

WORKSHOP ON MODEL HOSPITAL PHARMACY IN GOVERNMENT HOSPITALS
June 1st. 2002 at FICCI. New Delhi

Setting up of Hospital Based Drug Information Center

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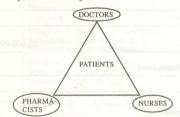
Drug Information Center, Karnataka State Pharmacy Council, Vijayanagar, Bangalore



INTRODUCTION

Drug Information is the provision of written and/ or verbal information or advice about drugs and drug therapy in response to a request from other healthcare providers, organizations, committees, patients or members of the public.

Drug Information Service describes activities indertaken by pharmacists in providing information to optimize drug use. The term includes, but is not limited to, the specialized service offered by a drug information center. Drug information center refers to a facility specifically set aside for and specializing in the provision of drug information.



India is a country with significant drug use problems. Irrational and unnecessary prescibing is common and antibiotic resistance is widespread. These problems are as a result of variety of economic, social political occupational medical and regulatory factors. The most important of these include:

- Lack of awareness about the drug information center.
- Availability of more than 85,000 formulations.

- National drug policy is industry focused rather than health focused.
- Lack of awareness of the principles of rational drug use of drugs among doctors and pharmacists.
- Widespread sale of prescription drugs over the counter despite this being illegal and high level illiteracy, poverty among patients.

Hence organized drug Information centers are need of the hour. The following are the drug information centers of India.

- 1. AIIMS-Poison infor-mation Center, Delhi
- 2. CDMU Documentation Center, Calcutta
- Maharashtra State Pharmacy Council, Maharashtra
- 4. Andhra Pradesh State Pharmacy Council, Andhra Pradesh
- 5. Trivandrum Medical College, Kerala
- 6. Karnataka State Pharmacy Council, Bangalore, Karnataka
- Drug Information Center, (KSPC), Victoria Hospital, Bangalore, Karnataka
- 8. JSS, Mysore, Karnataka
- 9. KIMS, Bangalore, Karnataka
- Kasturba Medical College, Manipal, Karnataka
- 11. JSS, Ooty, Tamilnadu (2 centers)
- 12. Pharma Information Center, Chennai
- 13. Sri Ramakrishna Mission Hospital, Chennai
- 14. Sri Ramakrishna Mission Hospital, Coimbatore

State of the last		Zana Zana	251
an or dealer	Staffing Struc	cture and Levels	Rs.
Qualification: 1 M.Pharm with computer knowledge	Specialization: Pharmacology/ Pharmacy practice	To start with AICTE lecture lecture for technical personnel 12,000.00 × 12	1,44,000.00
1 Assistant	B.Pharm Graduate with computer knowledge and/ or 1 computer operator with typing knowledge	As per government norms 5,000.00 × 12	60,000.00
	Infrastructu	re Facilities	Sed -
Space: 300 to 400 so	quare feet, Provided by the ho	ospital	
Location: Prominent	central place near wards/OPD	(CEUSION)	arra espara
1.44 MB FDD, 52x, C	essor, 128 MB RAM, 40 GB F CD-ROM Drive, Multimedia Ki SVGA Color Monitor, Interna	it, contrait ranto mon manager a or sen	59,000.00
Printer TVSE Dot Matrix Prin	nter (1989)	mation Service describes activities placematics in providing information	7,500.0
Stationery: (Depends on the usage)			5000.00
Telephone :	centers of India.	or printer the former of the test of the t	miormaliton cent
For Internet telephone:			36,000.00
Intercome: Provided		Chanks in President, Regulated and o	They was a second
Internet: 1000 hours	/year Free for government ins	titution	
Office Furniture Almeras, book racks, display racks, tables, chairs		25,000.00	

Drug Information Resources

Primary Resources

Journals: Obtain free service from NIC, Delhi

Many online journals free refer appendix for useful websites.

