



The Relationship of Knowledge Levels and Behavior Self-Medication of Analgesic in Community Village Kalumbuk, Sub District Kuranji in Padang City, Indonesia

Hansen Nasif^{1*}, Sara Surya², Riko Eka Putra²

¹(Department of Pharmacology & Clinical Pharmacy, Faculty of Pharmacy, Andalas University Indonesia)

²(Department of Pharmacy, Dharma Andalas University Indonesia)

Corresponding Author: Hansen Nasif

ABSTRACT: Self-medication is a person's attempt to treat themselves without a prescription from a doctor who uses over-the-counter, limited over-the-counter and mandatory drugs pharmacy. Analgesics are drugs used to relieve sensation pain without affecting a person's consciousness. One of the analgesic groups which often used for self-medication is analgesic non-opioid (NSAIDs). Drug were given for relieve painful like symptom of fever, pain, dizziness, headaches, and etc. The aim of this research is to determine the relationship between the level of knowledge and behavior in self-medication of analgesic drugs in Kalumbuk Village, Subdistrict Kuranji in Padang city, Indonesia. A descriptive analysis with purposive sampling, data were obtained from 119 respondents, usage probability sampling with simple random sampling technique. Source data through spread questionnaire which containing 15 item statement to level knowledge and 12 item statement to assess behavior self-medication drug analgesic. Analysis data with test Fisher's Exact Test with sig P-value (<0.05). The results obtained level knowledgerespondents including in category Enough (60.5 %) as much 72 respondents and behaviorrespondents including in category Enough (55.5%) as much 66respondents. There is connection which significant between level knowledge and behavior self-medication drug analgesic on community in village Kalumbuk Subdistrict Kuranji, in Padang City with P-value <(0.001), so concluded that If somebody already own knowledge which good so someone too will have behavior the good one.

KEYWORDS: self-medication, analgesic, knowledge, behavior

Received 18 Oct., 2023; Revised 31 Oct., 2023; Accepted 02 Nov., 2023 © The author(s) 2023.

Published with open access at www.questjournals.org

I. INTRODUCTION

World Health Organization (WHO) define self-medication or treatment alone is treatment which done in a way independent witha person's choice of modern medicine, herbal medicine, or traditional medicine for treating complaints of pain or symptoms, which can be controlled alone and several condition chronic disease that has been diagnosed by a doctor [1] .Self-medication as someone's attempt to treat herself without a prescription from a doctor [2] or without first consulting a doctor [3].Self-medication is a treatment for problem health which generally happen, use drug which can used without supervision from health personnel, and is safe and effective for use itself [4] . Self-medication usually done for dealing with complaints and minor illnesses experienced by many people, like fever, painful, dizzy, cough, indigestion, worms, diarrhea, skin diseases and others [5]. Based on data from National Statistics Centre of Indonesia, 79.49% of sick people carry out self-medication, meanwhile in West Sumatra 90.54%, and in Padang City 80.04%. This figure is higher compared to the percentage of the population who go to the doctor for outpatient treatment, which is equal to 34% [6] .

Analgesic is drugs which used for remove flavor pain without affecting a person's consciousness [7] . One of group analgesic which often in self-medication is analgesic non-opioid (NSAIDs). This drug is given to treat mild to moderate pain , which people often choose and use to overcome pain without going through recipe doctor, like drug free, and drug free limited [8] .This is the main factor for society in carrying out self-

medication Wrong the only one is knowledge. Knowledge somebody Not only influenced by experience and environment but can also be influenced by the education they have received. Lack of community knowledge carrying out self-medication has the potential to increase the risk of incidents occurring medicine [1]. In addition, self-medication behavior can cause various health problems if done incorrectly. Research conducted by Kardewi 2018 [9] stated that patients did not self-medicate read moreover formerly rule use before consumed and lack of knowledge about the contents of analgesic drugs and not paying attention to their presence effect side effects of usage the drug.

