

Increasing ADR reporting in Nepal

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Letter to the Editor

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Dear Editor,

I read with great interest the article by Santosh KC and coauthors titled 'Strengthening the pharmacovigilance programme in Nepal'¹.

I agree with the authors that more regional centres should be started. A problem however may be that due to a variety of reasons many centres are not functioning optimally. I also agree that knowledge about pharmacovigilance and its importance is poor even among pharmacologists and pharmacists. Under reporting remains a problem and a previous study conducted at KIST Medical College had examined adverse drug reactions (ADRs) submitted to the centre and possible steps to improve reporting rates². Communication between the centres and the reporters remains a problem. Reporters are not able to benefit from the ADR reports and hence consider reporting as something to be avoided. Community pharmacies can play an important role in ADR reporting due to their number and reach and should be specifically targeted.

With increasing education and rising socioeconomic status ADR reporting by consumers can supplement reporting by professionals³. In many countries the pharmaceutical industry plays an important role in pharmacovigilance⁴. In Nepal it is not mandatory for the industry to report ADRs and few reports are received from the industry. The issue of which organization should take the lead with regard to pharmacovigilance in the country has been recently

discussed⁵.

Not all publications relating to pharmacovigilance in the country have been highlighted in the manuscript. The criteria which the authors followed for selecting and citing references can be explained. Strengthening pharmacovigilance in Nepal is an essential but daunting task with tremendous implications for patient safety and rational use of medicines.

References

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Article Information

Article history

Received	16 June 2013
Received in revised form	18 June 2013
Accepted	19 June 2013