

# CHAPTER I

## INTRODUCTION

### 1.1 Research Background

Symptom of mental disturbances be one of health problem, that has not been fully resolved in society, both at the level of national or international. People with mental disturbances or often called by ODGJ, are individuals suffering from mental health disorders. According to Constitution of the Republic of Indonesia Number 18 of 2014 concerning mental health disturbances state that communities experiencing mental disturbances that is communities experiencing disturbance in thinking, behavior and emotions form a bunch symptom or sign change meaningful and capable cause suffering as well as obstacle in operate function as human.<sup>1</sup> According to WHO (2019), the prevalence of schizophrenia increased by 40%, from 20 million people to 26 million people. The prevalence of schizophrenia increased in Indonesia to 20% of total population.<sup>2</sup> Meanwhile according to the Basic Health Research (Riskesdas) in 2018, the prevalence mental disturbances in Indonesia are experiencing improvement from 2013. In 2013 there were 1,7% per 1000 families who experienced mental disturbances such as schizophrenia, meanwhile in 2018 it increased to 7% per 1000 families. This is can be interpreted that from 1000 houses there are 70 houses with the member that experience schizophrenia. While in East Java there was an increase in the number of families that experience schizophrenia. In 2013 there was a 2,3% increase to 6% in 2018. From 6% of members ladder the only there are 15,1% who do not do the treatment, while the other 84,9% are willing to seek treatment. However among 84,9% willing to seek treatment only there are 48,9% members willing to seek treatment regularly while the other 51,1% do not do the treatment regularly for various reason. Patient with age over 15 years who experienced mental disturbances such as schizophrenia in Indonesia only 9% who are willing to seek medical treatment and especially in East Java at least 4,6% of the amount of 9%.<sup>3</sup>

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<sup>1</sup> Undang-Undang Dasar No.18, *Undang-Undang Dasar Republik Indonesia Nomor 18 Tahun 2014 Tentang Kesehatan Jiwa*, p. 185. 2014

<sup>2</sup> World Health Organization, *Schizophrenia*, 2019

<sup>3</sup> Kementrian Kesehatan RI., *Hasil Utama RISKESDAS Tahun 2018*, Kementrian Kesehatan Republik Indonesia, Jakarta, 2018

Individual with schizophrenia condition estimated often experience relapse which can occur repeatedly, therefore it requires treatment as well as maintenance patient for a long term. Caring for schizophrenia patient requires extensive knowledge, skills, patience, and need long term comitment. Several factors that related with schizophrenia incident, such as genetic factors, biology factors, biochemical factors, social status, economic status, stress, and drug abuse.<sup>4</sup>

There is non-pharmacological therapies that are often used to manage schizophrenia such as psychoeducation or *cognitive behavioral therapy*. In addition to non-pharmacological therapy there is pharmacology therapy which includes the use single antipsychotics therapy and combination therapy between antipsychotic and antianxiety, antidepressants, or others. Antipsychotic therapy divided into two groups which first generation antipsychotic or typical and second generation antipsychotic or atypical. First generation antipsychotic or typical effective in managing positive symptoms. While second generation antipsychotic or atypical effective in managing negative symptoms.<sup>5</sup> Antipsychotic therapy should be administered for 2 weeks until 6 weeks.<sup>6</sup> It often common non-compliance patient in carry out treatment because of length of treatment period and occurrence side effects after consuming antipsychotics drug. Some research mention that using first generation antipsychotic or typical like chlorpromazine and haloperidol are often happen some reaction of side effect such as extrapyramidal syndrome to patients who consume it.<sup>7</sup> Therefore, done this research about evaluation antipsychotics use. It has been explained in the Al-Qur'an, Surah Yunus, verse 57, as following:

يَا أَيُّهَا النَّاسُ قَدْ جَاءَكُمْ مَوْعِظَةٌ مِنْ رَبِّكُمْ وَشِفَاءٌ لِمَا فِي الصُّدُورِ وَهُدًى وَرَحْمَةٌ  
لِّلْمُؤْمِنِينَ

