A Study on Self Medication Practices among General Public in Local Community

Keywords: self-medication, questionnaire, survey, significance

ABSTRACT

The practice of self-medication among the public is increased nowadays. Self-medication defined as, obtaining and consuming drugs without the advice of a physician ie, procuring medicines from the medical store without the prescription of a doctor. The misuse of non-prescription drugs are now becoming a serious problem. The main hazards of self-medication include drug interaction, incorrect dose and dosage, adverse drug event, in case of antibiotic it can lead to resistance. So it is very important to make the public aware about the lethal effects of using self-medication. The present study aims to evaluate the use of self-medication, among general public in a local community.

AIM: To study about the practice of self-medication among general public in a local community.

METHOD: A prospective cross sectional survey study was carried out for a period of 6 months in a local community. A total of 100 respondents were enrolled in the study. A specially designed questionnaire was prepared for evaluating the use of self-medication. The questionnaire was provided to the respondents at the time of community survey. Based on the response, the percentages were calculated for each question and finally determined the significance of age and gender with the practice of self-medication.

RESULT: Among 100 subjects enrolled in the study 56 were females and 44 were males. In this, 95% were reported that they practiced self-medication and rest 5% were not. There was significant association between age and use of self-medication and no significant association between gender and use of self-medication.

CONCLUSION: Our findings revealed that, the majority of study participants are practiced self-medication.
INTRODUCTION:

“William Osler” once quoted that desire to take medicines is perhaps the great feature, which distinguishes man from animals\(^1\). Self-medication is defines as the use of drugs that have not been prescribed by a licensed health care professional. In most households today, a large number of illnesses are initially treated with drugs that are easily obtainable to relieve light symptoms, such as headaches, common cold, sore muscles and bone pains. Thus the usage of OTC drugs among the public increases\(^2\). Responsible self-medication can reduce the burden on health care services and could be helpful in treating minor symptoms and illnesses that do not need consultation from a medical practitioner. However several studies reported that self-medication can lead to many problems like delay in health care seeking which in turn can lead to economic injuries, drug interaction etc\(^3\). So, self-medication is a global concern in both developed and developing countries\(^4\). The increased advertising of pharmaceuticals poses a larger threat of self-medication to the younger population in general. This raises concerns of incorrect self-diagnosis, drug interaction, and use of drugs other than for the original indication\(^5\). In India, it is very common to see self-medication practice and which is emerging challenge to health care providers. There is a lot of professional and public concern about the irrational use of drugs in self-medication. In developing countries like India, easy availability of a wide range of drugs coupled with inadequate health services result in increased proportion of drugs used as self-medication compared to prescribed drugs\(^1\). Previous studies have shown that self-medication practices are more common in women and in those who live alone, have a lower socio economic status, have more chronic ailments, have psychiatric conditions, are of younger age and in students\(^6\). The 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. The youth are highly influenced by the media and the internet which promote the self-medication behaviour\(^5\). But if the self-medication is practiced appropriately, it is a major contributor to the health care system and can be beneficial in various aspects. Convenience, economical advantage, direct and rapid access to treatment, self-reliance in preventing or relieving minor symptoms and improving a person’s active role in his/her own health care are some of the well-established advantages\(^7\). Patient satisfaction with the health care provider, cost of the drugs, educational level, socio economic factor, age and gender are the important factors influencing self-medication\(^8\). Few studies were conducted at community level in India to assess the magnitude of self-medication.
practices. Studies of such nature will provide useful insight on the reasons for which patients resort to this practice and might help the policymakers and regulatory authorities to streamline the process of drug regulations, updating the list of essential medicines and safety issues of over the counter drugs. Major problems related to self-medication are wastage of resources, increased resistance of pathogens and causes serious health hazards such as ADR and prolonged suffering. In India, it is very common to see self-medication practice and which is an emerging challenge to health care professionals. WHO promotes the practices of self-medication without medical consultation for effective and quick relief of symptoms to reduce the burden on health care service centres, which are often understaffed and inaccessible in rural and remote areas. By proper use of self-medication, we can decrease the help of health care professionals for every minor illness and so doctors may devote more time to investigation, treatment and prevention of serious pathologies. This will decrease the excessive demand on health delivery system and present patients from losing confidence in the system.

MATERIALS AND METHODS

A prospective cross sectional survey study was carried out for a period of 6 months in a local community. A total of 100 respondents were enrolled in the study. A specially designed questionnaire was prepared for evaluating the use of self-medication. The questionnaire was provided to the respondents at the time of community survey. Based on the response, the percentages were calculated for each question and finally determined the significance of age and gender with the practice of self-medication.

