

Impact of Rational Prescribing of Drugs in Pregnancy and Child Birth

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DESCRIPTION

One of WHO top focuses is to improve maternal health. Is the World Health Organization striving to minimize maternal mortality by implementing integrated pregnancy and childbirth management? IMPAC-Integrated Management of Pregnancy and Childbirth is a set of guidelines and tools that respond to key areas of maternal and perinatal health programmers. It is central to the department's technical assistance activities to help countries improve maternal, perinatal, and newborn health in strategic and systematic ways.

IMPAC is a worldwide tool that targets health systems and health workers, as well as families and communities, and is based on the most recent scientific research. The goal of IMPAC is to enhance pregnant women's access to high-quality health services, hence lowering child and maternal mortality. It covers critical variables affecting access to expert care before to, during, and after pregnancy and delivery.

During the third trimester, up to one-third of women get anemia. Iron insufficiency and Folate deficiency are the most prevalent reasons. Maternal morbidity as a result of anemia includes decreased work capacity and physical performance, which has been described mostly as a result of iron deficiency anemia. Anemia causes anomalies in the host defense system as well as neurological impairment. Anemia in pregnancy has also been linked to an increased risk of early labor and low birth weight.

Preeclampsia appears after 20 weeks of gestation and occurs in 25% of cases postpartum. Swelling of the face or hands, as well as hyperreflexia, is rather specific symptoms of preeclampsia. Preeclampsia is considered severe when it produces considerable organ dysfunction (detected clinically or by testing). HELLP syndrome affects 10% to 20% of women with severe

preeclampsia or eclampsia. When the pregnancy reaches 37 weeks, major complications emerge, or the fetal lungs are developed, delivery is typically necessary.

Thus, the research of prescription patterns aids in the monitoring, evaluation, and suggestion of changes in practitioners' prescribing behaviour in order to make medical treatment more sensible and cost efficient. As a consequence of this study, medical treatment becomes more reasonable and cost efficient, as prescribing patterns are watched and assessed, and changes in practitioners' prescribing behaviors should be advised to improve patient quality of life.

A prescription-based survey is regarded as one of the most effective means of assessing and evaluating physicians' prescribing attitudes and pharmacists' dispensing practices. Antibiotic overprescribing and under prescribing are both undesirable practices; overprescribing is related with increased side effects, excessive expenditure, and, eventually, the establishment of resistance organisms, whereas under prescribing leads to treatment failure.

Many different types of drugs are utilized in the gynecological department. H2 receptor antibiotics (73%) are the most widely used, followed by vitamin supplements (100%), analgesics (32%), antihypertensive medicines (43%), and corticosteroids (11.9%). Prescription monitoring surveys are required to enhance the sensible use of medications.

The previous studies discovered a lack of information about pharmaceuticals, and as a result of relieving the symptoms, people cease taking prescriptions without consulting a physician. Some medications cause unpleasant drug responses (for example, iron and folic acid cause vomiting and constipation, Nifedipine causes a headache, and azithromycin causes stomach discomfort), which leads to non-adherence to treatment.

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