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Assessment of Knowledge, Attitude and Practice About Self Medication Among Adults in Urban Population

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ABSTRACT:
The objective of the study is an assessment of knowledge , Attitude and practice about self medication among adult in urban population.This is a prospective observational study conducted in local community pharmacy stores in Nellore for 6 months duration July 2024 to December 2025. Our study includes a total of 221 patients receiving self medication using their own knowledge and pharmacist advice and finding percentages based on gender, age, qualification,occupation wise, socio economic status, personal reasons and analyzing individual decision on medication for diseases by Modified kuppu swamy scale and Specially designed patient data collection form .Our results shows the proportion of educated people who are using the self-medication is more as compared to that of uneducated people. Common reasons for using self-medication are assuming less severity, Knowledge on medication and Doctor fee. This study shows the greater number of people have taken self medication for minor ailments like headache and body pains. Our results shows majority of unemployed people have taken self medication compared with employed people. The majority of the participants who self-medicated belonged to the middle class socioeconomic class followed by upper-middle class.. Educating the public on how to self-medicate is an important step that can be taken to reduce the chances of them misusing or abusing OTC medications. A patient solely dependent on themselves or blindly trusting their local pharmacists for the right remedy might end up with a bigger disease or problem than with what they started . so stopping this process need a standard and legalized controllance on people and pharmacists to avoid drugs resistance and adverse drug reactions.

KEY WORDS: OTC medication, Kuppu swamy scale, Socio economic status ,pharmacist .

INTRODUCTION:

Self-medication is an essential part of healthcare system and its exercise is prevalent[1]. Inspite, the main problem with self-medication is the harmful outcomes due to its inappropriate use[2]. Consumers interest to manage their routine health problems practice self-medication as it is simple, affordable, and time saving.

Practice of self-medication is affected by several elements such as individual , institutional, and ecological factors. Media, extensive advertisement by the pharmaceutical manufacturers also play an important role toward exercising self-medication. Inadequacies in the healthcare delivery systems especially in low income countries such as inaccessibility, unregulated distribution of medicines, inequitable distribution, and lack of healthcare professionals, high costs, and patients' attitudes toward healthcare practitioners are some of the important drivers of self-medication[3].

PREVALENCE:

In developing countries reported prevalence rates are much higher, with 79% in India. 84% in Pakistan. 78% in Saudi Arabia. 67% in Nigeria, in Sri Lanka (urban; 12.2%, rural; 7.9%)[4].

Reasons of Self Medication :

A number of reasons listed for self-medication like urge of self care[5] ,lack of time ,lack of health services[6] ,financial constraints ,ignorance ,feeling of sympathy toward family members in sickness ,misbelieves ,extensive advertisement and availability of drugs in other than drug shops[7].

Potential Benefits of self medication:

Self medication is arising an increasingly important area within health care[8] . It promotes patients towards greater freedom in making decisions about management of minor health problem thereby promoting empowerment[9]. Individual behaviour of self management relative to their health , Self managing in avoiding or alleviating minor symptoms or conditions, Education opportunities on specific health issues[10].

Potential Risks of self medication:

Despite, self medication is involved with risks such as misdiagnosis[11], using of over drug dosage, extending duration of use, drug interactions and poly pharmacy[12]. The following may be particularly challenging in the elderly[13]. . Possible potential risks are incorrect self-diagnosis , failure to seek appropriate medical advice promptly , Incorrect choice of therapy , failure to recognize special pharmacological risks [14].

List of commonly used drugs for self medication:

Category	Drugs
Anti histamines	Cetrizine , Aminophylline ,camphor ,chlorphenaramine maleate ,codeine phosphate Etc.,
Analgesic	Acetaminophen ,Ibuprofen ,aspirin ,Aceclofenac , Diclofenac
Antacid	Gelusil , rantidine , pantoprazole ,omeprazole ,Etc.,
Anti fungal	Clotrimazole , fluconazole
Vitamin	VitaminA ,vitamin E ,Vitamin D ,Vitamin B complex
Antibiotics	Ciprofloxacin , ceftriaxone ,amoxicillin
Anti diarrhoeal	Loperamide , Diphenoxylate , Racecadotril

Laxatives	Dulcolax , lactulose, Liquid paraffin , Castor oil

Research methodology : it is prospective observational study conducted in nellore district and sample size is 221 and duration is 6months (july 2024 to December 2024)

INCLUSION CRITERIA :
Study participants who are purchasing drugs with out prescription with age of 18 to 60 years

EXCLUSION CRITERIA :
All the patients were age less than 18 and who are not willing to participate in study .

