



Guideline Adherence and Prescribing Trend of Antihypertensive Medications among Tertiary Hospital Physicians in Lahore, Pakistan

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SUMMARY. Hypertension is a chronic medical condition while its management depends on rationale use of anti-hypertensive drugs. The objective of current study was to evaluate doctor's adherence to Joint National Committee guidelines. Prescriptions written for 80 hypertensive patients were collected. On second visit, patient's blood pressure (BP) was related to its prescription. The mean age and weight of patients was 54.03 ± 10.33 years and 67.98 ± 11.16 kg respectively. Majority patients 36 (45%) had stage 2 hypertension. Of the total, 44 (55%) were males, 64 (80%) were married and 38 (47.5%) were employed. Diabetes and ischemic heart disease (IHD) were the most common co-morbidities. Combination therapy was used in 52 (65%) patients while 70 (87.5%) patients achieved controlled blood pressure on their second visit. Angiotensin converting enzyme inhibitors (ACEIs) or angiotensin receptor blockers (ARBs) remained preferred in diabetic patients while beta blockers (BBs) were choice of drug in IHD patients.

RESUMEN. La hipertensión es una condición médica crónica cuyo tratamiento depende del uso racional de los medicamentos anti-hipertensivos. El objetivo del presente estudio fue evaluar la adherencia del médico a las directrices del Comité Nacional Conjunto. Se analizaron recetas de 80 pacientes hipertensos. En la segunda visita, la presión arterial del paciente (BP) estaba relacionada con la prescripción. La edad media y el peso de los pacientes fue de $54.03 \pm 10,33$ años y 67.98 ± 11.16 kg, respectivamente. La mayoría de los pacientes (36, 45%) tenían la hipertensión en etapa 2. Del total, 44 (55%) eran varones, 64 (80%) estaban casados y 38 (47,5%) estaban empleados. La diabetes y la enfermedad cardíaca isquémica (IHD) fueron las comorbilidades más comunes. La terapia de combinación se utilizó en 52 (65%) pacientes, mientras que 70 (87,5%) pacientes lograron controlar la presión arterial en su segunda visita. Los inhibidores de la enzima convertidora de angiotensina (ACEIs) y los bloqueadores de los receptores de angiotensina (ARB) permanecieron preferidos en los pacientes diabéticos, mientras que los beta bloqueantes (BBs) eran el fármaco de elección en pacientes con IHD.

KEY WORDS: adherence, co-morbidities, hypertension, Joint National Committee, prescribing practices.

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