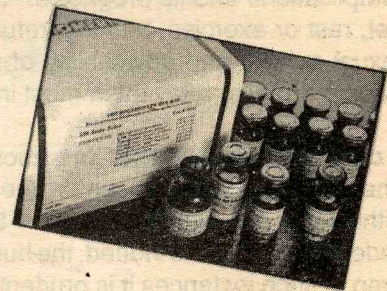
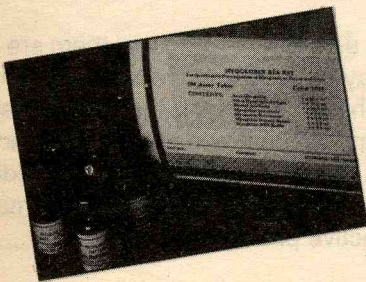
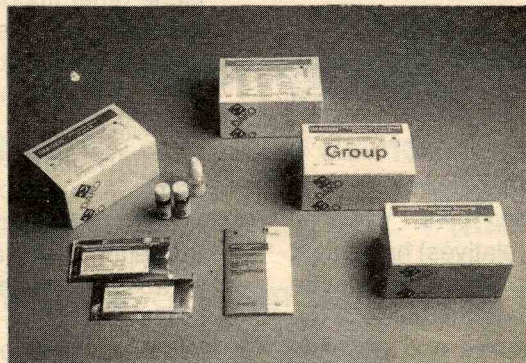
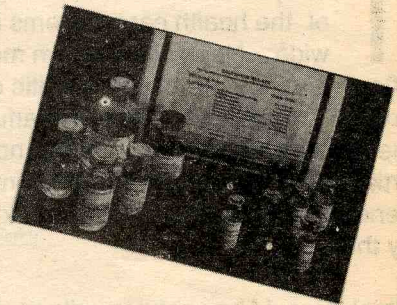
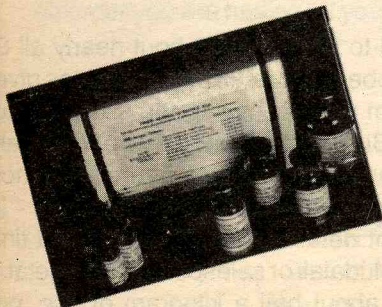


HOW TO GET THE BEST FROM WESTERN MEDICINAL DRUGS

Prof. Colvin Goonaratna

*Professor in physiology and Chairman
State Pharmaceuticals Corporation and
State Pharmaceuticals Manufacturing Corporation*



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about the disease or disorder he or she is suffering from.
These include the name of the disease or disorder,
its main features and possible complications
and its prognosis.**

Today western medicinal drugs form an important part of the health care systems in most countries worldwide. Nearly all western medicinal drugs are highly effective, many are highly specific and some are extremely powerful. Like all useful and powerful tools, some drugs have the potential to harm if they are not properly used. In this article I will try to give you a few hints on how to get the best benefit from medicinal drugs, and how to avoid being harmed by them.

I think it would be useful to write my ideas from here on in the form of a series of questions you need to ask your doctor (and yourself) about diseases and their treatment.

1. What disease or disorder am I suffering from?

Every patient (and often their close relatives) has a right to know relevant details about the disease or disorder he or she is suffering from. These include the name of the disease or disorder, its main features and possible complications and its prognosis. Other details such as diet, rest or exercise, bathing, return to work or school, sexual activity and advisability of pregnancy or breast feeding are also relevant in most instances.

In cases of seriously ill persons, those with fatal illness or when the diagnosis is uncertain, the doctor may decide to withhold some information from the patient. This is understandable, and indeed, the humane thing to do. But even in such instances it is prudent to inform one or two close relatives of the patient about the illness.

2. What is the drug (or drugs) I am supposed to take?

I have never ceased to be amazed about nearly all Sri Lankan patients will obediently take any medicines given or prescribed to them without having the slightest clue about the medicine. But the same people who would take a medicine which may determine their future life without asking the prescriber or pharmacist even its name - let alone other important details about it - will spend time talking to the Kaday Mudalali or salesperson or vegetable Ammey at the Pola about half a kilogram of rice, one metre of jacket material or a bunch of Gotukola.

The most important thing about a drug is its generic name. A prescriber may prescribe a drug by any one of a drug's brand names, but it is his or her duty to write down the generic name also on the prescription. The patient has an absolute right to ask and to be told the generic name.

3. What are the side-effects of the drug (or drugs) I have to take?

Most drugs have a side-effects. Most of them are minor ones, but a few may be significant, and one or two may even be serious. The good doctor is the one who tells the patient about at least the common side-effects and what to do if they occur. Those who claim that their medicines have no side-effects at all are either deluding themselves or doling out ineffective placebos.

4. What are the other things I need to know about the drug (or drugs)?

Other details of the drug (or drugs) prescribed for you that you must know include the dose, the number of times per day it must be taken, relationship to meals if any, duration of treatment, and its safety during pregnancy and breast feeding.

5. Are drugs safe during pregnancy and breast-feeding?

It is safe to assume that most drugs are unsafe during pregnancy and breast feeding. Any woman of child-bearing age whose menstrual period has been delayed by even a couple of weeks, or who is breast feeding, must tell the prescriber about these two points. And it is the prescriber's duty to consider very carefully the safety of drugs prescribed for women during pregnancy or breast feeding.

6. How long should I take the medicine?

The answer to this question depends on what illness or disorder you are having. If your trouble is a headache or

a mild viral fever, aspirin or paracetamol for a day or two may be all you need in the way of medicines. If you are suffering from leprosy or tuberculosis, drug treatment has to be taken for many months. For high blood pressure and diabetes mellitus, usually drugs have to be taken for years and perhaps for a lifetime. And for cortisol or thyroid hormone deficiency, replacement with the appropriate hormone is inevitably life-long.

Conclusions

Doctors need to talk (as equals, no superiors) to patients much more than they do now, about the disorders they are suffering from and the treatment. Patients need to move away from the attitude most of them have no of silent obedience, and need to establish a friendly dialogue with their doctors as equal partners in the management of disease. Patients have an inalienable right to be informed, and doctors have a sacred duty to give information when asked. Only in this way can both doctors and patients derive the best results from western medicinal drugs.

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