Knowledge, Attitude, and Practice towards Over-the-Counter Drugs (OTC) use among adult population in Jeddah, Saudi Arabia

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Abstract

Background: Despite all their benefits, improper use of medicines can bring potential health hazards. Though it was previously considered unnecessary, responsible self-medication is regarded as an essential aspect of self-care.

Objectives: To explore the Knowledge, Attitude, and Practice on Over-the-Counter Drugs (OTC) use, and its determinants among the adult population in Jeddah, Saudi Arabia

Method: It was a cross sectional study, where data were collected through online Google form to collect information on 503 subjects; where the sample type was a convenient one. A predesigned questionnaire was used to collect information on personal, sociodemographic and clinical information, as well as on the knowledge, attitude and practice on use of OTC drugs.

Statistical analysis: SPSS version 24 was used, and the Subroutine Chi square test of significance was used. The level of significance was 0.05.

Results: The majority of the enrolled subjects (83.3%) used OTC drugs (419/503). About 60% were under the age of 40 years old. Lower educational level, and increased salary over 10,000 SR were significantly associated with the use of OTC

drugs (p < 0.05). About 80% were advised on the use of the OTC drugs by pharmacists; and 53.7% read about indications, side effects and contraindications of the OTC drugs before their use. About 80% used them for emergency; and 71% used them for treatment of mild illnesses. About 90% used them because of their past experience with their use, and 30% used them to avoid consultation fees. Painkillers were used by 97.4% of the subjects; in addition, cough suppressants (71.8%), dietary supplements (69.2%), antihistamine (40.3%) and digestive and laxative drugs (48.9%) were used. About 30%, considered that OTC drugs were cheaper and convenient. About 45% of the subjects considered that OTC drugs were safe and effective. About 80% considered it was wrong. to use the OTC drugs with other medications

Conclusion: In Saudi Arabia, OTC medications can easily be obtained at pharmacies for the purpose of self-treatment. Approximately 83% of Jeddah survey respondents reported that they had used OTC drugs. The most commonly used OTC medications were antipyretics, analgesics and anti-inflammatory drugs, and these drugs were more commonly used by respondents aged <40 years than those aged ≥40 years. The awareness level of the survey respondents on the side effects resulting from the use of OTC medications was relatively low.

Keywords: OTC drugs, KAP, Saudi Arabia, mild illnesses

Introduction

The use of over the counter (OTC) drugs is highly common in both developed and developing countries (1). According to the SFDA, paracetamol, antacid, antihistamine, and laxatives, are available as OTC in Saudi Arabia (2). The irrational use of OTC drugs leads to increased morbidity and deterioration of the quality of life and increasing healthcare costs (1). A patient with a milder illness, such as a fever, cold/cough, diarrhea, indigestion, or wound infection, may receive pharmaceutical advice from friends, relatives, or strangers, in the manner of a healthcare professional, particularly, regarding scheduled medications (3).

It is reported that, the use of the OTC drugs was common in older persons and among those who lived independently; it was also commonly used when children get simple illnesses like a mild headache, allergies, fever, flatulence, or indigestion (4). A study of 1596 students in Saudi Arabia, Riyadh who used OCT during exams revealed that 85.2 % were aware that long-term usage of OTC medicines such as aspirin, ibuprofen, and paracetamol can cause major negative effects. Furthermore, 60.7% of respondents agreed that simple access to OTC medications was a possible explanation for their use (5). Females usually take OTC drugs for dysmenorrhea, and headache, pain, influenza, and for allergy (6). A previous study revealed that friends or family, internet businesses, and pharmacies were the sources of OTC medicines. (7). In Ethiopia, a study revealed that the main OTC drugs used were antibiotics, analgesics, appetite suppressants, anti-emetics and anti-influenzas (8, 9). A previous study in a Malaysian urban area reported that, self-prescription was found to be more convenient, easier to access, and time-saving, than consulting a doctor (9). A study was conducted in Qassim province, Saudi Arabia, which found that the majority of the participants read the drug brochures and followed the directions for usage (10). A study, in Jazan, showed that over 30% of those who self-medicate was because access to hospitals is difficult, while a tiny fraction blamed excessive expenses (6). A study in Japan revealed that Dietary supplements and over-the-counter medications were commonly used by older patients with chronic conditions, and their use was linked to female sex, gender education, and affluence (11). According to a study conducted in Poland, the use of OTC was more widespread in those with secondary and higher education than in those with primary education (12). The aim of the present study was to explore the knowledge, attitude and practice of the population in Jeddah, Saudi Arabia, about the use of OCT drugs.

