

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 28 of December 2018.

Methodology: A 7- part self administered questionnaire was used 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.. 88% of the participants in our study were in the prevalent age group of 22-16 years and most of these students were from Turkey (58.3%). 25.7% of students visited a physician when they had a disease, however 25% of them didn't comply with physician's 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%), were used commonly as self-medication. Nearly all of students 95.9% knew the meaning of OTC and prescription only drugs. About 30.7% of students medicated themselves because it isn't a serious disease. The main source of information about self-medication for students was the advice from pharmacist (29.7%). 26.8% of students agreed that pharmacists are good source of information for minor medical problems, 18.2% agreed that self-medication is acceptable for pharmacy students however 4.1% accepted 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

18 **1. INTRODUCTION**

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20 Self-medication is a global component of self-care practice and can be defined as “the
21 selection and use of medicines/medicinal products, including herbal and traditional products
22 on one’s own initiative, or on the advice of another person, without consulting a physician
23 either for diagnosis, prescription or surveillance of the treatment [1, 2].

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

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

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

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

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

54 Pharmacy students are future pharmacists who have a potential role in counselling the
55 patients about the advantages and disadvantages of self-medication. The academic
56 curriculum of pharmacy students teaches them about rational use of medicines and
57 consequences of irrational use but there was a lack of understanding of disease diagnosis
58 [9]. Hence, it is important that the various patterns of self-medication be studied in them.
59 This study aims to assess the knowledge, attitude, and practice (KAP) of self-medication
60 among pharmacy students of Near East University in Northern Cyprus.

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62 **2. MATERIAL AND METHODS**

63 **2.1 Study Setting**

64 A cross-sectional survey study conducted using self-administered questionnaires
65 among pharmacy students (fifth year) in Near East University on 28 of December
66 2018. The study population consisted of all fifth-year pharmacy students that were
67 available at the time of the study.

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69 **2.2 Data management system**

70 **2.2.1 Data collectors**

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

74 **2.2.2 Data collection tool and Sampling**

75 Questionnaires prepared in English which consists of 7 parts were distributed to
76 collect all relevant data. The questionnaire was adopted from a formerly published
77 study which was developed, standardized, and previously used by Kumar et al [14].

78 The questionnaires include; demographic information's which includes gender, age
79 and nationality, the second part consists of disease or symptoms frequently self-
80 treated by the students, procedures taken for the illness, source of information for
81 self-medication and finally the students' attitude of towards self-medications.

82 Descriptive statistics were used to describe the frequency of variables contained in
83 the questioner.

84 Convenient sampling technique was used because we took all fifth-year pharmacy
85 students [15].

86 **2.2.3 Data analysis**

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

91 **2.2.4 Ethical issues**

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

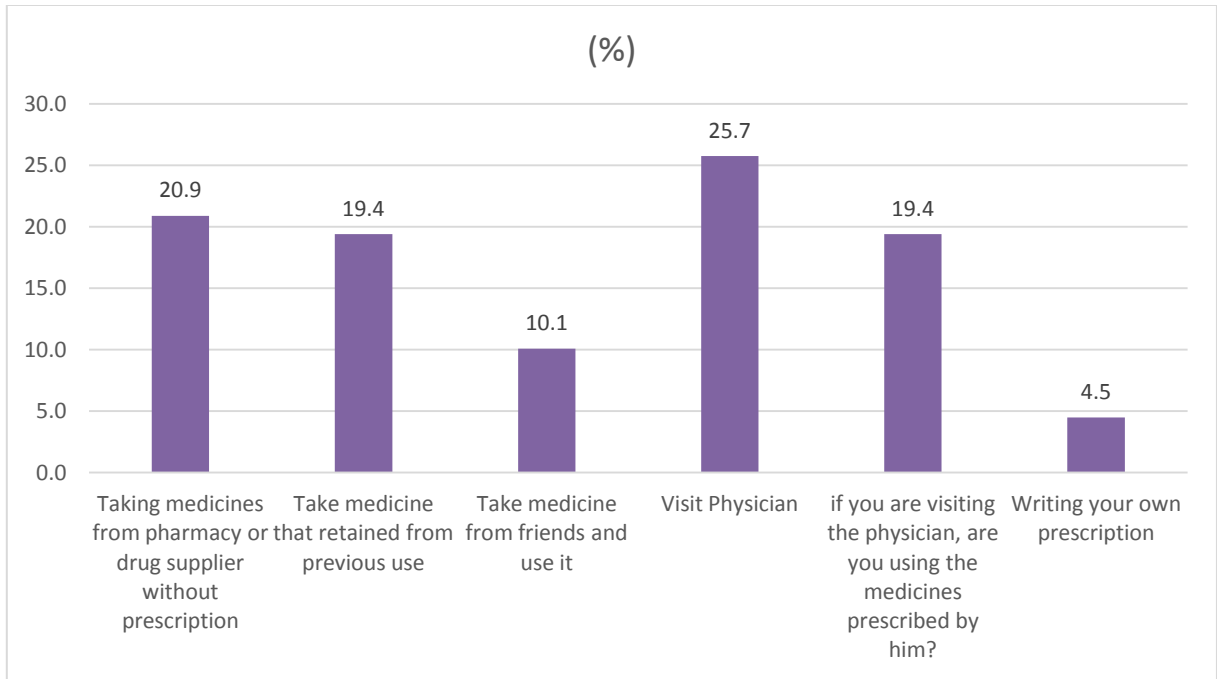
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97 **3. RESULTS AND DISCUSSION**

