

## Original Research Article

### Knowledge, Attitude and Practice of self-medication among Pharmacy Students in North Cyprus

**Aim:** The aim of our study is to assess the attitude, knowledge and practice of self-medication among fifth year Pharmacy Students at Near East University in Northern Cyprus.

**Study design:** A cross sectional study.

**Place and Duration of Study:** The study was conducted in faculty of pharmacy in Near East University in Northern Cyprus on December 2018.

**Methodology:** Self-administered questionnaires was conducted using which comprise 7 parts among fifth year pharmacy students who were available during the study time.

**Results:** A total of 77 questionnaires were distributed to be filled by respondents, all of them were filled completely and collected. Among the participants, 39 (51%) with the prevalent age group of 22-26 years old and most of students in our study were from Turkey 42 (58.3%). 25.7% of students are visiting a physician when they have a disease however 25% of them don't comply with physician prescription. Headache (16.8%) and common cold (14.0%) were the most frequently reported illness for which self-medication was taken. Analgesic medicines (37.4%), followed by vitamins (29.7%) and antibiotic (13.5%), are used commonly as self-medication. Nearly all of students 95.9% know the meaning of OTC and prescription only drugs. About 30.7% of students medicate themselves because of it isn't a serious disease. The main source of information about self-medication for students was taking the advice from pharmacist (29.7%). 26.8% of students were agree that pharmacists are good source of information for minor medical problems, 23.0% and 18.2% were agree that self-medication is acceptable for pharmacy students however 4.1% accept that self-medication is not acceptable at all and it would be harmful.

**Conclusion:** The practice of self-medication is prevalent amongst fifth year pharmacy students even with adequate knowledge and awareness about the consequences. Proactive pharmacist may contribute in management of minor illness and rationalized self-medication.

**Keywords:** self-medication; pharmacy students, self-care;, prevalence, clinical pharmacy, North Cyprus

#### 1. INTRODUCTION

Self-medication is a global component of self-care practice and can be defined as “the selection and use of medicines/medicinal products, including herbal and traditional products on one's own

21 initiative, or on the advice of another person, without consulting a physician either for diagnosis,  
22 prescription or surveillance of the treatment [1, 2].

23 The practice of self-medication is a growing trend [3] which generally involves over-the-counter  
24 (OTC) medications which are available without prescription in pharmacies but also includes  
25 prescription-only medicines (POM) [4], reutilizing/resubmitting a previous prescription, sharing  
26 medications with relatives or members of one's social circle, consuming leftover medicines already  
27 available at home, fail to comply with prescribed recommendations either prolonging it or interrupting  
28 it too early or decreasing or increasing the originally prescribed dose [5].

29 Self-medication has both benefits and risks. If done appropriately, self-medication can readily relieve  
30 acute medical problems, save scarce medical resources from being wasted on minor conditions,  
31 reduce the burden on medical services, decrease the time spent in waiting to see the physician, and  
32 save cost especially in economically deprived countries with limited healthcare resources [6,7]. On  
33 the contrary, inappropriate self-medication can lead to irrational drug usage, wastage of resources,  
34 increased chances of microbial resistance to antibiotics, increased risk of adverse reactions, drug  
35 interactions, drug addiction and prolonged morbidity [6, 8].

36 Self-medication patterns vary among different populations and are influenced by various features such  
37 as age, gender, income, self-care orientation, educational level, medical knowledge, previous  
38 experience, satisfaction, and seriousness of illnesses [9].

39 Self-medication is widely prevalent worldwide, especially in developing countries [10] like Northern  
40 Cyprus where not only OTC drugs, even most of the prescription only medicines (POM) are also  
41 easily accessible without prescriptions in community pharmacies. A published study in 2014 in  
42 Northern Cyprus reported that 87% of patients bought unprescribed medication at least once during  
43 their life and most commonly used medications are painkillers (32.9%) and antibiotics (29.3%) [11].

44 Studies have also shown that, self-medication is much more common among physician, nurse,  
45 pharmacists and medical students as compared to general population [12]. There are many factors  
46 that influence their self-medication practice like easy availability of drugs, advertising of drug  
47 manufacturers, previous experiences with symptoms or disease, self-confidence about accurate drug  
48 knowledge, home-kept prescription drugs and easy access to information [13].

