A QUALITATIVE EVALUATION OF COMPLIANCE TO PRESCRIBING GUIDELINES IN PUBLIC HEALTH CARE FACILITIES IN NAMIBIA

Qamar Niaz[1], Brian Godman[2,3,4], Stephen Campbell[5,6], Dan Kibuule[1]

[1]School of Pharmacy, Faculty of Health Sciences, University of Namibia, Windhoek, Namibia. Email: qniaz@unam.na; dkibuule@unam.na
[2]Department of Laboratory Medicine, Division of Clinical Pharmacology, Karolinska Institutet, Karolinska University Hospital Huddinge, SE-141 86, Stockholm, Sweden. Email: Brian.Godman@ki.se
[3]Strathclyde Institute of Pharmacy and Biomedical Sciences, University of Strathclyde, Glasgow, UK. Email: Brian.godman@strath.ac.uk
[4]School of Pharmacy, Sefako Makgatho Health Sciences University, Pretoria, South Africa.
[5]Centre for Primary Care, Division of Population Health, Health Services Research and Primary Care, University of Manchester, Manchester, M13 9PL, UK. Email: stephen.campbell@manchester.ac.uk

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Background: The World Health Organisation estimates that over 50% medicines are prescribed inappropriately and the main driver of antimicrobial resistance globally. There have only been a limited number of studies evaluating prescribing patterns in Namibia as the country strives to continue to provide comprehensive healthcare; majority using quantitative methods. Consequently, there is a need to address this. The objective is to evaluate prescribing practices among public health care facilities in Namibia to provide future guidance. *Methods:* A mixed methods medicines use evaluation was conducted to assess compliance to guidelines. Qualitative methods used to evaluate factors and practices associated with prescribing at three levels of health care, i.e. hospital, health centre and clinic. Main outcome measures for the quantitative study were compliance to current standard treatment guidelines (STGs),85% compliance to STGs is considered acceptable. *Results:* Of the 1,243 prescriptions, 73% complied with the STGs and 69% had an antibiotic. Of the 3759 medicines (mean of 3.0±1.1 per prescription) prescribed, 64% had generic names. 94.6% of prescribers were aware and had access to STGs for reference purposes, with 82% reporting easy to use NSTG. Main thematic factors driving compliance to therapeutic guidance were programmatic, that is access to up-to date objective guidelines, continued education on their use, and ease of referencing using an index. Lack of systems to regulate noncompliance impacted on their use. *Conclusion:* Given concerns with adherence to guidelines, lack of INN prescribing and high use of antibiotics, a prescribing performance management system should be introduced in Namibia to improve prescribing. This will be monitored.