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

100 The study was composed of 38 (49%) males and 39 (51%) female pharmacy
101 students from fifth year. Most of the respondents were in the age 22-26 years
102 (88%).

103 Most of the sample were from Turkey 42 (58.3%), followed by North Cyprus 14
104 (19.4%), then the other nationalities like Iraqi 8 (11.1%), Syrians 4 (5.6%), Nigerian
105 2 (2.8%), Lebanese 1 (1.4%), and Egyptian 1(1.4%) and others.

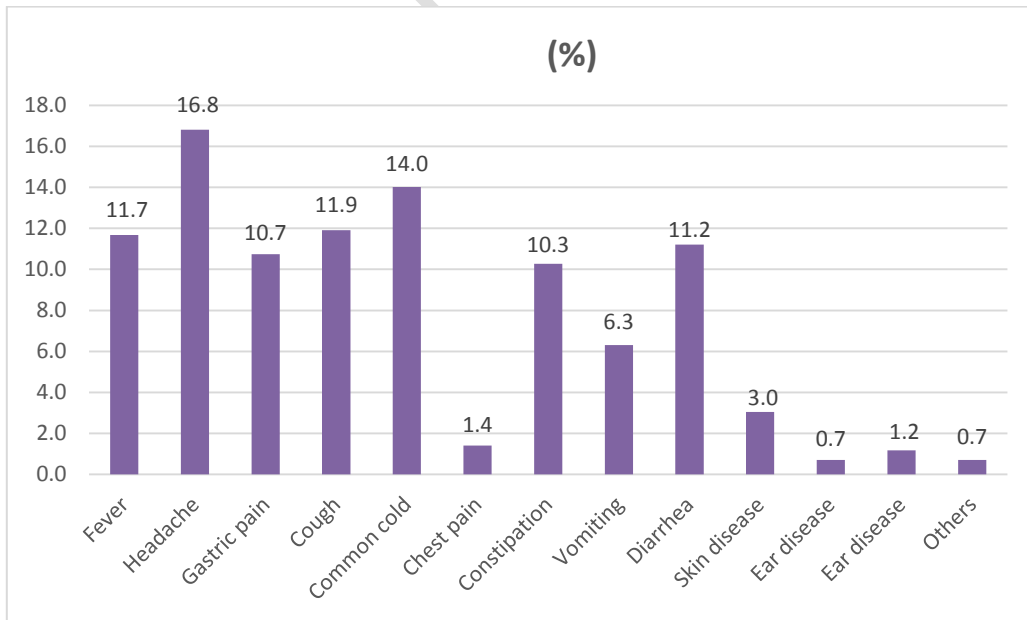
106 Regarding to procedures taken for the illness between the students, 25.7% of
107 students are visiting a physician when they have a symptoms or disease, while
108 20.9% are taking medicines from the pharmacy without prescription and 19.4% take
109 medicine that remained from previous use. From 25.7% of students who usually visit
110 a physician, about 25% of them don't comply with physician prescription. [Figure 1]
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Figure 1: What are you usually doing when you have symptoms or disease?

