

*Dr. Mohd Akram*¹, Syeda Zuleqaunnisa Begum *², Fariya Azeem *³*

¹ MBBS , MS (Ortho)

² Assistant Professor , Deccan School Of Pharmacy

³ Student , Deccan School Of Pharmacy (Affiliated To OU)

Corresponding Author: Dr.Mohd Akram, MBBS , MS (ORTHO)

Email:editorjohp@gmail.com

ABSTRACT

INTRODUCTION:

Myocardial infarction (MI), is commonly known as a heart attack, which occurs when blood flow decreases or stops to a part of the heart, causing damage to the heart muscle. The most common symptom of this is chest pain or discomfort which may travel into the shoulder, arm, back, neck, or jaw.

METHODOLOGY :

The methodology included the plan of work with literature review , to understand the management, patient counselling , designing the data collection form , reporting of the collected data. The study site for this was the inpatient ward of cardiology department, Tertiary care hospital. The type of study site was observational study and the patient selection was randomly done. The inclusion criteria being the patients (male and Female) with age group 30-100 years with comorbid conditions and the exclusion criteria are the pediatric patients less than 30 years and the pregnant women. The study period is for 1 month with 40 patients. The present study was conducted to find out prescribing pattern of drugs used in Myocardial Infarction emergencies in tertiary care hospital. Total 40 patients case sheets were analysed during 1 month study period.

RESULTS AND DISCUSSION:

The total percentage of male and female in 40 patients was found to be 52% (male) and 48% (female) Males are more prone to Myocardial infarction . The highest percentage of patients were seen in the 2nd category i.e. age group (46-60age) and the lowest percentage of patient in 5th category age group (91-105age). The most common symptom was Chest pain present in 28 (70%) patients and SOB was the next common symptom-19 (47.5%) and other symptoms include nausea vomiting-5,(12.5%) sweating- 8, (20%) cough- 4, (10%) weakness- 3,(7.5%) uneasiness- 3, (7.5%) jaw pain-1, (2.5%) palpitation- 4(10%) and after treatment there is a difference in percentage of the frequency of symptoms i.e SOB(42.5%), Chest pain(65%), Cough(10%), Palpitation(7.5%), Sweating(17.5%), Nausea(10%), Jaw pain(2.5%), Weakness(7.5%), Uneasiness(5%). The various comorbid conditions

observed in Myocardial infarction are Hypertension, Diabetes mellitus, Coronary artery disease (CAD), Chronic kidney diseases (CKD), Anemia, Ischemia, Dysfunction, Hyperthyroidism, Stents etc. The most widely seen conditions are Diabetes mellitus (47.5%), and Hypertension (40%) along with CAD (15%), CKD (12.5%), Anemia (5%), Ischemia (2.5%), Dysfunction (7.5%), Hyperthyroidism (2.5%), Stents(5%).The drugs used in Myocardial infarction are Vasodilators, Beta blockers, Antiarrhythmic drugs, Anti-Thrombotics, Thrombolytic, Analgesic, Anti Anxiety and Inotropic agents. Most widely used drug in the treatment of MI is Anti coagulants (32), Anti platelet (29), vasodilators (23), Beta blockers and Analgesic (14), Anti anxiety (8), Antiarrhythmic (1) and Inotropic agent (7). There are various other drugs that are used along with Anti MI drugs in the treatment of Myocardial infarction such as proton pump inhibitors, Diuretics, NSAIDS, Laxatives, HMGCoA reductase, Cardiac glycosides, Cardiotonic agent, Adrenergic inhalants, Anti emetic, Anti mineralocorticoid, corticosteroid, Anti histamines, Hypnotics and Sedatives, Anti diarrheal, Anti anginal.

CONCLUSION:

Now a day's MI a cardiac diseases is becoming a common cause of death in the developing world. The aim of this study is to produce the rational prescriber and to give the prescription pattern of drug use and current recommendation and guidelines. This study shows that the most commonly prescribed drug classes involved were Anti platelets, Anti coagulants, Vasodilators, Beta blockers and Analgesics and their combination among MI patients.

KEY WORDS: Myocardial Infarction, Discomfort, Males, Diabetes mellitus, prescription.

Access this Article Online	Quick Response Code: 
Website: http://www.journalofhospitalpharmacy.in	
Received on 30/01/2020	
Accepted on 11/02/2020 © HEB All rights reserved	