TO STUDY THE PRESCRIPTION BEHAVIOUR OF DOCTORS/GYNECOLOGISTS PRESCRIBING IRON SUPPLEMENTATION

PRESENTED BY-

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COMPANY PROFILE

Our Mission-Corona's mission as an ethical,transparent ,spirited and vibrant organization with a progressive outlook, is to make available a range of innovative , value added and evidence based product .

Our Vision-Our vision at corona is to achieve good health for every individual society and the nation as whole by becoming one of the top pharmaceutical company.

INTRODUCTION

- “Anemia" usually refers to a condition in which your blood has a lower than normal number of red blood cells.
- Iron is an essential mineral that is needed to form hemoglobin, an oxygen carrying protein inside red blood cells.
- Iron deficiency anemia is a condition in which the body lack enough red blood
- Iron deficiency anemia is the most common form of anemia and it develops over time if the body does not have enough iron to manufacture red blood cells.
- Without enough iron, the body uses up all the iron it has stored in the liver, bone marrow and other organs.

Anemia

Diagnosis:

- Low Hb level in male less then 12g/dl, in female less then 10 g/dl)
- Low heamatocrit (in males less then 39% in female less then 35%)
- Low serum iron level
- Low serum ferritin level.
- Low RBC count.

Treatment:

- The first priority of treatment is to determine the underlying causes of anemia.
- Once this is determined iron replacement therapy begins.
- Oral preparation with ascorbic acid for enhance iron absorption. If patient is noncompliant then parenterally.

Grades of Anemia (WHO)

Grade	Hb in gm%
Very Severe	< 6
Severe	6 to 8
Moderate	8.0 to 9.4
Mild	9.5 to 11

Research Methodology

Objective: -To study the prescription behaviour of doctors/gynecologists prescribing iron supplementation.

Mode of data collection:

Study type: Descriptive Study

Type of data: Quantitative data

Sampling technique: Purposive sampling

Data collection tool: Field and online survey using a questionnaire

Study Area: Ahemdabad

Sample size: Response of 40 doctors and 90 patients were recorded.

Data Analysis and Interpretation: Analysis and interpretation of the data have been carried out to deduce the conclusions with the aid of appropriate statistical tools.