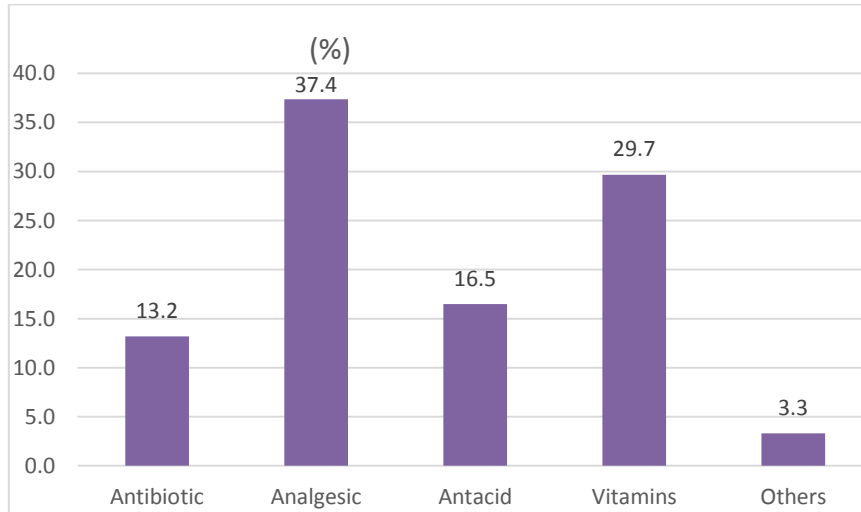
And for the symptoms and diseases that the students medicated themselves, the highest percentage was for headache (16.8%), common cold (14.0%) 10.3% constipation, 6.3% for vomiting, and a very small ratio for other symptoms and diseases, which are: skin disorder, chest pain, ear disease, eye disease,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



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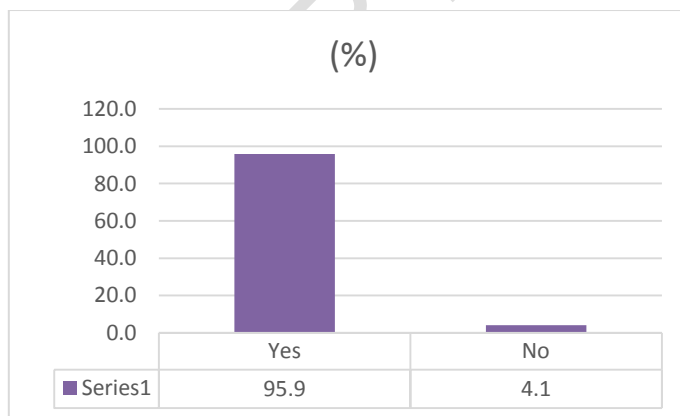
Figure 2: In which of the following symptoms and diseases do you medicate yourself ?