Subjects and Methods

It was a cross sectional study, and the sampling method was a non-probability convenient one. Sample size was determined using G*power software, where $\alpha=0.05,$ Power = 0.95 effect size = 0.3, and degree of freedom= 5 (13). The minimal sample size required was 194 subjects; thus, 503 subjects were enrolled in the present study. Data were collected using predesigned questionnaire which provided information on personal, sociodemographic and clinical aspects of the participants, and information, also, on the knowledge, attitude and practice towards OTC use.

Data were analyzed using SPSS version 22, and Chi square test of significance. Level of significance for the study was 0.05.

Availability of the data: the row data are available at the research center of ISNC and all results of the data were included in the paper.

Results

Table 1 shows the relationship between use of OTC drugs and socio-demographic and clinical characteristics of the studied subjects. The total number of subjects studied was 503; among them 419 (83.3%) used OTC drugs, while 84 (16.7%) subjects didn't. The majority of those used OTC drugs were under the age of 40 years old (59.9%). Age, gender, nationality and occupation were not significantly associated with use of OTC drugs (p > 0.05). Lower educational level, and increased salary over 10,000 SR were significantly associated with the use of OTC drugs (p < 0.05). History of having chronic diseases was not significantly associated with use of OTC drugs (p > 0.05). Use of the OTC drugs was irrelevant to having health insurance (p > 0.05).

Table 2 reveals the distribution of the subjects using OTC drugs according to gender and source of advice on the use of OTC drugs and reason for their use. The majority of the subjects were advised on the use of the OTC drugs by pharmacists (80.2%); however, 58.9% were advised by friends or members of patients' families, or used them after searching the net on management of symptoms (40.1%), or through using old prescriptions (48.4%). No significant differences were found between males and females in the previous findings (p > 0.05). A minority of subjects depended on advertisements to use OTC drugs (16.2%); it was significantly more common in females than males (p < 0.021). Among the studied subjects only 53.7% read about indications, side effects and contraindications of the OTC drugs before their use; this was significantly more common among females (p < 0.002). However, great proportions of the subjects never, or sometimes read about this information before their use (6.2% and 40.1% respectively).

The majority of the subjects used the OTC drugs for emergency situations (81.1%), and it was significantly more common among females than males (p < 0.05). A large proportion of subjects admitted that they used them for treatment of mild illnesses (70.9%); and this was similar in both males and females (p > 0.05).

The vast majority of the subjects used the OTC drugs because they had past experience with their use for certain illnesses (90.2%); this was similar among males compared to females (p > 0.05). About one third of the subjects used the OTC drugs to avoid consultation fees (32.2%). This was similar between males and females (p > 0.05).

Table 3 displays distribution of the studied subjects by gender and type of the OTC drug used. Almost all subjects (97.4%), used Painkillers e.g. paracetamol and NSAIDs as OTC drugs; this was similar in both males and females (p>0.05). Cough suppressants were used by 71.8% of the subjects and this was significantly more common in males compared to females (p < 0.001). On the other hand dietary

supplements was used by 69.2% of the subjects; it was significantly more common among females compared to males (P < 0.001). Antihistamine (40.3%) and digestive and laxative drugs (48.9%), were similarly used by males and females (p> 0.05).

Table 4 reveals distribution of the subjects using OTC drugs according to gender and Knowledge about OTC drug use. About one third of the subjects (29.8%), considered that OTC drugs were cheaper and convenient. It was significantly higher among males compared to females (p <0.001). About 45% of the subjects considered that OTC drugs were safe and effective; this was similar in both males and females (p >0.05).

The majority of the subjects did not consider it right to take the OTC drugs which had an expired date. About 80.0% considered it wrong to use the OTC drugs with other medications. The largest proportion of the subjects (47.0%), preferred to store