Results & Discussions

DOCTORS

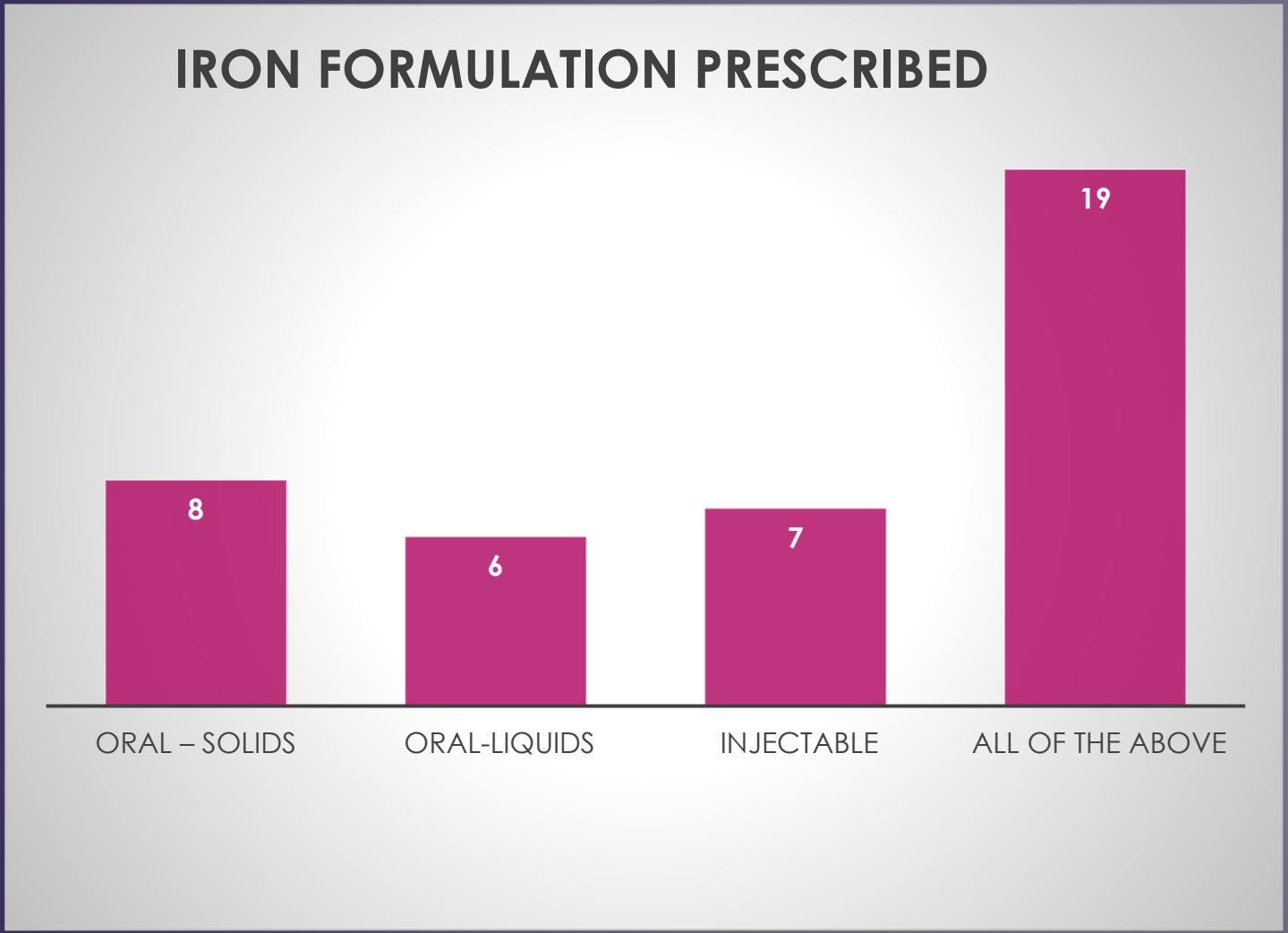


Fig 1: Depiction of Iron Formulation prescribed by gynaecologists in their practise

1) Which are the iron formulations prescribed by you in your practise?

INTERPRETATION- From fig 1. It was observed that gynaecologists prescribe all forms of iron formulation depending upon the severity of situation and patient compliance.

