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The plague of polypharmacy in Pakistan

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ABSTRACT

Polypharmacy is the use of more drugs than clinically indicated. It has become a growing problem as it is associated with negative medical and economic consequences such as increased risk of drug interactions, side effects as well as high medication costs. There is a pressing need to address the issue of polypharmacy especially in a developing country like Pakistan where the problem is adversely affecting the fragile and vulnerable section of the population. It is the utmost responsibility of the heath care providers to recognize this problem and work towards developing possible solutions to minimize polypharmacy in the country.

Keywords: Polypharmacy, Pakistan

As highlighted in the poor human development indicators of the country, the health care system of Pakistan depicts an ugly image analogous to other divisions of the administration machinery. The health care system which is largely ignored by the officials of the government has starved financially due to which it could never equip itself with the state of the art facilities to help the public at large.

The rapidly growing population of the country also burdened the health care machinery that continued to neglect the role of pharmacists, which was another severe blow to the health care system. It is only recently that the value of the pharmacists has been recognized. Pharmacists can play a vital role in promoting quality health practice and

minimize the misuse of the medicines either by the patients or the patients, an act which is also termed as polypharmacy in modern scientific language (Sundus Kirmani et al. 2014; Atta Abbas, Kenneth McGarry, 2013).

Debatable in terms of numbers, usage and clinical indications of the given drugs, the problem of polypharmacy nonetheless is a dilemma which the health care professionals (HCPs) did not seem to acknowledge. Polypharmacy can be defined as the increase in the number of the medicines on a prescription which can vary regionally or country wise. It can also be described as use or more drugs than clinically indicated or even incorrect use in terms of administering the medication (Hovstadius, 2010; Werder and Preskorn, 2003; Bushardt et al. 2008).

Since the last decade, a number of studies conducted in Pakistan reported polypharmacy in the country. However the health care professionals (HCPs) did not pay heed to aforesaid (Das et al. 2001; Najmi et al. 1998). As a result of which this problem is now plaguing the entire country. With the recent overhaul of the pharmacy curriculum and inclusion of pharmacists in the health care system (Atta Abbas, Kenneth McGarry, 2013; Curriculum of Doctor of Pharmacy, 2011), it is hoped that a consensus among the health care professionals on this challenging problem will be achieved, which is direly needed.

As a universal rule, to solve a problem, one needs to acknowledge the adversary in the first place. This acknowledgement of polypharmacy by HCPs will pave a way for the eradication of the problem and devise a think tank to counter such issue in future; at the same time promote health and well being in the masses thereby aiding the monetarily starved and overburdened health care system of Pakistan.

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