



Antibiotic Prescription Patterns In The Out-Patient Department (OPD) Of University Of Ghana Hospital, Legon

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Introduction

The use of antibiotics in any healthcare setting is indispensable which makes the current challenge of antimicrobial resistance a huge threat to health globally. One of the causes of antibiotic resistance which renders previously successful medicines ineffective against pathogenic bacteria is the misuse (i.e., over-prescription or inappropriate prescription) of antibiotics in general. Apart from the risk of resistance, there is also the increased occurrence of adverse drug reactions when antibiotics are misused. This makes antibiotics prescribing pattern studies necessary in identifying challenges that occur with antibiotics use and to recommend solutions or interventions. There is very little informal on the prescription pattern of antibiotics in hospitals in Ghana. This study sought to describe the antibiotic prescribing pattern in the Out-Patient Department (OPD) of a primary hospital in Accra, Ghana.

Methods

A retrospective study was conducted using 260 prescriptions issued from 1 August 2016 to 31 July 2017 from the University of Ghana Hospital. Prescribing indicators adapted from the WHO and USAID documents on how to investigate antimicrobial use in hospitals were employed. The results were analyzed using Microsoft Excel 2013.

Results and discussion

The most prescribed antibiotics were amoxicillin/clavulanic acid, cefuroxime, ciprofloxacin, and flucloxacillin. The percentage encounter with antibiotics was 37% and 8.8% of the prescriptions contained injectable antibiotics. The average number of antibiotics per encounter was 1.15 but only 9.6% of these prescriptions were based on some laboratory test. 83.6% of the antibiotics prescribed were found on the Essential Medical on List and 88.1% of the prescriptions conformed to the Standard Treatment Guidelines. 56.5% of antibiotics prescribed were prescribed with their generic names.

Conclusion

Overall, the prescribing of antibiotics in the UG Hospital was satisfactory but it is recommended antibiotics prescriptions are made based on culture sensitivity tests and also medicines are prescribed with generic rather than brand names.