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PVG practice: Suggested approach in improving adverse drug reaction reporting and factor perceived may be influencing pharmacovigilance practice among health care providers in Lagos state

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The success or failure of any pharmacovigilance activity depends on the reporting of suspected adverse reactions. ADR reporting with yellow cards has tremendously improved pharmacovigilance of drugs in many developed countries and its use is advocated by the World Health Organization (WHO). ADR reporting among health care workers in Nigerian tertiary institutions is at a very low practice. A cross sectional study was made involving 75 medical doctors, 75 pharmacists and 30 nurses was surveyed with self-administered questionnaire which had undergone some modification to suit Nigerian environment. The questionnaire was validated through scrutiny in the Clinical Pharmacy department of University of Lagos and the zonal head of the NPC in LUTH. The Questionnaire was distributed through various heads of the units and professional acquaintances and was allowed to stay with them so as to allow attending to the question. The questionnaire sought the demographics of the HCPs; the factors they perceived may influence pharmacovigilance practice and suggestion on the possible way to improve ADR reporting. The result gave 95.6% response rate. A majority of the HCPs responds to positive impact in improving ADR reporting and factors militating the practice. Education and training was the most recognized means of improving ADR reporting. Adverse drug reaction reporting among the Nigerian health care professional proves to be inefficient and lack a proper data base documentation. Though, there has however been a slight improvement when compared to previous studies. Social workers and all sectors of the health care system need to be involved. Governments needs to include private hospitals, retails dispensaries and traditional medicine. PV reporting centre should also be at primary health centre, effort must be to train staffs who would flag off the monitoring and documentation of ADR, lack of local expertise in pharmacovigilance could be tackled through developing exchange programmes with NAFDAC and sharing of best practices, there should be established organizers of public health and drug access campaigns in local languages and with regional surveillance stem and creating a specific centre for pharmacovigilance in all hospitals will help the advancement.

## **Biography**

Temitope Oyeneye completed her Graduation at Olabisi Onabanjo University and internship at Lagos University Teaching Hospital in Lagos, Nigeria. Presently, she is working as Pharmacist at Drug Consult Pharmacy, Nigeria. She has years of experience in interpreting a prescription and administration of pharmaceutical drugs in both government hospital and private corporate pharmacy stores.

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