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# Knowledge, attitude and practice of self medication among the staff-members of Charotar University of Science and Technology

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## ABSTRACT

Self-medication raises its occurrence in many situations in our everyday lives, which is an inappropriate and harmful practice. A research framework was conducted to evaluate the awareness, attitude and practice of self-medication among the CHARUSAT University staff members. Among the staff members, a pre-validated questionnaire was circulated. Using Microsoft Excel, information was gathered and evaluated and the results were represented as numbers and percentages. Total 136 staff-members voluntarily took part in the study. We found that, source of information of the drugs used for self-medication were "previous prescription (77.7%)" and source of drugs was "medical store (78.8%)". Only (34.3%) staff-members accepted the fact that they always visited a qualified practitioner whenever they got sick. Most of the staff-members took self-medication for headache (73.5%) followed by cough, cold, sore throat (73.5%) and fever (56.6%). Out of total 136 staff-members most of them took Analgesics (61.8%) as self-medication followed by lozenges (66.2%). For almost 66.9 % of university staff members, self-medication was common. They provided a reason that "no need to visit a doctor for minor illnesses". 73.5 % of the population has taken cough and cold preparations as self-medication.

**KEYWORDS:** Self-medication, Questionnaire, Knowledge, Attitude, Practice

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## INTRODUCTION

Self Medication is known as the common practice of using medication such as over-the-counter (OTC) medicines for minor ailments without a registered medical practitioner's consultation. In developed and developing countries, it is a part of self-care [1][2]. However, in developed countries, self-medication cases are on an increased scale as people live there think it is the first line of treatment for minor health issues such as headaches, vomiting, cough and cold, fever [3]. Other factors, consisting of prior experience in the treatment of similar diseases, knowledge of medications and their use, incessant advertisement and lack of access to trained health professionals [1], may also be responsible for such practice [1].

Many factors have been found to play a role in leading to self-medication practice among staff members, such as easy

drug availability, drug manufacturers advertisement, prior encounters with symptoms or disease [4][5]. Self-medication can save money and lives if used wisely, but if used irrationally, it can raise the risk of adverse incidents, bacterial infection, hypersensitivity, drug tolerance, signs of drug withdrawal and masking disease that can delay proper diagnosis [6]. In the proper use of non-prescription medications, self-medication used safely can play a crucial role, improving protection and reducing undesirable drug effects [7]. Families, acquaintances, pharmacists, previous prescription medication, articles, drug advertisements and the internet are the most common sources of self-medication [8].

Among the CHARUSAT campus students, a research with a similar aim was performed. The current study among the staff members of the CHARUSAT campus was suggested, taking into account the results of the previous study [9].

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## METHOD

### Subject Enrolment Details

As shown in Figure 1, all of CHARUSAT's current departments / institutes were involved in data collection. The number shown in the figure was the voluntary contribution of staff members from different departments / institutes.

### Study Site

The study was carried out among the staff members of the Charotar University of Science and Technology (CHARUSAT), Changa.

### Study Design

It is a questionnaire-based, cross-sectional study design. From the previous study [3][7], a questionnaire on self-medication was taken. For data collection, the English language was considered appropriate.

### Data Collection Process

By contacting the staff members of the CHARUSAT campus, a questionnaire-based survey was carried out. The nature of the research and the context of the questionnaire were briefly clarified to the staff members. Both participants were presented with details concerning the questionnaire on self-medication behaviors. Verbal consent was obtained and research participation was entirely voluntary. First questions were asked about the habit of self-medication practice (yes or no) and if the answer is "YES" then subsequent leading questions were included about age, gender, education status, source of information, awareness of effective self-medication practice, types of drugs used for self-medication and diseases leading to self-medication.

### Data Analysis

Data were presented as number counts and percentages. Descriptive analysis was used to represent the data. Microsoft Excel was used for analysis of data.

## RESULTS

There was a total of 136 staff members, of whom 83 (61 %) were men and 53 (39 %) were women. The mean age was found to be  $43.5 \pm 2$  years, varying between 21 and 65 years. A total of 99 (72.8 %) staff members have taken self-medication, while the remaining 37 (27.2 %) staff members have never taken self-medication to date.

