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Influence of medical representatives on prescribing practice in Mekelle, Northern Ethiopia

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Drug promotion among many others predictors attributes to influence physicians' prescribing decision and choice of drugs despite the existence of generic prescribing policy in Ethiopia. Hence, the aim of this study was to assess the influence of medical representatives on the prescribing practice of physicians in health facilities, Mekelle, Northern Ethiopia. A facility based cross-sectional study was conducted enrolling all physicians working in both public and private health facilities in Mekelle city as studying participants. The data were collected from February to March 2015. The data were entered into Epidata Version 3.1 database and transferred to STATA version 12 statistical packages for analysis. Bivariate and multivariate logistic regressions were modeled to estimate the predictors of the influence of prescribing decisions among physicians. Overall of the 90 physicians, we had been approached, 83 of them were voluntary (the response rate of 92%). About three fourth (75.9%) of the respondents were males and 52(63%) of the respondents were General Practitioners. In this study, 40 (48.2%) of the physicians believed that their prescribing behavior were influenced by visits of medical representatives (MRs). Stationary materials and drug samples were the commonest kinds of gifts with a value of 23(35.4%) and 20(30.7%) respectively and face to face talking 45(54.2%) was the most frequent promotional method. Physicians accepting gifts from MRs were six times more likely influenced [AOR=6.56, 95% CI: 2.25, 19.13]. Moreover, working in the private health facility were also another predictors of the influence of prescribing decision in the study area [AOR= 12.78, 95% CI: 1.31, 124.56]. In conclusion, nearly half of the physicians working in Mekelle reported that their prescribing decision was influenced by medical representatives in the last 12 months. Accepting gifts and working in private health facilities were predictors of influencing prescribing decisions. Professional associations and Food medicine health care administration and control authority of Ethiopia in charge of rectifying malpractice should take responsibility of managing health actors to exercise their duties and medical practices ethically.

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Nigella sativa as an Anti-inflammatory and Promising remyelinating agent in the cortex and Hippocampus of experimental autoimmune Encephalomyelitis-induced rats

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Experimental autoimmune encephalomyelitis (EAE) is a well-established animal model of multiple sclerosis. This study aimed to investigate the protective and therapeutic effects of *Nigella sativa* (*N. sativa*) seeds (2.8 g/kg body weight) in EAE-induced rats. EAE-induced animals were divided into: (1) EAE-induced animals ("EAE" group). (2) "*N. sativa* + EAE" group received a daily oral administration of *N. sativa* 2 weeks prior to EAE induction until the end of the experiment. (3) "EAE + *N. sativa*" group received a daily oral administration of *N. sativa* after the appearance of the first clinical signs until the end of the experiment. All animals were sacrificed at the 28th day post EAE-induction. Disease pathogenesis was monitored using a daily clinical scoring, body weight, open field test, histopathological and ultrastructural examination and determination of some oxidative stress parameters in the cortex and hippocampus. *N. sativa* ameliorated the clinical signs and suppressed inflammation observed in EAE-induced rats. In addition, *N. sativa* enhanced remyelination in the hippocampus. However, protection of rats with *N. sativa* administered 2 weeks prior to EAE induction and its continuation until the end of the experiment resulted in a significant increase in the cortical lipid peroxide level with reference to control and "EAE" rats. In conclusion, *N. sativa* seeds could be used as a protective agent or an adjunct treatment for EAE even when the treatment started after the appearance of the first clinical signs. However, the dose and duration of *N. sativa* must be taken into consideration to avoid its probable pro-oxidant effect.

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