

## Good Prescription Writing

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There are minimum four and seven real parts to a drug prescription. The first is the Date, then name of patient and age, third is superscription or heading, the symbol **R** from the Latin recipe, meaning "take." The fourth part is the inscription, specifying the ingredients and their quantities or main body of prescription. The fifth part is the subscription, which are directions to compound then medicine. The signature or direction to patient, and last Prescriber's name (or name of Doctor/Pharmacist). When a patient comes for an office visit, the physician or other authorized health professional prescribes medications 67% of the time and an average of one prescription per office visit are written because more than one prescription may be written in a single visit [1].

A prescription is frequently divided into the superscription, including all everything the list of ingredients; the inscription, including the ingredients and their amounts; the subscription, including everything below this, as directions to compounder, directions for patient, and prescriber's name.

No prescription in Pakistan contained minimum four and seven real parts of a prescription. An extensive study shows that legibility was poor in 58.5% prescriptions. Physician's name and registration number were not mentioned in 89% and 98.2% prescriptions respectively. Over 78% prescriptions did not have diagnosis or indication mentioned. Dosage, duration of use, signature of physician and directions for taking drugs were not written in 63.8%, 55.4%, 18.5% and 10.9% of prescriptions respectively. On average, each prescription included 3.32 drugs. Most frequently prescribed drug classes are analgesics (61.7%), anti-infective agents (57.2%), multi-vitamins (37.8%) and gastrointestinal drugs (34.4%). We found 206, 130, 105 and 101 different brands of anti-infective agents, gastrointestinal drugs, analgesics and multivitamins found to be prescribed.

While being one of the poorest countries in the world, prescription medicines are unnecessarily expensive in Pakistan. Health-related expenses consume a large portion of household budgets of the very poor in Pakistan. At the same time, illegible and incomplete prescriptions filled by unlicensed pharmacists often selling counterfeit medicines add to the burden of disease. Hospitals, Pharmacies, and clinics in Pakistan need to be subjected to a stricter regulatory regime to limit the spread and prevalence of disease.

Unlike Pharmacies, hospitals and clinics are staffed by trained and experienced doctors. However, this is worth little when the prescriptions they write are either not legible or are incomplete. The good doctors in Pakistan though are not the only once with sloppy handwriting. In the United States alone, more than 7,000 deaths are attributed to doctors' sloppy handwriting [2]. Over three billions prescriptions are written in the United States every year. Illegible handwriting, unclear abbreviations and dosage instructions are the reasons behind mistakes that prove fatal for thousands of patients.

The contents of prescriptions reveal two additional sources of concern. First, prescriptions on average carried 3.3 drugs, which, according to the experts, is significantly higher than the WHO recommended standard of two drugs per prescription [3]. Of the six facilities from where these prescriptions were sourced, prescriptions from the private for-profit facilities listed higher drugs per prescription than those collected from public-sector medical facilities.

It was observed that a higher number of average drugs per prescription mostly using brand names, and over-prescription of analgesics, antimicrobials, multivitamins and anti-ulcer drugs. Quality of written prescriptions was poor in terms of perfection.

### Bibliography

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