

Original article

Unnecessary Use of Pain Killer in Different Age Groups

Safila Naveed*, Sidra Ghayas, Anum Jawed, Farhana Kanwal, Bisma Mohiuddin,
Erumta Sabeen and Bushra Sabuhi

Jinnah University for Women, Karachi, Pakistan

*Corresponding Author: Safila Naveed

Abstract

Analgesics, though relatively safe and commonly used drugs. Many people concomitantly take the same analgesics of different brands thereby contributing to analgesic nephropathy. In this study we examined patients' attitudes towards analgesic usage. Male and female patient of ages 15 to 70 years were approached pattern of analgesic use was assessed by response to questionnaires. 100 individuals completed the questionnaires. The clinical conditions for which the patients used analgesics for were body pains, headache, chest pain, tooth ache, stomach pains, menstrual pains and pains associated with other disease conditions. Acetaminophen, aspirin, naproxen, ketoprofen and ibuprofen were the most frequently used analgesics. About 80% of the patients were on self medication. There is need for analgesic education programme placing emphasis upon the hazard associated with analgesics abuse.

Keywords: Pain killer, age group, gender.

Introduction

One of the most widely used and abused drugs all over the world are pain-killers, pain is an unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage . Pain killers (Analgesics) currently represent the mainstay of pain management, with an array of drugs available, aspirin, acetaminophen, non-steroidal anti-inflammatory drugs (NSAIDs). People believe there is a pill for every disease they immediately take analgesics, heavy use of analgesics, particularly over-the-counter (OTC) drugs. Several studies have reported for associations between use of analgesics and the chronic renal failure including non-steroidal anti-inflammatory drugs (NSAIDs) acetaminophen, flurbiprofen and aspirin. Abuse of analgesics has long been associated with the development of chronic renal failure. Breaking patients' beliefs about the abuse and misuse of analgesics is a key factor in controlling the unnecessary use of pain killers. Also understanding of

patients' attitude to analgesic usage may facilitate more effective communication between the doctors and patient and as well as the development of strategies to educate patients and the public [1-2].

Materials and Methods

This was a cross-sectional study using interviewer questionnaire. The questionnaire was developed to conduct this study. The questions were related to patient information and about their attitudes to analgesic usage.

Results

Adequate pain control is a fundamental right of every patient. Effective pain management is an integral and important aspect of quality medical care. Preventing drug abuse is an important goal. Self prescription of analgesics even for minor ailments, could lead to medical complications. The most commonly misused medicines are painkillers. Several analgesics can induce gastritis and may also increase risk of stroke by four times in patients with high BP. In our study we found that many pain killers are used by individuals some use habitually while many take when killers only when needed. In this study we found that acetaminophen is the most commonly used pain killer about 40% of the individuals use it out of which 97.5% use it as self medication & reported some side effects which include nausea, vomiting, gastric upset etc. but keep using it to relieve pain. Aspirin is also used by 91 of individuals in our study 11% population use aspirin to relieve their headache, muscle pain, back ache and all of them took aspirin as self medication & reported some side effects as urticaria, dehydration, vomiting, dizziness etc. In our study we found that the pain killers are used regularly by individuals. In this study we observe that 5% population used and the age of individuals 20 to 60 years have been used. Individuals using this pain killer in the conditions of headache, muscle pain, back ache, toothache, fever and also have been side effects like Stomach upset, Nausea, constipation, dizziness. Population used this medicine. 100% used self medication but 0% on doctor prescription. No one it's habitual and the most commonly used pain killer. Flurbiprofen is also used by population to relieve their headache, muscle pain, back ache as self medication & reported some side effects as vomiting, dizziness, constipation, nausea etc only 3% use this ,medicine in our study. 100% on doctor prescription, it is not commonly used because of side effect. This data indicate that the daily use of pain killer slowly progress the diseases because of daily use. High doses of painkillers used by millions can increase the risk of heart attacks and strokes according to the largest study of its kind. It confirmed a 'small but significant' extra risk of dying from heart problems after prolonged use. The data indicate that the highest doses of painkillers prescribed by physician are twice every day amount recommended for headache and other minor ailments. In studies of pain killer we have found that the use of pain killer is more and we also