### Knowledge

Most common reasons for taking self-medication was like "there was no need to visit doctor for minor illness 91 (66.9%)" followed by "self-medication provided quick relief 61 (44.85%)", "it was time saving 37(27.20%)", and "there was ease and convenience in taking self-medication 42 (30.88%)". (see Table 1)

Figure 2 represented the sources of the drugs used for self-medication. Majority of participants 73 (77.7%) answered "previous prescriptions" followed by 78 (78.8%) "medical store".

The most common reason for **not taking** self-medication were such as "there was lack of knowledge about medicines 17 (41.5%)", "risk of adverse effects 15 (36.6%)", "risk of using wrong drugs 16 (39%), risk of misdiagnosing 9 (22%)." (See Table2)

### Attitude

In our study, we found that out of 136 staff-members only 59 (56.2%) staff-members accepted the fact that "they sometimes visited a qualified medical practitioner whenever they fell ill", while 36 (34.3%) staff-members said that "they always visited" and 10 (9.5%) staff-members "visited rarely" as depicted in Figure 3.

### Practice

Out of 136 staff-members, most of the staff-members 100 (73.5%) took self-medication for headache followed by

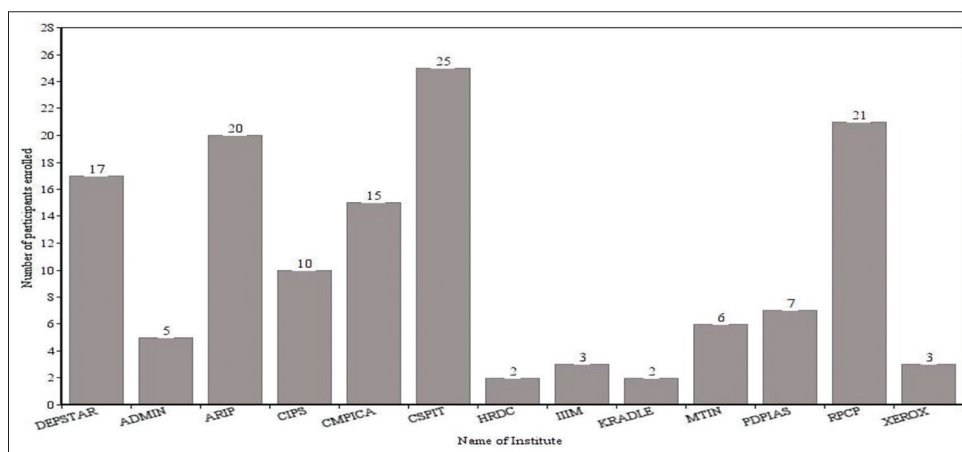


Figure 1: CHARUSAT's departments / institutes for data collection.

