Original Article

# **Self-Medication with Antibiotics Among Third Year Medical Students**

**Self-Medication** Among Medical **Students** 

Afsheen Siddigi<sup>1</sup>, Zainab Nazneen<sup>2</sup>, Syed Yasir Hussain Gilani<sup>3</sup>, Nadia Haleem<sup>1</sup>, Wajid Ali<sup>4</sup> and Haq Nawaz<sup>1</sup>

# ABSTRACT

**Objective:** This study was conducted to assess the frequency and the common reasons of using antibiotics for the purpose of self-medication among the medical students, the highly educated youth of a country as little is known about self-medication with antibiotics in medical students in this region.

**Study Design:** This descriptive cross sectional study.

Place and Duration of Study: This study was conducted in Ayub Medical College Abbottabad from Jan 2020 to June 2020.

Materials and Methods: We performed this study on Third year MBBS and second year BDS students. Data was collected through self-administered questionnaire and analyzed using SPSS version 16.

Results: Among 240 medical students 65% were male and 35% were female. Prevalence of self-medication with antibiotics in this study was found to be 85%. Convenience (56%) or over the counter drugs was the most common reason for self-medication and sore throat (37.1%) was the most common ailment for which antibiotics were used by the students, 40 % of students discontinued the drug during treatment, the reason being disappearance of symptoms. Participants (53%) accepted that self-medication with antibiotics could be harmful and is unacceptable.

Conclusion: Inspite of being highly aware of the deleterious outcomes of self-medication, prevalence of selfmedication with antibiotics was found to be high among the medical students. Hence further research is needed to study the patterns for antibiotic usage so that appropriate interventions could be made.

Key Words: Self-medication, medical students, antibiotics

Citation of article: Siddiqi A, Nazneen Z, Gilani SYH, Haleem N, Ali W, Nawaz H. Self-Medication with Antibiotics among Third year Medical Students. Med Forum 2021;32(1):90-93.

## INTRODUCTION

Self-medication is the traditional use of medication including drugs and herbs without the consultation of a doctor or health care professional. It is the target of Millennium Development Goal to make sure the affordability and accessibility of essential drugs in developing countries. In accordance with this, selfmedication is one of the main contributors for irrational use of medicines.<sup>2</sup>There is day by day rise in the prevalence of self-medication graph throughout the world. It is estimated that in developing countries 80 % of all the medicines are purchased without prescription and these include analgesics, antipyretics, antiinflammatory CNS depressants, drugs, stimulants and opiates etc.<sup>3</sup>

1. Department of Pharmacology / Community Medicine<sup>2</sup>/ Medicine<sup>3</sup>/Biochemistry<sup>4</sup>, Ayub Medical College Abbottabad.

Correspondence: Dr. Afsheen Siddigi, Associate Professor of Pharmacology, Ayub Medical College, Abbottabad.

Contact No: 03345092422 Email: drafsheenfaisal@gmail.com

Received: August, 2020 October, 2020 Accepted: Printed: January, 2021

Many studies have been conducted on tertiary level students around the world as they contribute to the highly educated portion of a country's population and possess more knowledge about health. Being more specific, students of medical colleges are the future

The major problem with self-medication is the

irrational use of antibiotics which has a number of

unacceptable effects in the form of drug resistance,

treatment failure, increase in antibiotic cost, extended

hospitalization and increase morbidity and mortality.<sup>4</sup>

Antibiotics take one of the highest positions among

prescribed drugs worldwide but at the same time they

are posing a big public health threat in the form of

antimicrobial resistance. Statistics show that their

irrational use is a danger for not only developing

According to studies, level of education can be taken as

one of the most relevant predictor of self-medication.

countries but also for developed countries.

health providers.<sup>6</sup>

71.4%.11

Pakistan based data shows that 79% of self-medication practice is contributed by private sector.7 Multiple studies in Pakistan showed the prevalence of selfmedication with all medicines to be 61% and 66%.8,9 However, data at the regional level on self-medication as a whole among medical students indicates its prevalence to be much higher i.e. 99%. 10 While a study conducted in Karachi on self-medication with antibiotics in particular shows its prevalence to be

Determinants of self-medication in Pakistan include easy accessibility to drugs, excessive marketing of medicines, inadequate health knowledge, poor regulatory authorities, unreachable health care workers and paucity of medical facilities. <sup>12</sup>Therefore aim of this study was to determine the frequency and common reasons for the use of antibiotics as self-medication among medical students It will help to draw awareness among the medical students about the adverse outcomes associated with self-medication with antibiotics. It will also be beneficial for developing appropriate interventions for its prevention.