observe the many side effects in our survey and we also found that 15% population used diclofenac and the age of individuals 18 to 60 years have been used. Individuals using this pain killer in the conditions of headache, muscle pain, back ache, toothache, fever and also have been side effects like Stomach upset, nausea, constipation, heart burn, dizziness. Population used this medicine 33.3% on doctor prescription but 66.6% used self medication. 11.1% habitually used. In this study, we found that diclofenac is the most commonly used pain killer. In our survey we studied the mefenamic acid and also seen its side effect. The number of population used this medicines is 17% and use in the condition of headache, muscle pain, back ache, fever. The side effects of this medicine are also observed like Stomach upset, Nausea, constipation, heart burn. The 71.4% use it as self medication and 21.4% habitually used. Hyoscine butyl bromide and drotaverine, these drugs are using but not commonly. They used by self medication and the ratio is 100% with the age of 20-23yrs. The condition use these are dysmenorrhea and pain and the reported side effect are, dizziness, nausea, constipation etc. Our study of Naproxen and ketoprofenis is that, these are the drugs that not use commonly but some time do prescribe it for any kind of pain to patients who are not cure by the other painkillers. Naproxen sodium is an effective and safe treatment in tension-type headache. Their common side effects are stomach upset and nausea. Our results shows out of 91 persons 77 use self medication and these are belong to age group 20-30. The frequency of self medication in different gender we found almost equal ratio of using pain killer as a self medication. Duration of self medication is very high in 1- 5 year but not less in other duration which indicate this is common practice. p value for different age group is 0.022 in different gender is 0.14 and in duration we found 0.521. values are non significant which shows there is no difference in using self medication in different age groups, gender and duration. Result given in table 1-4 and fig 1-3.

Discussion

This survey identified persons in demographic groups who had both higher levels of misconceptions and lower levels of knowledge about the potential adverse impact of analgesics. Many people become mentally absorbed into thinking they are experiencing some form of pain and therefore use analgesic medication continuously. One of the first steps to recovering from a painkiller addiction knows what the signs and symptoms are and what can be done to stop it. Painkillers are medication aimed at relieving discomfort and unpleasantness for those suffering from injury, illnesses and other ailments. When an individual becomes physically dependent on it, the person cannot stop using the drug no matter whether they want to or not. This is due to the withdrawals symptoms that are suffered when the drugs are not available. The brain increases the number of receptors due to the constant availability of pain medication causes its nerve cells to stop working normally. The body the reacts by halting its

manufacturing of endorphins they are the natural painkillers present inside the body. Because the nerve cells in the brain has now stopped working, they body becomes dependent on the medication and causes painful effects on the body when the medication is unavailable. In actual fact, once an individual addicted then they are only using the drugs to avoid the withdrawal symptoms that might be experienced. Lack of interest in other treatment methods, muscle and joint pains, mood and behavior changes, sleeplessness are all things that can be experienced due to in increased use of analgesics. The reason of self medication is that the dispensing behavior of drugs and use of these medicine not properly monitored by government. There for the ratio of the use of these types of medication very high in Pakistan³⁻⁶.

Conclusion

This study shows that patients often have inadequate knowledge and misconceptions on analgesic usage, improved patient education may reduce unnecessary analgesic usage and chronic renal failure in the community.

Table1: Self Medication in different age groups

Self Medication	Age					Total
	20 - 30	31-40	41-50	51-60	61-70	
no	8	1	3	1	1	14
yes	61	11	2	2	1	77
Total	69	12	5	3	2	91

Table 2: Self Medication in different gender

Self Medication	gender		Total
	female	male	
no	3	11	14
yes	44	33	77
Total	47	44	91

