OTCs and alternative medicines



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After qualifying in Pharmacy at UCT, larc Blockman pursued a career in Clinical Pharmacology. A nedical degree and subsequently a degree in Clinical harmacology, both from UCT, has nabled Marc to folhis passion in the tional use of medicines. This has lead to be Chair of the EDL committee of outh Africa, a memer of the clinical as Il as pharmacoviaiince committees of Medicines Control ouncil, as well as a member of many narmaceutical advisory committees in ooth the public and private sectors.

With rapidly increasing medical care costs, concerns are growing about the benefits and risks of the wide range of prescription and over-the-counter (OTC) medicines. There has been a dramatic increase in the use of OTC and complementary medicines as well as supplements.

Sales data are inadequate and lack any definition of user characteristics, perceived indications, compliance or clinically relevant drug interactions with conventional pharmacotherapy. Moreover health care professionals themselves are often ignorant of such use by their patients.

Many complementary medicines have a long history of traditional or cultural use. They are often classified as 'natural' with its inherent implication of 'safety'. Such a perception allows and encourages their sale and distribution through a range of outlets, often bypassing the advice or scrutiny of a health care professional. It is becoming increasing clear that we can no longer uncritically accept the maxim 'natural equals safe'. On the contrary recent examples of previously unsuspected toxicity convince us of the need for continuing vigilance.

It is hoped that this issue of *CME* will address some of the above issues and provide more enlightened insights that will aid health care professionals in developing a way forward with their patients who may be using one or other product.

John Straughan gives a very useful and updated review of the commonly used antioxidants. He reviews what we *know*, identifies the myths and tries to strike a balance between them.

Noel Cranswick's article looks at OTCs in children, the 'forgotten' patients. Children are commonly exposed to OTCs, often with little evidence available to suggest safety and efficacy, other than extrapolation from adult data.

Patrick Bouic highlights some of our understandings of the varied OTC supplements in HIV-infected patients. He looks at a range of commonly used supplements and debates the evidence (or lack of) for their use.

Joe Talmud's article on drug interactions with OTC medicines is essential reading. These occur commonly and health professionals must enquire about OTCs when prescribing medicines.

Peter Smith's article on herbal OTC products is a well-balanced review of the available literature, strengthened by personal experience. It gives the health professional perspective on the risk-benefit of these agents.

Roger Wiseman gives an objective account of the facts and fallacies surrounding non-steroidal anti-inflammatory use in our population, while Ushma Mehta considers the potential harm of OTC medicines from an adverse drug reaction standpoint and the role of reporting the reactions to the Medicines Control Council. Finally, Siya Ntutela discusses the traditional healer's approach to the management and diagnosis of tuberculosis as well as the decision on the use of traditional medicines in this patient group.



Tamaryn Blockman . . . future guest editor?