

Assessment of knowledge, attitude and practice on adverse drug reaction reporting and its monitoring among health care providers working in Jimma zone health centers, South West Ethiopia

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Background: Drugs are a dualistic therapeutic tool. Decisions on treatment are guided, not only by the potential for benefit, but also by the nature and severity of adverse drug reactions (ADRs). In Ethiopia voluntary reporting has been effective as of 2002 through the rigorous activities performed by the adverse drug reaction monitoring division of the Drug Administration and Control Authority. But the number of ADR reports received by the authority was low in amount. Hence, an assessment of knowledge, attitude and practice on ADR reporting and its monitoring needs to be performed so that it can serve as a base for an intervention.

Methods: A descriptive cross sectional survey using semi-structured questionnaire (quantitative) and qualitative primary data collection method (in-depth interview) were used for collecting data from health care providers working in Jimma zone health centers from March 10-April 13, 2012.

Objectives: The aim of this study was to assess the knowledge, attitude and practice of health care providers on adverse drug reaction reporting and monitoring in the public health centers in Jimma Zone, Oromia region, South West Ethiopia.

Results: The response rate was 131 (85.1%). More than half of the health care providers 66 (50.4%) have ever heard about ADR reporting. The assessment shows that 112 (85.5%) respondents believe that it is the responsibility of all health professionals to report the encountered ADRs. Moreover, the study indicated that 21 (16%) health care providers use national treatment guidelines as a source of information about ADRs. Less than half 55 (42%) of the health professionals were introduced about ADR monitoring during their undergraduate studies. Almost half of the respondents 65 (49.6%) reported that FMHACA is responsible for the monitoring of ADRs. Only around a tenth of respondents have a satisfactory knowledge about ADR and side effect. With regard to attitude about ADR reporting, almost all health care providers agree that an ADR should be reported (93.9%). Concerning respondents' practice towards ADR reporting, from the total 131 respondents only 19 (14.5%) had encounter an ADR in their day today practice during the last 3 months. From these only 6 (31.6%) had reported the ADR they encountered. The need to be certain about the association between the drug and ADR before reporting 102 (77.8%) and the belief that that ADRs are well documented by the time a drug is marketed 99 (75.6%) were the two major reasons listed for not reporting ADRs.

Conclusion and Recommendation: Though the study participants have satisfactory attitude about ADR and ADR reporting, their knowledge and practice about ADR and ADR reporting was below a satisfactory level. In Service training and supportive supervision, collaboration with the different stake holders and vertical reporting system design are recommended for improving ADR monitoring and reporting.

Key Words: Knowledge, attitude, practice, adverse drug reaction, adverse drug reaction reporting, health professionals, jimma

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