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### Evaluation of the noncompliance in the patient of malaria at primary health care centers of Thatta district

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Adherence, compliance, concordance – whichever term you prefer, all refer to the extent to which patients take their medication as prescribed. The three key elements involve taking a medicine at the right dose, the correct dosing frequency and for the recommended treatment duration. Both *Plasmodium vivax* and *Plasmodium falciparum* are prevalent in Pakistan, yet up-to-date data on the epidemiology of malaria in Pakistan are not available. This study was undertaken to determine the current prevalence and distribution of *Plasmodium* species in district Thatta. A descriptive observational study was conducted at selected primary health care centers of Thatta district. A total of 300 patients were enrolled via purposive sampling with confirmed diagnosis of malaria from the duration of January 2018 to September 2018. All patients were interviewed regarding their disease and therapy and a structured questionnaire was asked to be filled by the patients. A total of 300 patients were interviewed among which male patients (n=230) were more in number than female patients (n=70). Maximum number of patients was enrolled from Rural Health Centre Gharo i.e. 40%, while 30% each enrolled from Rural Health Centers Jherk and Jungshai. A large ratio of patients fall between the ages of 24-35 years i.e. 51 %, (n=153) while diminutive ratio of patients fall between the ages of 55 years. In account of noncompliance, 37% patient were found with dose missed, among which dominant factor was the side effects of the medication i.e. 17%, in which fatigue and G.I disturbance was the major contributor for the noncompliance, whereas 20% were thinking to change the medication. Around 30% patients were found to show irregularity for their routine visits, however 21% patient were found defaulter and discontinued their treatment out of which 10% cases was due to duration of therapy where as 6% was because of early satisfaction and remaining were 3% and 2% left the medication because of lack of follow up and lack of education respectively. Study concluded that the major contributing factor was noncompliance which interrupted the patient's health.

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