Views of Asians and non-Asians on sources of drug information and the desirability for medication to be made available over the counter

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SUMMARY

Differences do exist between Asians and non-Asians on the range of products they feel should be available over the counter (OTC) and the amount of information they wish to receive. This should be taken into account when considering proposals for changes in the legal status of prescription-only medicines. The profile of the pharmacist as a provider of drug information to patients could be raised in both groups.

Keywords: drug administration; drug information; ethnic differences; over-the-counter medicines.

Introduction

THIS report examines data collected on attitudes to drug information and OTC medication as part of a larger study conducted in Leicester six years ago. In view of the debate concerning the wider availability of OTC medicines, it is particularly timely to examine the ethnic perspective of self-medication. The importance of providing patients with sufficient written information for OTC and other medication is also now recognized, including information for all original packs of new or renewed licensed medication.² In addition, patients may obtain verbal information and advice through a variety of health workers (general practitioners (GPs), nurses or pharmacists) as well as relatives or friends. Although pharmacists are widely consulted over the treatment of minor ailments with OTC medicines,³ concern has been expressed by certain consumer associations over the availability and quality of such advice. This report compares the opinions of Asians and non-Asians in Leicester with respect to the wider availability, over the counter, of selected prescriptiononly medicines, and the provision of information regarding such medicines.

Methods

This study is part of a larger piece of work¹ from the responses of 449 Asians and 447 non-Asians. 'Asians' are defined as those who migrated or whose forebears orginated from the Indian sub-continent or East Africa. The subjects were randomly selected in the

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Leicester city area from general practices covering the areas in which more than 95% of the Asian population are known to reside.

Participants in this study were shown a list of 12 types of medication, all of which were prescription-only medicines at the time of the study — though some have subsequently become OTC. Both Asian and non-Asians were asked which classes of drugs should be made available OTC, which classes of drugs patients would like further information about, and who should be the source of that information.

Results

Table 1 indicates that, in general, Asians desired less availability for OTC medication than non-Asians. In particular, Asians and non-Asians strongly agreed that antibiotics, strong pain killers and sleeping tablets should not be made available OTC. Table 2 shows that, except for three classes of drugs, Asians desired more information than non-Asians, although the overall percentage requiring further information was below 30%. For each of those classes of drugs listed in Table 2, most respondents (73%-89%) wanted any drug information to be given by the doctor, with smaller numbers favouring the pharmacist, and smaller still the media.

Discussion

The observation that Asians were generally less in favour of various categories of medicines being made available OTC than non-Asians is in keeping with their perceived high dependence on doctors.⁴ Some effort may need to be taken to persuade Asians to self-medicate and to seek the advice of a pharmacist for minor problems, rather than visiting the GP. The low percentage of patients requiring information was somewhat less than that found in other studies,⁵ but Asians do seem to desire more information than non-Asians, perhaps in keeping with their health-oriented culture and perceived need for a better education. Again, in contrast to some other studies,6 patients much preferred to receive information from a doctor than from a pharmacist. With increasing numbers of drugs being made available OTC, pharmacists will have to become more skilled in communicating, particularly with ethnic minority patients with whom they may not share a common language.

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Table 1. Proportions of Asians and non-Asians in favour of making the following medicines available over the counter (currently they are available only on prescription).

| Medicine | Asian <i>n</i> =449 | non-Asian <i>n</i> =447 | χ² prob- ability | Odds ratio* (95% CI) |
|--|------------------------|----------------------------|---------------------|-------------------------|
| Antibiotics | 14.2% | 13.2% | <i>P</i> <0.66 | 0.94 (0.76–1.16) |
| Ulcer-healing tablets Tablets for high | 7.3% | 19.9% | <i>P</i> <0.0001 | 1.98 (1.54–2.56) |
| blood pressure | 3.3% | 11.4% | <i>P</i> <0.0001 | 2.16 (1.51–3.08) |
| Nerve tablets | 4.4% | 11.2% | <i>P</i> <0.0001 | 1.64 (1.21-2.23) |
| Anti-depressant tablets | 3.6% | 7.8% | <i>P</i> <0.006 | 1.63 (1.13–2.33) |
| Strong painkillers | 11.3% | 15.7% | <i>P</i> =0.06 | 1.20 (0.96–1.49) |
| hayfever Eye ointments | 21.6% | 46.3% | <i>P</i> <0.0001 | 1.97 (1.66–2.34) |
| (medicated) | 28.2% | 45.9% | <i>P</i> <0.0001 | 1.60 (1.36-1.87) |
| Vaginal creams and pessaries | | | | |
| for thrush | 13.8% | 42.5% | <i>P</i> <0.0001 | 2.27 (1.88-2.73) |
| Sleeping pills | 7.1% | 5.2% | <i>P</i> =0.22 | 0.97 (0.70-1.33) |
| Eardrops | | | | |
| (medicated) | 29.3% | 49.2% | <i>P</i> <0.0001 | 1.43 (1.23–1.67) |
| Contraceptive pill | 14.9% | 28.6% | <i>P</i> <0.0001 | 1.66 (1.37-2.00) |

^{*}Odds ratio = odds of non-Asian patients desiring a drug OTC compared with Asian patients, after adjustment for age, sex, education and social class; 95% confidence interval (CI). Of the medicines under discussion, ulcer-healing tablets have now become OTC drugs (H² antagonists), and vaginal creams and pessaries for thrush are also available OTC. The only sleeping tablet that is marketed OTC is promethazine (25mg). Inhalers for hay fever are now available OTC (1994).

Table 2. Proportions of Asians and non-Asians requesting further information about medicines.

| Medicine | Asian n=449 | non-Asian <i>n</i> =447 | χ² prob- ability |
|-------------------------------------|----------------|----------------------------|---------------------|
| Antibiotics | 36.0% | 21.9% | <i>P</i> <0.0001 |
| Ulcer-healing tablets | 23.1% | 8.5% | <i>P</i> <0.0001 |
| Tablets for high blood | | | |
| pressure | 32.9% | 32.0% | <i>P</i> =0.77 |
| Nerve tablets | 26.7% | 15.4% | <i>P</i> <0.0001 |
| Anti-depressant tablets | 27.8% | 20.4% | <i>P</i> <0.009 |
| Strong painkillers | 26.9% | 22.4% | <i>P</i> =0.12 |
| Inhalers for hayfever | 21.6% | 9.2% | <i>P</i> <0.0001 |
| Eye ointments Vaginal creams and | 20.4% | 6.9% | <i>P</i> <0.0001 |
| pessaries for thrush | 20.9% | 9.8% | <i>P</i> <0.0001 |
| Sleeping pills | 24.2% | 17.2% | <i>P</i> =0.01 |
| Ear drops | 19.6% | 7.2% | <i>P</i> <0.0001 |
| Contraceptive pills | 26.4% | 13.2% | <i>P</i> <0.0001 |

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