

Assessment of Knowledge Perception and Attitudes on Medications in General Population

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ABSTRACT

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Modern medicines have changed the way in which diseases are managed and controlled. Despite all their benefits, evidence continues to mount that adverse reactions to medicines are common, yet often preventable, cause of illness, disability and even death. The objective of the present study was to explore the perceptions and knowledge regarding ideas about the medication and as well as adherence in general population. A questionnaire was developed to assess both attitudes towards medications as well as self-medication. Our study found that the patients who received family assistance in managing their medications often lacked an understanding of some of their own treatments. Most of the respondents have taken medications from the pharmacists only, which shows there is greater chance and opportunity for the pharmacists in guiding and providing proper education to the patients.

INTRODUCTION

Medicine is considered as one of the most important necessity to all of us. Modern medicines have changed the way in which diseases are managed and controlled. Improper use of medicines brings potential health hazards. Despite all their benefits, evidence continues to mount that adverse reactions to medicines are common, yet often preventable, cause of illness, disability and even death. Hence, public knowledge, attitudes and practices regarding the use of medicines influence the decision to seek health care, the use of medicines and ultimately the success of the treatment. Prescription of medicine is almost wide spread of medical interventions which always lie at the heart of clinical practice. Although there is an extensive literature on patients' adherence to medication, much less attention has been paid to their ideas about medication.¹ Knowledge Attitude Practice (KAP) Studies tells us what people know about certain things, how they feel and also how they behave.² Patient perceptions towards medications might be important in a number of ways.³ Patient education also plays a critical role in facilitating patients' acceptance of their diagnosis and understanding behavioral changes required for active participation in treatment.⁴ Educational status is an important determinant of self-medication. The problem of educating low-literate patients cannot be ignored. The Joint

Commission on Accreditation of Health Care Organizations mandated that hospitals and other health organizations provide instructions understandable to patients, assess patients' knowledge, and document such educational effort.⁴

Patients with lower educational level might have more trust in physicians' advice.⁵ Patient knowledge of drug therapy and disease still remains poor and patient's memory of instructions given by physician is poor, since 50% of the information will be forgotten immediately. Lack of communication and lack of patient uptake of information may account for the marked up to 55% patient deviation from prescribed drugs.⁶ The concept of self-medication which encourages an individual to look after minor ailments with simple and effective remedies has been adopted worldwide.⁷ Unsupervised self-medication places patients at risk for medication misuse. Patient self-medication may also unwittingly generate dangerous drug–drug and drug–disease interactions.⁸ This practice will be observed in societies with high-level literacy.⁷ The objective of the present study was to explore the perceptions and knowledge regarding ideas about the medication and as well as adherence in general population.

METHODOLOGY

A questionnaire was developed after extensive literature review on the studies focusing on knowledge and perceptions towards medications. We aimed to include statements assessing both attitudes towards medications as well as self-medication. The questionnaire was slightly modified according to the need of this particular population. Respondents were explained about the study and oral consent was obtained from each and every participant. Individuals

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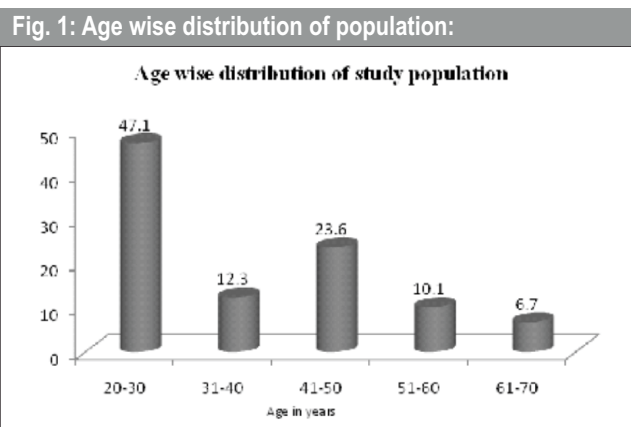
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who did not give verbal informed consent or who were unable to answer the questions due to some barriers were excluded. The questionnaire covered the following aspects a) standard demographic data to ascertain if there was any correlation between patient demographic characteristics and medication management practices; b) patient adherence and perception; c) self medication; d) information about medicines given to them by pharmacists; e) obtaining prescriptions and having them filled.