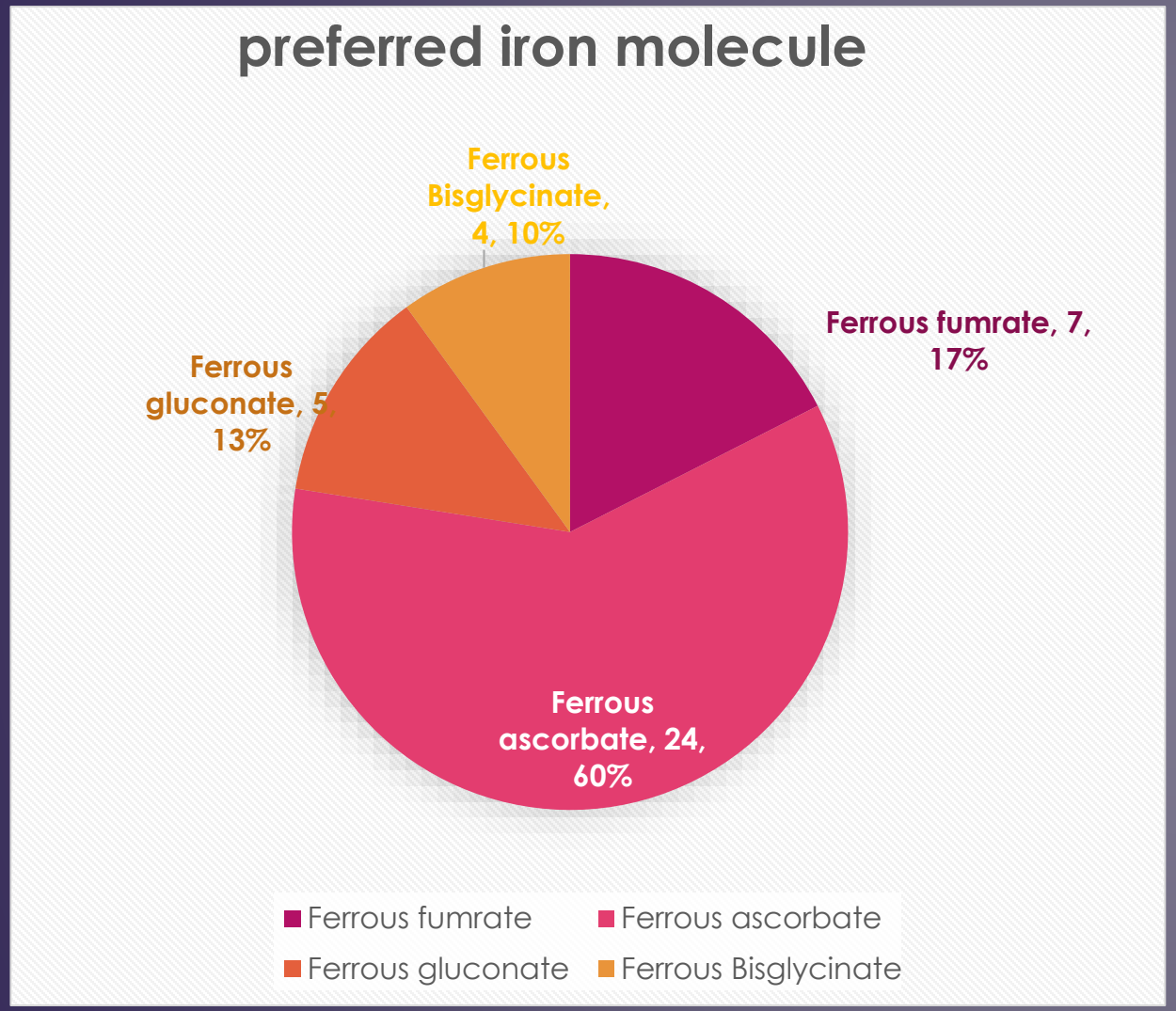
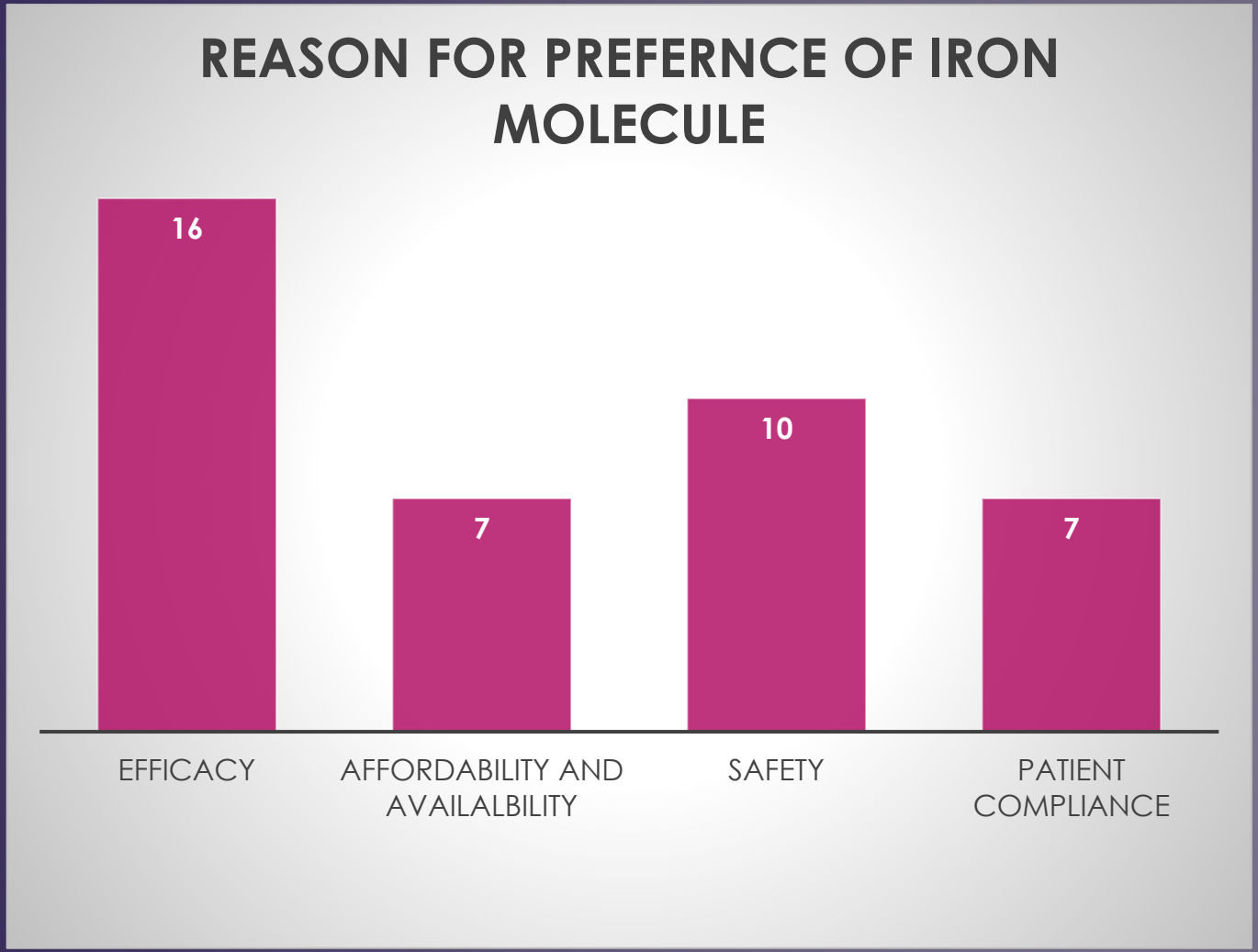


Fig 2 : Depiction of preferred iron molecule

2. Which oral iron molecule is preferred by you?

Interpretation: From fig 2 it was observed that 24 respondents prescribe Ferrous ascorbate to their patients followed by ferrous fumrate followed by ferrous gluconate and then ferrous biglycinate .



3. Why do you prefer the above oral iron molecule ?

Interpretation : From fig 4 it was observed that ferrous ascorbate is mostly preferred because of its efficacy followed to safety and then comes patient compliance and affordability and availability.

