# Original Research Paper

Pediatric



# SELF MEDICATION IN PEDIATRIC AGE GROUP BY PARENTS

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ABSTRACT

INTRODUCTION: Utilization of drugs to treat self-diagnosed disorders or symptoms is self-medication. Primary objective of the study was to study the trends and demographic characteristics of self-medication and to determine knowledge, attitude of parents practicing self-medication.

Methodology: This cross sectional questionnaire based study was conducted in pediatric ward of tertiary care hospital where sample of parents was selected by random sampling technique. Verbal consent of parents were taken prior to interview by explaining objective of study.

Result: Total 500 parents were selected as sample. Out of which 74.6% were practicing self-medication. Most common symptoms were Fever, cough and cold for which medication was given.

CONCLUSION: It was observed that educated parents usually practiced it due to some knowledge of disease and medicines. However knowledge of adverse effects of medications and rationale use of drugs like antibiotics is necessary. Emergence of resistance is a very danger of self-medication with antibiotics. And it's use should be restricted to registered medical practitioners only.

# **KEYWORDS:** Self-medication, drugs, source

#### INTRODUCTION

As per WHO definition self-medication is an element of self care .[1] Self-medication is defined as the utilization of drugs to treat self-diagnosed disorders or symptoms or the irregular or continuous use of a prescribed drug for chronic or repeated diseases or symptoms.[2] In pediatric population, selfmedication is defined as administration of medication by the care giver without medical consultation. Improper use of OVER THE COUNTER drugs due to lack of knowledge of their side effects could have serious implications. [3] The threatened danger of self-medication with antibiotics is the emergence of resistance.[4] Easy availability of drugs, irresponsible publicity of prescription drugs without displaying possible dangers over media, lack of education in parents are the factors promoting self medication with prescription only drugs. Self-medication is prevalent all over the world and it varies from a value as low as 25% to as high as 75%. Indian studies lack data on self medication in Indian pediatric population.[6-11]] The objectives of this study are to examine the prevalence and characteristics of selfmedication and relation of demographic characteristics to self-medication in pediatric population.

#### **METHODOLOGY:**

This is cross sectional study, where questionnaire based study was conducted in pediatric ward of L.G hospital, Ahmedabad, India. All children between one month and fourteen years of age who were admitted in ward were considered eligible. Sample of study was determined by randomization. Verbal consent was given by the parents of children. They were informed the purpose and objectives of study before obtaining the consent. After obtaining informed verbal consent, the structured questionnaire was provided to the caregiver in local language and their response was recorded. The questionnaire was validated by standard procedure to evaluate knowledge and attitude of parents towards self medication. The questionnaire included set of questions to gather the range of information which includes:

- Symptoms for which medications were used
- Reason for not consulting doctor
- Source of drugs
- Method used for calculation of drug dose

Total 500 parents were included in study. All the data was analyzed and tabulated by proper statistical methods.

#### RESULT:

- In order to determine self-medication trends in children 500 parents were interviewed.
- Gender distribution of participants was 49%(245) male and 51% (255) females.
- Self-medication was found to be 74.6%(373) among total
- It was observed that 178(55%) of participants practised self-medication in children between age 5-10 years, 80(25%)in age between 11-14 years,65(20%)in age between 1 month-5years.
- Common ailments for which participants preferred to self medicate their children was also noted. About 66% of them used last prescription or previous experience.

REASON FOR SELF MED	ICATION	
SAVE MONEY		63(17%)
FOR THEIR BENEFITS		263(70%)
NOT HAVING A TRUST C	N DOCTOR	24(6%)
BECAUSE OF MORE WO	RKING HOURS OF	25(7%)
PARENTS		

Parents gave medication in dose calculated by different methods. Most of them (66%) used previous prescription.

Most of parents (44%) bought drugs from local medical store. So it was the main source of availability of drugs.

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CRITERIA USED FOR CACULATION OF DOSE OF DRUGS	
AS PER AGE	24(6%)
AS PER WEIGHT	30(8%)
BY HIS/HER SELF	58(15%)
APPROXIMATELY	17(4%)
AS PER PREVIOUS TREATMENT	255(66%)

SOURCE OF DRUGS	
MEDICAL STORE	180(44%)
FRIENDS	14(3%)
IN HOME	59(14%)
OTHER DOCTER	86(21%)
TV,NEWS,MEDIA	71(17%)

SYMPTOMS FOR WHICH SELF	Number of	
MEDICATION GIVEN	participants	
FEVER	323(22%)	
COUGH	269(17%)	
HEADACHE	109(7%)	
VOMIT	188(12%)	
DIARRHOEA	218(14%)	
CONSTIPATION	16(1%)	
ENERGY	140(9%)	
ABDOMINAL PAIN	225(15%)	
SKIN DISEASE	2	
ASTHMA	47(3%)	

#### **CONCLUSION:**

Result of present study showed that self-medication prevalence in children is high. It was observed that educated parents usually practiced it due to some knowledge of disease and medicines. However knowledge of adverse effects of medications and rationale use of drugs like antibiotics is necessary. Emergence of resistance is a very danger of selfmedication with antibiotics. And it's use should be restricted to registered medical practitioners only.

# REFERENCES:

- World Health Organization. Self-care in the context of primary health care: Report of regional consultation, Bangkok, Thailand, WHO-SEARO, 2009.
- World Health Organization. Guidelines for the regulatory assessment: Medicinal products for use in self-medication. WHO/EDM/QSM/00.1, 2000.
- Choonara I, Gill A, Nunn A. Drug toxicity and surveillance in children. Br J Clin Pharmacol. 1996;42:407-10.
- Chalker J. Improving antibiotic prescribing in hai phong province, Vietnam: the "antibiotic-dose" indicator. Bulletin of the World Health Organisation. 2001
- 5. Johnson RE, Pope CR. Health status and social factors in nonprescribed drug use. Med Care. 1983;21:225-33.
- 6.  $Dineshkumar\,B, Raghuram\,TC, Radhaiah\,G, Krishnaswamy\,K.\,Profile\,of\,drug$ use in urban and rural India. Pharmacoeconomics. 1995;7:332-46.
- Sharma R, Verma U, Sharma CL, Kapoor B. Selfmedication among urban population of Jammu city. Indian J Pharmacol. 2005;37:37-45.
- Tibdewal S, Gupta M. Mother suse of selfmedication in their children of preschoolage. Indian J Public Health. 2005;49(1):27-9.

  Anand NK, Tandon L. Evaluation of sources and trends in pediatric
- medication including selfmedication. Indian Pediatr. 1996;33:947-8.
- Saradamma RD, Higginbotham N, Nichter M. Social factors influencing the acquisition of antibiotics without prescription in Kerala state, south India. Soc Sci Med. 2000;50(6):891-903.
- 11. International Journal of Contemporary Pediatrics Nagragyan SA et al. Int I Contemp Pediatr. 2016 Nov;3(4):1267-1271 http://www.ijpediatrics.com