RESULTS

A total of 120 respondents were included in the study even though only 89 respondents were taken into consideration for the assessment, due to incomplete response and the respondents were aged between 20-70 years. This study population includes both the illiterates and literates, illiterates were in more number than literates. The majority of

| Illiterates | High school | Graduates |
|-------------|-------------|-----------|
| 34% | 43% | 23% |



| S.no | Questions Related To Knowledge Perception And Attitudes About Medicines | Response Level (percentage) |
|------|---|-----------------------------|
| 1. | What do you do when you have headache, temperature, cough and cold, body pains? | |
| | I will go to pharmacy | 69% |
| | I will consult doctor | 31% |
| 2. | Are you taking medicines at this moment? | |
| | Yes | 36% |
| | No | 64% |
| 3. | What type of medicines have you had in past? | |
| | Minor illness | 75% |
| | Major illness | 25% |
| 4. | Do you prefer drugs based on advertisements and do you ask the pharmacist for same drugs? | |
| | Advertisements | 15% |
| | Pharmacists | 85% |
| 5. | Do you think that all the OTC medicines are effective and safe? | |
| | Yes | 37% |
| | No | 53% |
| 6. | Have you ever experienced any side effects with medicines? | |
| | Yes | 33.7% |
| | No | 66.3% |
| 7. | Did you inform your pharmacist or physician about side effects of drugs you have experienced? | |
| | Yes | 30.3% |
| | No | 69.7% |
| 8. | Will you take nutritional supplements without asking your physician? | |
| | Yes | 12.6% |
| | No | 88.3% |

| | | |
|-----|--|----------------|
| 9 | If you or your family members get same disease will you purchase same medicines or will you consult physician? Yes No | 34.9% 64% |
| 10 | When you got to doctor do you like to have prescription or are you looking fir something else? I will feel it enough information I want some more information | 41.6% 58.3% |
| 11. | Do you always get prescription filled as soon as you get them or do you wait for sometime? Immediately fill the prescription I will wait for sometime | 61.7% 38.2% |
| 12 | Have you ever had to take a medicine over a long period of time? Yes No | 31.4% 68.5% |
| 13 | Will you prefer to go to an alternative practitioner? Yes No | 57.3% 42.7% |
| 14 | Are you given enough information about your medicines when it is dispensed by pharmacists or prescribed by physician? Yes No | 51.6% 48.3% |
| 15 | Do you think more costly drugs are more effective? Yes No | 59.5% 40.4% |
| 16 | While you consult a physician will you tell him/her about the medicines which you are using presently including OTC medications? Yes No | 61.7% 38.2% |
| 17 | Do you use the prescribed medications upto the given regimen or will you stop them if symptoms subside? Will use medicines until symptoms subside Will use medicines up to given regimen | 53.9% 46% |

respondents are between the age group of 20-30 years group (47.1%), followed by 12.36%, 23.6%, 10.11% in age group of 31-40 years, 41-50 years and 51-60 years respectively, while the least percentage of 6.7% of respondents were found between the age group of 61-70 years.

DISCUSSION

The data presented in this paper describe the views of a general population about medications. The analysis has not been done according to the type of drug because sufficiently detailed information about drug type was not collected. In our research study, survey was carried out about medication knowledge among different population in rural areas which includes both literates and illiterates.

Many patients resort to the practice instead of contacting health care professionals because of long waiting periods in hospitals, minor ailments, cost to save money and time, lack of accessibility, shortage of doctors, or a feeling that their ailment is beyond the knowledge of well trained doctors.

Without adequate knowledge of their medications intended purpose and effectiveness, patients relied on other factors, such as personal experience with their medications effects or complete trust in their provider's medical advice, to assign importance ratings.⁹

Our study found that the patients who received family assistance in managing their medications often lacked an understanding of some of their own treatments. Medicines should never be exchanged with others, friends or family as they may not be appropriate to them. Patients should not believe in "a pill for every ill" and should accept non-medicines therapy when only advice and assurance is provided by the physician.¹⁰

As in previous studies self-medication was considered as a major problem associated with minor ailments like sore throat and common cold. With the option of obtaining antibiotics from pharmacies, it may be hard to limit direct access of patients to antibiotics.¹¹

The adherence towards medication and the complete filling of prescription was associated with the cost. Studies in low-income countries showed that the cost of medical consultation and low satisfaction with medical practitioners were also related to self-medication.¹²

Patients should avoid practicing self-medication, if possible, but if unavoidable they should consult and seek help from the dispenser/pharmacist and not rely upon their own previous experience. Previous surveys shown that literate people were 76% more likely to self-medicate than illiterate people.¹³

Pharmacists play a key role in providing information about OTC medications to the patient. Information technology will play a fundamental part in helping pharmacists to provide new services. As mentioned in our study that most of the respondents have taken medications from the pharmacists only, which shows there is greater chance and opportunity for pharmacists to provide efficient professional guidance for safe and appropriate OTC use. According to the literature, majority of the patients expressed positive attitudes towards pharmacist provision of OTC medication and related advice.¹⁴ According to the results of our study, most of the physicians as well as pharmacists were informed by patients regarding the side effects produced by the medication. So, the pharmacist should provide information about side effects of drugs at the time of dispensing and also about the completion of prescribed regimen even after the symptoms has been subsided.

CONCLUSION

As an outcome of our research, most patients were unaware about the proper usage of medicines; Low level of knowledge may put patients at risk of health related problems. This indicates the need for change in the perceptions and practices of the health care professionals towards safe use of medicines. Community pharmacists should get continuous education and repeated training programs because they are easily accessible for patients once the medicine is prescribed and Community pharmacists can play a significant role in guiding and providing proper education to the patients.

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