

Assess the Prevalence of Self-Medication among Individuals in a Selected Community at Thoothukudi

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Abstract: *Self-Medication is harmful to one's health and is widespread in the country. To reduce the practice of self-medication, people should get sufficient health education. The study was undertaken by the investigator to assess the prevalence of self-medication among individuals in a selected community at Thoothukudi. The samples were selected by purposive sampling method. The sample size was 65 and they were selected based on inclusion criteria. A checklist was used to determine the prevalence of self-medication. The study findings revealed that among 65 samples 69% of samples reported engaging in self-medication, 44% of samples were taking self-medication for fever and cough, 56% were for cold, 33% were for knee pain, 47% for head ache, 33% for abdominal pain and 29% were for diarrhea. 73% were commonly taking Tab. Paracetamol as self-medication, 42% were taking cough syrup, 9% Anti histamine and antibiotics and 16% were taking Tab. Pantoprazole as self-medication. While self-medication may offer short-term relief, the potential long-term risks make it a serious public health issue. Implementing comprehensive health education initiatives is essential to reduce this practice and ensure safer health practices in the community.*

Keywords: Self-Medication, Health education, public health, Community study, Thoothukudi

1. Introduction

In this mechanical fast moving world human beings have got no time to spend for their health. It is completely neglected until the body gives an alarm. If there is any health problem arises also immediate attention is not given and instead that they are taking self-medication.

Self-medication has traditionally been defined as the taking of drugs, herbs or home remedies on one's own initiatives, or on the advice of other person without consulting a doctor.

Though self-medication helps to reduce the cost of treatment, traveling time and consultation time, major health problems may occur. The common problems related to self-medication are wastage of resources increased resistance of pathogens which can cause serious health hazards. Antimicrobial resistance is a current problem worldwide particularly in developing Countries where antibiotics are available without any prescription. Hence, the laws related to controlling self-medication can be promulgated to regulate responsible self-medication. In India it is very common to see self-medication practice and which is emerging challenge to health Care providers.

Studies on self-medication showed that factors like education, family, society, easy availability of drug and exposure to advertisements are contributing to self-medication. Thenmozhi (2023) conducted a cross-sectional study among the rural community people in Keezhur, Chengalpattu District, Tamilnadu, and proved that self-medication was common in 60.5% of people, and 46.6% of them frequently used analgesics. The most frequent condition for which people used self-medication was headache (30.4%).

In less developed countries self-medication is considered "responsible" because it may help to treat diseases that do

not require medical attention and may reduce overuse of medical services. Self-medication's purpose is to solve minor health issues.

Although the potential benefits seem to be of a financial nature, self-medication can frequently cause unwanted side effects that would increase healthcare costs, creating an additional burden.

2. Methodology

The research design selected for the study was descriptive in nature. The study was conducted at P&T colony at Thoothukudi. The target population comprised of samples between 18 to 50 years and the sample comprised of 65. The sampling technique used for this study was purposive sampling. Samples who were willing to participate in this study were included. The tool for the present study consisted of two parts. Part I consisted of demographic variables such as age, place, gender, occupation, education, income, Health Insurance, type of family, marital status and number of children. Part II consisted of a checklist to assess the prevalence of self-medication. The tool used in the study was validated for appropriateness, adequacy Relevance, completeness, and comprehensiveness. Comments and suggestions were invited and a few changes were made based on the suggestions from the experts. Each sample was interviewed separately using the prepared tool. This ensures that the responses are individualized and avoids bias or influence between participants. The process also helps ensure consistency in the way questions were presented to all participants. After the data collection, the information was organized, tabulated, analyzed, and interpreted using descriptive and inferential statistics. Descriptive statistics will help summarize and describe the key findings (e. g., percentages of individuals engaging in self-medication), while inferential statistics can help identify any relationships or differences in behaviors among demographic groups (e.

g., age, income, family type. The study included obtaining oral consent from each participant before beginning data collection. This is an essential step in ensuring that participants are informed about the purpose of the study and are voluntarily participating.

3. Data Analysis and Interpretation

Distribution of samples based on demographical variables.

Among 65 samples, 85% of the samples were in the age group of 18-37 years, 77% samples were residing in urban area, 57% of samples were females, 62% of samples were employed, 97% of samples were literates 55% samples were earning above Rs.10, 000 per month, and 97% samples were from nuclear family.

Prevalence of self-medication

Among the 65 individuals surveyed, 69% reported engaging in self-medication. This reflects a high rate of self-medication in the community, which may pose health risks.

Symptoms for which the self-medication was used; N= 45

Symptoms	Number	Percentage
1. Fever	20	44
2. Cough	20	44
3. Cold	25	56
4. Knee pain	15	33
5. Headache	21	47
6. Abdominal pain	15	33
7. Diarrhoea	13	29

Among 65 samples 44% of samples self-medicated for fever and cough, 56% reported using self-medication for a cold, 33% self-medicated for knee pain, 47% used self-medication for headaches and 29% used self-medication for diarrhea.

Commonly taken self-medication; N= 45

Medicines	Number	Percentage
1. Paracetamol	33	73
2. Cough syrup	19	42
3. Anti-histamines	4	9
4. Antibiotics	4	9
5. Pantoprazole	7	16.

Among 45 samples 73% were commonly taking Tab. Paracetamol as self-medication a popular pain reliever, indicating its widespread use for various symptoms, 42% reported using cough syrup, 9% taking Anti histamine and antibiotics and 16% taking Tab. Pantoprazole as self-medication.

4. Conclusion

Self-medication can lead to various health issues, including incorrect diagnosis, delayed treatment, drug resistance (especially with antibiotics), and side effects due to improper usage. The high prevalence (69%) of self-medication calls for urgent attention, especially considering that the most commonly used drugs, like Paracetamol, may be misused or overused. There is a pressing need for health education to raise awareness about the risks of self-medication, including the dangers of using antibiotics without prescription and the potential harm of overusing pain relievers like Paracetamol.

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