

SOUTH ASIAN REGIONAL CONFERENCE OF THE WORLD ORGANIZATION OF **FAMILY DOCTORS**

11th - 14th February 2016, Colombo, Sri Lanka

Most of the students obtained the knowledge on NCD through NCD patients who were living with them. Significantly less subjects (61.3%, 19/31) of girls than boys (85.1%, 57/67) could name at least one complication of NCD (P < 0.01, odds ratio [OR] =3.6, 95% confidence interval [CI] =1.3-5.6). Significant number of students acquired knowledge about NCD through patients at home than other modes of media (P = 0.02, OR = 6.2, 95% CI = 1.1-14.2).

CONCLUSION: Young population needs to be made aware of NCD, its causes and long-term complications. At the same time, efforts should be made to sensitize them through media and to make them realize the importance of knowing.

Keywords: Awareness, Advanced level student, Media, Non communicable diseases

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OP 026

TITLE: Clinical pharmacy service improves medication adherence in patients with non-communicable chronic diseases: evidence from a controlled trial Shanika LGT1,2, Wijekoon N1, Jayamanne S2,3, Coombes J2, Coombes I2, Perera D2, Dawson A2, De Silva HA3

INTRODUCTION AND OBJECTIVE: This is the first study in Sri Lanka to determine whether a ward-based clinical pharmacy service could improve patients' medication adherence.

METHOD: This is a part of a controlled trial conducted in a tertiary care hospital to evaluate effectiveness of clinical pharmacy service on improving quality use of medicines in patients with non-communicable chronic diseases. Intervention group (IG) received a ward-based pharmacist's service throughout hospitalization to optimize drug therapy. At discharge pharmacist counseled patients regarding all aspects (name, indication, dose, frequency, side effects, actions for side effects, timing, monitoring, storage) of long term medications; written instructions were also provided. Control group (CG) received usual care without a ward-based pharmacist. On the 6th day after discharge patients 'self-reported medication adherence was assessed by a different pharmacist using two tools (Average medication adherence score calculated based on dose and frequency and Morisky 4-item Medication Adherence Scale).

RESULTS: There were 334 and 311 patients in IG and CG, respectively. IG had a significantly higher average medication adherence score compared to CG (IG - 92.97 \pm 15.04 vs. CG - 80.42 \pm 28.29; P<0.001) irrespective of age, gender, education level and number of medications prescribed. A significantly large proportion of individuals in IG scored high level of adherence on the Morisky adherence scale compared to CG (IG-82.3% vs. CG-59.8%; P<0.001). Forgetfulness and stopping the drug when feel worse, were the two main reasons identified for non-adherence.

CONCLUSION: A collaborative medicine management approach with a ward-based clinical pharmacist improves patients' adherence to long term medications. 1 Faculty of Medical Sciences, University of Sri Jayewardenapura2. South Asian Clinical Toxicology Research Collaboration 3Faculty of Medicine, University of Kelaniya

OP 027

TITLE: Ethnicity based research on diabetes in Bangladeshi GARO Adivasis Rahman Z1, Bala K2, Islam N3, Islam M M3, Chowdhury A I2, Abdal N M3, Bhuiya N I2

INTRODUCTION AND OBJECTIVES: Ethnicity – based research can identify new clues to pathogenesis of a disease, since the populations under study are heterogeneous in genetic and lifestyle characteristics. The objectives of the study were to assess the prevalence and to find out the determinants of diabetes and impaired glucose tolerance (IGT) among the GARO Adivasis.

METHOD: Under a cross- sectional analytical study design a total of 778 GARO adivasis located in a remote rural area of haluaghatupazilla under mymensingh district were assessed purposively by face-to-face interview and physical examination, through interviewer administered pretested questionnaire. Capillary blood glucose levels byPOCT (point of care testing), fasting blood glucose (FBG) levels and 2hour after 75g oral glucose load (OGTT) were measured by following the WHO guideline for the detection of DM and IGT. Data were analyzed by appropriate univariate as well as multivariate analysis using statistical software SPSS version 17.

RESULTS: Of the total respondents 53.2% were females and the mean (+-SD) ages of the respondents were 39.2% (+-15.26) years, the proportion of underweight and overweight were 32.6% (CI: -27.9-37.3) and 11.8% (CL: -8.6-15.0) respectively. Whereas 21% of the study re-