49 Pharmacy students are future pharmacists who have a potential role in counselling the patients about  
50 the advantages and disadvantages of self-medication. The academic curriculum of pharmacy  
51 students teaches them about rational use of medicines and consequences of irrational use but there  
52 was a lack of understanding of disease diagnosis [9]. Hence, it is important that the various patterns of  
53 self-medication be studied in them. This study aims to assess the knowledge, attitude, and practice  
54 (KAP) of self-medication among pharmacy students of Near East University in Northern Cyprus.  
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## 56 **2. MATERIAL AND METHODS**

### 57 **2.1 Study Setting**

58 A cross-sectional survey study conducted using self-administered questionnaires among  
59 pharmacy students (fifth year) in Near East University on December 2018. The study  
60 population consisted of all fifth-year pharmacy students that were available at the time of the  
61 study.  
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### 63 **2.2 Data management system**

#### 64 **2.2.1 Data collectors**

65 The self-administered questionnaires were distributed and collected by the investigators  
66 from the students' class rooms, after providing an explanation regarding the study purpose  
67 and impact.

#### 68 **2.2.2 Data collection tool and Sampling**

69 Questionnaires prepared in English and translated to Turkish which consists of 7 parts were  
70 distributed to collect all relevant data. The questionnaires include; demographic  
71 information's which includes gender, age and nationality, the second part consists of disease  
72 or symptoms frequently self-treated by the students, procedures taken for the illness, source

73 of information for self-medication and finally the students' attitude of towards self-  
74 medications. Descriptive statistics were used to describe the frequency of variables  
75 contained in the questioner.

76 Convenient sampling technique was used because we took all fifth-year pharmacy students  
77 [14].

### 78 2.2.3 Data analysis

79 Data were analyzed using SPSS and Microsoft Excel. Descriptive statistics were used to  
80 describe demographic information as well as variables contained in the questioner in order to  
81 assess practice, attitude, and knowledge of self-medication practice among pharmacy  
82 students.

### 83 2.2.4 Ethical issues

84 A detailed explanation of the aim and objectives of the study was given to obtain the consent  
85 of students prior to data collection. They were also informed that participation is  
86 confidentiality and voluntary and would be maintained throughout the study.

## 88 3. RESULTS AND DISCUSSION

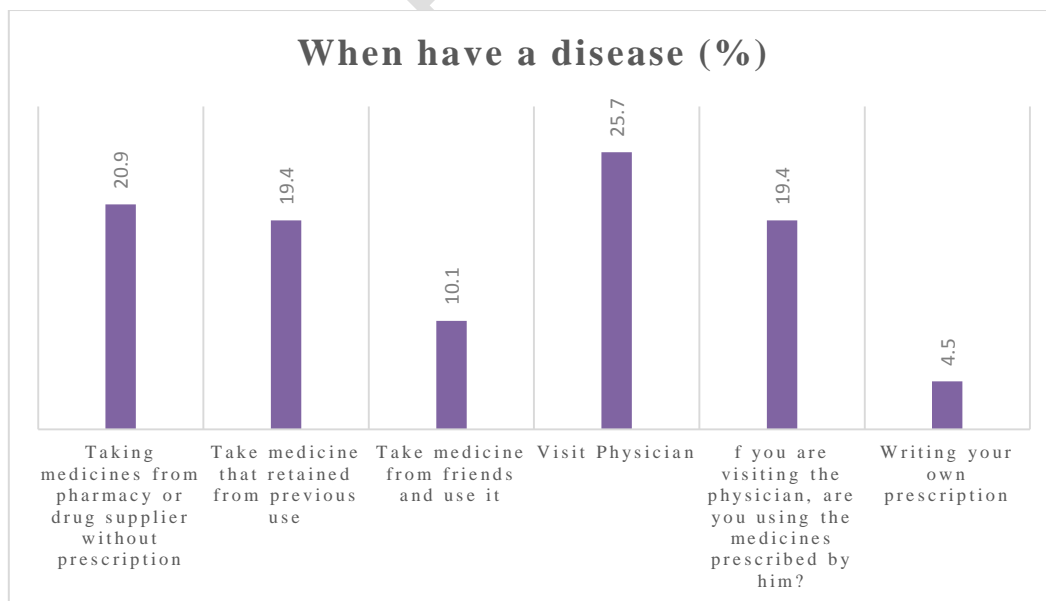
89 A total of 77 questionnaires were distributed to be filled by respondents, all of them were  
90 filled completely and collected.

