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Patient's understanding of drug label instructions: a study among different populations living in the Netherlands

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Type of abstract: Research

Aim of the study: Health literacy concerns the knowledge and competences of an individual person that are necessary for adequate response to information about health(care). Health literacy is strongly associated with educational level and overall literacy. Previous research has shown low (health) literacy to be associated with poor adherence, increased health consumption and poor health outcomes. The assumption of health care providers that their patients can read, understand and respond adequately to the instructions found on prescription drug labels may (sometimes) be unfounded. The aim of this study was to assess understanding of drug label instructions in different (non-native) populations living in the Netherlands.

Methods: Four different populations living in the Netherlands were studied: people born in Iran, Turkey, the (former) Antilles and Surinam (Hindustani). Participants were recruited at meeting places for a particular ethnic group (mosques, cultural centers). Only people with sufficient comprehension of the Dutch language were included (tested by a short screening questionnaire on literacy skills). First year pharmacy students, who were born in the Netherlands, were included as reference group. All participants completed a survey with questions about the correct interpretation of 4 drug label instructions, with instructions like “*Complete the prescribed course (antibiotics prescribed for 7 days)*” and “*Take 1 tablet as needed, maximal 6 tablets a day (acetaminophen)*”. For correct interpretations of the instructions presented in the survey experts of the university (staff members, practicing pharmacists) and the Royal Dutch Pharmacist Association were consulted.

Results: In total, 180 Iranian, 188 Turkish, 168 Antillean, 155 Hindustani born in Suriname and 153 Dutch (reference) participants were included in the study. Some drug label instructions were misunderstood; misunderstanding of instructions occurred both in non-natives and Dutch natives (3 out of 4 labels were misunderstood by the majority of participants), but non-natives had more often problems with the instructions. For example, the instruction “*Complete the prescribed course (antibiotics prescribed for 7 days)*” was more often correctly answered (*use the drugs for 1 week*) by the Dutch reference group (95.4%) compared to the other groups: Iranian (80.6%), Turkish (88.3%), Hindustani (91.6%) and Antillean (81.0%) participants ($p < 0.05$).