Fig 3: Depiction of reason for preference of iron molecule

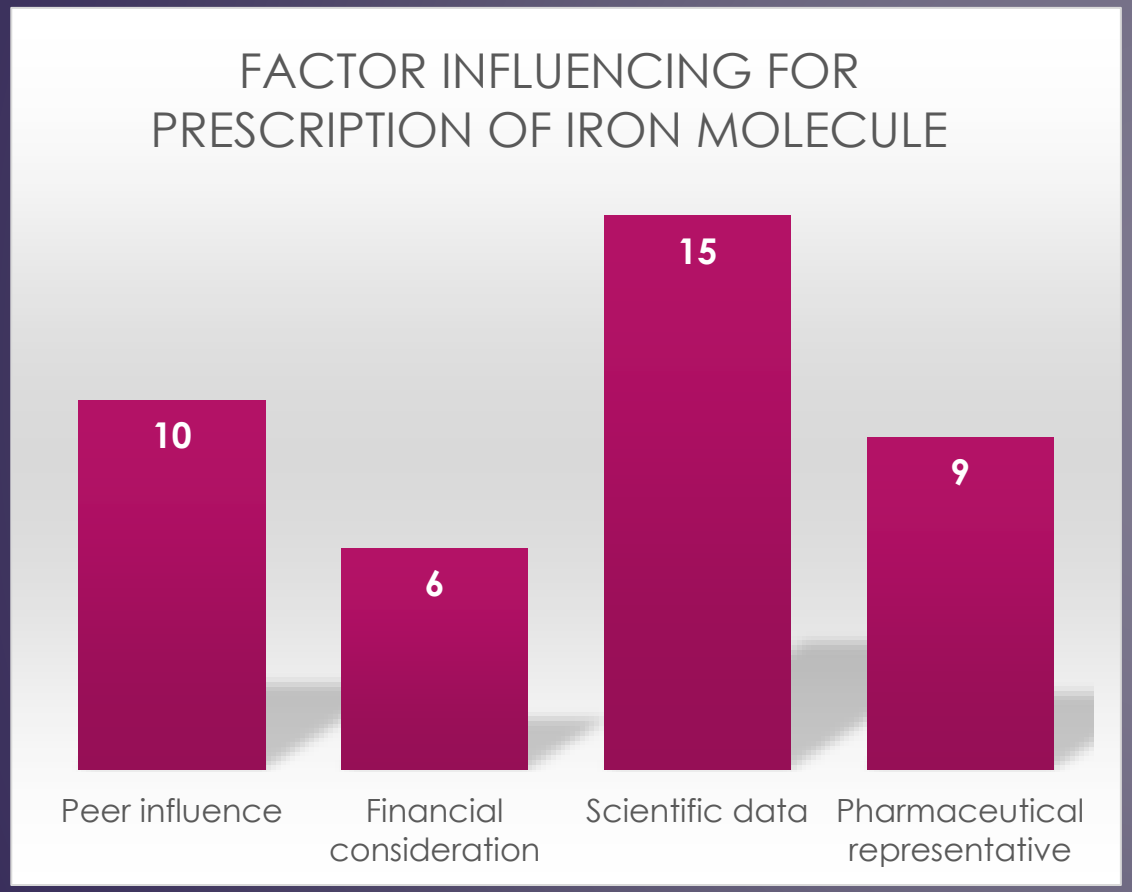
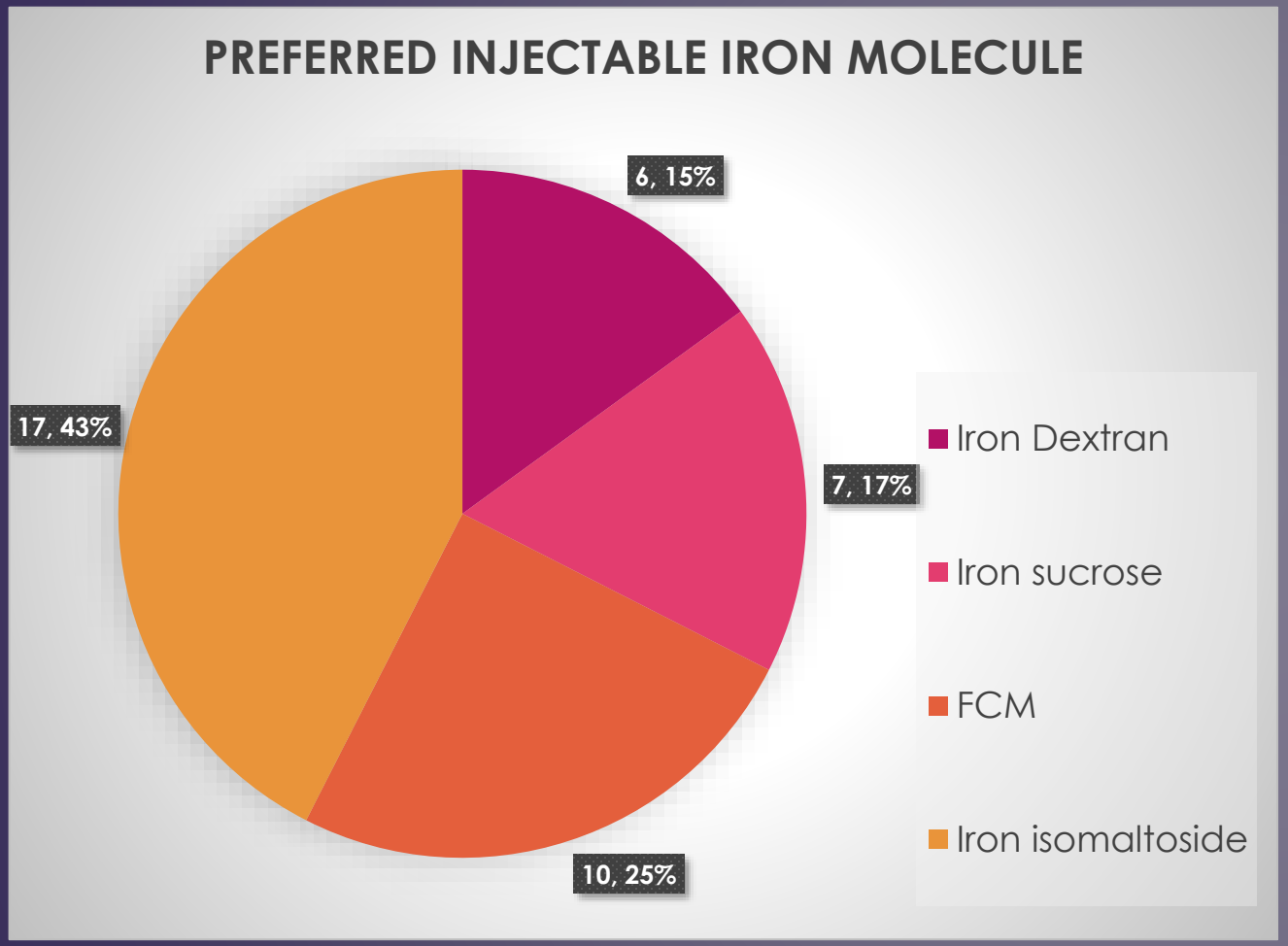