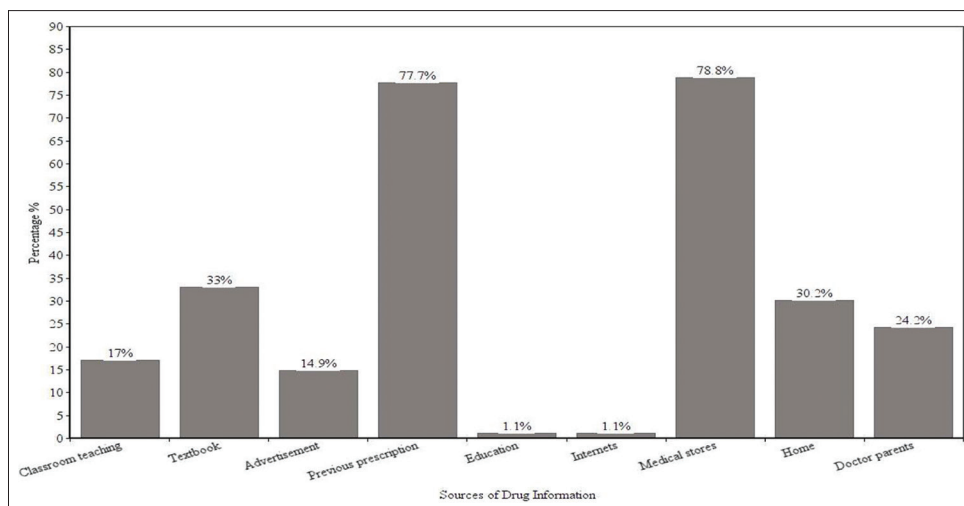


Figure 2: Sources of drug Information for Self-medication

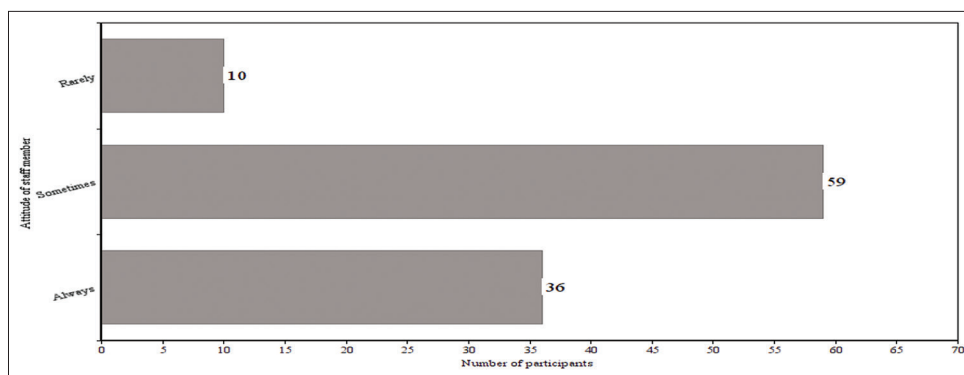


Figure 3: Attitude of Staff-members while visiting Hospital

Table 1: Reasons for Self-medication

Sr. No.	Reason for Self-Medication	Numbers (n)	Percentage (%)
1	Confidence on your knowledge about medicine	43	31.61
2	Ease and convenience	42	30.88
3	No need to visit doctor for minor illness	91	66.9
4	Quick relief	61	44.85
5	Time saving	37	27.20
6	Economical	16	11.76
7	Learning opportunities	8	5.88
8	Crowd avoidance	6	4.41

Table 2: Reasons for not taking medication

No. Reason for not taking Self-Medication	Numbers (n)	Percentage (%)
1 Lack of knowledge about medicines	17	41.1
2 Risk of adverse effects	15	36.6
3 Risk of using wrong drugs	16	39
4 Risk of misdiagnosing	9	22
5 Risk of drug dependence	7	17.1
6 Risk of using drugs wrongly	13	31.7

cough, cold and sore throat 100 (73.5%), and fever 77 (56.6%). Out of 136 staff-members, most of the staff-members 84 (61.8%) took analgesics as self-medication followed by cough and cold preparation 99 (66.2%). (Figure 4 and Table 3)

**DISCUSSION**

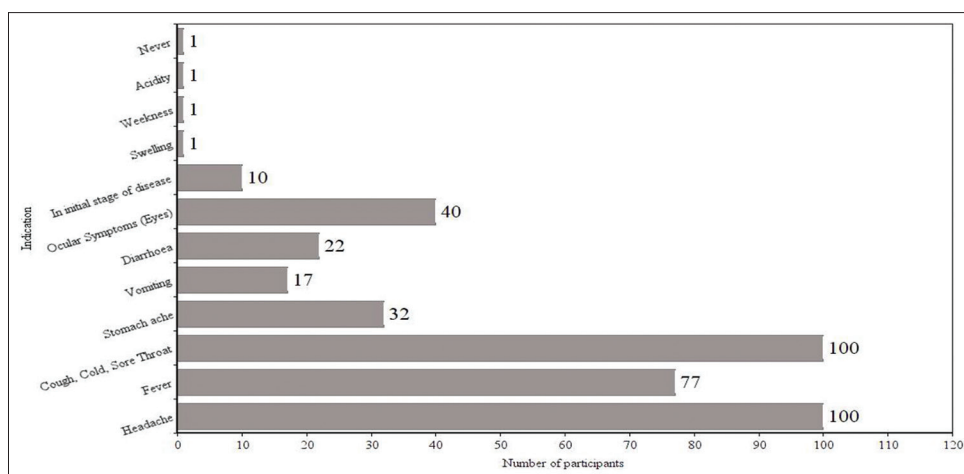
Staff-members in CHARUSAT campus are doing self-medication very often. In the present study, 136 staff-members of the university were contacted and from that 72.8% staff-members answered “YES” in reference to self-medication. It indicates that the overall incidence of

