CHAPTER V

PRESENTATION

There are three parts in my oral presentation: the essay, the data exercise, and the proposal. In the first part, I stated the situation of drug use, factors underlying irrational use of drugs, and proposed three strategies to improve the situation: educational strategies, managerial strategies, and regulatory strategies.

In the second part, I presented the data exercise. I showed the World Health Organization's drug use indicators, which I used as the tool. I also explained the processed of data collecting and the results of the exercise.

In the last part, I presented the proposal and provided detail information of the activity plan.

I used power point program for my presentation. The content of the slides are shown below, in the sequence as shown to the examination committee.
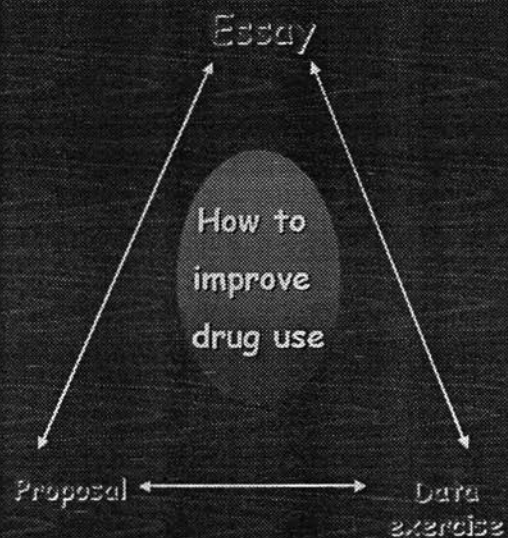
IMPROVING DRUG USE IN HEALTH CENTERS, MUANG DISTRICT, KANCHANABURI PROVINCE, THAILAND
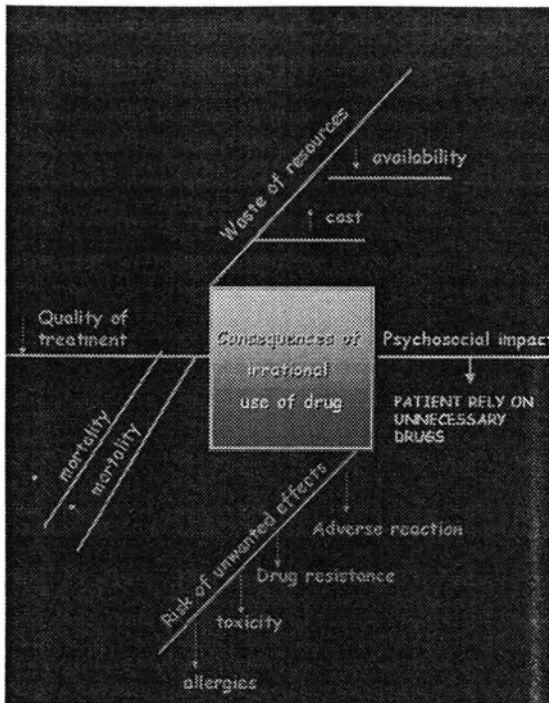
Public health

use available resources
>>>>> health improvements
for population

Role of drugs in health care

1 save lives & improve health

2 promote trust & participation in health services

3 costly

4 different from other consumer product

5 improvement are possible

Essay

How to improve drug use

Proposal ←→ Data exercise

Consequences of irrational use of drug

Decrease quality of treatment

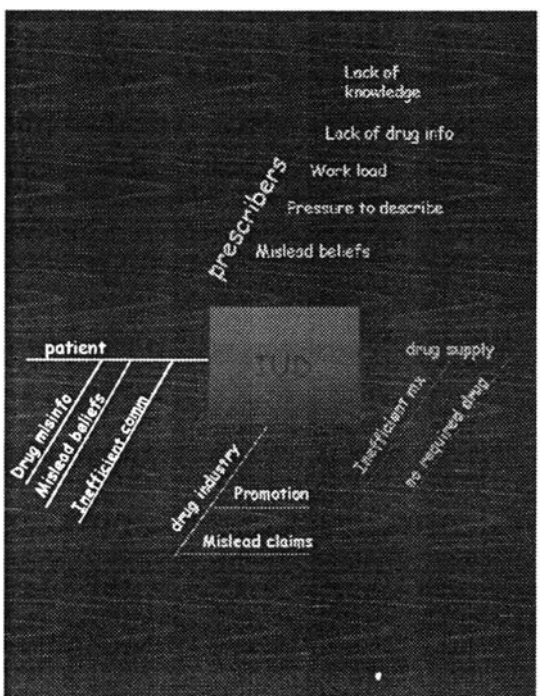- *increase mortality*
- *increase mortality*

    Waste of resources
- *decrease availability*
- *increase cost*

Psychosocial impact:

patient rely on unnecessary drugs

Risk of unwanted effects:

- *adverse reaction*
- *drug resistance*
- *toxicity*
- *allergies*

Some major factors influencing

irrational use of drug

Patient

- *drug misinformation*
- *mislead beliefs*
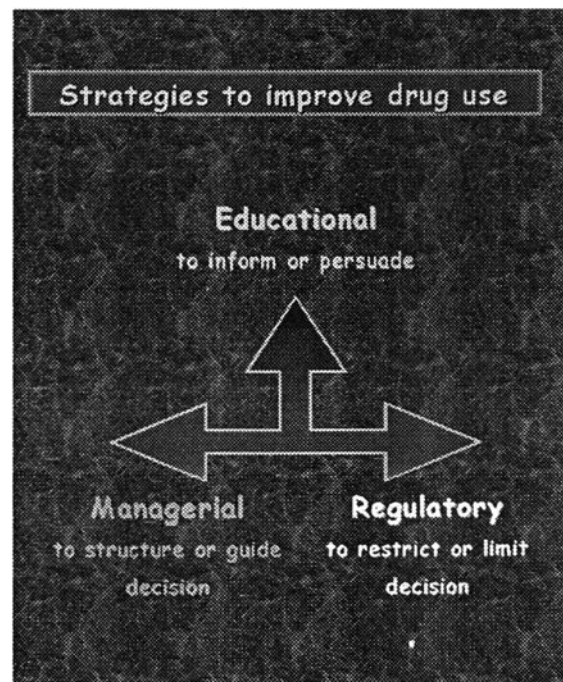- *inefficient communication*

Prescribers

- *lack of knowledge*
- *lack of drug information*
- *workload*
- *pressure to describe*
- *mislead beliefs*

Drug supply

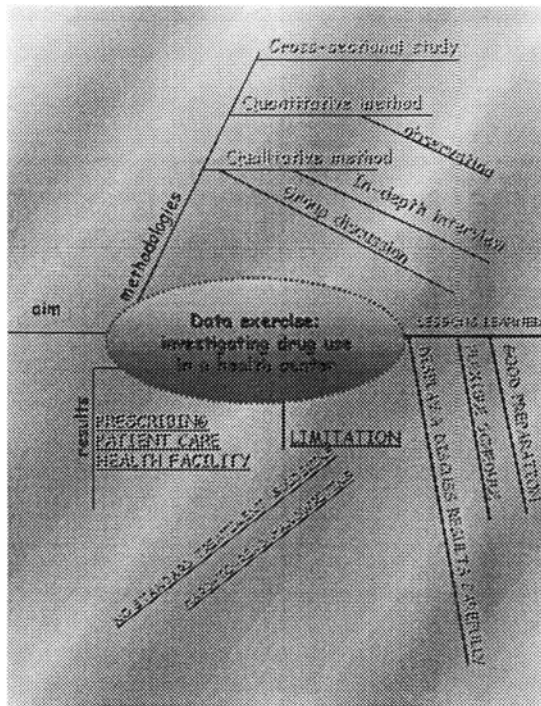- inefficient management
- no required drug

Drug industry

- promotion
- mislead claims

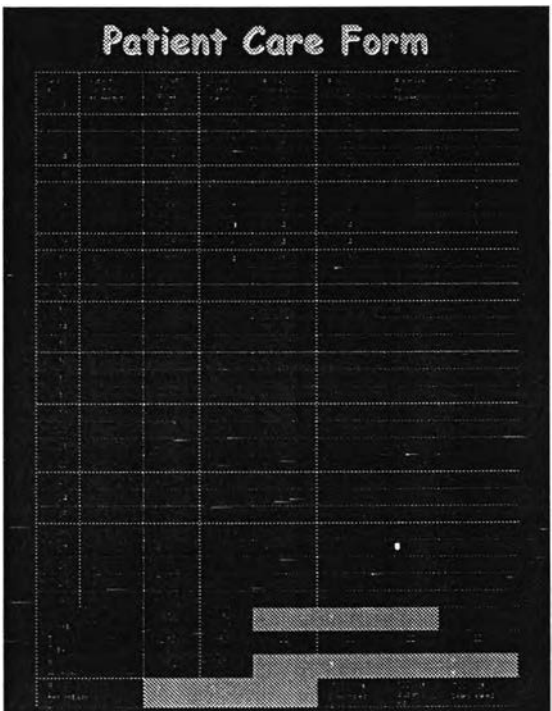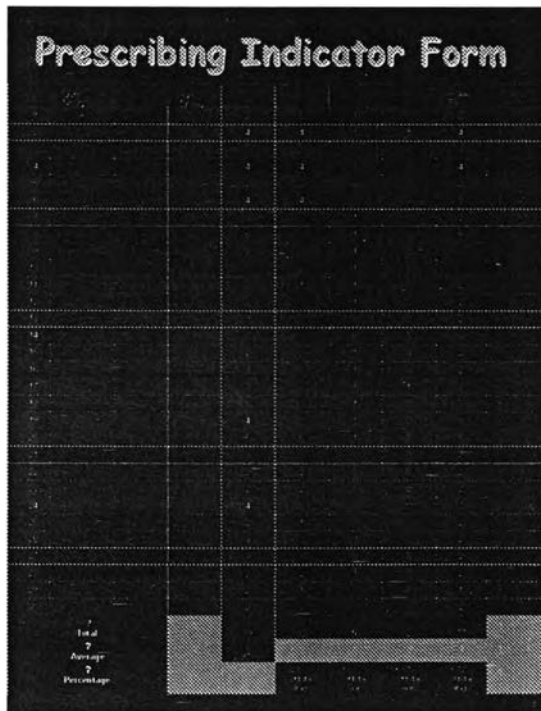**Strategies to improve drug use**