Figure1: Self Medication in different age groups

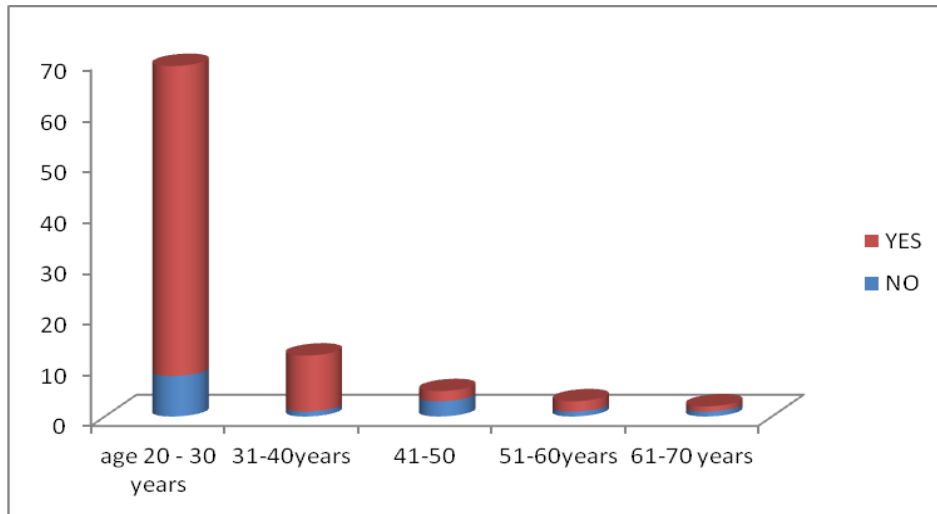


Figure 2: Self medication in different gender

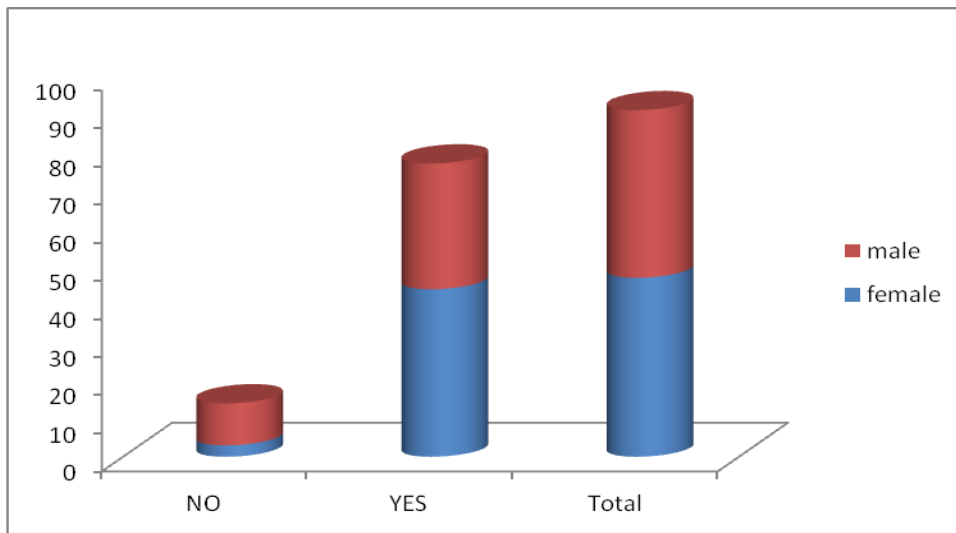


Table 3: Time period of self medication

Self Medication	since			Total
	6 month -1 year	1-5 year	5-10 year	
no	6	7	1	14
yes	24	34	18	77
Total	30	41	19	91

Figure 3: Duration of self medication

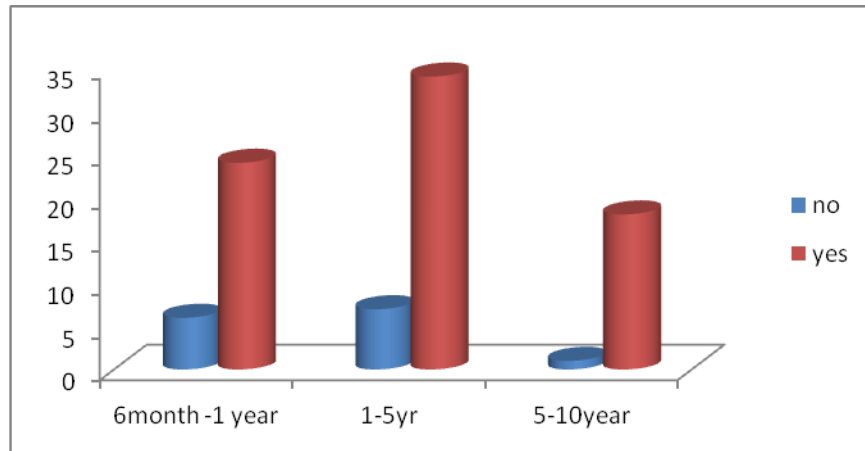


Table4 : Chi-Square Tests

Chi-Square relation of different groups	Value	df	Asymp. Sig. (2-sided)
Different age groups	11.449 ^a	4	.022
Self Medication in different gender	6.051 ^a	1	.014
Duration of self medication	2.258 ^a	3	.521

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