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Characteristics of sildenafil citrate users in Addis Ababa, Ethiopia

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Background: Misuse of sildenafil citrate by healthy young men for recreational purpose is becoming a major concern. The main sources for this are medicine retail outlets (i.e. pharmacies and drug stores). The aims of this study were to describe the characteristics of sildenafil citrate users and to assess the dispensing practice of sildenafil citrate, in community pharmacies in Addis Ababa, Ethiopia.

Methods: A survey was conducted among customers who purchased sildenafil citrate from community pharmacies in May 2013; and semi-structured interviews were conducted with community pharmacists. Quantitative data was analyzed by using simple descriptive statistics. For the interviews, thematic analysis was used.

Results: More than half of the respondents to the survey (n=197) were below 40 years (57.9%), never married (53.8%) and had post high school study (57.9%). All were men. Only 16.6% of them were diagnosed for ED, and 58.4% had used sildenafil before. The main reason for buying sildenafil was experimentation (46.9%). According to interviewees sildenafil citrate was found being dispensed without prescription due to unhealthy competition among medicine retail outlets and clinics. Dispensing the medicine without adequate counseling and provision of information was also reported.

Conclusion: Respondents of all age groups were found using sildenafil citrate mainly without confirming the appropriateness of the etiologic conditions. Selling sildenafil without a prescription seems to be a common practice in pharmacies in Addis Ababa. Strengthening the regulatory activity is crucial to ensure that customers are protected from unprecedented health risk in the dispensing of medicines.

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Epidemiology and economic burden of adverse drug reactions & their risk factors among Indian ambulatory patients- role of clinical pharmacist

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Now a days, ADRs are the important cause of hospital admissions, constituting a significant economic burden. We thus aimed at identifying ADRs and assessing their causality, preventability and severity, risk factors & economic burden in Indian ambulatory patients over a 6 months period. Of the total 400 prescriptions, 138 (34.5%) were identified with ADRs. Using the Naranjo's algorithm, it was found that 48 ADRs were definite, 57 were probable & 33 were possible. Severity was assessed using Modified Hartwig and Siegel scale, in which 45 (32.6%) patients had mild ADRs, 66 (47.8%) had ADRs of moderate severity and 27 (19.56%) had severe ADRs. Schumock and Thornton scale was used to identify the preventability of ADRs among which 36 (26.08%) ADRs were definitely preventable, 74 (53.62%) were probably preventable & 28 (20.28%) were not preventable. Mean hospital stay of patients was 8 days & average cost per patient suffered with an ADR was INR 3,751/-. Risk increases with age (> 60), gender (females), number of prescribers (>2), prescription of multiple drugs (>5), duration of treatment (>1 month), multiple diagnoses. Most commonly observed ADRs were anti-tubercular drugs induced hepatotoxicity, calcium channel blockers induced edema, ACE inhibitors induced dry cough, olanzapine caused diabetes mellitus. The awareness of risk factors of ADRs would help physicians to identify patients with greater risk & therefore, might benefit from ADRs monitoring and reporting programme. Thus clinical pharmacist has a role in conducting medication history interview and dose tailoring thereby influencing the prevention of economic burden to the patients.

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