

Is It a Correct Proposal for Improving Compliance?

Dip Jyoti Deori¹

Eastern Journal of Psychiatry (2024): 10.5005/jp-journals-11001-0067

Mental health issues are a dreaded health issue in India. How far are we capable of improving the compliance of patients from remote outreached areas? Are they really continuing the medications as prescribed from the tertiary care or private setup? Related to the matter of compliance, a lot of factors are there for which medications are often discontinued or there is poor compliance. Apart from all the factors, can we take responsibility to minimize poor compliance? Zone wise or as a state body, we can think of a new idea of setting up a certain kind of booth (dispensing unit) in the first referral units (FRUs) or civil hospital or separate booth, which can be integrated with the National Health Mission (NHM) if possible, for smooth running.

We can collect funds to purchase few basic medications for uninterrupted availability in the periphery. There may be issues like—is it for all irrespective of socioeconomic status or for poor people with mental illnesses? We can make it free for patients with Ayushman card that has been provided to poor people by the Government of India, and without a card, we can charge them with a minimum expenditure. Initially, we can set up minimum number of such units in our state to check our feasibility. Later on, we can plan accordingly with our difficulties, and if it can be carried forward, we can have better clinical outcomes from most of the outreached areas of the state or the east zone as a whole.

HOW CAN WE COLLECT FUNDS?

If we generate one particular account where our esteemed members of the Indian Psychiatric Society (IPS) (from our zone or state) can donate or send (e.g., Rs. 100/- or 200/- per month) to this account, we can have a huge collection of funds for the benefit of our outreached society. The account has to be audited regularly with all the transaction details. Also, there may be some other agencies, esteemed members, or people who can donate with their own interest at any time or any amount for a good cause.

Again, there is a question—what are the medications we will be able to make available or will be of use, as there is a vast number of medications as well as a number of mental illnesses. We can plan for a minimum of first-generation antipsychotics along with fewer new-generation antipsychotics, selective serotonin reuptake inhibitors (SSRI), anxiolytics, and sedatives, etc. We can try for the availability of olanzapine, risperidone, lorazepam, clonazepam, escitalopram, sodium valproate, and haloperidol with all their respective dose strengths.

WHERE WILL WE PURCHASE MEDICATIONS?

There are a lot of generic medicine companies which are supplying medicines in the government setup.

Department of Psychiatry, Dhubri Medical College and Hospital, Dhubri, Assam, India

Corresponding Author: Dip Jyoti Deori, Department of Psychiatry, Dhubri Medical College and Hospital, Dhubri, Assam, India, Phone: +91 7896811954, e-mail: djdeori@gmail.com

How to cite this article: Deori DJ. Is It a Correct Proposal for Improving Compliance? *East J Psychiatry* 2024;24(1):28–29.

Source of support: Nil

Conflict of interest: None

This is one of my plans/ideas for our psychiatric society, NHM as well as the government. If possible, with joining hands from all the stakeholders, we can be able to improve our underprivileged poor society where there are people with mental illnesses.

Recently from my experience, I was sent to a health mela under the direction of the central government. Was there any prior announcement or awareness related to the mela? Even if it was there, there were no specific or particular mentions of awareness related to mental illness or a psychiatry camp. Was there any medication available from the organizing team? No. Already we know that there are very few medications available in hospitals for psychiatry patients, especially in tertiary hospitals or sometimes, you will not get any medication there. So how can you expect any psychiatry medications in those primary healthcare setups? How can you expect any psychiatry medications in those private pharmacies near to that primary healthcare? I planned to collect few samples from known companies which had helped me a lot for those needy patients. At least it can help them for few days. If further needed, they can ask their nearby pharmacy to arrange these medications as early as possible or if needed, they can visit the tertiary care as needed. As it was a health mela with all the specialties, they should particularly mention all the departments with names. We should not address the people like all the department doctors/specialists will be coming. We should make them aware of all departments/specialties properly. Only sending a doctor to camp is not going to serve the purpose. We should be concerned about the medications too, specifically the psychiatry medications.

TRANSPORTATION OF MEDICATIONS

Transportation of medications can be done with the help of NHM as they keep supplying medications and other goods to most of

the hospitals. We can associate with them, or else we can send separately in our own way to the destination.

ASSOCIATION OF NONGOVERNMENTAL ORGANIZATIONS

If possible, few nongovernmental organizations (NGOs) are there, who are helping the needy people with regards to their basic needs such as food, clothes, and even shelters. We can associate with them for the smooth running or operation of the plan.

By joining hands, a lot of problems or difficulties can be overcome. So, let us think about it for our needy, underprivileged people with mental illnesses.

Further, we can have a discussion on this plan regarding its positivity or negativity from all our esteemed members and active members of respective societies, local representatives who also can take part to give their opinions.

ORCID

Dip J Deori  <https://orcid.org/0000-0002-1267-0947>