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Patterns of prescribing practices in Prince Sattam Bin Abdelaziz University Hospital, Saudi Arabia

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Irrational prescribing is widespread across the world and is a major problem in many healthcare facilities, especially in developing countries. World Health Organization (WHO), declared that more than half of all drugs are prescribed, dispensed or sold improperly across the globe. Many studies achieved in different countries have documented various forms of irrational prescribing. The study objective was to determine patterns of prescribing practices in Prince Sattam Bin Abdelaziz University. The study was a cross-sectional survey divided into 2 parts: A retrospective prescription survey and a questionnaire for knowledge, attitudes and practices (KAP) survey. In the prescription survey, 725 patient encounters were sampled from outpatient and inpatient departments between 1st January and 31st July, 2014. SPSS version 17 was used for all statistical analysis. The knowledge, attitudes and practices (KAP) survey involved administering questionnaires to 51 prescribers. The number of drugs per patient encounter was 3.8. Only 23% of the total drugs were prescribed using international non-proprietary names (generic names). Antibiotics prescribed for about 62% while injections were prescribed in 12.8% of the total prescriptions surveyed. The percentage of complete prescriptions was 41%. Clinical setting, comorbidities, chronic conditions and prescriber team were all found to be significantly associated with both polypharmacy (12.5%) and antibiotic prescription. Polypharmacy means more than 5 drugs prescribed. Polypharmacy was evident in acute cases 90%. the number of drugs prescribed was positively correlated to patient's age. The KAP survey revealed gaps in prescribers' knowledge as regard prescribing guidelines. The results showed a trend towards inappropriate prescribing, particularly underuse of generic names when prescribing, over prescription of antibiotics, polypharmacy and incomplete prescription writing. To address irrational prescribing in the hospital, frequent continuous medical education forums (CMEs), seminars and trainings on prescribing are recommended. Also, periodic prescription surveys and drug utilization studies are endorsed to identify any forms of irrational prescribing.

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Diabetes mellitus revisited: A narrative review

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Aim: To explore the management of diabetes from a pharmacy perspective and engaging patients in self-management.

Methods: A search was made of international peer-reviewed literature in PubMed, Medline, Cochrane Library and the grey literature. This document provides a review of a relevant literature including a general overview of diabetes mellitus, therapeutic goals, pharmacologic and lifestyle treatment. The epidemiology of diabetes was explored, and an overview of new approaches for treatment and management of diabetes mellitus collated.

Results: The search yielded studies and information that met the inclusion criteria. Pharmacological and lifestyle management, diabetes education and knowledge, and the prevalence of diabetes were also documented.

Conclusion: Research examining the role of healthcare providers as diabetes educators and exploring the needs of patients with diabetes is of importance to optimize health outcomes and minimize costs related to treatment and complications.

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