



**Mahmood, Sidra and Rehman, Tofeeq-ur and Hussain, Shahzad and Godman, Brian (2016) Psychopharmaceutical prescribing practices in non-communicable diseases in Pakistan : an unheeded public health apprehension. In: IPCE 2016 19th International Pharmacy Conference and Exhibition, 2016-04-21 - 2016-04-24. (In Press) ,**

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## **Psychopharmaceutical prescribing practices in non-communicable diseases in Pakistan; An unheeded public health apprehension**

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(Accepted for oral presentation 19th International Pharmacy Conference and Exhibition, Pakistan. April 2016)

### **Abstract**

**Background and aims:** World Health Organization (WHO) has ranked depression as the fourth leading cause of global burden of disease and predicted that depression may be second most common disease by 2020. It is significant public health issue accountable for debilities and functional impairments and quality of life impairment. More than 80 % of patients with depression are now coped at primary health care level in developed countries, and drug therapy is the first-line treatment. Although the clinical benefits of antidepressant drugs in major depression are well documented, the evidence is less robust in cases of mild depression—a highly prevalent disorder in the primary care setting. Epidemiological studies have reported that the dispensation of antidepressants increases with geriatric patients and is more frequent in females than in males. The problem of rising prescription drug costs has also emerged as a critical policy issue. There is scarcity of data on the use of antidepressants in non-communicable diseases in Pakistan. This study was designed to assess prescribing, consultation and facility indicators in healthcare facilities of various cities of Pakistan.

**Methods:** In this cross-sectional study, random and convenient samplings were used to collect data from both private and public healthcare facilities from various cities of Pakistan. Quantitative data was collected using structured questionnaire and prescription analysis whereas qualitative information on factors influencing prescribing practices was obtained by interviewing medical practitioners. A total of 9955 prescriptions were obtained from 400 patient-prescriber encounters between June, 2014 and September, 2015.

**Results:** The prescription analysis revealed that history taking, physical examination and diagnoses were as per guidelines in majority of the cases while brand prescribing was many fold more than generic prescribing. Average number of drugs prescribed was above 4.50 with more prescribing tendency in private facilities. Prescribing practices were dominantly influenced by severity of disease, patient age and availability of drugs. The medical representatives were the main source of drug information to prescribers. Pharmacy and therapeutic committees in all the facilities were absent/non-functional along with non-availability of essential drug list in most of health facilities.

**Conclusion:** There are considerable opportunities to improve the rational use of antidepressants in Pakistan by institutionalizing the prescribing guidelines and formularies, promoting low priced generics and imparting training on essential medicines to the physicians and pharmacists.

**Keywords:** Non-communicable diseases, antidepressants, generics, essential medicine