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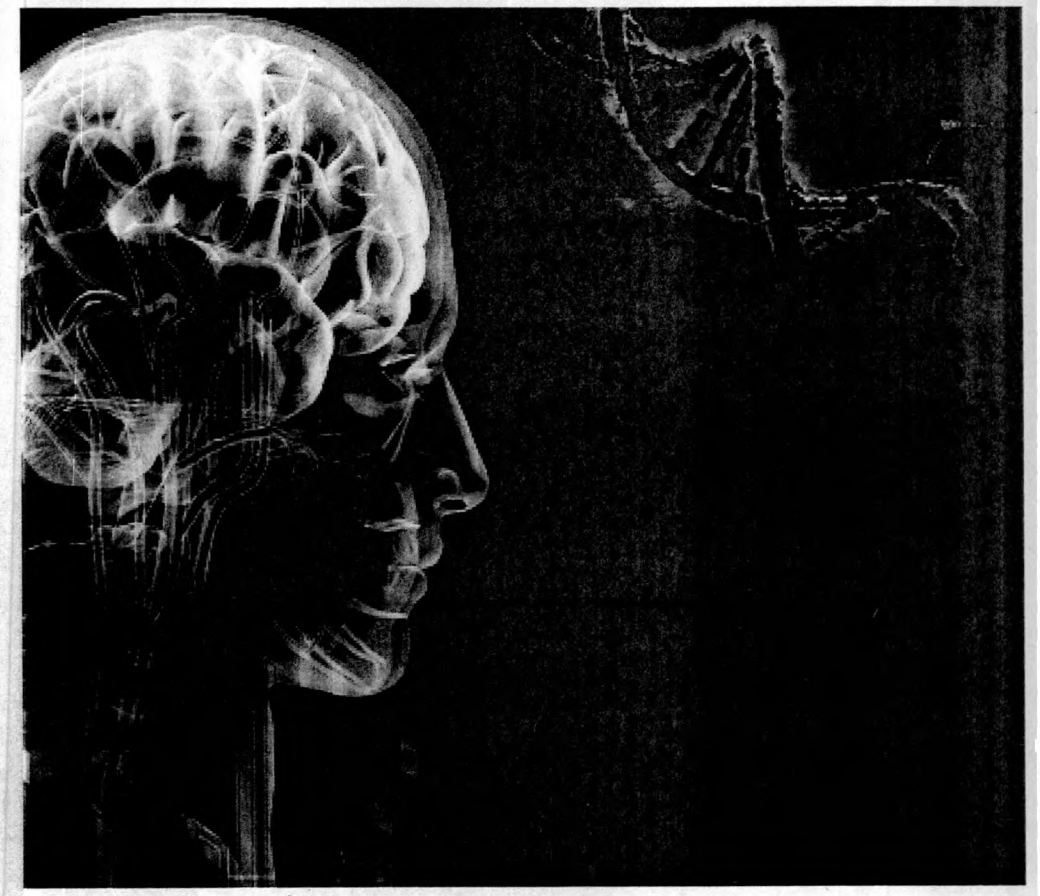

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[3]NSW Therapeutic Advisory Group, Australia

Medicines may produce desired therapeutic effects and unwanted adverse effects. This study's aim was to investigate the incidence and nature of adverse drug reactions (ADRs) in hospitalized adult patients in Sri Lanka.
A 3-month prospective observational study identifying prevalent and incident ADRs in adult patients was conducted in the medical wards of four hospitals varying in size from 40 to 2,255 beds and role (divisional, base, district general and teaching). ADRs were identified by ADR documentation in the medical notes and patient interview using a standardized questionnaire with reference to pharmaceutical texts for reported symptoms. All medicines taken pre-hospitalization and during hospitalization were reviewed. The likelihood that the perceived ADR was an ADR was assessed using the Naranjo Algorithm. ADR severity was categorized using Hartwig's severity assessment scale.

360 patients (48% male) were recruited. Thirty nine ADRs were documented in 37 (10.3%) patients with 33% reported prior to hospitalization and 67% during hospitalization. 10% were classified definite, 51% probable, and 38% possible ADRs using the Naranjo Algorithm. ADRs were categorized as mild (36%), moderate (64%), or severe (0%). Most commonly affected systems were the nervous (23%), dermatological (18%), gastrointestinal (18%) and cardiovascular systems (15%). Antibiotics were the most commonly implicated medication group (21%).

Sri Lankans frequently experience ADRs after hospitalization. It is important that ADRs are recognized and therapy modified as appropriate. This will be very important to improve the safety and quality of healthcare system.