## MATERIALS AND METHODS

This study was conducted in Ayub Medical College Abbottabad from 15<sup>th</sup> Jan 2020 till 15<sup>th</sup> June 2020. It was a descriptive cross sectional study. Ethical approval was taken by the Ethical committee of Ayub Medical College. We approached the medical students through lecture hall for data collection. All the currently enrolled 3<sup>rd</sup> year MBBS and 2<sup>nd</sup> year BDS students were included in the study. Out of the total 275 students, 240(87%) students responded of which 218 were from 3<sup>rd</sup> year MBBS and 22 from 2<sup>nd</sup> year BDS.A self-administered questionnaire was given to the students for collection of data after taking fully informed verbal consent and their confidentiality was guaranteed. Questionnaire was about the use of antibiotics and various aspects related to antibiotics and their opinion about self-medication with antibiotics. Data was entered and descriptive analysis of the data was done using SPSS version 16.

# **RESULTS**

In this study total number of students was 240 among which 90% were from MBBS and 10% from BDS. 157 students (65%) were male and 83 female (35%). 198 students (83%) were boarders. Prevalence of selfmedication with antibiotics was 85% (Table 1). Among 134 students (56%) convenience was the most common reason for self- medication with antibiotics and sore throat was the most common complaint (37%) for taking antibiotics (Table 2). It was noticed that previous experience with antibiotic led to the selection of antibiotic in (31%) of cases. 34% students selected antibiotic by studying the literature. Most of the students (34%) got idea about dosage from family members. 95 students (40%) switched to another antibiotic during the course of treatment as antibiotic did not work in 112 students (48% of cases) as shown in (Table 3). When asked about discontinuation of antibiotics, 97 students (40%) stopped taking antibiotic when symptoms disappeared. Results demonstrated that among 128 (53%) self-medication was not an acceptable method.

Table No. 1: Ever self-medicated with antibiotics

| Answer | Frequency | Percent |  |
|--------|-----------|---------|--|
| Yes    | 205       | 85.4    |  |
| No     | 35        | 14.6    |  |
| Total  | 240       | 100.0   |  |

Table No.2: Complaints for using antibiotics

| Complaints       | Frequency | Percent |
|------------------|-----------|---------|
| Runny nose       | 23        | 9.5     |
| Nasal congestion | 15        | 6.3     |
| Cough            | 24        | 10.0    |
| Sore throat      | 89        | 37.1    |
| Fever            | 20        | 8.3     |
| Aches & pains    | 9         | 3.8     |
| Diarrhea         | 11        | 4.6     |
| Skin wounds      | 3         | 1.3     |
| Others           | 11        | 4.6     |
| NA               | 35        | 14.6    |
| Total            | 240       | 100.0   |

Table No 3: Reasons for switching antibiotic

| Reasons            | Frequency | Percent |
|--------------------|-----------|---------|
| Former did not     | 112       | 46.7    |
| work               |           |         |
| Former ran out     | 15        | 6.3     |
| Later one was      | 9         | 3.8     |
| cheaper            |           |         |
| Adverse effects of | 44        | 18.3    |
| former             |           |         |
| Others             | 25        | 10.4    |
| NA                 | 35        | 14.6    |
| Total              | 240       | 100.0   |

## **DISCUSSION**

Self-medication is self-consumption of drugs for the treatment of illness without seeking advice from a physician. In a country like Pakistan, with weak law enforcing systems, effective and safe use of medicines cannot be guaranteed. One can understand the utilization of drugs by those with no knowledge of medicine but the picture gets worsened when it comes to the most educated population of a country with complete awareness. The purpose of this study was to assess the prevalence of sell-medication with antibiotics among third year medical students.

In this study frequency of self-medication with antibiotics among medical students was 85% which is quite near to the study conducted by Aslam M et al in Karachi<sup>11</sup>, while variable prevalence rates are reported by diverse studies showing 70% prevalence in Ghana<sup>4</sup>, 53% in Nigeria<sup>11</sup>and71% in India<sup>12</sup>. Prevalence results may vary from country to country due to variable demographic features, different socioeconomic conditions and methodologies. Poor restrictions on the sale of antibiotics in Pakistan has led to easy accessibility to antibiotics which is one of the major reason for high prevalence of self-medication and the

current study demonstrated that "convenience" was the main reason for self-medication in 56% of students other factors being ignorance, lack of time and cost saving. This finding was consistent with the work done by Bennadi. 13 In our study sore throat was the most common reason for the use of antibiotics due to geographical conditions and weather differences in this area which is supported by a study with comparable objectives conducted in Nepal G<sup>14</sup> however contrasting results were seen in a Nigerian study where diarrhea was the major reason for the use of antibiotics<sup>11</sup>. In our study previous experience with antibiotic for treating similar illness was the major reason of antibiotic selection which was also mentioned in a study in Ethopia. 15 In a recent study information of medicine was acquired by studying package inserts in 63% of nursing students 16 which is in agreement with our study. Various analysts 17,18 revealed that respondents switched antibiotic during the treatment because it was found ineffective. The present study was in concordance with these studies. When asked about the discontinuation of medicine 40% students stopped taking antibiotic when symptoms disappeared which is analogous with the findings of another study where 28% discontinued antibiotic when symptoms disappeared<sup>19</sup>. As selfmedication is not a justifiable act, our students (58%) regarded it as a harmful act which is in agreement with a study in Karachi where it was not acceptable. 19

## **CONCLUSION**

This present study demonstrated the high use of antibiotics among third year medical students. Controlling the usage of antibiotics is of utmost significance not only among the general population but also among the health providers. Awareness about the outcome of irrational use of antibiotics in the form of awareness programs must be stressed especially about antimicrobial resistance to avoid imminent future medical disaster. Government should make efforts to discourage this practice as much as possible by making strong polices regarding dispensing of antibiotics.

