**Results:** Among 715 patients studied 50.3% were females. Mean age was 58.3±15.4 years and 35.4% were elderly (aged ≥65years). 45.6% had diabetes. Mean number of drugs per patient was 6.11±2.97. Hundred and fifty four (21.5%) ADRs (33 (4.6%) during index hospital admission; 121 (16.9%) during 6-months period following discharge) were detected involving 112 (15.7%) patients. Incidence in men and women were 21.1% and 21.9%, respectively (p = 0.79). ADRs were more common in elderly than in non-elderly (34% vs 14.7%, p<0.001) and in those who were on ≥5 drugs than in those who were on <5 drugs (25.9% vs 12.7%, p<0.001). ADRs were more common among those with diabetes than among those without diabetes (28.5% vs 15.6%, p<0.001).

**Conclusions:** Incidence of ADRs was high in the study population. Factors associated with a higher incidence of ADRs were age ≥65years, ≥5drugs in the prescription and presence of diabetes. Among patients with NCCDs, these special patient groups need more attention to minimize ADRs.

**OP 3**

**Use of non-prescription analgesics and its associated factors in Boralasgamuwa Medical Officer of Health (MOH) area**

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**Introduction and objectives:** Self-medication with analgesics is a health problem. The objective of this study was to assess the non-prescription analgesic usage, factors associated with usage and knowledge regarding analgesics.

**Method:**A descriptive cross sectional study was conductedin 3 randomly selected Grama Niladhari areas in Boralesgamuwa MOH area. Data was collected using an interviewer administered questionnaire and data were analyzed using SPSS version 20.

**Results:** Respondent rate was 93.93% (n=403) and 38.2% (n=154) were males. Analgesic use is significantly high among females (p = 0.029) and in unmarried people (p =0.036). The unemployed reported a highest use of analgesics compared to retired and employed. Analgesic use decreased with increasing education but drastically increased again at degree level (p < 0.05). One hundred and fifty respondents (37.2%) used analgesics to alleviate pain within the last 4 weeks. From total analgesic users (n=150) 90.6% (n=136) used only one analgesic within last for weeks. Of those 96.3% (n=131) used paracetamol, 1.5% (n=2) aspirin and 1.5% (n=2) diclofenac. One person stated that he used loratadine to alleviate pain. From total analgesic users (n=150), 9.3% (n=14) used two analgesics together. Eight (57.1%) stated that they used paracetamol and chlorpheniramine as analgesics while others used paracetamol and diclofenac 7.1% (n=1), paracetamol and ibuprofen 14.3% (n=2) paracetamol and mefenamic acid 14.3% (n=2) and paracetamol and Panadeine 7.1% (n=1).From all analgesic users (n=150), 96.7% (n=145) used paracetamol. 70.3% of the respondents obtained paracetamol from a pharmacy. 13.1% (n=19) used paracetamol prophylactically. 49.7% (n=72) paracetamol users stated that paracetamol overdose causes kidney damage and 40% (n=58) knew it causes liver damage. From the total sample only 22.1% (n=89) were aware that it could cause liver damage in overdose.18.1% (n=62) people indicated paracetamol and Panadol as separate drugs and this percentage was 1.2% (n=4) for Paracetol. Aspirin and Disprin were identified as separate drugs by 11.6% (n=8). Amoxicillin which is an antibacterial drug was identified as an analgesic by 3.5% (n=14) of people.

**Conclusions:** Analgesic self-medication is a problem in the study area and awareness regarding analgesic use needs to be improved.