Table 1: Distribution of studied subjects by OTC drug use and socio-economic and health characteristics

| | | OTC drug use | | | | Total | | |
|--|--|--------------|--------|----|-------|-------|-------|------------|
| | | YES | | NO | | | | X2 |
| Variable | Categories | N | % | N | % | N | % | (p- value) |
| Age | 40 years or less | 242 | 58% | 58 | 69% | 300 | 59.9% | (4.313) |
| | 41 - 60 | 149 | 35.7% | 24 | 28.6% | 173 | 34.5% | P< 0.116 |
| | 61 + | 26 | 6.2% | 2 | 2.4% | 28 | 5.0 % | |
| Sex | Male | 177 | 42.2% | 41 | 48.8% | 218 | 43.3% | (1.228) |
| 127-127-127-127-127-127-127-127-127-127- | Female | 242 | 57.8% | 43 | 51.2% | 285 | 56.7% | P< 0.268 |
| Nationality | Saudi | 380 | 90.74% | 77 | 91.7% | 457 | 90.9% | (0.080) |
| | Non-Saudi | 39 | 9.3% | 7 | 8.3% | 46 | 9.1% | P< 0.777 |
| Qualification | >University | 104 | 24.8% | 34 | 40.5% | 138 | 27.4% | (8.614) |
| | <university< td=""><td>315</td><td>75.2%</td><td>50</td><td>59.5%</td><td>365</td><td>72.6%</td><td>P< 0.003</td></university<> | 315 | 75.2% | 50 | 59.5% | 365 | 72.6% | P< 0.003 |
| Occupational | Unemployed | 214 | 51.1% | 38 | 45.2% | 252 | 50.1% | (0.953) |
| | Manual | 205 | 48.9% | 46 | 54.8% | 251 | 49.9% | P<0.329 |
| Salary per month | 4000 or less | 137 | 32.7% | 24 | 28.6% | 161 | 32% | (7.190) |
| in SR | 4000-10000 | 101 | 24.1% | 32 | 38.1% | 133 | 26.4% | |
| | > 10000 | 181 | 43.2% | 28 | 33.3% | 209 | 41.6% | P< 0.027 |
| Do you have | Yes | 247 | 58.9% | 42 | 50% | 289 | 57.5% | (2.293) |
| health insurance | No | 172 | 41.1% | 42 | 50% | 214 | 42.5% | P< 0.130 |
| Do you suffer from | Yes | 102 | 24.3% | 14 | 16.7% | 116 | 23.1% | (2.324) |
| chronic disease | No | 317 | 75.7% | 70 | 83.3% | 387 | 76.9% | P< 0.127 |

Table 2: Distribution of subjects using OTC drugs according to gender and source of advice on the use of OTC drugs and reason for its use

| | | OTC d | lrug use | Total | X2 |
|--|------------|-----------|-----------|-----------|------------|
| | | Male | Female | | (p- value) |
| Variable | Categories | N % | N % | N % | |
| Advised by friends/ family | Yes | 110 62.0% | 137 56.6% | 247 58.9% | 1.294 |
| | No | 67 37.9% | 105 43,4% | 172 41.1% | (<0.150) |
| Advised by a | Yes | 143 80.8% | 193 79.8% | 336 80.2% | .069° |
| pharmacist | No | 34 19.2% | 49 20.2% | 83 19.8% | (< 0.446) |
| Search the symptoms | Yes | 66 37.3% | 102 42.1% | 168 40.1% | 1.006° |
| online | No | 111 62.7% | 140 57.9% | 251 59.9% | (< 0.184) |
| Using old prescription | Yes | 75 42.4% | 128 52.9% | 203 48.4% | 4.530° |
| | No | 102 57.6% | 114 47.1% | 216 51.6% | (< 0.021) |
| Known drug from | Yes | 38 21.5% | 30 12.4% | 68 16.2% | 6.189° |
| advertisement | No | 139 78.5% | 212 87.6% | 351 83.8% | (< 0.010) |
| Read the list of | Never | 17 9.6% | 9 3.7% | 26 6.2% | 12.853° |
| indication | Sometime | 81 45.8% | 87 36.0% | 168 40.1% | (< 0.002) |
| contraindication doses information | always | 79 44.6% | 146 60.3% | 225 53.7% | |
| For emergency | Yes | 136 76.8% | 204 84.3% | 340 81.1% | 3.720° |
| situations | No | 41 23.2% | 38 15.7% | 79 18.9% | (< 0.036) |
| For mild illness | Yes | 122 68.9% | 175 72.3% | 297 70.9% | .568 |
| | No | 55 31.1% | 67 27.7% | 122 29.1% | (< 0.259) |
| Have prior experience | Yes | 165 93.2% | 213 88.0% | 378 90.2% | 3.136° |
| with illness or with the medication | No | 12 6.8% | 29 12.0% | 41 9.8% | (< 0.053) |
| To avoid consultation | Yes | 64 36.2% | 71 29.3% | 135 32.2% | 2.177⁵ |
| fees | No | 113 63.8% | 171 70.7% | 284 67.8% | (< 0.086) |

Table 3: Distribution of studied subjects by gender and type of the OTC drug used.