Fig 4 : Depiction of factors influencing for iron molecule

4. Which factor influences you to prescribe this molecule?

Interpretation – from fig 5 it was observed that most of the respondents prescribe this molecule because of the scientific data provided to them regarding the molecule followed by peer influence then pharmaceutical consideration and they are least bothered about financial consideration.



5. Which injectable iron molecule is preferred by you ?

Interpretation : from fig 5 it was observed that 17 doctors prefer iron isomaltoside as injectable iron molecule followed by 10 doctors preferring FCM followed by iron sucrose and iron dextran .

Fig 5 : Depiction of preferable injectable iron molecule

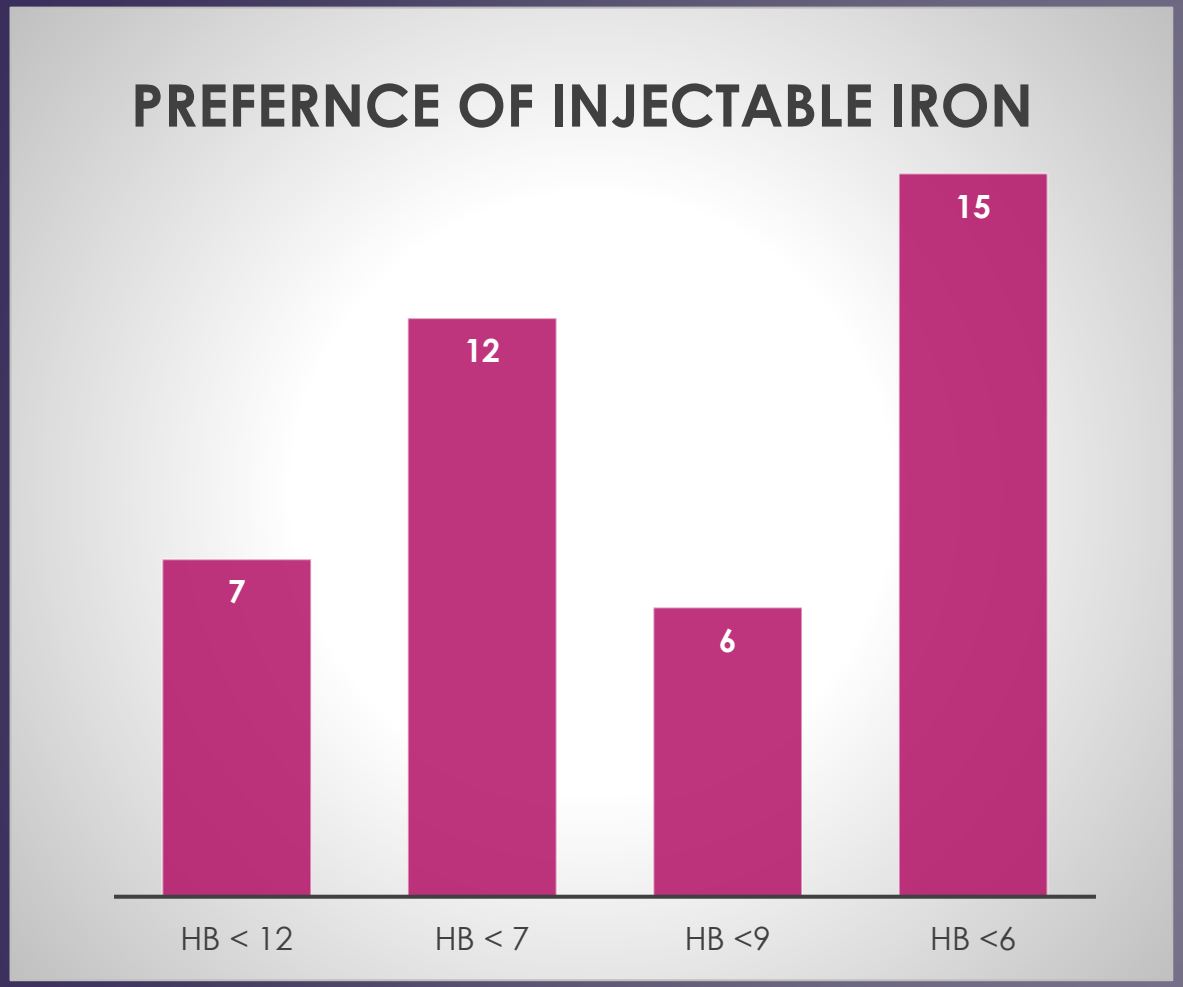


Fig 6: Depiction of condition in which injectable iron molecule is preferred

6. In which patient you prefer Injectable Iron?

Interpretation: From fig 8 it was observed that out of 40 repondents 15 gynecologists prefer injectable iron when haemoglobin is less than 6 followed by haemoglobin less than 7 .

PATIENTS

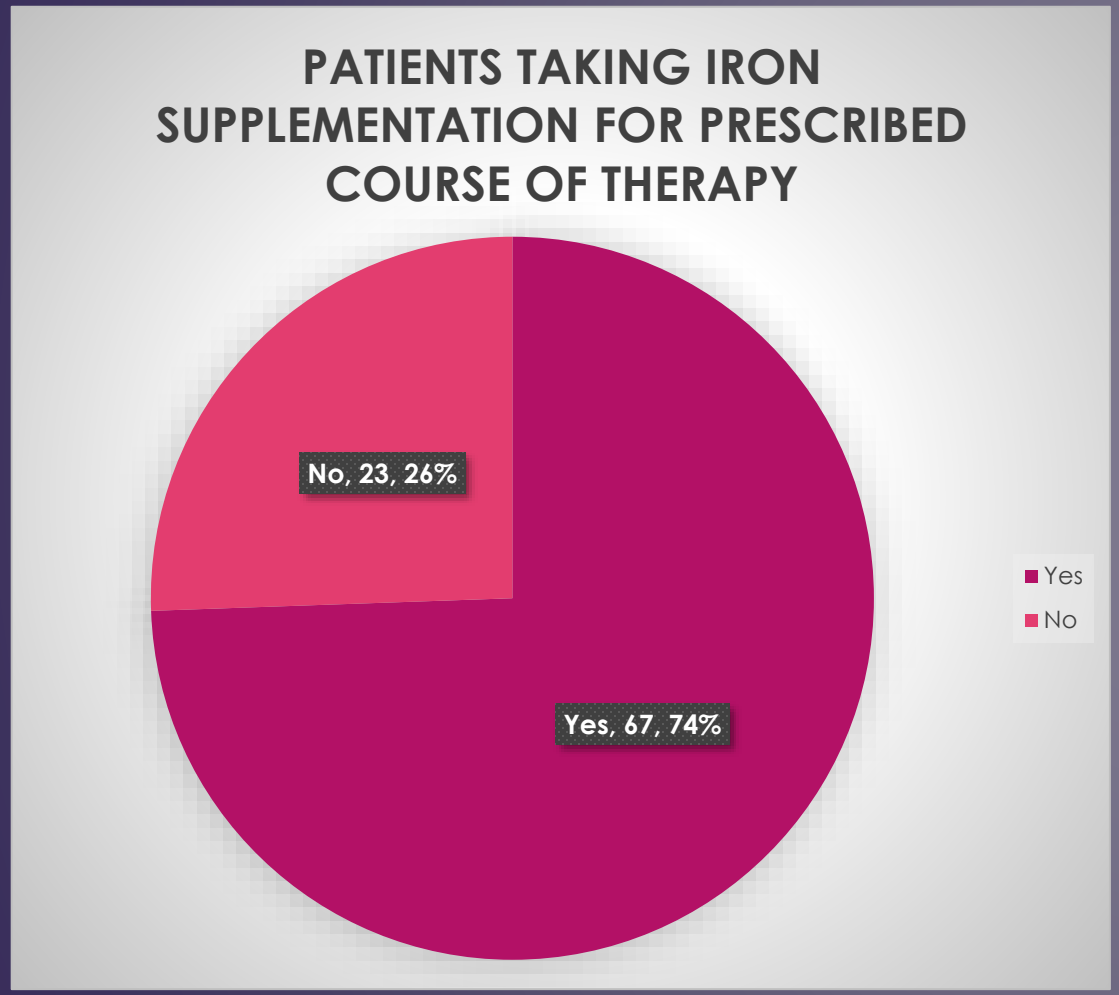


Fig 7: Depiction of patients taking iron

7. Do you take Iron supplement for the prescribed course of therapy?

Interpretation: From fig 7 It can be noted that 67 patients take iron supplementation for prescribed course of therapy , while rest of the respondents don't take.