Meaning: “O people human, indeed has come to you the Qur'an is made advice teaching from Your Lord, and who is bidder for diseases the mind that is in your chest,

<sup>4</sup> Zahnia, et.al., *Kajian Epidemiologis Skizofrenia*, Jurnal Majority, Vol. 5, No. 4, 2016

<sup>5</sup> Buijnzeel, et.al., *Antipsychotic Treatment of Schizophrenia: An update*. Journal of Psychiatry, p. 1-5. 2018

<sup>6</sup> Weng, et.al., *Study on Risk Factors of Extrapyramidal Symptoms Induced by Antipsychotics and its Correlation with Symptoms of Schizophrenia*. BMJ., p. 14-21. 2019

<sup>7</sup> Chikowe, et.al., *Adverse Drug Reactions Experienced by Out-Patients Taking Chlorpromazin or Haloperidol at Zomba Hospital, Malawi*. BMC Research Notes, Vol. 12 No. 376, p. 1-6. 2019

*and also becomes guidance instruction for safety, and bring grace for those who believe” (QS. Yunus: 57).*

From that statement it can concluded that as pharmacist, we are responsible for always ensure as well as evaluate medication use in patients with the primary objective safeguarding their patients. This outline has set up in the Indonesian Minister of Health Regulation Number 72 of 2017, which state the pharmacy service standard in related hospitals with pharmacy stock carried out by pharmacists and medical personnel technical of pharmacy. Therefore all the responsibilities related drug use problem issues responsibility of pharmacist.

## **1.2 Research Problems**

1. What is the pattern of antipsychotic drug use in schizophrenia patients at Binangun Public Health Center?
2. What are the common side effects experienced by schizophrenia patients at Binangun Public Health Center?

## **1.3 Research Objectives**

1. To identify the pattern of antipsychotic drug use in schizophrenia patients at Binangun Public Health Center.
2. To identify the common side effects experienced by schizophrenia patients in the Binangun Public Health Center.

## **1.4 Research Benefits**

### **1.4.1 Theoretical Benefits**

Other researchers can do evaluation antipsychotic drug use for do study more carry on as well as can made into material input or comparator for similar research.

### **1.4.2 Practical Benefits**

The benefits of this research for the Binangun Public Health Center include providing input or suggestions to improve attention in prescribing medications and providing information about the use of antipsychotic drugs for schizophrenia patients. This can help prevent the occurrence of various harmful reactions or other complications. It is expected that this will increase public knowledge about health matters.

## **1.5 Authenticity of Research**

The research about evaluation of antipsychotics use in schizophrenia patients has done by several researcher as in the following table:

Table 1 Authenticity of Research

Study Title	Types of Study	Variables	Results	Difference Study
Usage Study Antipsychotics Typical and Atypical in Therapy Patient Schizophrenia Non BPJS Outpatient at Dr. Iskak Tulungagung Regional General Hospital Period January 2015–December 2017	Non-experimental / Observational	Appropriate dose, indication, patient, time giving, and selection drug.	Therapy used combination antipsychotic as many as 13 recipes (50%), use antipsychotic typical as many as 11 recipes (42.31%), and the use of antipsychotic atypical as many as 2 recipes (7.69%).	Side effects that occur in schizophrenia patients.
Evaluation Accuracy Use of Drugs in Patients Schizophrenia in the Inpatient Facility of Mutiara Sukma Mental Hospital, Mataram Year 2019	Non-experimental / Observational	Independent: Usage medicine on medical record data schizophrenia patient.  Dependent: Accuracy usage drug covering appropriate indication, selection medicine, dose, time administration, and patients (17-45 years) based on medical record data.	Evaluation accuracy use medication in schizophrenia patients that is appropriate patient by 100%, indication by 100%, dose by 99%, drug by 99%, and the correct interval for administration by 96%.	Dependent variables, research related side effect of antipsychotics drug.