



# ABS030

## PRESCRIPTION AUDIT IN GERIATRIC HYPERTENSIVE PATIENTS

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**INTRODUCTION:** The Medical Council of India had passed the order, recently, to all the physicians in our country about writing all components of the prescriptions for diagnosed patients. The earlier studies show that the elderly people commonly suffer from hypertension and diabetes mellitus. However, some components of a prescription are not written by few physicians in a given set-up. Therefore, an auditing of prescriptions is needed to ensure proper utilization of the medications by the treated patients.

**OBJECTIVE:** To verify whether the Hospital based prescriptions were in accordance with the national prescription guideline.

**METHODOLOGY:** A prospective observational study for six months carried out in in-patients who were admitted to general medicine. The study protocol was approved by the human ethical committee. The patients of both sex and aged <60 years and diagnosed as suffering from hypertension as per JNC -7 guidelines were enrolled. The prescriptions were reviewed for physician information and advice (Name, signature), patient information (Name, Age, Gender), clinical data (diagnosis) drug information (dose, frequency, route of administration) and legibility. Data was collected into case report form. All data was analyzed using descriptive statistics.

**RESULTS AND DISCUSSION:** 150 prescriptions were analyzed, out of which 53% were male patients and 47% were female patients. All prescriptions were containing the basic information of the patients and physician, complete diagnosis of clinical signs and symptoms. The Drugs were prescribed in brand names in majority of the prescription (80.6%). The most commonly prescribed antihypertensive was CCB like Amlodipine and combination therapy was ARB+DIURETICS like Telmisartan and Hydrochlorothiazide. 86.6% prescriptions were legible to read. 53.3% prescriptions were complete in terms of dose, route, frequency and dosage form. Medication to be taken in relation with food timings were mentioned only in 43.3% cases. 59% of prescription were containing physician advice on diet. In 97% prescriptions follow up date was documented by physician. The average cost of medicine per month for a patient was Rs 231.76.

**CONCLUSION:** We could conclude that certain aspects of the prescription writing failed to comply with the Prescription guidelines. Prescription writing is to be improved so that a health system could be developed that would have more benefits and less unwanted effects. Cost can be minimized by increasing the compliance and adherence of patients to medicines by providing awareness through social media and newspaper.

**Keywords:** Auditing, Physicians, Prescription components.