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LETTER TO EDITOR

Letter to Editor

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Dear Editor,

We read with great interest, the article 'Clinical Case Studies: Novel Tools for Training Medical Students in Rational Prescribing Skills' published by Sharma et al. in the December 2008 issue of your journal. We would like to commend the authors for their commitment towards teaching about the rational use of medicines to medical students. The concept of P-drug and P-treatment is also very important for medical students and doctors. The guide to good prescribing describes selecting P-drugs for various disease conditions and the concept of P-treatment, as not all diseases will be requiring treatment with medicines.

Therapeutic exercises, as shown in annexure 1, have been used in many medical schools and have been found useful. At the Manipal College of Medical Sciences (MCOMS), Pokhara, Nepal, analyzing prescriptions using drug use indicators, evaluating drug advertisements, critical analysis of journal articles, selection of personal drugs for disease conditions, writing prescriptions and conveying information to the patient, are some of the educational activities carried out [1]. Also, there is an important difference between P-drug and P-treatment. One of the most common mistakes is that students often think that P (personal) drugs are drugs which are personal to the patient, rather than personal to the doctor [2]. P-drug is selected

for particular disease conditions. When a particular patient comes for treatment, then the suitability of the already selected P-drug for a particular patient is verified. For example, the doctor first selected a P-drug for generalized tonic-clonic seizures for ex. phenytoin. When a patient came, the doctor verified whether the selected P-drug is suitable for the patient (a young girl). In her case, because of cosmetic problems, phenytoin was not suitable and the doctor had to look at other alternatives. We would be interested in knowing the exact procedure followed by the authors in teaching these important concepts to students.

At MCOMS sessions on P-drug selection have been carried out for over four years. The students are assessed on this exercise during their practical examination [3]. Student feedback was positive, but they wanted certain modifications and wanted sessions during the clinical years of training and during internship [3]. It is planned to start sessions on P-drug selection at the KIST Medical College, Lalitpur, Nepal, shortly.

Another point on which we would like further information, is on how they were able to convince the doctors of the Department of Medicine to let their prescribing be analyzed by students and to be discussed in the department of Pharmacology. This is an important point, as we would also be interested in carrying out a similar exercise in our institutions. The viva-voce of students regarding drug use in the patients studied by them is an excellent concept. A similar process has been described in the 'Teacher's guide to good prescribing', which describes questions

students can ask their clinical teachers when reviewing drug treatment in wards [2]. An innovative student assignment suggested in the Teacher's guide is, involving students in drug use surveys. Interested students had carried out a study on morbidity profile and prescribing patterns in medical outpatients under our guidance and supervision [4]. This study can also be considered by the authors. We once again congratulate the authors on this important initiative towards promoting proper prescribing habits among medical students.

References

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