BORROWING AND SHARING PRESCRIPTION MEDICATION AMONG PATIENTS AT DIFFERENT STAGES OF CHRONIC KIDNEY DISEASE

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Introduction and Aims: Prescription medication borrowing and sharing among the patients and their family members or friends is a common but still scarcely investigated practice that can lead to detrimental health outcomes including adverse drug reactions and ineffective therapy due to incorrect dosage or drug regimen. The patients with chronic kidney disease provide a unique opportunity to study such behaviors due to their high pill burden and frequent contact with the medical personnel. These patients are regularly informed about increased risk of drug side-effects related to their disease. These factors may influence the need for borrowing and sharing prescription medication. The aim of the study was to compare the pattern of prescription medication borrowing and sharing among adult patients with end-stage renal disease on chronic dialysis and non-dialysis patients with chronic kidney disease to the subjects without normal renal function.

Methods: Study group comprised 304 patients (153 men and 151 women), age 18-85 years, who were under the care of tertiary nephrology center and 102 reference subjects with normal kidney function who regularly take prescription medication due to non-kidney disease. Prescription sharing and borrowing practices were compared between the three groups based on a standardized questionnaire.

Results: Among hemodialysis patients 7.7% borrowed and 12.2% shared prescription medication with their family members or friends, compared to 9.7% and 8.3%, respectively, among non-hemodialysis patients with chronic kidney disease. Control subjects were significantly more likely to borrow and share drugs (20.4% and 19.4%, respectively). Hemodialysis (28%) and CKD (36.6%) patients tended to return to previously maintained therapy without medical consultation slightly less often compared to control subjects (34.4%). Analgesics, antihypertensives and antibiotics were the drugs most often borrowed (56.5%, 26.1%, 26.1%, respectively) and shared (70.6%, 44.1%, 14.7%, respectively) in all studied groups. Presence of concomitant chronic disease and following medical information in the Internet were significantly associated with the practice of drug borrowing. The patients who positively evaluated their general health condition were significantly more likely to borrow prescription medications. Gathering medical information in the Internet was more common among patients with chronic kidney disease who shared their prescription drugs compared to those who did not share (65.7% vs. 34.9%, respectively).

Conclusions: Prescription medication borrowing and sharing is a common behaviour in patients with chronic kidney disease more often occurring among non-hemodialysis patients. “Doctor Google” phenomenon seems to be the factor mostly affecting the incidence of borrowing and sharing drugs.

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