Health care professionals’ perceptions of aspects of drug utilisation during the Intifada in Ramallah, Palestine.

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Aim of research programme commenced 1999

- To promote safe, rational and effective drug utilisation across Palestine through:
  - developing ‘best practice’ guidelines, adapted to local situation
  - developing and maintaining evidence-base to underpin the above
  - developing robust educational programmes based on reliable outcome indicators
Planned first phase

○ Characterise **antibiotic use** in **acute infection**

○ Develop and implement **antibiotic guidelines**

○ Evaluate **short** and **longer-term effectiveness** of guidelines
Key findings of first phase

- Substantial evidence of **sub-optimal prescribing**
- **Guidelines drawn up** for upper respiratory tract infection and urinary tract infection (most common types)
- before implementation commenced **Intifada** (war-like situation) began
- required **radical rethink** of project
- **How to proceed?**
What effect does the Intifada have on health care delivery and drug use?

- data collection on actual patient encounters impossible due to curfew, power cuts, lack of resources etc
- therefore decided to: **gauge views and perceptions of health care professionals (HCPs) and patients**
- reporting here some of the **findings with HCPs**
Method

- Semi-structured, **face-to-face interviews** with
  - **physicians** (n=64, 77% of district total)
  - **community pharmacists** (CPs, n= 44, 90%)

  in their workplace, Ramallah district
  Feb-May 2001 (6m after start Intifada)

- Interview designed, validated and piloted by ‘expert panel’
- Data entered into SPSS and analysed using descriptive statistics
### Results 1

<table>
<thead>
<tr>
<th>Effects of the Intifada</th>
<th>Physicians</th>
<th>Pharmacists</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intifada has affected work?</td>
<td><strong>Yes</strong></td>
<td><strong>39 (89%)</strong></td>
</tr>
<tr>
<td>How?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Problems accessing work</td>
<td>60 (94%)</td>
<td>39 (89%)</td>
</tr>
<tr>
<td>Less Working hours</td>
<td>8 (13%)</td>
<td>13 (30%)</td>
</tr>
<tr>
<td>Number of patients decreased</td>
<td>7 (12%)</td>
<td>21 (48%)</td>
</tr>
<tr>
<td>Number of patients increased</td>
<td>43 (72%)</td>
<td>38 (86%)</td>
</tr>
<tr>
<td>More patients with:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>severe complaints</td>
<td>37 (62%)</td>
<td>4 (9%)</td>
</tr>
<tr>
<td>mild complaints</td>
<td>2 (3%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Increased phone consultation</td>
<td>6 (10%)</td>
<td>-</td>
</tr>
<tr>
<td>Purchasing power decreased</td>
<td>-</td>
<td>42 (95%)</td>
</tr>
<tr>
<td>OTC dispensing increased</td>
<td>-</td>
<td>32 (73%)</td>
</tr>
<tr>
<td>Changed my prescribing/dispensing behaviour</td>
<td>30 (47%)</td>
<td>31 (70%)</td>
</tr>
</tbody>
</table>
Results 2

Effects of the Intifada on doctors' prescribing behaviour (n=64)

- Changed their prescribing behaviour: 47%
- No change-abide by medical store: 27%
- No change-regardless of cost: 18%
- No change-use inexpensive drugs: 8%
Results 3
– changes to physician prescribing

- Treat more **aggressively**
- Order **fewer diagnostic tests**
- Prescribe **fewer/cheaper drugs**
- Widespread prescribing of **amoxicillin**, even in likely viral infections
Results 4  
- changes to community pharmacist practices

- (More) important role in **counselling**, **advice** and **referral** to physician

- **OTC dispensing** of prescription only medication

- **Substitution** of cheaper drugs
Conclusions

- **HCPs** experienced many difficulties in delivering health care

- **HCPs adapted their practices** to help patients in the face of day-to-day difficulties

- **All HCPs** agreed that the need for **practice guidelines** was even **greater** during the **Intifada**
What next?

- Changes in prescribing/dispensing practices may help individual patients in the short-term.

- But longer-term may compromise delivery of optimal healthcare and contribute to future problems eg antibiotic resistance.

- Given the ongoing conflict situation, HCPs face a huge challenge to provide a high standard of health care.
The Way Forward

- All stakeholders need to investigate innovative and practical ways of supporting healthcare delivery at the individual, infrastructural and strategic level.

- Serious efforts have been, and continue to be, made to facilitate rational drug use.

- But a period of political stability is urgently required to allow sustained progress.
Thank you!

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References