II. RESEARCH METHODS

A quantitative study, with purposive sampling technique. Data were collection from March until May 2023 on community in village Kalumbuk Kuranji District, in Padang city. Population in this research are community in village Kalumbuk Kuranji District, Padang City, aged 17-55 years, is 5,362 people , with 2,751 men, and 2,611 women. Inclusion criteria respondents is aged 17-55 years old , willing become subject in study which has been proven with agreement respondents on the sheet inform consent , ever do self-medication with drug analgesics , and domiciled in the Village Kalumbuk Subdistrict Kuranji City Padang. Sample size calculated with Slovin formula with a result of 99 respondents, we also added 20 % for anticipation annoyance, so we have total 119 respondents. Sample taken with Probability Sampling with Simple Random Sampling technique. Samples were randomized use application Spin The Whell . The instruments or tools used in this research are questionnaire. Questionnaire about level of knowledge with 15 item statement And behavior self-medication with 12 point statement. The questionnaire used is a modification of Journals [7], [10] , and [11]

Assessment level knowledge in the form of a questionnaire with Guttman scale , where each statement has two choices, namely "correct" and "wrong" will then be given a score, for the correct answer a value of "1" will be given. and incorrectly given a value of "0". Meanwhile, for self-medication behavior This is done by providing a statement in the form of a Likert scale where the questionnaire which containing statement given choice "Always" with score 3, "Often" with score 2, "Sometimes" with score 1, And "Never" with score 0 [7]. Scale measurement level knowledge with use questionnaire that is guttman scale, which want answer firm, like answer correct and wrong. Good, with results percentage 76% - 100%, enough 56% - 75%, and not enough if Results percentage < 55%.

In this study, data was processed using the SPSS ver 22 application with the Fisher's Exact Test because data does not meet the requirements to be processed using the Chi test Square [12]

Table 1. List of respondents statement for level knowledge

| No | Statement | Correct | Wrong |
|----|--|---------|-------|
| 1 | Self-medication done for reduce symptom or disease which nature light without recipe doctor. | | |
| 2 | Drug pain killers is drug which used f or relieve pain or soreness without influence awareness. | | |
| 3 | Medicines which own sign circle color green on the packaging means drugs that are permitted purchased without doctor's prescription. | | |
| 4 | Medicines which own sign circle color blue on the packaging are medicines that are permitted purchased without recipe doctor. | | |
| 5 | Paracetamol is a drug included in Drug classes marked with colored circles green. | | |
| 6 | Sour mafenamate is drug which including in drug classes required by pharmacies (OWA). | | |
| 7 | Piroxicam is drug which including in drug mandatory pharmacy (OWA). | | |
| 8 | Bodrex, panadol, And paramex is drug brand trade contains content paracetamol. | | |
| 9 | Dosage or amount of medication that is drunk children equal to the dose or amount of medication taken by adults. | | |
| 10 | Medicines which can purchased without recipe doctor always drunk 3 times a day. | | |
| 11 | If dose drug 3 time a day, is means drug should taken every 8 hours. | | |
| 12 | Sour mafenamate is drug which can soothe the feeling pain during toothache. | | |
| 13 | Ibuprofen is drug which can relieve flavor pain during menstruation. | | |
| 14 | If use drug painkillers in a way Keep going continuously can cause damage on stomach. | | |
| 15 | All drug painkillers must drunk after Eat. | | |

Table 2. List of respondents statement for behavior

| No | Statement | Always | Often | Sometimes | Never |
|----|--|--------|-------|-----------|-------|
| 1 | I treat flavor painful low to moderate pain independently use drug free And drug free limited. | | | | |
| 2 | I must know symptom And complaints of illness that I felt before do treatmentAlone use drug painkillers. | | | | |
| 3 | I checked the expiration date drug which I save in a way periodically. | | | | |
| 4 | I read effect side drugpainkillers before using it. | | | | |
| 5 | I take the medicine according to it rule use which stated on packaging drug. | | | | |
| 6 | I drink drug paracetamol to lower the heat orfever. | | | | |
| 7 | I choose drug Sick head according to my headache feel it. | | | | |
| 8 | I drink drug 2 tablet at a time in one drink painful which I feel it fast is lost. | | | | |
| 9 | I drink drug sour mafenamate For relieve painful when you have a toothache. | | | | |
| 10 | I keep drug in place whichkeep away from direct sunlight | | | | |
| 11 | I stop drink drug painkillers when effect side appear such as nausea and Dizzy. | | | | |
| 12 | If I Not yet understand method use drug painkillers, I ask to pharmacy clerk. | | | | |

III. RESULTS AND DISCUSSION

The validity test of the questionnaire was carried out on 30 respondents in the PJKA housing complex , Jati Village, East Padang District, Padang City. Testing reliability has been carried out on all questionnaire questions with *Cronbach's Alpha* value of 0.908 , these results indicate a questionnaire own reliability perfect. Of the total 119respondents, there were 26 malerespondents (21.8%) and 93 femalerespondents.respondents (78.2%). This shows that therespondents are predominantly of one type female gender, where women care more about their health includes medicines, in addition to sources of information obtained by women more because women often interact and are more active than men men [18] . According to Thoma, 2011 [13] states that women more concerned about health than men and tend to have knowledge which are more good regarding self-medication.

