DANGER OF BUYING MEDICINES IN ANY PLACE OTHER THAN THE PHARMACY

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Introduction
There are medicines registered as such-and matter to the legislation of pharmaceutical departments and products that, without individual registered as medicines are put on sale and energetically promoted, generous those therapeutic qualities.

Amongst the therapy it is essential to differentiate individuals of instruction or recommendation sale, of those without prescription or over the counter (over the counter or OTC counter therapy in Anglo-Saxon vocabulary). On these there is the incorrect an installed hypothesis among the common public, which considers “over-the-counter” treatment are safe.

All medicines devoid of exemption, used in unnecessary doses or for else long duration, in condition where they would not be identified, can source side effects, indemnity, unwanted or adverse effects, make communications with other drugs or substances, provoke behaviors of mistreatment or reliance and even impediment the analysis of a situation that wants medical heed.

Thus, for ease, according to a learning by Morlans, M., Laporte, J. et al., Concerning 13% of all the causative burden of life-threatening nephropathy that leads to dialysis or transplantation in our surroundings is due to the persistent use of painkillers, nearly for all time in the construction of self-therapy.

The sale of any medicine exterior the pharmaceutical establishments is extremely dangerous for the fitness of inhabitants. As the Argentine Pharmaceutical Confederation (COFA) warns, 20 percent of the medicine obsessive in the nation are purchased exterior pharmacies; such provisions incorporate kiosks, supermarkets, service stations, gyms and even hotels adjustment. At times this also applies to recommendation drugs.

The identifiable of a medicine is the monitoring of the way that the creation takes at all stages of its advertising, it is necessary to attain a exact use of the medicine (pharmacovigilance, recognition of persistent patients, patient observation) as well as to found an action Therapeutics free of difficulties. It is also a implement that uses the physical condition system to detect counterfeits, adulterations on medications. When unraveling from the unique sales control, traceability becomes not easy, if not possible [1].

Errors in direction could be identified and corrected simply by a capable and knowledgeable pharmacist. Non-pharmacist dispensers might confirm unsuccessful in such instances. It would be uniformly unsuccessful if they dispensed medicines without prescription, leaving by only symptoms that the patient said. For instance, codeine phosphate syrup that is given for cough should not be given to people with lung diseases. It was confidential as a sedative pain reliever that acted on the brain to dull the cough impulse (triggered by understanding of bronchi/trachea to frustration). The mistreatment of codeine phosphate or incorrect providing could be prohibited only by insisting on a prescription from the general practitioner. The
syrup was much adored by people who saw it as a safe alternative for alcohol, said Mr. Premji.

“Right from managing of boxes of medicines on the shelves, examining the cold chain for vaccines and indexing these, it is the duty of a capable pharmacist, and not even of those people who had undergone a pharmacy helper line that is, actually, illegitimate.”

Mr. Premji says. Every qualified pharmacist should uphold therapeutic or instruction report of patients for five years. This was to help road prescription or supply mistake in investigation into drug-induced fatality or morbidity.

In the U.S. or the U.K., prescriptions supposed to be reserved secure for seven years. “At current, we have no possibility of tracking such lethal fault for the reason that the rules have not been compulsory. The administration does not appear to be involved in enforcement,” he lamented.

The responsibility of pharmacist in organization of medicine interaction The pharmacist, beside with the prescriber has a responsibility to guarantee that patients are conscious of the danger of side effects and an appropriate route of action supposed to be occur. With their thorough familiarity of medication, pharmacists have the capability to relate unpredicted symptoms experienced by patients to probable undesirable effects of their drug treatment. The practice in clinical pharmacy also ensures that ADRs are minimized by avoiding drugs with possible side effects in vulnerable patients. Thus, pharmacist has a main role to play in relative to avoidance, detection, and exposure ADRs.

There is also a authorized vacuum over their organize by the countrywide ability, since ANMAT has no jurisdiction over establishments that are not certified by the Ministry of Health. In other words, the referred “sales channels” (kiosks, warehouses, service stations) are exterior their jurisdiction and fitness.

According to the studies carried out by the Allama TR College of Pharmacy, Badarpur, Assam, in rural area most of the pharmacy is running without registered pharmacist hence make awareness camp & awareness rally to showcase danger of buying medicines in any place other than the pharmacy and also describe about medicines by conducting the health camp with the help of registered pharmacist & qualified doctor.

