

BORROWING AND SHARING PRESCRIPTION MEDICATION AMONG PATIENTS AT DIFFERENT STAGES OF CHRONIC KIDNEY DISEASE

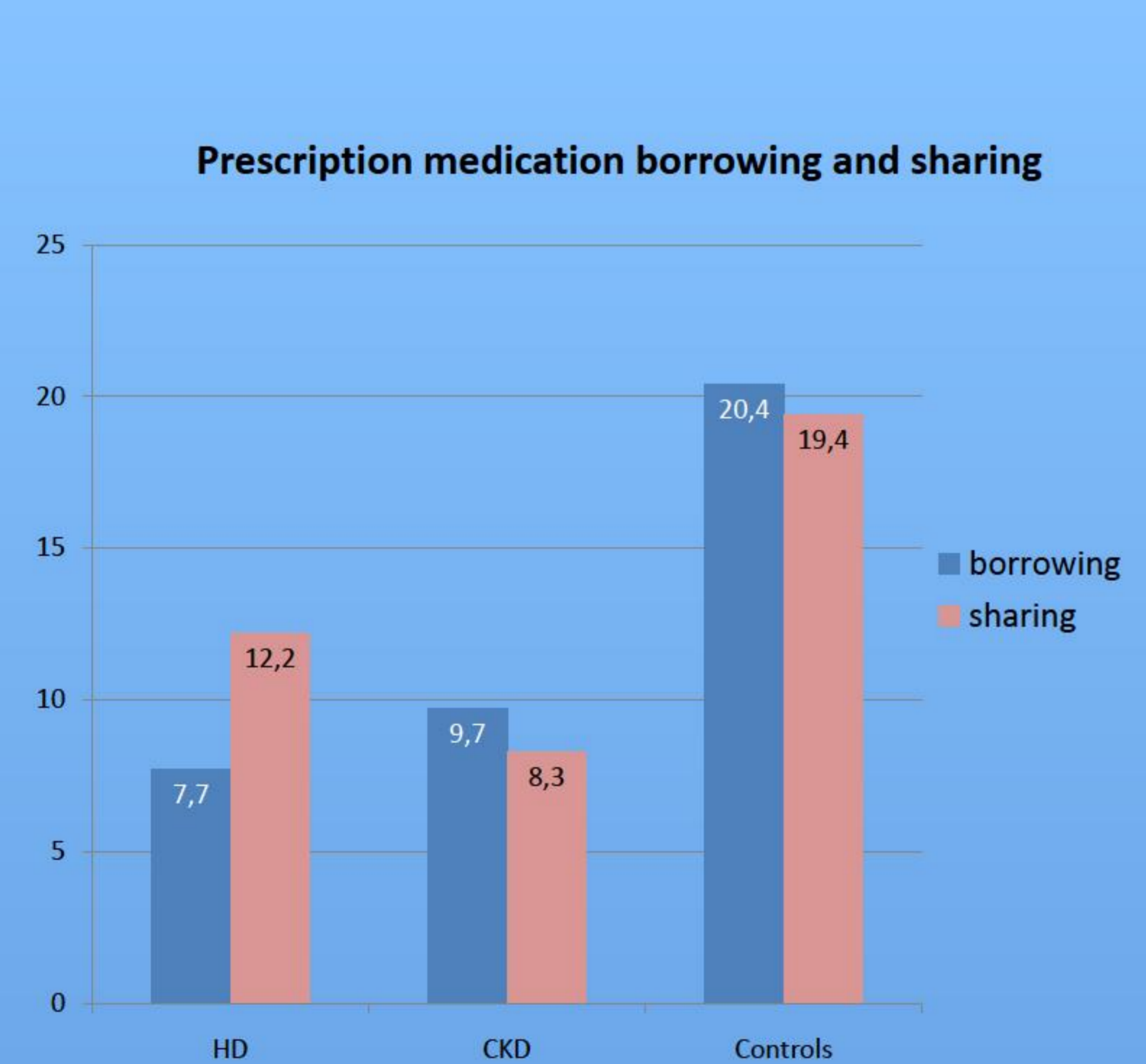


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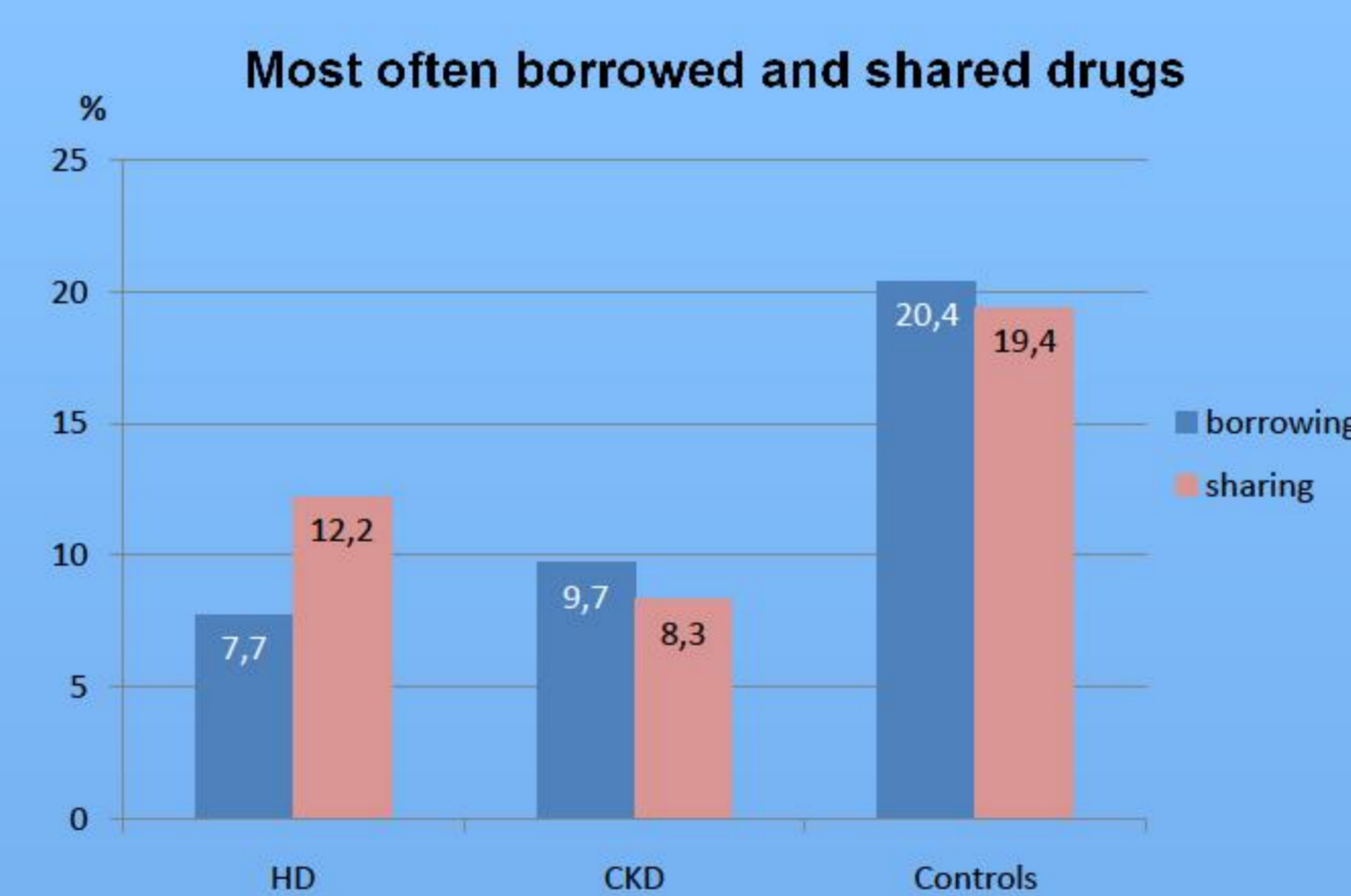
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INTRODUCTION AND AIMS: Prescription medication borrowing and sharing among the patients and their family members or friends is a common but still scarcely investigated practice that can lead to detrimental health outcomes including adverse drug reactions and ineffective therapy due to incorrect dosage or drug regimen. The patients with chronic kidney disease (CKD) provide a unique opportunity to study such behaviors due to their high pill burden and frequent contact with health professionals. The patients are regularly informed about increased risk of drug side-effects related to their disease. All these factors may influence the need for borrowing and sharing prescription medication. The aim of the study was to compare the pattern of prescription medication borrowing and sharing among adult patients with end-stage renal disease on chronic dialysis, non-dialysis patients with chronic kidney disease and subjects with normal renal function.

