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## Medication pattern and adherence to type-2 diabetes treatment at University Hospital of Central India

Chetna A Shamkuwar, Nalini Kumari and Vijay M Motrghare Government Medical College, India

**Statement of the Problem:** The estimated number of diabetics in India was 62.4 million in 2011 projected to rise 101.2 million by 2030. Rational medication pattern and adherence to treatment are key components diabetes control. Study purpose is to evaluate medication pattern and assess adherence to treatment.

**Methodology & Theoretical Orientation:** Prospective, observational and questionnaire based study. Medication pattern evaluated from prescriptions and adherence assessed with Morisky Medication Adherence Scale.

**Findings:** Total 194 prescriptions were studied. 96 (49.48%) and 98 (50.51%) were male and female, respectively. Majority were above 60 years of age. Co-morbid conditions were found in 169 (87.11%), patients with hypertension (74%), being more common. Patients were prescribed 1216 medications. The average number of drugs per prescription was 6.20. Oral hypoglycemic drugs were 22.69%. Commonly prescribed drugs were anti-hypertensive (15.70%), drugs for coronary artery disease (10.36%), antibiotics, NSAID, PPI, vitamins and minerals (31.99%). High, medium and low adherence was observed in 47%, 38% and 15% of patients, respectively. Males (62%) adherence was more than females in high adherence group.

**Conclusion & Significance:** This study demonstrates the variability of drug utilization in diabetics. More than 50% patient have medium and low adherence which affects control of diabetes. Factors leading to poor adherence should be studied for better control of diabetes.

## **Biography**

Chetna A Shamkuwar was trained in Clinical Pharmacology by Indian Council of Medical Research. She has wide experience of teaching clinical pharmacology since last 10 years. Her area of interest is research in rational drug use, adherence to treatments and its effects on clinical outcomes in chronic diseases. Her passion about clinical research and compassionate approach in patient care made her most sought after health personnel in designing chronic diseases treatment protocols in the region.

chelsycosmos@rediffmail.com

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