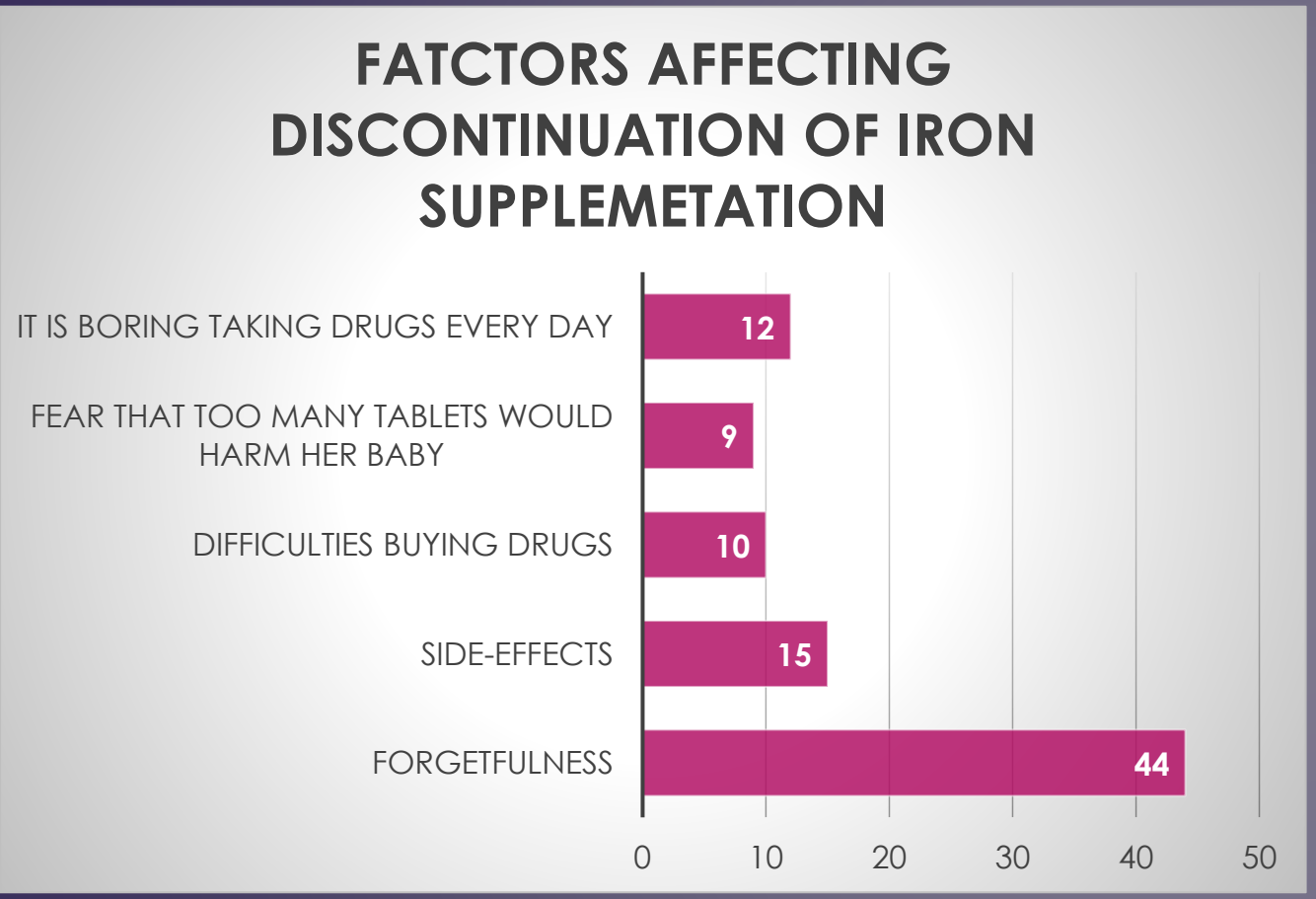


Fig 8: Depiction of factors contributing to discontinuation of iron supplementation.

8. Why do you discontinue iron supplementation?

Interpretation- From fig 10 it was observed that forgetfulness is the main and foremost reason for discontinuation of supplementation followed by side effects , it is boring to take drugs , difficulties in buying drugs and the least contributing factor is fear that too many tablets would harm her baby.