OP 5

Appropriateness of written dosing instructions provided with dispensed medicines by pharmacists – A hospital and community experience

Manchanayake M.G.C.A[1], Bandara G.R.W.S.K[1], Samaranayake N.R[1]

[1]B.Pharm Degree Program, Department of Allied Health Sciences, Faculty of Medical Sciences, University of Sri Jayewardenepura.

Poor communication of medicines information to patients may result in medication errors. We assessed the completeness, readability and overall knowledge of dosing instructions provided by pharmacists on dispensing labels to patients.

A cross sectional study was conducted in, outpatient pharmacies of a selected teaching hospital, and a selected community pharmacy. Patients/caregivers were selected through systematic random sampling. Dosing instructions on labels were assessed against an in-house checklist to determine completeness. Patients were asked to read dosing instructions to assess readability. Patient knowledge on given dosing instructions was determined through a set of predetermined questions. Completeness, readability and knowledge were scored out of 10 for each dispensing label.

A total of 1200 and 1372 dispensing labels were assessed in the hospital and community settings respectively. Dispensing labels included refill (75%) and new (25%) prescriptions. The median score out of 10, for completeness, readability and patient knowledge of dosing instructions were 7.5, 8.5 and 7.5 respectively for hospital, and 7.5, 6.7 and 7.5 respectively for community setting. Only few dispensing labels specified route of administration (hospital, 0.5%; community, 0.8%) and duration of treatment (hospital, 0.25%; community, 0.65%). Name (hospital, 48%; community, 27.3%) and strength (hospital, 40.2%; community, 36.6%) of medicines on dispensing labels were frequently misread. The mean scores for readability ($P<0.001$) and knowledge of dosing instructions ($P<0.001$) significantly differed among different education levels, in

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both settings. Some important dosing instructions were missing in dispensing labels. Readability and knowledge of dosing instructions differed by education level. Hence pharmacists must develop a standard procedure to provide complete, clear and simple dosing instructions to patients.

PP 1

Incompatibilities of key information in package inserts of medicines against selected reference source/s

Saheeha M.S.S[1], Samaranayake N R[2], Fernando G.H[3]

[1]Departmetnt of Pharmacy, Faculty of Health Sciences, Open University of Sri Lanka
[2]B.Pharm Degree Program, Department of Allied Health Sciences, Faculty of Medical Sciences, University of Sri Jayewardenepura
[3]Department of Pharmacology, Faculty of Medical Sciences, University of Sri Jayewardenepura

Package inserts (PIs) in medicines are an important source of information to health professionals. Hence information in PIs need to be reliable and accurate. The aim of this study was to assess the accuracy of key information in PIs of selected medicines used in Sri Lanka.

100 PIs were randomly selected from a government hospital and a private pharmacy. The researchers assessed if facts stated in different types of clinical information in PIs are documented in the same form in the British National Formulary and/or Australian Medicines Handbook. PIs were categorized as 'compatible' when facts in each clinical information type were identical, 'partially compatible' if there was at least one mismatch, and 'incompatible' if completely unmatched against references.

Nine types of clinical information; Indication/s, contraindications, precautions, adverse effects, drug interactions, average dose, dose regimen for adult/child, dosing interval and average duration of treatment, were matched with the reference in 100 PIs, resulting in 900 cross-matches. A total of 61 incompatibilities and 179 partial compatibilities were identified. Contraindications (16) and precautions (11) had the highest frequency of incompatibilities. 34 PIs had incompatibilities in at least one type of clinical information. Among them, a median of two types of clinical information were found to be incompatible per PI. Most incompatibilities were related to oral dosage forms. Nearly half of the PIs from India and Sri Lanka had incompatibilities.

Information found in PIs was not totally compatible with reference sources. Regulatory authorities need to urgently and continuously review PIs prepared by pharmaceutical manufacturers.

PP 2

Role of pharmacist in counseling in Sri Lanka - A descriptive survey

Safa MHF[1], Bagyawantha NMY[1], Herath HMDR[1], Lynch CB[2], Myers B[3], Sakeena MHF[1,4]

[1]Department of Pharmacy, Faculty of Allied Health Sciences, University of Peradeniya, Sri Lanka.
[2]Princess Alexandra Hospital, Queensland, Australia.
[3]Gold Coast Hospital, Brisbane, Australia.
[4]Faculty of Pharmacy, University of Sydney, NSW, Australia.

Inappropriate medication use is a barrier to patients' quality of life. Insufficient knowledge about health problems, non-adherence to medications and medication errors are the main contributing factors for irrational medicines use. The role of pharmacists should include communication with patients and other healthcare providers. In developed countries, this practice is already established, but is lacking in Sri Lanka. The objective of this study was to explore pharmacists' and undergraduate pharmacy students' perceptions about patient counseling.

A convenience sample of 50 pharmacy