124 When we asked about the medicines which are used commonly as self-medication,
 125 we found that the highest percentage was for Analgesic medicines (37.4%),
 126 followed by Vitamins (29.7%), Antacid (16.5%), antibiotic (13.5%), and other
 127 medicines like aspirin and metformin where used in (3.3%) as self-medication
 128 among the students. [Figure 3]
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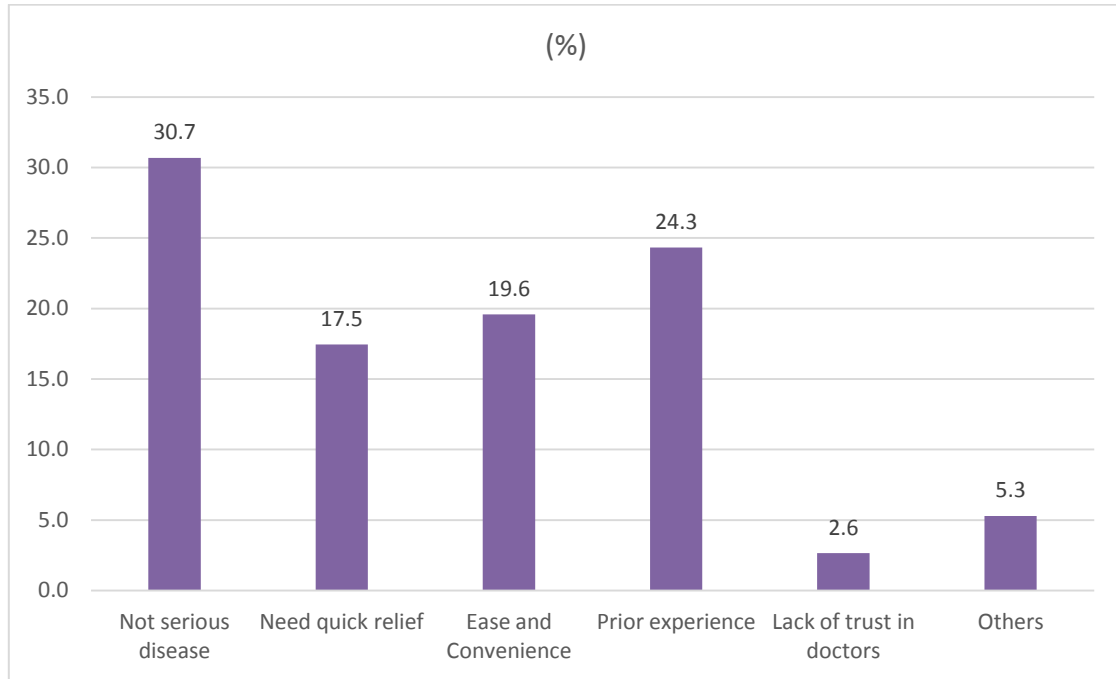
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 132 Figure 3: According to you, which of the following medicines do
 133 you usually use to medicate yourself?
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 136 And from our sample, 95.9% of our sample differentiate OTC and prescription only
 137 drugs, while 4.1% didn't. [Figure 4]
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 142 Figure 4: Knowing the medication classification "Over the Counter OTC and prescription only drugs"
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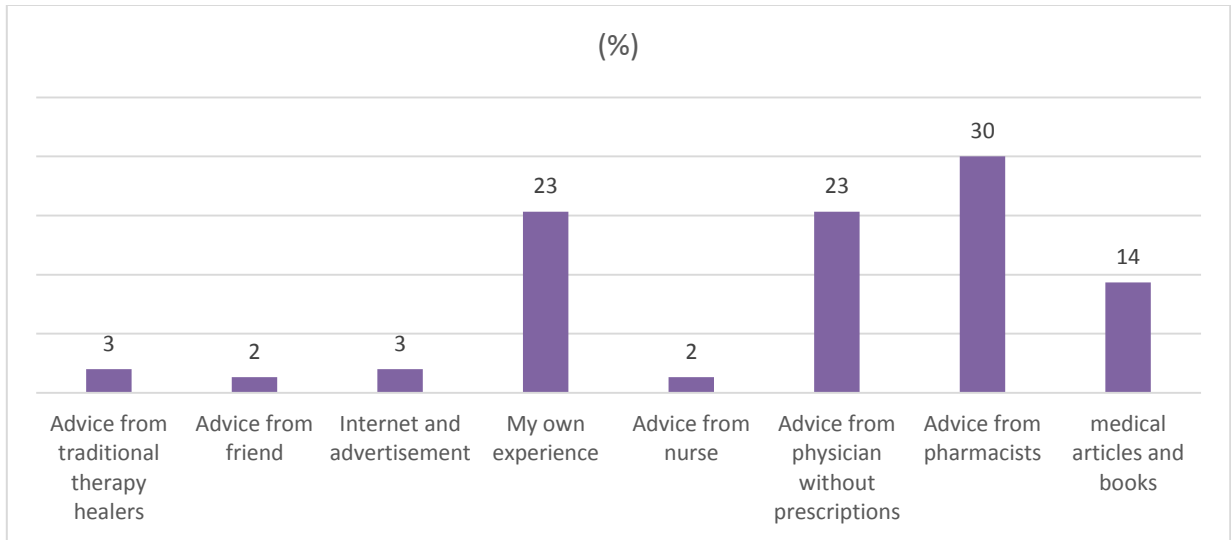
147 The reasons for self-medicated between the students was shown as, 30.7% of
148 students said that the disease is not serious, 24.3% of them had self-medicated
149 because his prior experience while 19.6% answered “ease and convenience”.
150 [Figure 5]
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Figure 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]

