# **Brief Reports**

# **Practices of Chemists Regarding Diarrhea Management**

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Diarrhea continues to be a global problem with a high morbidity and mortality. The National Programme for Control of Diarrheal Diseases was launched a decade ago with the main objective of reducing diarrhea related morbidity and mortality. Oral rehydration therapy is the mainstay of this programme. However, the success of this programme depends mainly on community participation. A large number of diarrhea patients visit the chemist shops and get the drugs over the counter. The study was undertaken to have an idea of current practices regarding diarrhea management among chemists.

## Material and Methods

One doctor (TM) played the role of

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"father" of a child having diarrhea and never identified himself as a doctor. A standardized case description was given to all chemists and similar answers were given if further questions were asked. The chemists were told about a 2-year-old male child having acute watery diarrhea for two days with a frequency of 8-10 per day, with no history of vomiting and no other problem. Child was taking normal feeds and fluid. The chemists were asked, 'Now what should I do?' The chemists of west, central and south Delhi were interviewed for the study. The following points were noted: (i) Whether ORS was prescribed and if instructions regarding its use were given; (ii) Drugs dispensed; (iii) whether the patient was referred to a doctor; and (iv) Any other health advice if given. The qualification of any chemist was not asked as it would raise suspicion and their usual practice could not be assessed.

### Results

A total of 30 chemists were approached by one of the authors (TM). Of these, 6 (20%) straightway advised that the child be shown to a doctor in the same locality. One chemist advised the "parent" to give ORS and also gave instructions regarding its use and referred the patient to a doctor; two more chemists advised ORS without any instruction. The rest of the chemists dispensed a variety of drugs which included some form of antibiotic/antibacterial in 20 cases (66.6%). Seven chemists (23.3%) also advised some nonsepecific antidiarrheals. Some patients were advised more than one antibiotic and more than one antidiarrheal. Different antibiotics/antibacterials advised were furazolidone-7 (23.3%)

metronidazole and furazolidone combination-5 (16.6%) cases; metronidazole-3 (10%) cases; and ciprofloxcin-2 (6.6%) cases. Amoxycillin, cephalexin and enteroquinol were advised in one case each. No other health advice was given by any of the chemists. None of the chemists asked any question pertaining to degree of dehydration, danger signs or complications. Most of them enquired whether the child would/could take tablets when answer was given "may be" but all of them advised that liquid preparations would be more suitable.

#### Discussion

A significant number of patients consult chemists for common ailments like diarrhea and they respond also by giving some form of medicine as found in a study in rural India(1). In urban areas, the number of patients seeking treatment from chemist shops is likely to be much higher as in the next door he will get a chemist who will entertain him without delay and will not charge him for advice. It is distressing to note that only 10% of chemists gave ORS and only one respondent gave instructions for its use in the metropolitan city of Delhi. The situation is as dismal as it was six years ago as seen by Greenhough(2) when only 7% of physicians prescriptions mentioned ORS. All the chemists who did not refer to a doctor advised some form of medicine. Overuse of drugs is a major problem and has been observed earlier in the studies undertaken to quantitate drug consumption and prescribing habits of physicians(3,4), A similar study in Africa showed that ORS is not the first line treatment received by the patients who visit private pharmacies for diarrhea(5). Pathak et al. in their study observed that almost all patients of gastroenteritis received one or more antibiotic(6). Nonspecific antidiarrheal drugs

were the other commonly advised drugs. It is satisfying to note that none of the chemists advised the use of anti-motility drugs. The chemists play an important role in health system in developing countries like India where there are no stringent regulations to check the sale of drugs which should be sold on prescription only. Besides they cater to a large number of patients with common and apparently minor illnesses. It is difficult to predict the factors influencing the chemists practices. However, the practising doctors in the neighborhood are likely to be a major influence besides the personal interest in selling the stocked products. The National Drug Policy and its recommendations should be made keeping in mind the large population of patients who do not visit qualified medical practitioners with orientation towards more community participation and chemists should also be included.

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