(www.freemedicaljournals.com)

- · British Medical Journal
- · Lancet
- New England Journal of Medicine
- JAMA
- · Indian Medical Journal Drugs
- American Journal of Health Systems Pharmacy

Secondary Resources

Rs.

indexing and abstracting systems

IOWA : (Optional)

Medline / pubmed-Through Internet : Access is Free

Tertiary Resources

Micromedex : Drug dex (Optional)

Books

Name of the Book	Author	\$=50/£=73	Price (Rs.)
BNF: Free for developing country	sesson on diguordi agso aresina	g shrawet blee	er seis es resilerado
Drug Information: A Guide to Pharmacist		\$ 39.95	1,997.50
Stedman's Electronic Medical Dictionary Version 5.0 (CD-ROM for Windows and Macintosh, Individual)	Stedmans	\$ 89.95	4,497.50
Martindale The Extra Pharmacopoeia	James. E.F. Reynolds	£ 250.00	18,250.00
AHFS Drug Information, 2001	Gerald K. McEvoy (Editor), et al	\$ 159.95	7,997.50
Goodman and Gliman's Essentials of Pharmacology	Theodore W. Rall; Paperback	\$ 49.95	2,497.50
Remington: The Science and Practice of Pharmacy Vol I, II	Alfonso R. Gennaro	\$ 125.00	6,250.00
Harrison's Principles of Internal Medicine	Eugene Braunwald M.D. (Editor), et al	\$ 125.00	6,250.00
Pharmacotherapy: A Pathophysiologic Approach	Joseph T. Dipiro (Editor), et al	\$ 155.00	7,750.00
Drugs in Pregnancy and Lactation : A reference guide to fetal & Neo-natal risk, By G.G. Briggs	G.G. Briggs	\$ 60.00	3,000.00
Advice for the Patient : Drug Information in Lay Language Volume II : USP DI 2000	Micromedax, United States Pharmacopoeia	\$ 75.00	3.750.00
Meylers Side Effects of Drugs : An Encyclopedia of Adverse Reactions and Interactions	M.N.G. Dukes	\$ 323.50	16,175.00
Manual of Adverse Drug Interactions	J.P. Griffen, P.R. D'arcy	\$ 227.00	11,350.00
Handbook on Injectable Drugs	Lawrence A. Trissel	\$ 178.50	8,925.00
Ellenhorn's Medical Toxicology— Diagnosis and Treatment of Human Poisoning	Mathew J. Ellenhorn	\$ 145.00	7,250.00
TOTAL	eet anisimonoaro neuric	of Sections	Rs. 1,05,940.00

^{\$ =} Rs. 50.00 and £ = Rs. 73 as on 22nd May 2002

All the rates may subject to change depends on the publisher and date of purchase.

Total Expenses 1,05,940.00 (Books) 3,36,500.00 (Salary, computers, stationery, office furniture)

4,42,440.00

2,45,000.00 (Salary, telephone and stationery)

Recurring Expenses

2,45,000.00

It is collective responsibility of all health professionals to work together towards better patient care. Pharmacists have contributed significantly elsewhere in the world towards patients care through quality and safe use of medicine. In India Pharmacists are under utilized but their potential role in solving some of the drug used problems of our country has been realized. However, they are not trained to assume this new responsibility. This project will help the pharmacist to realize their responsibility in the field of information dissemination. Also this will help the medical professionals to understand the role of pharmacist in the healthcare system.

OBJECTIVES

To establish a hospital based drug information center.

To provide authenticate, unbiased drug information to health care professionals.

To provide tailor-made counseling and drug information to patients.

To Monitor and document adverse drug reactions within the hospital.

TRAINING AND SUPPORT

The training of pharmacists can be obtained from Drug Information Center, Karnataka State Pharmacy Council, Bangalore.

NETWORKING OF DIC

There are many potential benefits of networking drug information centers. This is true generally but may be even more so in developing countries. Benefits of networking include:

- Reduced professional isolation,
- Ability to share information and resources,
- Reduced duplication of effort, and
- Potential learning and training opportunities.

Networking can occur at a regional, national, or international level.

The above-mentioned Budget is meant for a 500-beded hospital. If more government hospitals participate in this programme, networking can be done to access the database to serve all the hospitals by avoiding duplication of resources.

CONCLUSION

A highly successful program in Southern India had demonstrated that future of clinical pharmacy and drug information in India rests with ability of pharmacists to provide unbiased drug information and assisting doctors in selection of cost effective therapy. The future of clinical pharmacy and drug information services are very bright and Government should come forward to establish in many hospitals to implement patient focused service through efficient drug information.

ACKNOWLEDGEMENT

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