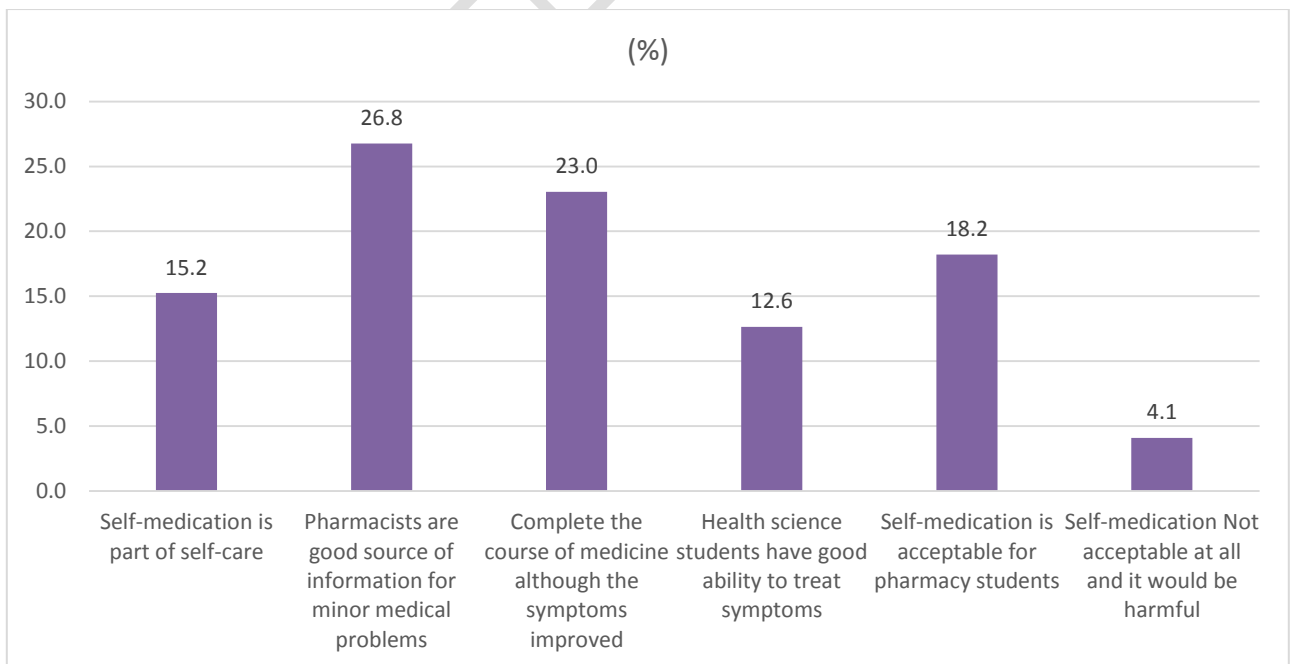


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Figure 6: The source(s) of information for medicating yourself

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



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

174 **DISCUSSION**

175 The study was conducted among fifth year pharmacy students in Near East
176 University in Northern Cyprus. Frequency of self-reported medication is highly
177 variable in different parts of the world; these results are may be due to the
178 differences in study subjects, working definition of self-medication and tool used to
179 collect the response of the participants [15].

180 People have always been very cautious about their personal health status and for
181 this they have used self-medication, a feature of healthcare, from ancient times.
182 Although self-medication has many pros and cons it depends on who uses it and
183 how it is used for self-treatment. We focused on pharmacy students because they
184 have adequate knowledge of medicine in theory and are more cautious about the
185 safety of drugs which is lacking in other student groups or in the general population.
186 Thus a pharmacy student's view on the self-medication practice can be considered
187 as a major factor to judge the characteristics of their future prescription pattern [13].
188 In Turkey and North Cyprus the duration of undergraduate pharmacy education has
189 increased to five years, consisting of more clinical contents making a good
190 opportunity for further implementation of the concept [17].

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

196 In our study we found that about 68% of the students self-practice different types of
197 medication. A similar type of study was conducted by Kumar et al. in coastal south
198 India and signified that the amplitude of self-medication practice was 78.90% among
199 medical students [14]. Other similar studies also demonstrated the prevalence rate
200 of self-medication ranged between 57.1% and 92% among the medicals students in
201 India [18].

