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Practices related to thyroxin tablet usage among primary hypothyroidism patients attending endocrinology clinic at Teaching hospital, Jaffna

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Background: The most common cause for hypothyroidism in Sri Lanka is autoimmune thyroid disease (Hashimoto's thyroiditis). Primary hypothyroidism is by far the most common cause of hypothyroidism. Replacement of thyroxin hormone in body is important to improve quality of life.

Objective: The goal of the study is to evaluate practices related to usage of thyroxin tablet among primary hypothyroidism patients attending endocrinology clinic at Teaching hospital, Jaffna.

Method: A descriptive cross-sectional study was conducted in June 2019, among the whole population who attend the endocrinology clinic and took thyroxin tablet for more than six months for their treatment. An interviewer-administered questionnaire was used to collect data among 305 participants. The questionnaire was pre-tested and validated by experts. The scoring of practice was categorized into two categories which were poor (0-75%) and good (more than 75%). Data was analysed by SPSS 25.0 and Chi square test was performed to find relationship. Significance was obtained when the p<0.05 in Chi square test.

Results: Among the participants', the majority were females (88.5%), in between the age of eighteen to thirty and the mean age was 37.4±14.6 years. More than half the participants (52.1%) used thyroxin tablets for about 1-5 years. The majority took thyroxin in an empty stomach (99.3%), and thirty minutes before breakfast (85.9%). More than half of the participants stored thyroxin in a brown colour container (62.6%), and 21.6% stored in a brown colour blister pack. Nearly 43.3% (n=132) were missing thyroxin tablets due to their workload (50.8%), whereas 20.7% informed thyroxin treatment is not reducing their symptoms. Among participants, 34.1% obtained scores less than 75% on thyroxin tablet usage. Females had good practices than males (p=0.02).

Conclusion: Among the participants nearly one third was having poor practices on thyroxin tablet usage.