Table 3. Respondents Based on final education

| Respondents Education Level | | |
|-----------------------------|-----------|------------|
| Education | Frequency | Percentage |
| Elementary school | 2 | 1.7 % |
| Junior high school | 18 | 15.1 % |
| Senior high School | 74 | 62.2 % |
| Bachelor | 25 | 21.0 % |
| Total | 119 | 100% |

Based on table 3, from 119 respondents, it shows that education category of respondents included elementary school as many as 2 people (1.7%), Junior High school as much 18 person (15.1%), Senior high school person as much 74 (62.2%), And Bachelor as many as 25 people (21.0%). It can be concluded that categoryrespondents' final education was dominated by the senior high school category with 75 people (62.2%). Senior High school education or equivalent is included in the category education intermediate or advanced [14] . Education is a factor which influential to power catch information, knowledge, attitude and behavior [15] .

Table 4. Respondents based on knowledge level

| Level of Knowledge | | |
|--------------------|-----------|------------|
| Category | Frequency | Percentage |
| Good | 32 | 26.9 % |
| Enough | 72 | 60.5 % |
| Not enough | 15 | 12.6 % |
| Total | 119 | 100% |

Based on table 4, from 119 respondents, it shows that level knowledge community to self-medication drug analgesic there is good category as many as 32 people (26.9%), fair as many as 72 people (60.5%), as well as less than 15 people (12.6). It can be concluded that the level knowledge community about self-medication drug analgesic including in sufficient category. According to Ra'is, 2021 [16] is one of the causes that makes the level knowledge respondents enough because part respondents own level education senior high school.

Table 5. Respondents based on behavior

| Behavior | | |
|------------|-----------|------------|
| Category | Frequency | Percentage |
| Good | 45 | 37.8 % |
| Enough | 66 | 55.5 % |
| Not enough | 8 | 6.7 % |
| Total | 119 | 100.0 % |

Based on table 5, from 119 respondents, it shows that behavior community to self-medication drug analgesic in village Kalumbuk Subdistrict Kuranji City Padang there is category Good as much 45 person (37.8%), Enough as much 66 person (55.5%), as well as not enough as much 8 person (6.7%). It can be concluded that people's behavior to villages self-medication with analgesic drugs is included in the sufficient category. A person's behavior can influenced number of factor, like knowledge the more its height a person's knowledge, then a person's behavior will also be good, in this case is someone which capable control and apply knowledge which held in the right direction. [17]

IV. CONCLUSION

Based on the results of the research that has been carried out, it can be taken conclusion that the respondents level of knowledge is included in the category enough (60.5 %) with 72 respondents and respondents behavior was included in category enough (55.5%) with 66 respondents. There is connection which significant between level knowledge And behavior self-medication drug analgesic on community in village Kalumbuk Subdistrict Kuranji in Padang city with mark *P-value* <(0.001).