91 The study was composed of 38 (49%) males and 39 (51%) female pharmacy students from  
92 fifth year. Most of the respondents were in the age 22-26 years (88%).

93 Also most of our sample were from Turkey 42 (58.3%), and the second higher percentage  
94 were from KKTC 14 (19.4%), and other nationalities like Iraqi (11.1%), Syrians (5.6%),  
95 Nigerian (2.8%), Lebanese (1.4%), and Egyptian (1.4%).

96 Regarding to procedures taken for the illness between the students, 25.7% of students are  
97 visiting a physician when they have a disease, while 20.9% are taking medicines from the  
98 pharmacy without prescription and 19.4% take medicine that remained from previous use.  
99 From 25.7% of students who usually visit a physician, about 25% of them don't comply with  
100 physician prescription. [Figure 1]

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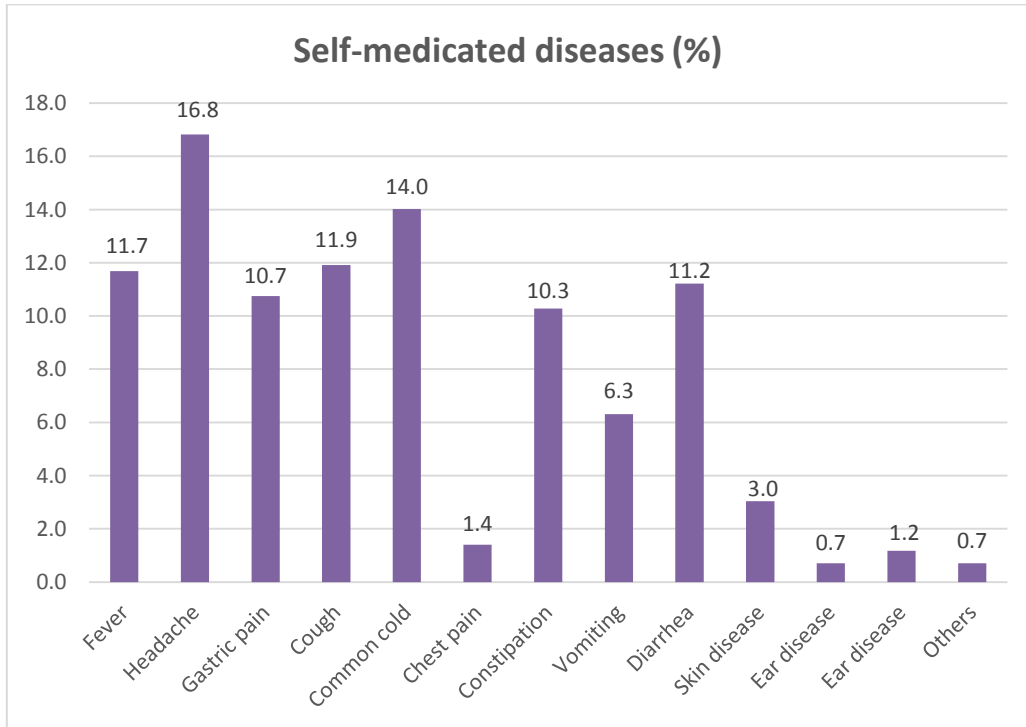


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Figure 1: What are you usually doing when you have a disease

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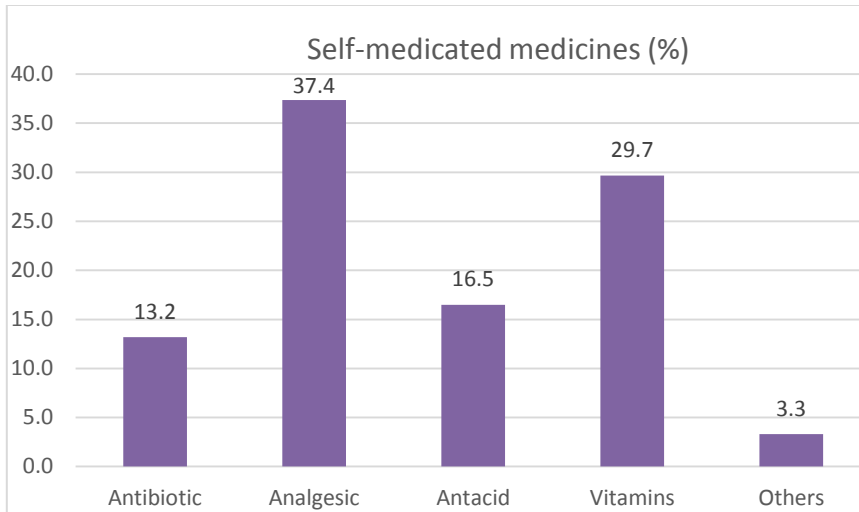
And for the diseases that the students were medicate themselves, the highest percentage was for headache (16.8%) and common cold (14.0%) and 10.3% constipation, 6.3% for vomiting, and a very small ratio for other diseases, which are: skin disorder, chest pain, ear disease, eye disease, and chest pain. [Figure 2]



