A Descriptive Study to Assess the Knowledge, Attitude and Practice Regarding the Use of Self Medication among People Visiting in Selected Pharmacies at Urban Area

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Abstract: *A descriptive study to assess the knowledge, attitude and practice regarding the use of self medication among people visiting in selected pharmacies at urban area. To evaluator research approach with non experimental descriptive survey design was used to measure knowledge, attitude and practice regarding used of self medication among peoples visiting in selected pharmacies at urban area. The sample was people visiting in selected pharmacies at urban area to fulfilling the inclusion and exclusion criteria and the samples consist of 100. The sampling technique was used in this study was purposive and interview sampling technique. Data was collected by using structured knowledge questionnaires, Likert Scale and checklist. Based on the objectives and the hypothesis the data was analyzed. The result shows that 33% of the adults from urban area had poor level of knowledge score, 66% had satisfactory and only 1% of them had excellent level of knowledge score. It shows that 75% of the adults from urban area had average level of attitude score and 25% of them had good level of attitude score. It shows that each 3% of the adults from urban area had poor and good level of practice score and 94% of them had average level of practice score.*

Keywords: Knowledge, Attitude & Practice, Peoples visiting in selected pharmacies, Use of self medication

1. Introduction

There are many public and professional concerns about irrational use of drugs. The prevalence rate is high all over the world up to 68% in European countries, 57% in USA, 92% in adolescence of Kuwait. The prevalence rate of self medication and self care are 31% in India, 59% in Nepal and 51% in Pakistan[6]. A study was conducted to assess the prevalence of self-medication in Brazilian children. The finding showed self medication ranging from 7.1 to 53.2%for different age groups.[1]

Concerns about practice of self-medication (SM) world across are based on associated risks such as adverse drug reactions, disease masking, inaccurate diagnosis of disease, increased morbidity, drug interactions, wastage of healthcare resources and antibiotic resistance.1-6 The World Health Organization (WHO) has defined self-medication as the use of drugs to treat self-diagnosed disorders or symptoms, or the intermittent or continued use of a prescribed drugs for chronic or recurrent disease or symptoms. .[2]

Self medication can be defined as obtaining and consuming drugs without advice of a physician either for diagnosis, prescription or surveillance of treatment. There is a lot of public and professional concern about the irrational use of drugs. Knowledge of their side effects leads to serious long term deleterious complications. Self medication is the treatment of common health problems with medicines especially designed and labeled for use without professional supervision and approved as safe and effective for such use. These medications do not require a prescription for purchase and are thus called non-prescription medicines.[3]

2. Literature Review

Jawarkar, A. K et. al (2017)they study the prevalence of self-medication practices amongst elderly population in urban health center of Amravati, Maharashtra. Materials & Methods: A cross-sectional study was conducted in April 2015-July 2015 data were collected by personal interviews using pretested questionnaires. The sample size was calculated using the formula n= 4pq/d2 considering p as 56% and allowable error 10%. A total of 320 elderly people were included in the survey. The eldest member of the family, present at the time of the visit was interviewed. Data were collected from 320 persons and analyzed using SPSS version 16.0. Results: The overall prevalence of self-medication was 48%. Allopathic drugs were the commonest mode of self-medication (95%). The commonest reason for self-medication was easy availability of medicines in medical stores and other shops, time saving factor (69%). Local pharmacist (89%) was the main source of information. Joint and muscle pain was the commonest indication identified for self-medication (89%). Conclusion: The study revealed that 48% of elderly population is influenced by self-medication practices without consulting doctors and the commonest causes for self medication were musculoskeletal pain, headache and fever. [18]

Dutta R et al.(2017*)* in this study the objectives of the study were to find out the prevalence of self-medication practices in the community; to describe the common conditions where self-medication is practiced. Methods: A community based cross sectional study was conducted in a rural population at Kuthambakkam village, Tamil Nadu from February 2015 to July 2015. This village falls under the rural field practice area of Department of Community Medicine, Saveetha

Medical College and hospital, Thandalam. There were 1175 households in this village of which 165 households were identified for the study purpose using simple random sampling technique. Statistical analysis: Data entry and analysis was done using SPSS version 16 software. Descriptive statistics were calculated for background variables, attitude and practices of self-medication. Results: The study was conducted in 165 households in Kuthambakkam village, the rural field practice area of Department of Community Medicine, Saveetha Medical College. The median age of the study participants was 38 years. The minimum age was 17 and maximum was 77 years. 73 (44.2%) of study subjects reported having health problems currently. Of them, 76.7% replied they consulted a doctor for their problem, 17.8% resorted to self-medication and rest 5.5% took native treatment at home. Conclusions: It is imperative to address the practice of self-medication among the people in the age of growing drug resistance being reported. Periodic studies on the knowledge, attitude and practice of self-medication may give an insight into the pattern of drug use among the people. [19]