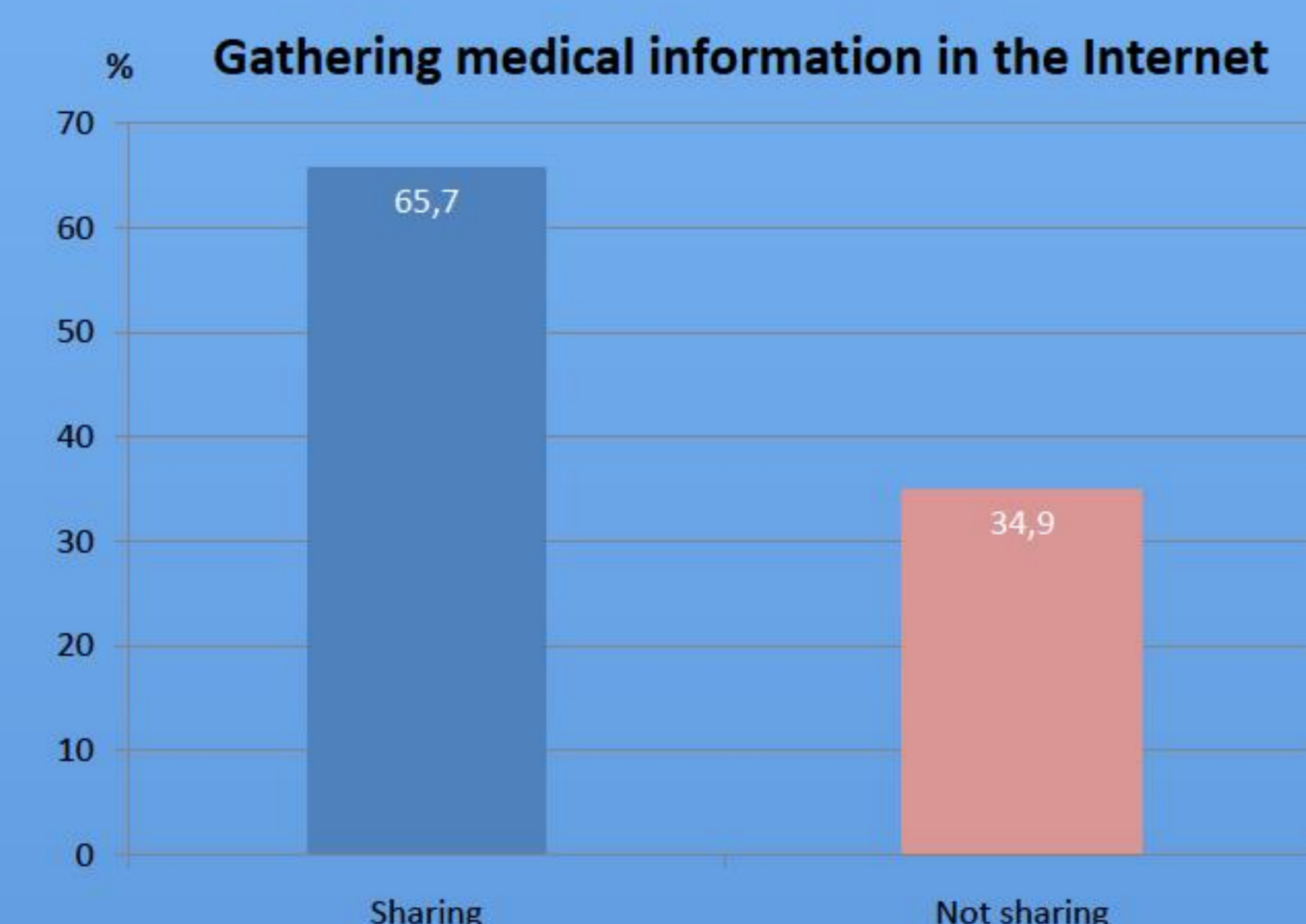
METHODS: Study group comprised 304 patients with chronic kidney disease (153 men and 151 women), age 18-85 years including 222 subjects on chronic hemodialysis (HD), 82 CKD patients not on hemodialysis under the care of tertiary nephrology center and 102 control subjects with normal kidney function who regularly take prescription medication due to chronic non-kidney disease. Prescription sharing and borrowing practices were compared based on a standardized questionnaire.