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Figure 2: In which of the following diseases do you medicate yourself

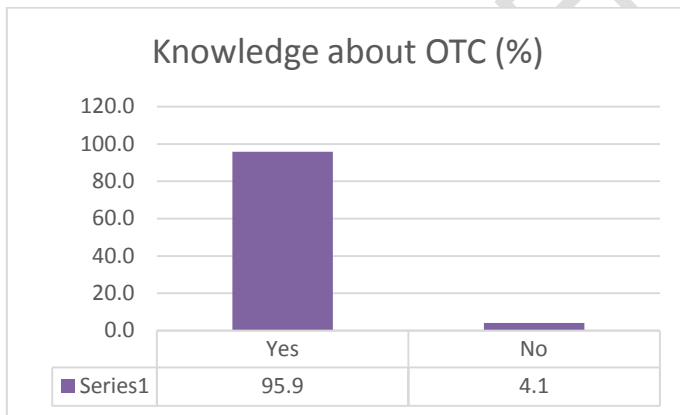
When we asked about the medicines which are used commonly as self-medication, we found that the highest percentage was for Analgesic medicines (37.4%), followed by Vitamins (29.7%), Antacid (16.5%), antibiotic (13.5%), and other medicines like aspirin and metformin where used in (3.3%) as self-medication among the students. [Figure 3]



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Figure 3: According to you, which of the following medicines do you usually use to medicate yourself?

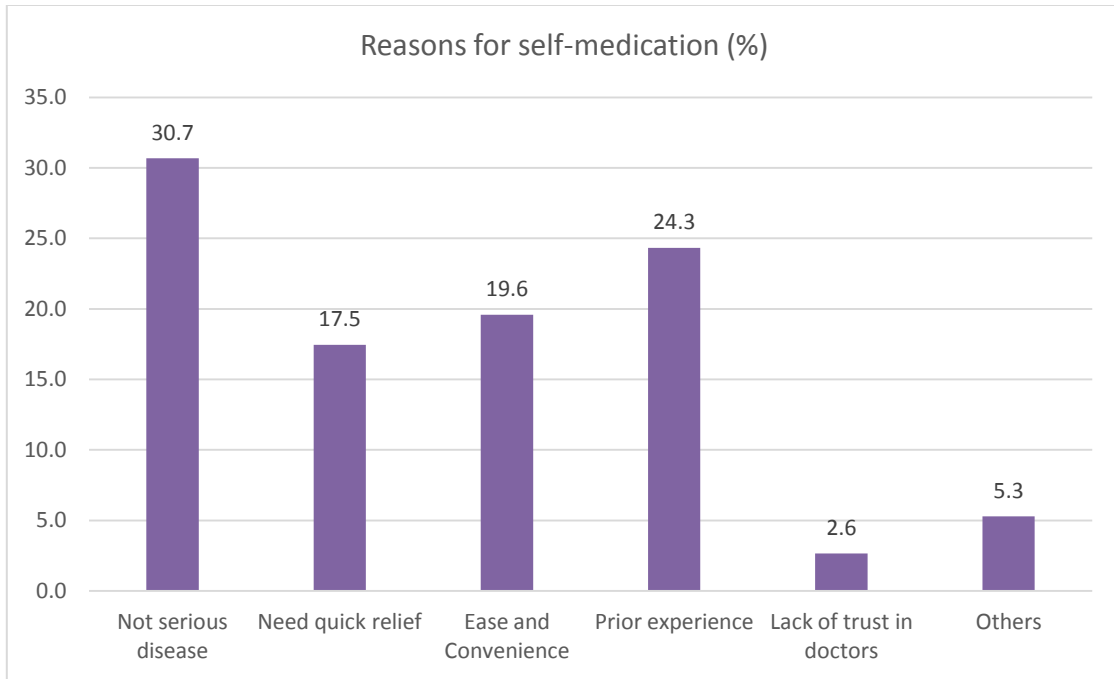
And from our sample, 95.9% of our sample differentiate OTC and prescription only drugs, while 4.1% didn't. [Figure 4]