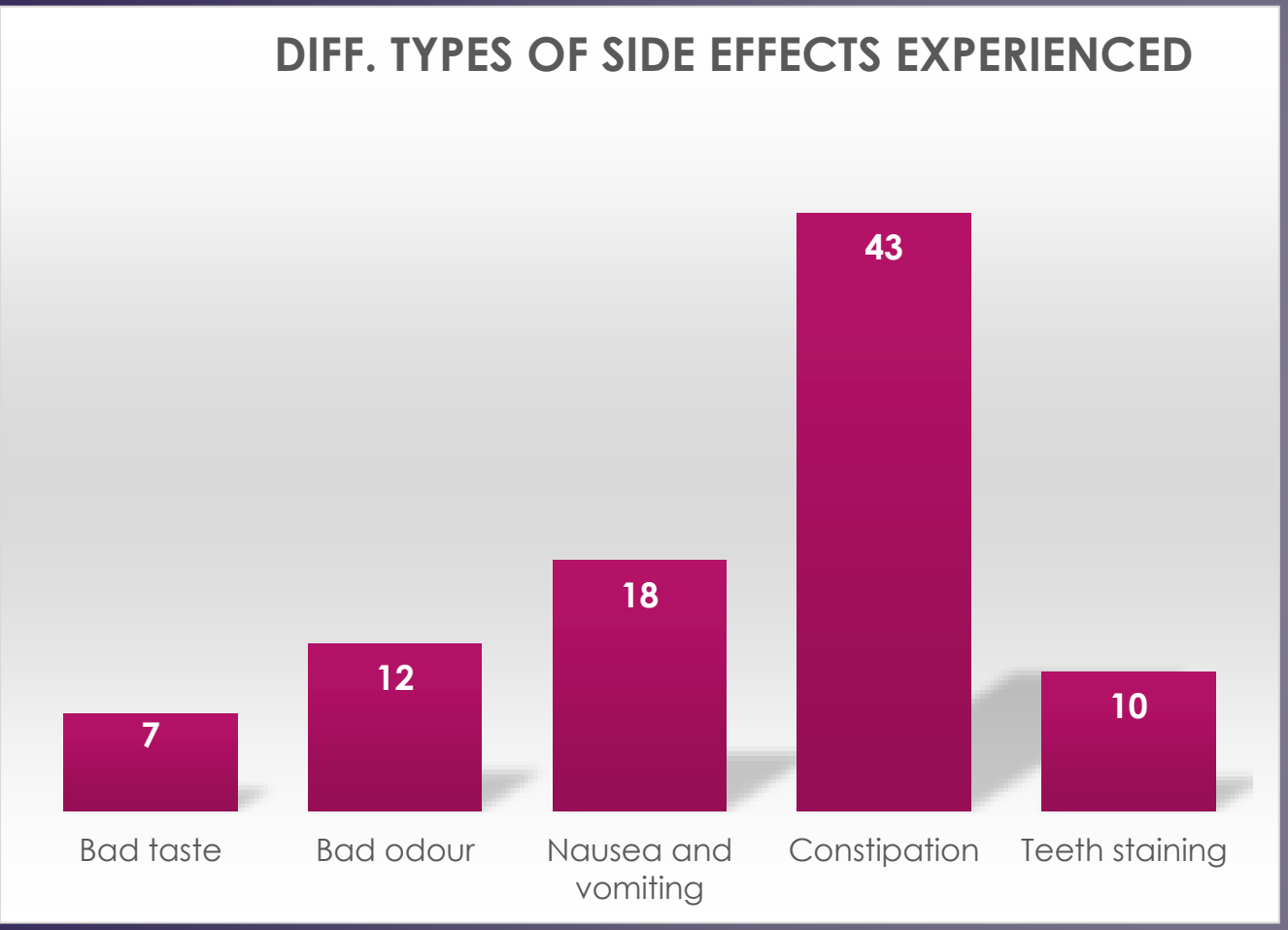


Fig 9: Depiction of different types of side effects experienced by patients

9. What kind of side effects you experience?

Interpretation: from fig 9 it was observed that most of the patients has experienced constipation followed by nausea and vomiting , bad odour, teeth staining and then bad taste.

CONCLUSION

- 60% of respondents prefer ferrous ascorbate as the most preferred molecule in their prescription of iron supplementation.
- 40% respondents prefer ferrous ascorbate because of its efficacy and 37% repondents prescribe this molecule because it is backed and supported by scientific data.
- 48% respondents because they forget to take the medicines depicts the major reason which leads to discontinuation of iron supplementation.

RECOMMENDATION

Corona Remdies is having oral iron supplementation reach and they need to enter into liquid iron market .so based on this study I might want to suggest :

- Gynecologists are favoring a wide range of definition in their solution , so their choice of entering in fluid iron market as indicated by my examination is by all accounts great .
- From gynecologists prefence of endorsing ferrous ascorbate molecule and the components which impact them to recommend this atom will assist us with shaping our methodology dependent on this.
- Conditions in which they endorse fluid iron will assist us with planning our USP for the forthcoming item.
- On the premise of the results experienced by the patients it will assist us with classifying them and in like manner dispatch new SKU for patients with GI intoleraance.
- In iron fluid market the vast majority of the gynecologists are inclining toward Iron Isomaltoside , so we ought to likewise go with this particle.

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