The Use of Antimalarial Drugs Prior To Health Facility Attendance among Patients at Kitale District Hospital, Kenya

Emmanuel Simiyu Musombi

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ABSTRACT

Malaria is a major cause of morbidity worldwide. It remains the leading cause of morbidity and mortality in Kenya, especially in young children and pregnant women. Problems related to the distribution and use of antimalarial drugs have compounded the situation in Africa and Kenya is no exception. In Kenya, like in many other developing countries, drugs are often used without prescription. They may be purchased from local shops, markets, or street vendors. They may also be obtained by sharing with other users, or used when left over from previous treatments. There is concern that this widespread use of anti-malarial drugs for all fevers is often inappropriate and ineffective and may contribute to drug resistance and thus slow down the fight against malaria. The main objective of this study was to determine the use of antimalarial drugs prior to health facility attendance among patients at Kitale District Hospital. Specifically the study aimed to determine the treatment seeking behaviour in respect to malaria among patients attending Kitale District Hospital, establish the source and types of drugs and regimens used for malaria treatment in the management of fever prior to facility attendance, establish patients knowledge of antimalarial drugs and determine the association between demographic characteristics and treatment/ management of malaria. A descriptive facility based cross sectional study design was used. Sampling was done consecutively on patients who were diagnosed clinically and/or parasitologically for malaria at Kitale District Hospital Out Patient Department. A total of 406 respondents were interviewed. A structured questionnaire was used as a data collection tool. The information was entered in a database using SPSS Version 12. Data analysis was performed using the same software. Descriptive statistics was used to describe the results. Of the 406 patients interviewed, a total of two hundred and eleven (63.7%) had taken an antimalarial drug

prior to hospital attendance. The most commonly used antimalarials were Artemether lumefantrine (AL) (46%), Sulfadoxine- Pyremethamine (Fansidar®) (8%) and Amodiaquine (7%). There was significant difference by age and sex with regard to type of drug used for fever management (P=0.01). The sources of these drugs were diverse but public health facilities were the major source of Artemether lumefantrine (AL) (52%), while the informal sector comprising of shops, pharmacies or other sources including left over medicines at home were the major source of other antimalarial drugs. Of the 46% respondents who used Artemether lumefantrine (AL), 72% adhered to the correct dosage. Only 19% of the respondents had knowledge of AL as the new antimalarial drug being promoted by the Ministry of Health. Health workers were the major source of information on AL (66%). There was significant difference in knowledge of the new antimalarial drug by level of education of respondents (P<0.05). The study shows that treatment seeking behaviour for malaria was reported in majority of the respondents and about half of them sought treatment mainly from informal facilities such as shops rather than the recommended health care outlets, within 24 hours after the onset of fever. There was widespread use of antimalarial drugs in the community prior to hospital attendance with Artemether lumefantrine being the most commonly used antimalarial drug. Awareness of the recommended drugs for treatment of malaria was low and educational level was significantly associated with management of malaria as well as with knowledge about antimalarials. There is need for public health campaigns by the Ministry of Public Health and Sanitation to seek improvement in health seeking behaviour by educating the public on the importance of prompt and effective management of malaria.