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Figure 4: Knowing the medication classification "Over the Counter OTC and prescription only drugs"

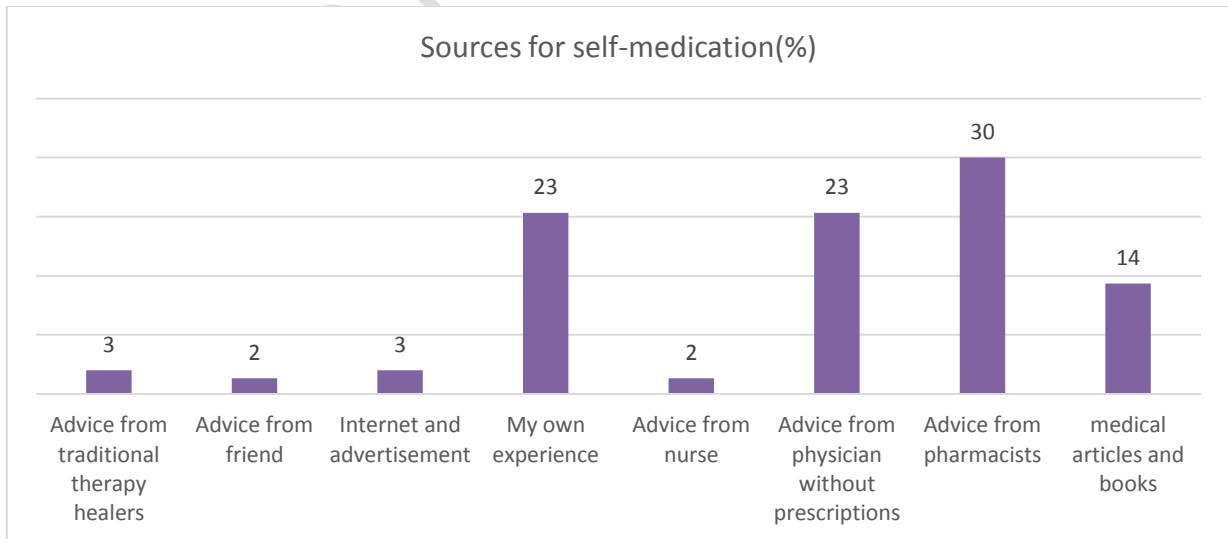
The reasons for self-medicated between the students was shown as, 30.7% of students said that the disease is not serious, 24.3% of them had self-medicated because his prior experience while 19.6% answered "ease and convenience". [Figure 5]



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Figure 5: The reason(s) for medicating yourself

For the students' sources of information about self-medication were 29.7% taking the advice from pharmacist, while 23.6% were ask the physician but without taking prescription and 21.8% depend on their own experience. [Figure 6]

