Abstract

Objective: Several tools have been introduced to evaluate the quality of prescribing. The aim of this study was to determine the quality of prescribing in hypertension and bronchial asthma in Primary, Secondary and tertiary health care setting using the new Prescription Quality Index (PQI) tool and to assess the reliability of this tool.

Methods: A prospective cross-sectional study was carried out for one month in order to assess the quality of prescribing of antihypertensive and antiasthmatic drugs using recently described PQI at PHCs, SHCs and THC facility. Patients with hypertension and bronchial asthma, attending out-patient departments of each health care facility for at least 3 months were included. Complete medical history and prescriptions received were noted. Total and criteria wise PQI scores were derived for each prescription. Prescriptions were categorized as poor, medium and high quality based on total PQI scores.

Results: A total of 356 patients were included. Mean age was 57.7±14.7 years (range 4–87 years) with 36% patients above 65 years of age. Mean total PQI score was 28.9±8.1. Of 356 prescriptions, 138 (38.8%) prescriptions were of high quality with PQI score ≥34. Prescribing quality in terms of PQI score showed highly significant difference between PHC, SHC and THC (P<0.0001). The prescribing quality between PHCs and SHCs did not differ significantly (P>0.05). The value of Cronbach’s α for the entire 22 criteria of PQI was between 0.68 to 0.89.

Conclusion: As evaluated by PQI tool, the quality of prescribing at THC was good as compared to SHCs & PHCs. PQI was found to be a reliable tool for assessment of prescribing quality in chronic diseases.