

Healthcare providers' perceptions of prescription medication sharing among adults in Saudi Arabia: A qualitative study.

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Background

- Although prescription medications can play a vital role in overall health, they can also have serious negative health outcomes when they are misused or abused, such as when they are shared.^{1,2}
- Very little research has investigated healthcare providers' perceptions of prescription medication sharing among adults.³

Aim

- The current study aimed at examining the healthcare providers' attitudes towards, and experiences of, prescription medication sharing among adults in Saudi Arabia.

Methods



- Qualitative study



- Eastern province, Saudi Arabia



- Participants were eligible to take part if they were doctors, pharmacists, or nurses, able to communicate in Arabic or English, and aged ≥ 18 years.



- Snowball sample



- Face-to-face or telephone interviews



- Data collection was continued until data saturation was achieved



- Interviews were audiotaped, transcribed verbatim, translated and analysed using thematic approach and NVivo 10 software

Results

Table 1: Characteristics of participants (N=31)

Parameter		N (%)
Client per day	<20	2 (6.5)
	20-50	8 (25.8)
	>50	21 (67.8)
Profession	General Practitioner	2 (6.5)
	Paediatrician	1 (3.2)
	Gastroenterologist	1 (3.2)
	Neurosurgeon	1 (3.2)
	Internal medicine	1 (3.2)
	Dentist	1 (3.2)
Pharmacist	18 (58.2)	
Nurse	6 (19.3)	



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Results

- The majority of participants were female (25/31; 80.7%), were Saudis (30/31; 96.7%) and were aged 25-34 years (20/31; 64.5%). The majority held an undergraduate qualification (28/31; 90.3%) and had >10 years work experience (13/31; 42%). Other participants' characteristics are shown in Table 1.
- Four overarching themes were identified in this study: 'types of shared medications' such as antibiotics, antihypertensives, cardiovascular, diabetes, cholesterol medicines; 'perceived benefits of sharing medicines'; 'negative experience of sharing medicines'; 'reasons for medication sharing'. A full description of the identified overarching themes, and sub-themes are shown in Table 2.

Table 2: Prescription medication sharing coding frame

Overarching theme	Sub-theme
Perceived benefits of sharing medicines	Saves time and money
	Social support
Negative experience from shared medicines	Personal health risks
	Public health risks
Reasons for medicine sharing	Lack of access to health services or medicines
	Lack of medication knowledge
	Forgetfulness
	Altruistic reasons
	Illness denial and embarrassment
	Cultural barriers
	Leftover medicines
	Travelling or being away from home
Lack of information about safe disposal	

Discussion and conclusion

- Prescription medication sharing was perceived by healthcare providers as a behaviour with positive and negative outcomes.
- An exploration of factors influencing medication sharing behaviour revealed many similarities with evidence from the International literature,³ although some differences were also found which may appear to be specific to the Saudi population.
- Further research is warranted into development of successful approaches or interventions to reduce harm resulting from medication sharing behaviour.

References

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