REFERENCES

- [1]. WHO. Promoting Rational Use of Medicines: Core Components. Geneva: World Health Organization. 2012.
- [2]. Kartajaya H. Self Medicatio, Who Benefits and Who Is At Loss. Indonesia: Mark Plus Insight. 2011.
- [3]. Agustina E, Permatasari D, Sari YO, Almasdy D. Pengkajian Praktek Swamedikasi Pada Salah satu Apotek di Kota Padang, Indonesia, SCIENTIA Jurnal Farmasi dan Kesehatan 2021. 11 (1); 15-23
- [4]. Jain S., Thakur A., Peepre K., Kaushal S., dan Kasar P. Maraknya Praktek Pengobatan Sendiri di antara Penduduk Perkotaan Kumuh yang Terletak Dekat Pemerintah. Perguruan Tinggi Medis, Jabalpur. Med Kesehatan Masyarakat Int J Community. 2018. 5(2): 811-817.
- [5]. Departemen Kesehatan Republik Indonesia. Materi Pelatihan Peningkatan Pengetahuan dan Keterampilan Memilih Obat Bagi Tenaga Kesehatan. Jakarta: Departemen Kesehatan Republik Indonesia. 2008.
- [6]. Zulkarni R, Yosmar R, Octafiani I. Hubungan Pengetahuan Pasien terhadap rasionalitas swamedikasi di beberapa apotek kecamatan Lubuk Basung, Jurnal Sporta Sainatika, 2019. 4 (2); 1-9.
- [7]. Astarina B.E., Puspitasari C.E., dan Dewi N.M.A.R. Hubungan Tingkat Pengetahuan Dan Perilaku Swamedikasi Analgetika Pada Mahasiswa Universitas Mataram. Journal Of Pharmacy Practice And Development. 2022.1(1):24-31.
- [8]. Melizza., Romlah S.N., dan Laiman I. Hubungan Tingkat Pengetahuan Terhadap Perilaku Swamedikasi Obat Analgesik, Masyarakat Rw 04 Desa Trembulrejo Bloro Periode April Tahun 2021. Jurnal Kesehatan Pharmasi (JKPharm). 2022.4(1): 30-39.
- [9]. Kardewi E. Hubungan Pengetahuan, Sikap dan Perilaku Terhadap Self Medication Penggunaan Obat Analgesik Bebas di Sekolah Tinggi Ilmu Kesehatan Bina Husada. Sriwijaya Journal of Medicine. 2018.1(1): 16–23.
- [10]. Mutmaina U.F., dan Zulfebriges. Gambaran Tingkat Pengetahuan Terhadap Penggunaan Obat Analgetik dalam Swamedikasi di Masyarakat Desa Rancabango Kabupaten Garut. Prodi Farmasi, Fakultas Matematika dan Ilmu Pengetahuan Alam, Universitas Islam Bandung. 2019. 5(2): 527-533.

- [11]. Susanti A.D., dan Dewi S.R. Studi Tingkat Pengetahuan dan Perilaku Swamedikasi Obat Analgesik Pada Pasien Di Apotek Kota Samarinda. *Jurnal Riset Kefarmasian Indonesia*. 2022. 4(3): 385-396.
- [12]. Sani F. *Metodologi Penelitian Farmasi Komunitas dan Eksperimental*. Yogyakarta: Deepublish. 2018.
- [13]. Thoma. *Pengaruh Tingkat Pendidikan Terhadap Tingkat Pengetahuan Masyarakat Mengenai Antibiotika di Kecamatan Mergangsan Kota Yogyakarta*. Universitas Sanata Dharma. Yogyakarta. 2011.
- [14]. Supardi S., dan Raharni. Penggunaan Obat yang Sesuai dengan Aturan dalam Pengobatan Sendiri Keluhan Demam-Sakit kepala, Batuk dan Flu. *Jurnal Kedokteran Yarsi*. 2006. 14(1): 61-69.
- [15]. Anisah Z., Moeslich H., dan Didik S. Pengaruh Pelayanan Kefarmasian Terhadap Kepuasan Konsumen Apotek Di Wilayah Purwokerto. *Jurnal Farmasi Indonesia*. 2010. 7(1): 46-52.
- [16]. Ra'is O.N., Ningrum W.A., Permadi Y.W., dan Muthoharoh A. Hubungan Tingkat Pengetahuan Terhadap Perilaku Swamedikasi Obat Anti Nyeri Di Kalangan Masyarakat Sekitar Pesisir Kabupaten Pemalang. [Skripsi]. Pekalongan: Universitas Muhammadiyah Pekajangan. Indonesia. 2021.
- [17]. Ananda D.A.E., Liza P., dan Rachmawati H. Hubungan Tingkat Pengetahuan dan Perilaku Swamedikasi Obat Natrium Diklofenak di Apotek. *Journal Pharmacy*. 2013.10(2): 138.
- [18]. Puspasari H., Harida S., dan Fitriyani D. Tingkat Pengetahuan Tentang "DAGUSIBU" Obat Antibiotik Pada Masyarakat Desa Sungai Awan Kiri Kecamatan Muara Pawan Kabupaten Ketapang Tahun 2017. *Jurnal MedicalSains*. 2018. 3(1): 11-18.