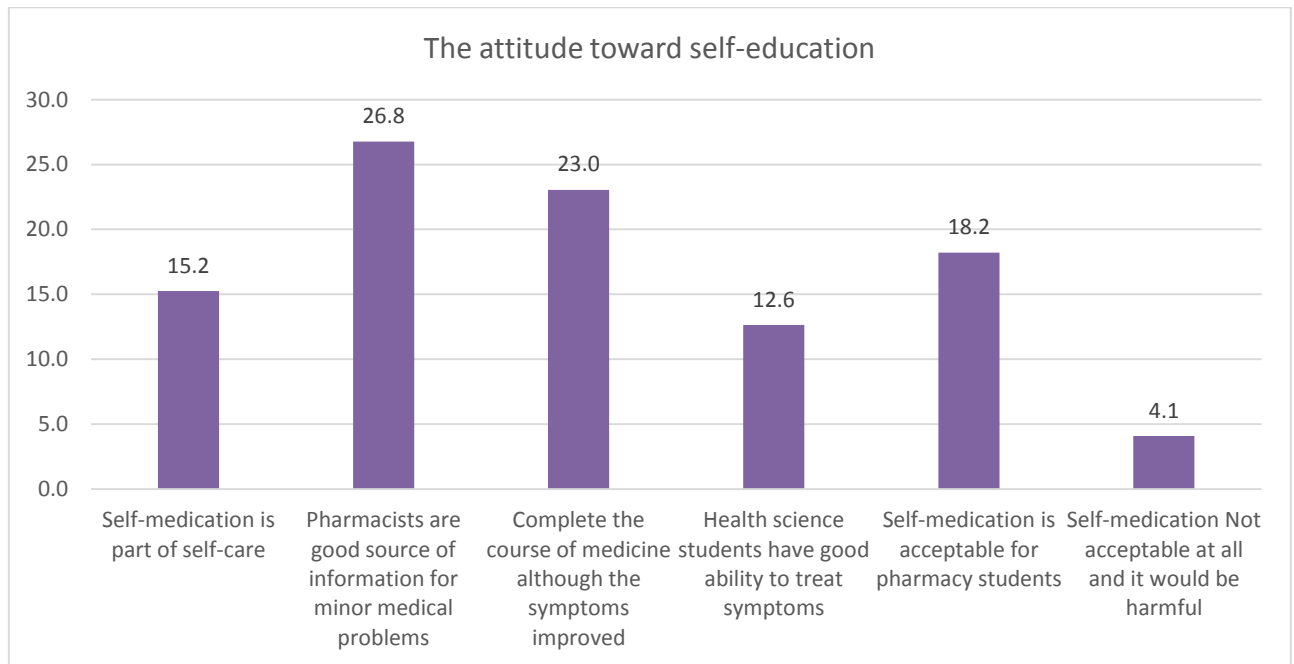


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Figure 6: The source(s) of information for medicating yourself

153 Data regarding attitude toward self-medication was 26.8% of students agreed that  
154 pharmacists are good source of information for minor medical problems, 23.0% were agree  
155 with completing the course of medicines although the symptoms improved and 18.2% were  
156 agree that self-medication is acceptable for pharmacy students. [Figure 7]

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Figure 7: What do you think about self-medication practice?

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## DISCUSSION

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The study was conducted among fifth year pharmacy students in Near East University in Northern Cyprus. Frequency of self-reported medication is highly variable in different parts; these results are may be due to the differences in study subjects, working definition of self-medication and tool used to collect the response of the participants [16].

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People have always been very cautious about their personal health status and for this they have used self-medication, a feature of healthcare, from ancient times. Although self-medication has many pros and cons it depends on who uses it and how it is used for self-treatment. We focused on pharmacy students because they have adequate knowledge of medicine in theory and are more cautious about the safety of drugs which is lacking in other student groups or in the general population. Thus a pharmacy student's view on the self-medication practice can be considered as a major factor to judge the characteristics of their future prescription pattern [13]. In Turkey and North Cyprus the duration of undergraduate pharmacy education has increased to five years, consisting of more clinical contents making a good opportunity for further implementation of the concept [15].

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The students of our study frequently use self-medication, and gender difference has not been shown to have any influence on the practice of self-medication. The reason behind insignificant gender differences in the overall exercise of self-medication may be the study format that allowed the respondents to select drugs by themselves.