self-medication is high in our university, which is similar to previous studies [10-12].

In our study, male staff-members (61%) were interested in taking self-medication most often as compared to Female staff-members (39%). Reason for higher use of self-medication in male staff-members is negligence to visit hospital for minor illness.

**Knowledge**

In current study, most of the staff-members used self-medication in favor that “there was no need to visit doctor for minor illness 91 (29.5%)”, “self-medication provided quick relief 61 (19.8%)”, “it was time saving 37 (12%)”, and “there was



**Figure 4:** Indication for the use of Self medication

**Table 3:** Drugs used for Self-medication

No.	Drugs used for Self-medication	Numbers (n)	Percentage (%)
1	Analgesics (For Pain)	84	61.8
2	Antibiotics (For Infection)	46	33.8
3	Multivitamins (For Nutritional)	49	36
4	Antiemetics (For Vomiting)	26	19.1
5	Antispasmodics (For Abdominal Pain)	18	13.2
6	Iron Preparation (For Anemic)	14	10.3
7	Cough & Cold Preparation	90	66.2

ease and convenience in taking self-medication 42 (13.6%)". rest of the staff-members are not taking self-medication due to "lack of knowledge about medicines 17 (41.5%)", "risk of adverse effect 15 (36.6%)", "risk of using wrong drugs 16 (39%)", "risk of misdiagnosis 9 (22%)". Similar findings were observed [13][14].

In the present study, the majority of the staff-members used "previous prescription" as a source of information about drugs. However, other sources such as advertisement, textbooks and classroom teaching also influence self-medication knowledge in study. The findings clearly indicate that staff-members of the university avoid visiting doctors consequently for the same type of complaint and use previous prescriptions as a source of information. The World Health Organization (WHO) has also pointed out that responsible self-medication can help prevent and treat ailments that do not require medical consultation and provide a cheaper alternative for treating common illnesses [15]. However, it is also recognized that self-medication must be accompanied by appropriate health information.

This study highlights the different sources of information on drugs for self-medications such as medical store, home and doctor parents. We found that the majority of the staff-members referred "medical stores (78.8%)" for self-medication. While home and doctor parents contributed less. In India, the majority of the population consult community pharmacists for their minor illnesses and avoid visiting doctors for the same. So, the similar findings were seen in the study [10][16].

## Attitude

The attitude of CHARUSAT campus staff-members towards the hospital visit was found (34.3%) always, (9.4%) rarely and (56.2%) visited a medical practitioner sometimes. Similar findings were reported previously [17].

## Practice

In the present study, majority of the staff-members did self-medication for the indication of "headache (73.5%)" followed by "cough, cold and sore throat (73.5%)" and fever (56.6%).

The self-medication may be found rational when the situation is not serious and the complaint is well evident [11][18] like headache and cough, cold and sore throat. The use of Over-the-Counter (OTC) medicine may be justified only if the safety is high and drug related side effects are less. Similar findings on practice and indication for self-medication are seen in studies [11,13].

The Analgesics have been reported to be the most commonly used group of drugs [19,20]. So, in our study we also found similar results. The use of Antibiotics is (40%) in the present study. The finding is opposite to the previous study [13][21].

## CONCLUSION

The self-medication prevalence among the staff was high. A total of 72, 8% of staff on campus took their own medicine. The staff describes how "the doctor should not have to be visited for mild illness." Cough and cold preparation treatments were taken as self-medication by 73.5 percent of the population. Awareness and self-medication attitude of staff is good. However, while taking medicine, special precautions are required.

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