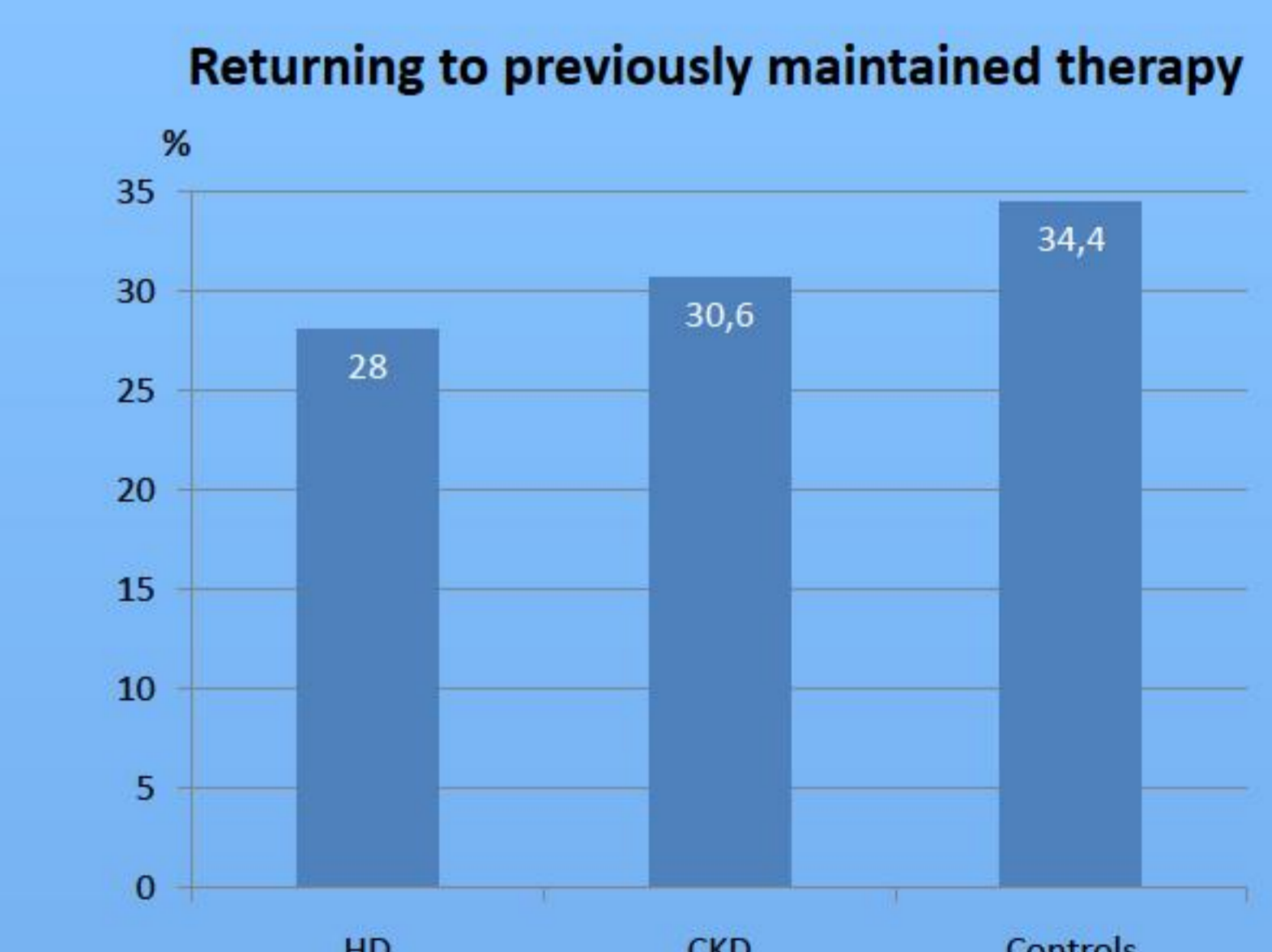
12,2% HD patients shared medications compared to 8,3% CKD, and 19,4% controls (p=0.09). 7,7%, 9,7% and 20,4%, respectively borrowed medications (p=0.0005).



Analgesics, antihypertensives and antibiotics were the drugs most often borrowed (56.5%, 26.1%, 26.1%, respectively) and shared (70.6%, 44.1%, 14.7%, respectively) in all studied groups.



Gathering medical information in the Internet was more common among CKD patients who shared their prescription drugs compared to those who did not share (65.7% vs. 34.9%, respectively, p=0,004).



HD (28%) and CKD (30.6%) patients tended to return to the previously maintained therapy without medical consultation slightly less often compared to the control group (34.4%).

More women than men shared medications (58% vs 42%). 63% patients who shared vs. 53% patients who did not share (p=0.16) and 79% patients who borrowed vs. 51% who did not borrow prescription medications (p=0.0002) were not satisfied with their financial situation. 89% of patients who borrowed vs. 98% patients who did not borrow (p=0.003) and 95% who shared vs. 97% patients who did not share (p=0.38) prescription medications had their own general practitioner. 72% patients who shared vs. 59% patients who did not share (p=0.11) and 58% patients who borrowed vs. 61% who did not borrow (p=0.72) prescription medications had chronic illness.

CONCLUSIONS: Prescription medication borrowing and sharing is a common behavior in patients with chronic kidney disease more often occurring among non-hemodialysis patients. "Doctor Google" phenomenon seems to be the factor mostly affecting the incidence of borrowing and sharing drugs.