202 Several research works carried out in other developing countries revealed that the
203 prevalence of self-medication was 38.5% and 43.2% among medical, pharmacy,
204 and health science students in Ethiopia, 51% among citizens in Slovenia, 55.3%
205 and 55% among medical students in Pakistan and Egypt respectively, 56.9% among
206 medical undergraduate students in Nigeria, and 80.9% among female university
207 students in Malaysia. The major influential reason behind the higher propensity of
208 self-medication might be the unregulated easy availability of all categories of
209 medicine without prescription [13].

210 Similar to some previously published articles, headache, common cold, fever, and
211 vomiting were the most common symptoms for self-administration of medications
212 mentioned by the respondents [18][19][20]. The most common cause for self-
213 treatment with drugs in our study was non seriousness of disease which did not
214 require a doctor's visit. Similar outcomes were reported by the study conducted in
215 India [13][21].

216 As mentioned, analgesics, vitamins, antacids, and antibiotics drugs were the most
217 common classes of drugs self-prescribed for treatment by almost all of the
218 respondents in our study. While in India antipyretics, analgesics, antacids, and
219 antiarrheal drugs were the most common classes of drugs self-prescribed for
220 treatment by almost all of the respondents [13]. These classes of drugs were

221 frequently used by medical students as found in the studies conducted in India [21],
222 Pakistan [6], Iran [22], and Ethiopia[20].

223 Furthermore, the use of antibiotics was different to that of analgesics and antacids.
224 This tendency is because of the knowledge of pharmacy graduates on the
225 resistance and side effects of antibiotics. It is well known that proper medicinal
226 knowledge can promote a good prescribing pattern of pharmacists. However, at the
227 same time inappropriate or irrational use of these drugs can lead to various
228 hazardous effects including the reduction in the capability of microbial flora to resist
229 detrimental microorganisms, the development of multidrug resistance, addiction,
230 toxicity, and other related syndromes. Therefore, such kind of practice should be
231 discouraged [13].

232 In our study we found that the major source of information on self-prescribed drugs
233 was from advice from pharmacists and this result is the same with the findings of the
234 study conducted in Saudi Arabia [23]. Further, other researches conveyed in India
235 and Ethiopia reported the internet as another common source of knowledge on self-
236 prescribed medicines which was the fifth common source of information in our study
237 results [13].

238 About 15.2% of the students believed that self-medication is a part of self-
239 medication this is less than studies conducted in India [21], Ethiopia [18], and
240 Pakistan [22]. Self-medication can only be considered a part of self-care if legitimate
241 use of medicaments can be ensured. It may lead to drug toxicity as their sharing
242 with friends or taking medicines that have been actually prescribed for other
243 problems, also there is a risk of using expired drugs [13].

244 23% of our sample was agreed with completing the course of medicines although
245 the symptoms of the illness were improved, 18.2% were agree that self-medication
246 is acceptable for pharmacy students, 15.2% consider self-medication as a part of
247 self-care, 12.6% were agree with acceptability of self-medication for pharmacy
248 students, but 4.1% accept that self-medication is NOT acceptable at all and it would
249 be harmful.

250 Our study had some limitations and we faced some complications during it. First of
251 all, we covered only fifth year pharmacy students in Near East University due to
252 shortage of time for the research work. So, if we had conducted the study among
253 more years we would have got a more extensive scenario on the self-medication
254 practice. Second, we did the study in just one university (Near East University),
255 though if we conducted it among many universities, we would get more
256 comprehensive results.

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

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261 **4. CONCLUSION**

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

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

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COMPETING INTERESTS

Authors declare no competing interests.

