated by the easy availability of drugs and information from textbook. Since inappropriate self-medication has the potential to cause serious harm, not only to nurses themselves but also to those whom they suggest medication. The respondents showed good knowledge towards self-medication and positive attitude towards self-medication favoring it as acceptable. Analgesic and antipyretic were most commonly used drugs. Prevalence of self-medication was high due to minor illness. Although the self-medication practice is inevitable; there is great responsibility of drug regulatory authorities in this regard.

Conflict of interest: None declared.

Ethical clearance: Taken.

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