



The Ghanaian Population's Issue with Antimalarial Drug Abuse

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INTRODUCTION

Malaria continues to be a major global social and economic health issue. Particularly affected are Africa's emerging nations. Misuse and abuse of over-the-counter antimalarial medications is a special issue. This issue may cause drug-resistant strains to evolve, which would cause Ghana to stop using additional antimalarial that were previously effective. Methods: To gather information about Ghanaians' knowledge of malaria, attitudes towards antimalarial, and usage of antimalarial, an innovative questionnaire was employed over the course of the study. Results: The chi-square test was used to compare the proportion in the studied subgroups. Version was used to conduct the analysis.

DESCRIPTION

TIBCO Software, Krakow, Poland and Statistical version, were used to conduct the analysis. Overall, of respondents were aware of the signs and symptoms of malaria were aware of its origins. More educated respondents were statistically more likely to be familiar with malaria symptoms. Just of the remaining respondents in the research group did a fast diagnostic test for malaria, and only of the respondents sought medical advice before taking the antimalarial medication. The local people of Accra and Yandi are mostly aware of the causes, signs, and symptoms of malaria as well as other preventative measures. Education has a huge impact on how people behave, especially in Accra. Malaria for antimalarial medications to be used effectively, there has to be widespread public education, knowledge, and accessibility to locations where they are marketed [1].

Except with coronavirus illness, the human immunodeficiency virus acquired immunodeficiency syndrome, and TB, malaria is one of the most prevalent infectious diseases in the world. Almost half of the world's population, according to the World Health Organization, resides in endemic regions. An estimated million cases of malaria, with an upward trend, were reported in nations where the disease is prevalent. In Ghana, there were more than 5 million cases recorded. According to the, there were cases of malaria-related fatalities worldwide, with of those deaths occurring in Africa. With people, Ghana is one of the most populated emerging West African nations and is situated in an area where

Plasmodium is prevalent. It also has the largest gross domestic output in US dollars. It is a nation with a high malaria incidence rate and a high infant mortality rate under Data from the Centres for Disease Control Atlanta show that general mortality in Ghana is caused by malaria, which is the third-leading cause of death in Ghana after respiratory disorders and strokes. According to data released by the WHO, new cases are rising steadily [2].

Due to the severe negative effects of prolonged usage, chemoprophylaxis is rarely employed among Ghanaians. There are other factors as well. The suggests the following alternatives instead of chemo prophylaxis among African residents: The malaria vaccine produced by has been advised for use in children residing in regions with moderate-to-high malaria transmission. Intermittent preventative therapy in pregnant women and seasonal malaria in young children living in the Sahel. Drug resistance has been brought on by the prolonged use of monotherapy to treat malaria. In nations with a resistance issue, the has advised the use of artemisinin-based combination treatment Ghana has been using. The first line of therapy for uncomplicated malaria became artesunate-amodiaquine [3].

When using this medication is not feasible, it is advised to These medications are offered in pharmacies, where they are dispersed by trained staff, as well as pharmacy stores, bazaars, and hawkers, where the sale is handled by those without official training. All antimalarial medicine costs must be higher than Ghana was the first nation to receive financing from the Global Fund after price stabilisation. The price drop made more widely accessible. Physician usage of increased as a result of informational initiatives run by the Affordable Medicines for Malaria Fund. Malaria mortality significantly decreased as a result of the deployment of combination therapy with artemisinin and co-financing for medications. The and United's reports indicate According to estimates from the United Nations International Children's Emergency Fund there were 60% fewer malaria-related fatalities. Without seeking medical advice, excessive usage and self-administration of antimalarial medications increase the chance of resistance to artemisinin and its companion therapies and expose patients to their side effects. Southeast Asia has reportedly seen the emergence and spread of Plasmodium falciparum variants resistant to artemisinin [4,5].

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CONCLUSION

Although the standards for treating malaria appear rational, health circumstances, median monthly income, and public knowledge are a little different than we might expect. Ghana offers public health insurance the fundamental package provides free access to medical treatment for the majority of ailments that are prevalent in Ghana, including malaria. The cost of buying medications is not covered by the insurance; it only covers the price of doctor appointments, hospital stays, and medical expenses associated with them. The National Health Insurance System insurance plans are mostly purchased by populations in large cities due to the comparatively high expenses of obtaining insurance in comparison to compensation and little access to health care facilities in rural regions. Even in the wealthiest neighbourhoods.

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CONFLICT OF INTEREST

None.

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