Advertising

The impact of the publicity of drugs on the actions of customers is unquestionable, and therefore the possible risks it represents for the physical condition of the people. The National Academy of Medicine warned on frequent occasions concerning “advertisements that give confidence the use of treatments and medications without medical management, and the propagation of publicity communication advising treatment and beneficial procedures of advantage occasionally not recognized and occasionally overstated, with the intention to give confidence their utilization”.

The World Health Organization (WHO) shaped the “Ethical criteria for the endorsement of medicines”, a hypothetical construction where recommendations are complete on advertisements intended at the public “should help the inhabitants to make normal decisions about the use of medicines that are lawfully obtainable without a prescription.

According to studies passed out by the Maimonides University and the Argentine Institute of Pharmaceutical Care (IADAF), the publicity of medicines encourages self-medication or drug mistreatment, a dilemma that takes 700 lives per year in the country.

In a note from health issues journalist Pedro Lipcovich, (“Today we are addictive”) analyzes a television significance of aspirin (acetylsalicylic acid) mentioning the arresting omission of any of its beneficial properties as anti-inflammatory, anti-fever, anticoagulant, associating its utilization “with a generic welfare state and high societal and employment concert”. 
We submissively help out in the encouragement of bad drinking habits, widely publicized, to enlarge the sales of a drug that apparently counteracts the effects. The induction to the conduct of nearness in the setting up of a management according to the symptoms, gives results: the whole thing can be solved with a tablet and still some nutritional supplements are preferred to be marketed as medicines because they “vend more”. But this approach has it’s When a adolescent is obtainable a “tablet” of happiness, with the promise of comfort and satisfaction; it is utopian to think he could say “no.”

To all this have to be added the weightlessness with which we help out in the instruction of medications. The mother, the coworker, the hairdresser, the kiosk and even the doctor’s workplace, among patients, advised medications.

Publicity and active endorsement by mass media, increases reckless self-medication and illogical use of medicines. Therapeutic drugs or medicines thus depart their place of public good, necessary for public fitness, and become a buyer excellent.

**Drug dependence**

Frequent medicine are used to create changes or changes in humor, unaccompanied or in organization with medicine or substances of mistreatment. According to the 2008 National Survey on Prevalence of Psychoactive Substance Consumption, conducted by INDEC, almost 4% of the inhabitants amid 16 and 65 years of age consumes neuroleptic.

It cannot be use into relation that nearly all drugs of mistreatment at the moment were originally medicine, which due to their pharmacological and toxicological distinctiveness (tolerance, abuse, and dependence) began to be used for their psychoactive property, individual then constrained or introverted in your pharmacological employment. Such is the container of cocaine, some opiates (morphine, codeine), amphetamines, anesthetics (ketamine), ephedrine, popper, etc.

The Abuse Medicines Observatory (WCO) in Spain conducted a lessons that confirmed the non-medical utilization (substance abuse) of a total of 27 substances. 22% inspired analgesics, some 12% anxiolytics or tranquilizers (benzodiazepines); 10% stimulants and the rest a wide variety of substances.

Mainstream use patterns integrated mixtures with drugs and alcohol and mistreatment of tranquilizers. Medications have constantly been part of the “medicine civilization” in non-therapeutic uses, in arrange to understanding new ambience or obtain improved yields. The modalities of drug violence modify and it could be believed that some of them “become trendy”. At present, the “fanatical jar” is the most general form of alcohol and medicine use-mostly benzodiazepines- among adolescents and youthful adults.

According to data beginning the Toxicology Unit of the “Juan A. Fernández” Hospital of the City of Buenos Aires, during 2008, 2182 consultations related to acute poisoning by substances of mistreatment were attended; 292 of them were due to mistreatment of some type of medicine and another 205 were due to the involvement of some medicine with alcoholic beverages.⁴

The equation among unsuitable encouragement of drug use, forms of facilitated or unrestrained convenience and patterns of unsuitable use and matter mistreatment constitutes an bigger risk trilogy, which exposes the potentially most susceptible inhabitants.

**CONCLUSION**

The earlier period quite a few years have seen main advances in our accepting of DDIs, mainly in the area of the molecular mechanisms by which drug act together. Though, our capability to correctly apply this in sequence to specific patients has lagged far behind. Pharmacists must take accountability for monitoring for drug connections and notifying the physician and patient about prospective troubles.⁵

OTC drug mistreatment is a documented problem globally but is presently moderately unstated. Investigation is required to calculate level of mistreatment, calculate interventions and capture personnel experiences, to notify strategy, directive and interventions.⁶
References


4. “Juan A Fernández” UBA Toxicology Professor Toxicology Unit of the Hospital Buenos Aires Maimonides University Buenos Aires.