STUDY MATERIALS :
Modified kuppu swamy scale : evaluating the socio economic status of an personal or family in municipal areas[15][16] .
Specially designed patient data collection form : This proforma is used to record the necessary information in demographics (age, gender, occupation or educational status), chief complaints, personal history, socioeconomic status based on annual income, reasons for considering OTC medication[17].

STUDY PROCEDURE:
All the data of the subjects is collected based on the inclusion and exclusion criteria.A proforma is specially designed to record the data from the subjects who were visiting to pharmacies.Subjects with general symptoms of fever, body pains headache, cough, gastric problems were considered and data is collected.The collected data will be analyzed and the information will be tabulated as per study objective using Microsoft excel.

RESULTS:
A total of 221 patients were recruited . and results were shown in the below table .

Gender	No of patients	Percentage (%)
Males	178	81%
Females	43	19%
Total	221	100%

Patient among categorization based on age :
results were shown in below table .

Age group	No of patients	Percentage
18 -27	59	21%
28-37	66	30%
38-47	74	33%
48-57	19	9%
58-67	3	1%
Total	221	100%

Distribution of Responders according to the qualification :

results were shown in the table.

Qualification	No of patients	Percentage %
Illiterate	52	23%
Primary school	4	2%
Middle school	6	3%
Intermediate	31	14%
High school	40	37%

PATIENT DISTRIBUTION BASED ON OCCUPATION WISE:

results were shown in the table

Occupation	No of patients	Percentage%
Profession	21	10%
Semi profession	36	16%
Shop owner , farmer , clerical	43	19%
Skilled worker	15	7%
Semi skilled worker	17	8%
Un skilled worker	18	8%
Un employed	71	32%

DISTRIBUTION BASED ON SOCIO ECONOMIC STATUS:

results were shown in the table .

Socio economic status	No of patients	Percentage%
Upper	30	13%
Upper middle	59	27%
Middle	75	34%
Upper lower	15	27%
Lower	42	19%
Total	221	100%

Distribution of responders according to the reasons :

Reasons for considering OTC medications	No of patients	Percentage %
Doctor fee	38	18%
Lack of time to consult doctor	15	7%
Assuming less severity	61	27%
From other person suggestion	31	14%
Knowledge on medication	44	20%
Ignorance	22	10%
Misbelieves	1	0.4%

Extensive advertisement	9	4%
Total	221	100%

Distribution of responders according to the self medication taken for diseases:

Participants cheif complaints	No of patients	Percentage
Headache	36	16%
Cough and cold	23	10%
Body pains	34	15%
Vertigo	4	2%
Nausea and vomiting	8	4%
Skin infections	16	7%
Eye and ear infections	21	10%
Constipation	7	3%
Diarrhea	16	7%
GI disturbances	21	10%
Throat infections	2	1%
Fever	19	9%
Stomach pain	5	2%
Generalized weakness	9	4%
Total	221	100%

Distribution based on drugs used in study population :

Distribution of responders according to drugs	No of patients	Percentage %
Analgesics	72	33%
Antipyretics	19	9%
Antacids	22	10%
Antihistamines	25	11%
Antiemetics	8	4%
Anti microbials	28	12%
Multi vitamin supplements	11	5%
Anti diarrhoels	16	7%
Mucolytics	8	3%
Laxatives	7	4%
Miscellaneous	5	2%
Total	221	100%

Conclusion:

This study focused on the self-medication of the OTC drugs, their use and reason for using it. Study reveals that with increasing the literacy, the demand of self-medication also increasing day by day. The proportion of educated people who are using the self-medication is more as compared to that of

uneducated people. This study shows the greater number of people have taken self medication for minor ailments like headache and body pains. Our results shows majority of unemployed people have taken self medication. The majority of the participants who self-medicated belonged to the middle class socioeconomic class followed by upper-middle class. It should be an obligatory part of the duties of a health care professional. Educating the public or the patients on how to self-medicate is an important step that can be taken to reduce the chances of them misusing or abusing OTC medications. They focus on just treating the symptom and might even let the underlying disease progress into a severe or fatal form. Interventions at different levels (accessibility, affordability) that will change the public's perception of OTC medication usage and vigilance during drug dispensation may help reduce the OTC medication abuse. A proper regulatory drug control must be enacted, rationally limited the accessibility of medicines to the people.

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