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180 In our study we found that about 68% of the students self-practice different types of  
181 medication. A similar type of study was conducted by Kumar et al. in coastal south India and  
182 signified that the amplitude of self-medication practice was 78.90% among medical students.  
183 Other similar studies also demonstrated the prevalence rate of self-medication ranged  
184 between 57.1% and 92% among the medicals students in India.  
185 Several research works carried out in other developing countries revealed that the prevalence  
186 of self-medication was 38.5% and 43.2% among medical, pharmacy, and health science  
187 students in Ethiopia, 51% among citizens in Slovenia, 55.3% and 55% among medical  
188 students in Pakistan and Egypt respectively, 56.9% among medical undergraduate students  
189 in Nigeria, and 80.9% among female university students in Malaysia. The major influential  
190 reason behind the higher propensity of self-medication might be the unregulated easy  
191 availability of all categories of medicine without prescription [13].  
192 Similar to some previously published articles, headache, common cold, fever, and vomiting  
193 were the most common symptoms for self-administration of medications mentioned by the  
194 respondents. It was quoted in our research report that the most common causes for self-  
195 treatment with drugs were that they see it not a serious disease and the insignificance of the  
196 illness which did not require a doctor's visit. Similar outcomes were reported by the study  
197 conducted in India.  
198 As stated earlier, antipyretics, analgesics, antacids, and anti-diarrheal drugs were the most  
199 common classes of drugs self-prescribed for treatment by almost all of the respondents in  
200 our study[17][18][19].  
201 Almost identical observations were found in the studies conducted in India, Pakistan, Iran,  
202 and Ethiopia where these common classes of drugs were frequently used by medical  
203 students.  
204 Furthermore, the use of antibiotics was different to that of analgesics and antipyretics.  
205 This tendency is because of the knowledge of pharmacy graduates on the resistance and side  
206 effects of antibiotics. It is well known that proper medicinal knowledge can promote a good  
207 prescribing pattern of pharmacists. However, at the same time inappropriate or irrational use  
208 of these drugs can lead to various hazardous effects including the reduction in the capability  
209 of microbial flora to resist detrimental microorganisms, the development of multidrug  
210 resistance, addiction, toxicity, and other related syndromes. Therefore, such kind of practice  
211 should be discouraged [13].  
212 We found from our study that the key factor for self-medication practice by the participants  
213 was their adequate pharmacological knowledge which they had gathered from their  
214 academic courses, and they trust themselves as pharmacists. These findings are similar to  
215 those from studies conducted in Nepal, India, Malaysia, Ethiopia, and Pakistan. The second  
216 major source of information on self-prescribed drugs was from previous prescriptions for the  
217 same illness and this result was analogous to the findings of the study conducted in India.  
218 Further, other researches conveyed in India and Ethiopia reported the internet as another  
219 common source of knowledge on self-prescribed medicines which was the third common  
220 source of information in our study results [13].  
221 About 15.2% of the students believed that self-medication is a part of self-medication this is  
222 less than studies conducted in India, Ethiopia, and Pakistan. Self-medication can only be  
223 considered a part of self-care if legitimate use of medicaments can be ensured. It may lead to  
224 accidental drug toxicity as there is always a risk of using expired drugs and also sharing with  
225 friends or taking medicines that have been actually prescribed for other problems. [13][18]



226 And 26.8% of these students considered the pharmacists as a good source for self-  
227 medication; it is similar to some studies that were done in Ethiopia, which considered  
228 pharmacists a very trustful source for self-medication.

229 23% of our sample was agreed with completing the course of medicines although the  
230 symptoms of the illness were improved, 18.2% were agree that self-medication is acceptable  
231 for pharmacy students, 15.2% consider self-medication as a part of self-care, 12.6% were  
232 agree with acceptability of self-medication for pharmacy students, but 4.1% accept that self-  
233 medication is NOT acceptable at all and it would be harmful.

234 Our study had some limitations and we faced some complications during it. First of all, we  
235 covered only fifth year pharmacy students in Near East University due to shortage of time  
236 for the research work. So, if we had conducted the study among more years we would have  
237 got a more extensive scenario on the self-medication practice. Second, we couldn't reach the  
238 hall number of students because the semester was almost finished and the lectures had been  
239 finished, so collecting data from them was slightly difficult. Third, we did the study in just  
240 one university (Near East University), though if we conducted it among many universities,  
241 we would get more comprehensive results. Finally, social desirability bias may have  
242 impacted the responses since the interviews were done in personally.

243 Also, the survey didn't differentiate between the uses of OTC drugs in self-medication vs.  
244 prescription drugs such as antibiotics and may have resulted in misunderstanding and  
245 confusion among respondents.

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#### 247 **4. CONCLUSION**

248 The practice of self-medication is prevalent amongst fifth year pharmacy students even with  
249 adequate knowledge and awareness about the consequences.

250 The high prevalence of self-medication is driven by multi factors, some of them cannot be  
251 modified easily as healthcare. Proactive pharmacist may contribute in management of minor  
252 illness and rationalized self- medication.

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#### 255 **COMPETING INTERESTS**

256 Authors declare no competing interests.

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#### 259 **ETHICAL APPROVAL**

260 The study was approved by the Near East Institutional Reviews Board (IRB) of Near East  
261 University Hospital that assigned this research as an observational study.

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