| | | OTC d | lrug use | Total | Х2 |
|--|------------|-----------|-----------|-----------|-------------------|
| | | Male | Female | | |
| Variable | Categories | N % | N % | N % | (p- value) |
| Dietary supplements and vitamins | Yes | 108 61.0% | 182 75.2% | 290 69.2% | 9.660 (<0.001) |
| | No | 69 39.0% | 60 24.8% | 129 30.8% | |
| Pain killer like paracetamol or NSAIDS | Yes | 172 97.2% | 236 97.5% | 408 97.4% | .048 |
| | No | 5 2.8% | 6 2.5% | 11 2.6% | (<0.530) |
| Cough suppressants | Yes | 142 80.2% | 159 65.7% | 301 71.8% | 10.659 |
| | No | 35 19.8% | 83 34.3% | 118 28.2% | (<0.001) |
| Antihistamines | Yes | 78 44.1% | 91 37.6% | 169 40.3% | 1.775 |
| | No | 99 55.9% | 151 62.4% | 250 59.7% | (<0.109) |
| Digestive and laxative | Yes | 92 52.0% | 113 46.7% | 205 48.9% | 1.142 |
| | No | 85 48.0% | 129 53.3% | 214 51.1% | (<0.166) |

Table 4: Distribution of subjects using OTC drugs according to gender and Knowledge about their use

| | | OTC drug use | | | | Total | | |
|--|--|--------------|-------|--------|-------|-------|-------|------------------------|
| | | Male | | Female | | | | X2 |
| Variable | Categories | N | % | N | % | N | % | (p- value) |
| OTC drugs are cheaper and | Yes | 62 | 35.0% | 63 | 26.0% | 125 | 29.8% | 13.776 (< 0.001) |
| convenient | No | 50 | 28.2% | 46 | 19.0% | 96 | 22.9% | (=0.001) |
| | I don't know | 65 | 36.7% | 133 | 55.0% | 198 | 47.3% | 0 201 |
| All OTC drugs are | Yes | 88 | 49.7% | 102 | 42.1% | 190 | 45.3% | 3.029 |
| safe and effective | No | 34 | 19.2% | 46 | 19.0% | 80 | 19.1% | (< 0.220) |
| | I don't know | 55 | 31.1% | 94 | 38.8% | 149 | 35.6% | A |
| OTC drugs could be | Yes | 9 | 5.1% | 8 | 3.3% | 17 | 4.1% | .886 |
| taken after expiry | No | 154 | 87.0% | 216 | 89.3% | 370 | 88.3% | (< 0.642) |
| date | I don't know | 14 | 7.9% | 18 | 7.4% | 32 | 7.6% | |
| One can use OTC | Yes | 39 | 22.0% | 51 | 21.1% | 90 | 21.5% | 3.764 |
| drugs with other | No | 102 | 57.6% | 122 | 50.4% | 224 | 53.5% | (40.150) |
| medication | I don't know | 36 | 20.3% | 69 | 28.5% | 105 | 25.1% | (< 0.152) |
| Where do you | Bedroom | 81 | 45.8% | 116 | 47.9% | 197 | 47.0% | 1.559 |
| usually store the | Medication box | 23 | 13.0% | 32 | 13.2% | 55 | 13.1% | N. December Street, As |
| OTC drugs | Kitchen | 3 | 1.7% | 8 | 3.3% | 11 | 2.6% | (< 0.669) |
| 10/04/ | Refrigerator | 70 | 39.5% | 86 | 35.5% | 156 | 37.2% | |
| For which | Fever | 4 | 21.1% | 5 | 15.6% | 9 | 17.6% | 4.503 |
| illnesses do you | Headache | 11 | 57.9% | 20 | 62.5% | 31 | 60.8% | A. |
| usually go for OTC | Dysmenorrhea | 0 | 0.0% | 2 | 6.3% | 2 | 3.9% | (< 0.342) |
| drugs | Cough | 3 | 15.8% | 1 | 3.1% | 4 | 7.8% | |
| | Abdominal cramps | 1 | 5.3% | 4 | 12.5% | 5 | 9.8% | |
| What do you do if the drugs show | Immediately discard the drugs | 169 | 95.5% | 237 | 97.9% | 406 | 96.9% | 2.704 |
| change in shape odour or colour? | Continue using until it expires | 7 | 4.0% | 5 | 2.1% | 12 | 2,9% | (< 0.259) |
| | Continue using even after it expires | 1 | 0.6% | 0 | 0.0% | 1 | 0.2% | |
| When someone | Yes | 70 | 39.5% | 125 | 51.7% | 195 | 46.5% | 14.024 |
| goes to the | No | 77 | 43.5% | 63 | 26.0% | 140 | 33.4% | |
| pharmacy, they should bring all medication | I don't know | 30 | 16.9% | 54 | 22.3% | 84 | 20.0% | (< 0.001) |

