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Drug utilization study in patients with bronchial asthma of a tertiary care hospital in Western Maharashtra

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BACKGROUND: Drug utilization studies (DUS) are necessary for knowing the extent of drug use and identify variability in drug use among different regions. Bronchial asthma is known to be one of the major causes of morbidity and mortality in India. There is paucity of Indian data which evaluate the pattern of drug utilization in bronchial asthma over its entire spectrum and varying severity. Hence, the present study was designed to assess the drug utilization pattern in all bronchial asthma patients at a tertiary care hospital to understand the current prescription trends and to determine areas in need of further research.

MATERIALS AND METHODS: A prospective, observational study for a period of 1 year from February 2014 to January 2015 was conducted at the outpatient and inpatient departments of medicine and pediatrics, government teaching tertiary care hospital, Maharashtra. The WHO's prescribing indicators were used for evaluating DUS. Assessment of the overall pattern of drug use and antiasthmatic drugs was done. Data were analyzed using descriptive studies. **RESULTS:** Data of 250 asthma patients showed a male preponderance (males vs. females 52.8% vs. 47.2%). The average number of drugs per encounter was 6.10. Only 33.9% of the drugs were prescribed by generic name, and a higher percentage (64.8%) of antibiotics were prescribed. Nearly 69.44% of the prescribed drugs were from essential drug list. The overall pattern of drug use showed that β_2 agonists (100% and 97.33%) and corticosteroids (92.57% and 94.66%) were the most common classes of antiasthmatic drugs prescribed in medicine and pediatric departments, respectively. One important finding was that inhaled salbutamol and inhaled corticosteroid were prescribed less commonly. **CONCLUSIONS:** The present study identifies the need for prescription by generic name and improvement in prescribing practices with current recommendations or guidelines for the management of bronchial asthma. This will help ensure rational use of drugs.

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