Educational
to inform or persuade

Managerial
to structure or guide
decision

Regulatory
to restrict or limit
decision

Cross-sectional study
Quantitative method
observation
Qualitative method
In-depth interview
group discussion
methodologies
aim
LESSONS LEARNED
Data exercise:
investigating drug use
in a health center
results
PRESCRIBING
PATIENT CARE
HEALTH FACILITY
LIMITATION
NEED OF A DISCUSS RESULTS CAREFULLY
FLEXIBLE SCENARIO
GOOD PREPARATION
NO STANDARD TREATMENT GUIDELINE
CASES ARE NOT RANDOMIZED

Data exercise:
investigating drug use
in a health center

Aims

to develop my ability to

• plan

• prepare & implement

• understand

• analyze

• present

Prescribing Indicator Form

Patient Care Form

Facility Summary Form

Contacts

Problems or
Comments

Cases
Retrospective .... covering dates .... To ..
Prospective .... covering dates .... To ..
Patient care .... covering dates .... To ..

Essential Drug List formulary available at facility (0/1) 1

Key drugs in stock to treat important conditions   In stock (0/1)

			% in stock
Aspirin (300 mg)	Tab	1	this facility
Paracetamol (500 mg)	Tab	1	**90.91**
Chlorpheneramine (4 mc)	Tab	1	**= 91%**
Tetracycline (250 mg)	Cap	1	
Amoxycillin (500 mg)	Cap	1	
Hydrochlorothiazide (50 mg)	Tab	1	
Adrenaline injection	Amp	1	
Aminophylline (100 mg)	Tab	1	
ORS (oral dehydration salt)	Pack	1	
Tetracycline eye ointment	Tube	1	
Antacid oral suspension	Bottle	1	

Facility Indicator Reporting Form

Number of cases		This facility	National standard
	Prescribing	30	
	Patients	10	
Average number of drugs prescribed		3	
Percentage of drugs prescribed by generic names		92.1%	%
Percentage of encounters with an antibiotic prescribed		53.3%	%
Percentage of encounters with an injection prescribed		6.7%	%
Percentage of drugs prescribed on essential drug list		86.5%	%
Average consultation time		1.2 mins	mins
Average dispensing time		50.1 secs	secs
Percentage of drugs actually dispensed		100%	%
Percentage of drugs adequately labelled		100%	%
Percent correct patient knowledge of dosage		100%	%
Availability of essential drugs list or formulary		Yes	%
Percentage availability of key indicator drugs		91%	%

COMMENTS:

SIGNATURES:

Prescribing indicator

1 average no. of drug per encounter = 3

2 percentage of drugs prescribed by generic name = 92.1%

3 percentage of encounters with an antibiotic prescribed = 53.3%

4 percentage of encounters with an injection prescribed = 6.7%

5 percentage of drugs prescribed from the essential drugs list = 86.5%

Patient care indicators

6 average consultation
time = 1.2 min.

7 average dispensing
time = 50.3 sec.

8 percentage of drugs
actually dispensed

= 100%

9 percentage of
drugs adequately
labeled = 100%

10 percentage of
patients' knowledge
of correct dosage

= 100%

facility indicators

11 availability of
copy of essential
drugs list
= yes

12 percentage of
availability of key
drugs
= 91%

Proposal

Improving drug use

in health centers,

Muang district,

Kanchanaburi province,
Thailand

Objectives:

1 to explore drug use

2 to collect baseline data

3 to try out WHO indicators

4 to improve prescribing pattern

Some important feature

· Collect baseline data

· try WHO's indicators

· participatory approach

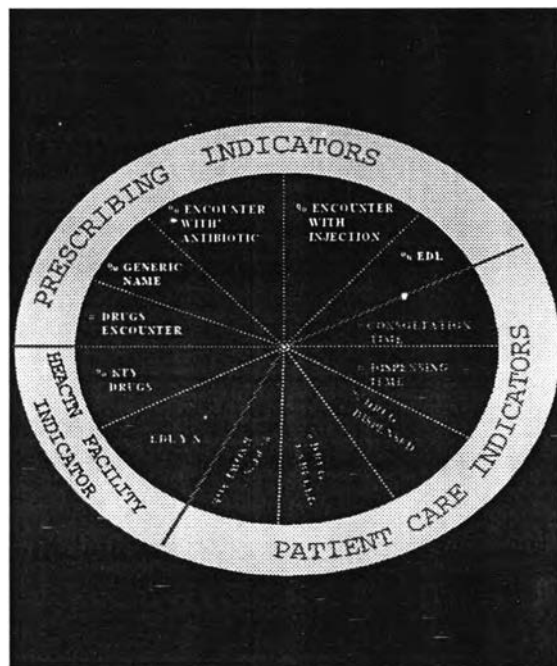· apply combined strategy

Tool:

drug use indicators

5 prescribing indicators

5 patient care indicators

2 facility indicators

= 12 indicators

Prescribing indicator

1 average no. of drug per encounter

2 percentage of drugs prescribed by generic name

3 percentage of encounters with an antibiotic prescribed
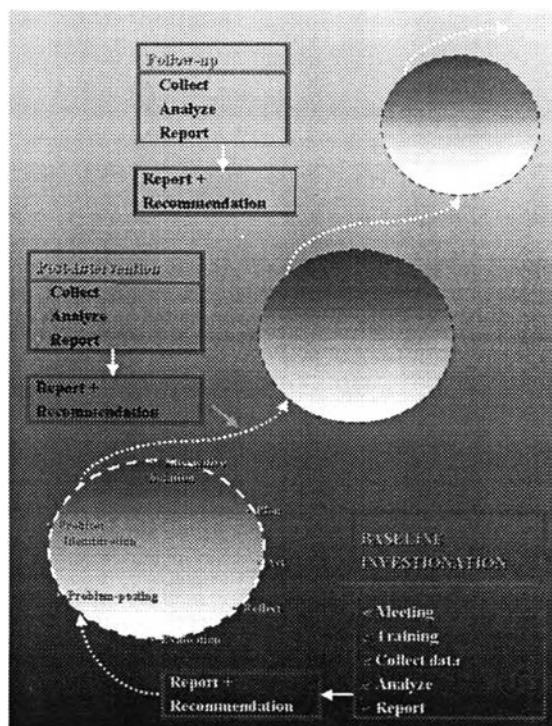
4 percentage of encounters with an injection prescribed

5 percentage of drugs prescribed from the essential drugs list

Patient care indicators

6 average consultation time

7 average dispensing time

8 percentage of drugs actually dispensed

9 percentage of drugs adequately labeled
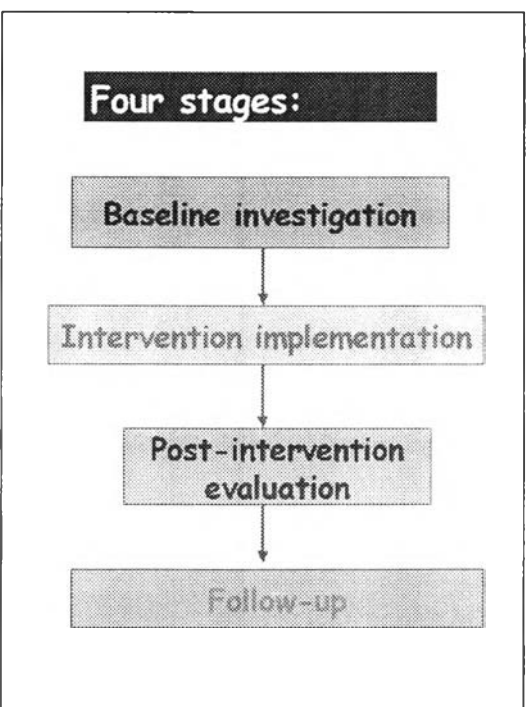
10 percentage of patients' knowledge of correct dosage

Activity plan:

Month

1 - 6 (6)	baseline investigation
7 - 13 (7)	intervention 1
14 (1)	evaluation 1
15 - 32 (18)	intervention 2
33 (1)	evaluation 2
34 - 35 (2)	report writing
36 (1)	presentation

Budget

• baseline investigation	34,950
• intervention implementation	0
• post-intervention	11,190
• follow-up	16,440
total	62,580

Four stages:

Baseline investigation

Intervention implementation

Post-intervention evaluation

Follow-up

Thank you

Committee,
Dr. Sathirakorn,
CPH Ajarns,
CPH staff,
Projects staff,
classmate, et al

A sunny smile to wish you
a happy day!