Discussion

A drug is a substance intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease. Prescription drugs are prescribed by a doctor; bought at a pharmacy; prescribed for and intended to be used by one person, and regulated by the FDA through the New Drug Application (NDA) process. On the other hand OTC drugs are drugs that do not require a doctor's prescription, are bought off-the-shelf in stores, and regulated by the FDA through OTC Drug monographs (14). Use of the OT drugs is common among the population of Saudi Arabia (10). This study was conducted to assess the Knowledge, Attitude, and Practice (KAP) towards OTC drugs use among the adult population in Jeddah, Saudi Arabia. In the present study the prevalence of use of OT drugs (without doctors' prescriptions) was 83.3%. This was in line with previous studies conducted in Saudi Arabia, and globally (10, 15, 16). A previous report from Japan revealed that dietary supplements and over-the-counter medications were commonly used by older patients with chronic conditions, and their use was linked to female sex, greater education, and affluence (11). However, in the present study age, gender, nationality and occupation were not significantly associated with use of OTC drugs. On the other hand, lower educational level, and increased salary over 10,000 SR were significantly associated with the use of OTC drugs. This was in line with findings from a previous study (12).

In the present study, the pharmacists were the main source for guiding the people on use of OTC drugs. This was in line with a previous study (7). Almost half of the subjects who use OTC drugs do not read information about the OTC drugs they use. Another study revealed that 20% do not read this information (10). The OTC drugs were used mainly for management of mild illnesses, and emergencies. This is inconsistent with other studies (4. 10, 11). The present study revealed that about one third of the subjects used the OTC drugs to avoid the consultation fees. This is similar to a previous study conducted in Jazan, Saudi Arabia (7). In the present study, almost all subjects (97.4%), used painkillers e.g. paracetamol and NSAIDs; cough suppressants were used by 71.8% of the subjects and this was significantly more common in males compared to females (p < 0.001). On the other hand dietary supplements were used by 69.2% of the subjects; it was significantly more common among females compared to males (P < 0.001). Antihistamine (40.3%) and digestive and laxative drugs (48.9%), were similarly used by males and females (p> 0.05).

This trend was similar to findings from other studies (7, 10, 16). In the present study, about one third of the subjects, considered that OTC drugs were cheaper and convenient. It was significantly higher among males compared to females (p <0.001). This is in line with previous studies from regional and international studies (1, 4). The simple access to OTC medications is a possible explanation for their use (1). In addition, self-prescription was found to be more convenient, easier to access, and more time-saving

than consulting a doctor in a study with 364 participants from Malaysian urban areas (4). In the present study almost half of the subjects considered that OTC drugs were safe and effective. This was in line with another study (5). However, in another study in Saudi Arabia that involved high school and university students only, 85.2% were aware that long-term usage of OTC medicines such as aspirin, ibuprofen, and paracetamol could cause major negative effects (1). In the present study, the majority of the subjects did not consider it right to take the OTC drugs which had an expired date or if they had changes in odour or colour. This is in line with findings from a previous study (8). In the present study almost half of the participants preferred to store the OTC drugs in the bed room. This is in line with findings from a previous study (8).

Limitations: This study has some limitations which must be considered when interpreting the data. The first limitation of this study is the representativeness of the survey respondents, as the study was conducted online. The results from this study may have overestimated the perspectives of the rest of the population because we excluded subjects who did not use the internet.

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Conclusions: In Saudi Arabia, OTC medications can easily be obtained at pharmacies for the purpose of self-treatment. Approximately 83% of Jeddah survey respondents reported that they had used OTC drugs. The most commonly used OTC medications were antipyretics, analgesics and anti-inflammatory drugs, and these drugs were more commonly used by respondents aged <40 years than those aged ≥40 years. The awareness level of the survey respondents on the side effects resulting from the use of OTC medications was relatively low. Based on these results, we believe this study can be pivotal in identifying starting points for interventions by health care professionals such as doctors, pharmacists and other health care workers. In particular, pharmacists should inform their consumers of possible adverse effects from OTC medications when counseling them. However, information about OTC medications should be tailored to consumers' needs, with consideration of his or her circumstances.

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