

Prescription medication use in a chiropractic training clinic: Cause for vigilance



Barry Draper*, Nereo Rigoni

RMIT University, Department of Health Sciences, Plenty Rd, Bundoora 3083, Australia

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ABSTRACT

Purpose: The concurrent use of CAM therapies with traditional allopathic medical practice is increasing. This study investigates the concurrent use of prescription medication in patients attending a chiropractic student teaching clinic for the first time. The need for practitioners to be aware of the side effects of prescribed medication patients are using is discussed.

Methods: Cross-sectional study of 1008 new patient consultations at a university chiropractic teaching clinic.

Results: 549 prescription medications being used by 330 patients were included in the analysis. A total of 104 individual medications were identified of which 69 listed headache as a potential side effect of their use. 57 of 116 (49%) of patients seeking care for the treatment of headache were concurrently using these medications.

Conclusions: Patients presenting to the university chiropractic teaching clinic may be seeking care for symptoms attributed to prescription medication. The requirement that practitioners be aware of the side effects of prescribed medication patients are using is raised.

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1. Introduction

As the utilisation of CAM within the general population continues to rise, much attention has been directed towards issues potentially arising as a result of the co-management of patients by CAM and mainstream providers. One issue concerns the potential for CAM therapies to interfere with the efficacy of prescribed pharmaceutical agents or produce adverse effects, when undertaken concurrently with those agents [1,2].

Less aired is the possibility that the side effects of such medications may be responsible for the symptoms for which patients seek care from CAM providers such as chiropractors, potentially resulting in the unnecessary use of therapy by these practitioners.

This study details the self-reported use of prescribed pharmaceutical agents by patients seeking treatment for headache at a chiropractic student teaching clinic. The ramifications that a patient may receive chiropractic care for the relief of headache symptoms which may be attributed to the use of such medications are discussed.

2. Methods

A retrospective, cross sectional analysis of the files of all new patients presenting to the chiropractic section of the Royal Melbourne Institute of Technology (RMIT) University Complementary Medicine teaching clinic during 1st January 2014–31st December 2014 was conducted. Students in the 4th and 5th years of their chiropractic education attend the clinic and provide care to members of the general community under the supervision of registered chiropractic practitioners acting as clinical supervisors. All new patients are asked to list the symptoms for which they are seeking care, and to list the brand names of all medication which has been prescribed to them by a medical practitioner and which they are using at the time of the first consultation.

Data derived through perusal of this form was placed into a Microsoft Excel spreadsheet and recorded as patient age, gender, symptom/s for which the patient was seeking care and prescribed medication as reported by patients. Non-prescribed, over the counter medication, vitamins and herbal supplements were excluded from the initial analysis. Brand name medications were cross-referenced with the drugs.com database to identify the generic medication name. Medications that could not be identified or was not listed at the internet site drugs.com [3] were excluded

* Corresponding author.

E-mail addresses: barry.draper@rmit.edu.au (B. Draper), nereo.rigoni@rmit.edu.au (N. Rigoni).

from further analysis (n 21). In addition, instances where a generic name eg “painkillers” was listed were also excluded from further analysis (n20). An exception was made to listings indicating use of the oral contraceptive pill. The decision to retain this medication in the analysis was based on perusal of the side effects of each of 181 oral contraceptives listed by brand name at drugs.com; this indicating that headache is a potential side effect of use in all 181 listings.

Using the internet site drugs.com as reference, the listed side effects of all remaining medications were then recorded. Those medications listing the potential side effect of headache were noted and matched with those patients who reported headache as a symptom for which they were seeking care. Basic analysis linking demographic variables against medications listing headache as a potential side effects of their use, was then conducted.

3. Results

1008 initial patient consultations were reported across the calendar year 1st January 2014–31st December 2014. 360 of 1008 new patients (35.7%) reported using prescription medication at the time of consultation. The demographic features of those patients are exhibited in Table 1.

The 360 patients listed a total of 590 instances of medication use. 21 medication listings were excluded from further analysis as the medication could not be identified at the website drugs.com. A further 20 medication listings were excluded because a generic description, for example “painkiller” was listed. Medications listed as “the pill”, “oral contraceptive” “OCP” or “oral contraceptive pill” were not excluded from further analysis for reasons listed previously. The remaining 549 medication listings were being used by 348 patients with 104 individual medications being identified. See Fig. 1 which summarizes medication use by patients.

The demographic features of those patients using medication and remaining in the analysis are presented in Table 2.

3.1. Multiple medication

132 of 348 patients (40%) were using more than one prescription medication and 52 of 75 patients over 61 years of age were using prescribed medication (69%). 75% of those using prescribed medication aged 61 and over, were also using more than one medication as indicated in Table 3.

3.2. Headache

116 of 1008 patients attending the clinic sought care for the treatment of headache (11.5%). The demographic features of these patients are featured in Table 4.

3.3. Headache and medication

82 of 116 seeking care for headache were using medication and 36 of these patients were also using multiple medication. The

Table 1
Demographic features of patients attending the clinic.

Age	0–20		21–40		41–60		60+			
Gender	F	M	F	M	F	M	F	M		
Medication users	237	123	48	19	107	47	53	30	27	
% of total	(360)	(36%)								
Non medication users	287	361	60	62	154	231	68	54	8	11
% of total	(648)	(64%)								
Patients attending	524 (52%)	484 (48%)	108	91	268	281	111	74	37	38
Total	1008		199		549		185		75	

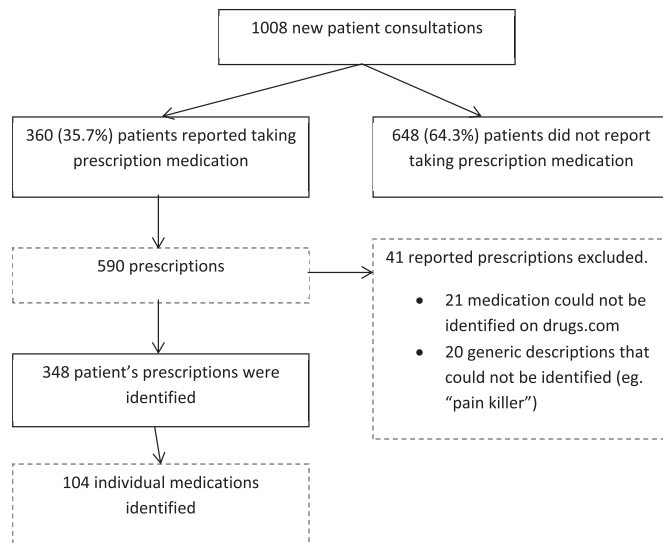


Fig. 1. Summary of medication use.

Table 2
Patients using medication.

	Total	0–20	21–40	41–60	60+
Female	227 (65%)	46	105	50	26
Male	121 (35%)	19	46	30	26
Total	348	65	151	80	52

Table 3
Patients using multiple medication.

	Total	0–20	21–40	41–60	60+
Female	77	4	25	27	21
Male	55	3	13	21	18
Total	132	7	38	48	39

Table 4
Patients reporting headache as a symptom.

	Total	0–20	21–40	41–60	60+
Female	84	12	42	22	8
Male	32	1	17	7	7
Total	116	13	59	29	15

demographic features of these patients are presented in Tables 5 and 6.

3.4. Medication listing headache as a potential side effect

Of the 104 individual medications listed, 69 were identified as having headache as a potential side effect of their use by reference

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