Gudka S et.al(2015) twenty-eight studies met the inclusion criteria. There were variations in methods, scenarios, how the authors reported and defined appropriate advice, and study populations. The proportion of pharmacy staff providing appropriate advice varied widely from 0% to 96%, with a minority providing appropriate advice in 83% of the scenarios performed. There was considerable variation in results, with the majority of studies reporting that inappropriate advice was provided by pharmacy staff when handling self-medication requests in developing countries. Consistent and robust methods are required to provide comparisons across practice settings. There is also a need to identify contributing factors to poor provision of advice for developing intervention strategies for practice improvement. A literature search was undertaken via MEDLINE, EMBASE, CINAHL Plus, Web of Science and International Pharmaceutical Abstracts. Studies that reported on the proportion of pharmacy staff providing appropriate advice when handling self-medication requests in developing countries were included. The appropriateness of advice was determined by each author's definition in the original studies. [23]

3. Methodology/Approach

In this study a evaluator research approach with non experimental descriptive survey design was used to measure knowledge, attitude and practice regarding used of self medication among peoples visiting in selected pharmacies at urban area. The sample was people visiting in selected pharmacies at urban area to fulfilling the inclusion and exclusion criteria and the samples consist of 100. The sampling technique was used in this study was purposive and interview sampling technique. Tools used for data collection includes four sections namely demographic variables, structured knowledge questionnaires, Likert Scale and check list.

4. Result

The structured knowledge questionnaires and checklist was used for data collection. The analysis was done with the help of descriptive and inferential statistics. The analysis and interpretation of the observations are given in the following section:

Section A: Distribution of people visiting selected pharmacies with regards to demographic variables.

Section B: Assessment of level of knowledge, attitude and practice regarding use of self medication among people visiting selected pharmacies at selected urban area.

Level of knowledge score	Score Range	Level of Knowledge Score	
		No of people	Percentage
Poor	1-3	33	33
Satisfactory	4-7	66	66
Excellent	>7	1	1
Minimum score		1	
Maximum score		8	
Mean knowledge score		4.13 ± 1.49	
Mean % Knowledge Score		41.3 ± 1.49	

Level of attitude score	Score Range	Level of Attitude Score	
		No of people	Percentage
Poor	1-12	0	0
Average	13-28	75	75
Good	29-40	25	25
Minimum score		19	
Maximum score		36	
Mean attitude score		26.61 ± 3.20	
Mean % attitude Score		66.52 ± 8.00	

Level of practice score	Score Range	Level of Practice Score	
		No of people	Percentage
Poor	1-4	3	3
Average	5-7	94	94
Good	8-10	3	3
Minimum score		4	
Maximum score		9	
Mean attitude score		5.50 ± 0.81	
Mean % practice Score		55 ± 0.81	

Section C: To find out correlation between knowledge and attitude, knowledge and practice and attitude and practice regarding use of self medication among people visiting selected pharmacies at selected urban area.

Overall	Mean	SD	r-value	p-value
Knowledge	4.13	1.49	-0.394	0.0001
Attitude	26.61	3.20		S,p<0.05

Overall	Mean	SD	r-value	p-value
Knowledge	4.13	1.49	0.096	0.343
Practice	5.50	0.81		NS,p>0.05

Overall	Mean	SD	r-value	p-value
Attitude	26.61	3.20	0.06	0.551
Practice	5.50	0.81		NS,p>0.05

Section D: Association of knowledge, attitude and practice score regarding use of self medication among people visiting

selected pharmacies at selected urban area with their selected demographic variables.

5. Conclusion

It shows that 33% of the adults from urban area had poor level of knowledge score, 66% had satisfactory and only 1% of them had excellent level of knowledge score. It shows that 75% of the adults from urban area had average level of attitude score and 25% of them had good level of attitude score. It shows that each 3% of the adults from urban area had poor and good level of practice score and 94% of them had average level of practice score.

6. Future Scope

Nursing practice: Nursing service has directs significant impact on human health. The expanded role of the professional nurse emphasizes those activities which promote health and preventive behavior among peoples. The most of the peoples do not have the adequate knowledge regarding use of self medication; the presence study is an attempt to assess knowledge, attitude and practice regarding use of self medication among people at selected pharmacies at urban area. As a part of multi dimensional approach the presence study findings would help the community health nurse:-

To develop and understanding about the knowledge, attitude and practice regarding use of self medication among people at selected pharmacies at urban area.

To anticipate the needs, plan nursing activities and implement the need base intervention to peoples in selected pharmacies at urban area.

Nursing administration: Nurse Administrators are the back bone for providing facilities to improve knowledge and attitude regarding use of self medication. Findings of the present study will help:

The nurse administrators can organize continue education program for people to update the knowledge and disseminate to the people in selected pharmacies at urban area.

The nurse administrators can also organize and plan different program to impost the information on use of self medication to the people in the selected pharmacies at urban area.

Community health nurses should have better knowledge on use of self medication so that they can provide education in community members to changing their attitude towards use of self medication.

Nursing education: Findings of the present study depicts that nurses requires broad knowledge to provide education regarding use of self medication which can improve the knowledge, change attitude towards use of self medication and improve practice . Nurse educator can plan the strategies to overcome the problems regarding use of self medication through the community based education to the people.

Nursing research: Nursing depends upon the selection systematic application and evaluation of knowledge from basic sciences. The present study will help:

To undertake research in any areas like urban and rural community area so that the nurse can contribute to the prevention regarding use of self medication.

To undertake more researches in this area to determine the existing knowledge, attitude and practice regarding use of self medication among the people to identify needs and bring more awareness.

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