#### **Author's Contribution:**

Concept & Design of Study: Afsheen Siddiqi Drafting: Afsheen Siddiqi,

Afsheen Siddiqi, Syed Yasir Hussain Gilani

Data Analysis: Zainab Nazneen, Wajid

Ali,

Revisiting Critically: Haqnawaz, Nadia

Haleem

Final Approval of version: Afsheen Siddiqi, Zainab

Nazneen

**Conflict of Interest:** The study has no conflict of interest to declare by any author.

## **REFERENCES**

- Kassie AD, Bifftu BB, MekonnenHS. Selfmedication practice and associated factors among adult household members in Meket district, Northeast Ethiopia, 2017. BMC Pharmacol Toxicol 2018;19(1):15.
- Shafie M, Eyasu M, MuzeyinK, Worku Y, Martín-Aragón S. Prevalence and determinants of self-medication practice among selected households in Addis Ababa community. PLoS ONE 2018;13(3): e0194122.
- 3. Gore PR, Mahavan S. Consumers' preference and willingness to pay for pharmacist counselling for non-prescription medicines. J Clin Pharm Ther 1994;19:17–25.
- Donkor ES, Tetteh-Quarcoo PB, Nartey P, Agyeman IO. Self-Medication Practices with Antibiotics among Tertiary Level Students in Accra, Ghana: A Cross-Sectional Study. Int J Environ Res Public Health 2012; 9(10): 3519-29.
- Skliros E, Merkouris P, Papazafiropoulou A, Gikas A, Matzouranis G, Papafragos C, et al. Selfmedication with antibiotics in rural population in Greece: A cross-sectional multicenter study. BMC Fam Pract 2010;11:58.
- Fadare JO, Tamuno I. Antibiotic self-medication among university medical undergraduates in Northern Nigeria. J Public Health Epidemiol 2011;3:217–20.
- 7. Aziz MM, Masood I, Yousaf M, Saleem H, Ye D, Fang Y. Pattern of medication selling and self-medication practices: A study from Punjab, Pakistan. PLoS ONE 2018;13(3):e0194240.
- Aqeel T, Shabbir A, Basharat H, Bukhari M, Mobin S, Shahid H, et al. Prevalence of Self-Medication among Urban and Rural Population of Islamabad, Pakistan. Trop J Pharm Res 2014; 13(4):627-33.
- 9. Humayun S, Imran W, Naheed I, Javid N, Hussain M, Azhar M. Analysis of self medication practices; a descriptive cross sectional study. Prof Med J 2016; 23(5): 608-13.
- Kanwal ZG, Fatima N, Azhar S, Chohan O, Jabeen M, Yameen MA. Implications pf self-medication among medical students:a dilemma. J Pak Med Assoc 2018;68(9):1363-7
- 11. Aslam M, Baig MT, Saim MAF, Jahan S. Self medication with antibiotics among secondary and tertiary level students in Karachi, Pakistan: A cross sectional study. Inventi rapid: pharmacy practice 2013;2013:1-5
- 12. Khalid L, Mahsood N, Ali I. The public health problem of OTC antibiotics in developing nations. Res Social Adm Pharm 2016;12(5):801–2.
- 13. Bennadi D. Self-medication: A current challenge. J Basic Clin Pharm 2013;5(1):19-23.

- 14. Nepal G, Bhatta S. Self-medication with Antibiotics in WHO Southeast Asian Region: A Systematic Review. Cureus 2018;10(4):e2428
- 15. Ayalew MB. Self-medication practice in Ethiopia: a systematic review. Patient Prefer Adherence 2017;11:401–13.
- 16. Gama Abel Santiago Muri, Secoli Silvia Regina. Self-medication among nursing students in the state of Amazonas Brazil. Rev GaúchaEnferm 2017;38(1):e65111.
- 17. Rajendran A, Kulirankal KG, Rakesh PS, George S. Prevalence and Pattern of Antibiotic Self-Medication Practice in an Urban Population of Kerala, India: A Cross-sectional Study. Ind J Community Med 2019;44(1):S42-5.
- 18. ShabaniZ, Redican KJ. Antibiotic Self-Medication among Young Adults in Kosovo. Int J Healthcare Med Sci 2018;4(7):134-40.
- Mumtaz Y, Jahangeer SMA, Mujtaba T, Zafar S, Adnan S. Self-Medication among University Students of Karachi. JLUMHS 2011;10(3):102-5.