



INTRODUCING STANDARD TREATMENT SCHEDULE THROUGH
FACE-TO -FACE EDUCATION: A WAY TO IMPROVE
PRESCRIBING PRACTICES AT BRAC HEALTH CENTERS



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ABSTRACT

Prescribers are helmsmen and focal person for improving rational prescribing. The use of drugs in the treatment of childhood diarrhea will be investigated by looking through retrospective secondary data at BRAC Health Centers (BHC). These are privately run health facilities situated in the rural areas of Bangladesh for delivering curative care along with their community based preventive health services to the people who do not have easy access to the government health care delivery system. No study has been done yet in BRAC setting to measure the condition of rational use of drugs. Appropriate treatment of childhood diarrhea will be emphasized by introducing standard treatment schedule (STS) on diarrhea through face-to-face education to the prescribers of BHCs.

Standard treatment schedule is familiar in the organizational setting. There are two standard treatment algorithms now operating smoothly in BRAC community based setting, one is on ARI and the other is on TB. The cure rate in TB control program is 86% (1996-97), which has increased from 73% (objective is 90% by the year 2000) and the cure rate in ARI control program is 99% (1996), already supersede the targeted cure rate of 85%. So, introducing standard treatment on diarrhea is feasible and realistic in these static rural health care centers to improve the rational use of drugs.

The main objective of the proposed study is to improve rational prescribing by the prescribers of BHCs. The study will be an experimental pretest posttest design with both quantitative and qualitative approach. Retrospective review of prescription records will be the main data collection technique. For the qualitative purpose, several in-depth interviews will be conducted to explore the knowledge of the prescribers and for developing motivating messages during educational sessions. To develop skill in handling obstacles during data collection process, data exercise was done in Thailand. The prescribing indicators that will be measured are (1) percentage of encounters prescribed with ORS, (2) percentage of encounters prescribed with an antibiotic, (3) percentage of encounters prescribed with an anti-amoebic agent.

The results of this study will be evidence to the planners and policy makers to introduce other treatment schedules to the prescribers of BRAC Health Centers to ensure rational prescribing, hence promote rational use of drugs.