ETHICAL APPROVAL

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

REFERENCES

1. Hernandez-Juyol M, Job-Quesada JR. Dentistry and self-medication: a current challenge. *Med Oral*. 2002;7(5):344–347.
2. Montastruc JL, Bagheri H, Geraud T, Lapeyre-Mestre M. Pharmacovigilance of self-medication Therapies. 1997;52(2):105–110.
3. Patel PM, Prajapati AK, Ganguly B, Gajjar B. Study on impact of pharmacology teaching on knowledge, attitude and practice on self-medication among medical students. *Int J Med Sci Public Health*. 2013;2(2): 181-186.
4. Pereira FSVT, Bucarechi F, Stephan C, Cordeiro R. Self-medication in children and adolescents. *Jornal de Pediatria*. 2007;83(5):453–458.
5. Hansen EH, Holstein BE, Due P, Currie CE. International survey of self-reported medicine use among adolescents. *Ann Pharmacother*. 2003;37:361–6.
6. Hughes CM, McElnay JC, Fleming GF. Benefits and risks of self-medication. *Drug Saf*. 2001;24:1027–37.
7. World Health Organisation (WHO). The safety of medicines. 2005.
8. Clavinjo HA. Self-medication during pregnancy. *World Health Forum*. 1995;16:403-4.
9. Susheela F, Goruntla N, Bhupalam PK, Veerabhadrapa KV, Sahithi B, Ishrar SMG. Assessment of knowledge, attitude, and practice toward responsible self-medication among students of pharmacy colleges located in Anantapur district, Andhra Pradesh, India. *J Educ Health Promot*. 2018; 7: 96.
10. Hussain S, Malik F, Hameed A, Ahmad S, Riaz H. Exploring health-seeking behavior, medicine use and self medication in urban and rural Pakistan. *Southern Med Review* 2010; 3(2):32-34.
11. Sari B, Uluşan M, Muhsen A, Önel Z, Zaimoğlu C. Turkish Family Physician. Unprescribed medication use in North Cyprus. 2014; 5(2).
12. Suleiman I, Sharif L, Rubian S. Self-medication practice among pharmacists in UAE. *Pharmacol Pharm*. 2015; 6: 428-435.
13. Seam M, Bhatta R, Saha B, Das A, Hossain M, Uddin S, Karmakar P, Choudhuri M, Sattar M. Assessing the perceptions and practice of self-medication among Bangladeshi undergraduate pharmacy students. *Pharmacy*. 2018 Mar;6(1):6.
14. Kumar N, Kanchan T, Unnikrishnan B, Rekha T, Mithra P, Kulkarni V, Papanna MK, Holla R, Uppal S. Perceptions and practices of self-medication among medical students in coastal South India. *PloS one*. 2013 Aug 28;8(8):e72247.
15. Nouri, A. I., Abdi, A. M., & Hassali, M. A. (2018). Synopsis of Research Methodologies: A Brief Guide for Pharmacists. *Journal of Pharmaceutical Research International*, 1-16.
16. Goud, T. Gangadhara, K Pavan Kumar and Kirtika Ramesh. "A Study on Self Medication among College Students." (2014).
17. Abdi, A. M., Zarouri, A. T., Saloumi, L., & Basgut, B. (2018). North Cyprus Pharmacist's Cognition and Practice of Pharmaceutical Care. *Journal of Pharmaceutical Research International*, 1-9.
18. Abay SM, Amelo W. Assessment of self-medication practices among medical, pharmacy, and health science students in Gondar university, Ethiopia. *J. Young Pharm*. 2010; 2:306–310.
19. Hughes CM. Monitoring self-medication. *Expert Opin Drug Saf*. 2003;2(1):1-5.

- 321 20. Sarahroodi S, Maleki-Jamshid A, Sawalha AF, Mikaili P, Safaeian L. Pattern of self-
322 medication with analgesics among Iranian university students in central Iran. *J. Family.*
323 *Community Med.* 2012; 19:125–129.
- 324 21. Sontakke SD, Bajait CS, Pimpalkhute SA, Jaiswal KM, Jaiswal SR. Comparative study of
325 evaluation of self-medication practices in first and third year medical students. *Int J Biol Med*
326 *Res.* 2011 Apr 30;2(2):561-4.
- 327 22. Zafar, S.N.; Syed, R.; Waqar, S.; Irani, F.A.; Saleem, S. Prescription of medicines by
328 medical students of Karachi, Pakistan: A cross-sectional study. *BMC Public Health* 2008, 8,
329 162.
- 330 23. Albusalih F, Naqvi A, Ahmad R, Ahmad N. Prevalence of self-medication among
331 students of pharmacy and medicine colleges of a public sector university in Dammam City,
332 Saudi Arabia. *Pharmacy.* 2017 Sep 4;5(3):51.
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UNDER PEER REVIEW