The protocol of study submitted to Institutional Human Ethics Committee (IHEC). The protocol was approved by committee with the approval number SJPCEC/P25/PP/2016/033.

A computerized literature and manual search was conducted to identify relevant studies, to find out the practice of self-medication among general public in a local community. Literatures which support the study were collected and they were properly reviewed for conducting the study.

A questionnaire was designed for collecting subject details, relevant to the study purpose, during the community visit, subjects data including name, age, sex, occupation, educational status, and also the reason for self-medication practices.
All the questionnaires were evaluated and based on the response, the percentages were calculated for each question and finally determined the significance of age and gender with the practice of self-medication.

**Inclusion Criteria:**

- People who are willing to co-operate for the study.
- People of age group between 18 and 70.
- People who are using self-medication.

**Exclusion Criteria:**

- People with mental or psychiatric issues.
- People giving incomplete data or information.

**RESULT AND DISCUSSION**

To study aims to determine the practice of self-medication among general public in a local community. A total of 100 respondents were enrolled in the study and their demographic data, self-medication practices were analysed.

The demographic analysis suggested that 56 were females and 44 were males (figure 1).

The subjects were grouped into 5 categories based on age, majority belongs to the age group of 48-57 years (31%) followed by (27%) in category of ≥ 58 years and (17%) in 38-47 years, (14%) in 28-37 years and (11%) in 18-27 years (figure 2).

Out of 100 subjects, 95% reported that they practiced self-medication and rest (5%) not practiced (figure 3). The study shows that 20% of the subjects always use self-medications whereas 44 % of them use it often (figure 4). 63% of respondents came to know about the self-medication from previous prescription, 22% from friends and relatives and 15% from advertisement (figure 5). 84% of subjects brought these medications directly from medical store and 11% of subjects depended on friends and family (figure 6). About 35% of subjects practiced self-medication because of reluctance to see doctor for minor ailments (figure 7). From the respondents using self-medication 35% took the medicines for headache, followed
by cough, cold and sore throat (24%), fever (22%), menstrual symptoms (6%), stomach ache and toothache (5%), vomiting and diarrhoea (2%), and ocular symptoms (1%) (figure 8). Analgesics (33%) were the commonly used self-medication, followed by antipyretics (23%), lozenges (19%), multivitamins (9%) and only 3% of respondents use antibiotics as self-medication (figure 9).

Table 1 shows the significance of impact of demographic variables to the practice of self-medication. We found that, there was significant association between the age and use of self-medication but no significant association between gender and use of self-medication.

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**Figure No. 1: Percentage distribution of subjects according to their gender**

**Figure No. 2: Percentage distribution of subjects according to their age (years)**
Figure No. 3: Use of self-medication in the study population

Figure No. 4: Practice of self-medication

Figure No. 5: Source of information about self-medication
Figure No. 6: Procuring of self-medication

Figure No. 7: Reasons in favour self-medication
Figure No. 8: Indications for self-medication

INDICATIONS FOR SELF-MEDICATION

TOOTH ACHE
OCULAR SYMPTOMS
VOMITING &...
MENSTRUAL...
STOMACH ACHE
COUGH, COLD, SORE ...
FEVER
HEADACHE

PERCENTAGE

Figure No. 9: Drugs used as self-medication

DRUGS USED AS SELF-MEDICATION

ANALGESICS
ANTIBIOTICS
ANTIVIRALICS
MULTIVITAMINS
DECONGESTANTS
LOZENGES
OTHERS

PERCENTAGE

Table No.1 Significance of demographic variables with the use of self-medication

<table>
<thead>
<tr>
<th>DEMOGRAPHIC VARIABLES</th>
<th>P- VALUE OF CHI-SQUARE (A=0.05)</th>
<th>INTERPRETATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>0.002</td>
<td>Significant</td>
</tr>
<tr>
<td>Gender</td>
<td>0.395</td>
<td>Not significant</td>
</tr>
</tbody>
</table>
CONCLUSION

Our findings revealed that the majority of study participants had practiced self-medication. The common reasons for this practice were no need to visit the doctor for mild illness, and for saving money. Major source of information regarding the use of self-medication was previous prescription. Most of the respondents have taken self-medications for headache, followed by cough, cold, and sore throat. There was significant association between age and use of self-medication but no significant association between the gender and use of self-medication.

Through this study, it was shown that there were lacunae in the knowledge and practice of self-medication among the public. Therefore, a proper guideline should be provided to the public regarding the use of self-medication.

We conclude that education intervention is the best remedy for any knowledge based problem to refine and resolve issues. So, the pharmacist and all health care professionals still need to educate the public on use of self-medication through training programs and continues education is very important.

Author’s contributions: All authors have equally contributed for making this study to be successful.

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REFERENCES