

# MedicinesTalk

Information for Consumers and Consumer Groups

No. 11

About using medicines wisely

Spring 2004

## Young people talk about medicines

What do young people think about prescription and over-the-counter medicines? This article highlights the findings of a research project that asked that question of more than 70 young people aged 10–18 years. The research, conducted by the NSW Commission for Children and Young People, involved focus groups in Bathurst, Campbelltown, North Sydney and Wollongong, and an online discussion forum held over the same four-day period as the focus groups.

### Perceptions of safety

Many of the young people thought that, in general, prescription and over-the-counter medicines were safe, unlike illegal and age-restricted drugs. Many believed that if medicines were readily available then they were safe. However, some believed that any medicines could be potentially harmful.

*'There's basically two types — the ones that help you when you're sick and the ones that hurt you like crack, dope and alcohol.'*

*'All drugs can affect your health in negative ways.'*

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### Information sources

The young peoples' main sources of information about medicines were their parents, particularly their mothers, and their doctors. Many of them trusted their parents to give them good advice when they were sick.



*'Mum tells me all that stuff, so I don't really have to think about it.'*

They were less satisfied with their doctors' advice and directions, and often relied on parents to translate for them. However, some realised their parents also had difficulties understanding doctors.

*'I think they need to get rid of their jargon a lot of the time and speak in terms we can understand.'*

*'Most of the time I get Mum to explain it, but sometimes she doesn't understand.'*

### Dealing with doctors

Some young people had helpful and approachable doctors, while others felt their doctors could not relate to them or communicate with them.

*'I'm invisible. I'm the patient getting checked out and here's the doctor talking to my Mum about something that's wrong with my body.'*

Some wanted to know about non-drug treatments, and some did not feel comfortable discussing issues such as side effects of medicines.

*'People always seem to think that the answer is medication, they don't think of trying diet, exercise or*

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# Understanding brand names

These days many prescription medicines are available in more than one brand. You may have discovered this when your pharmacist asked you if you would like a cheaper brand than the one the doctor prescribed.

If your doctor or pharmacist gives you a medicine with an unfamiliar name, it is important that you find out if it is a different brand of one of your usual medicines, or a new medicine. Knowing this will help you avoid problems. Unfortunately, sometimes people don't realise their 'new' medicine is simply another brand of their usual medicine, and so take both, therefore taking double the intended dose.

Every prescription medicine has two names: one is the 'brand name', the other is the 'generic name'. Like many things we buy, medicines are usually referred to by their brand names. For example, Prozac is the well known brand name of a medicine for depression, but the generic drug name of the medicine is fluoxetine.

Different brands of a particular medicine share the same generic drug name. For example, ranitidine is the generic name of a medicine for stomach ulcers. However, most people who take ranitidine probably think of it as Zantac, which is the brand name it was given by its original manufacturers. Nowadays,



Some of the brands of 150 mg ranitidine tablets available on the Pharmaceutical Benefits Scheme.

- 1 Ranihexal
- 2 Ranitidine BC
- 3 Rani 2
- 4 Ranoxyl
- 5 Ranitidine
- 6 Zantac
- 7 Ausran

several other companies also make ranitidine, and each has given it a different brand name. Other brands include Ausran, Rani 2, Ranihexal and Ranoxyl. In addition, some of the big pharmacy

## Typical labels of two brands of ranitidine

(Mrs Smith is a concession cardholder)

Brand name →	<b>ZANTAC TABLETS 150 mg 60</b>	\$5.95	← Concessional price plus price premium
Generic name →	(RANITIDINE)	(Full cost \$24.13)	
	Take one tablet daily		
	<b>Mrs Joan Smith</b>	16/08/04	
	Dr Chang		
Brand name →	<b>RANI 2 TABLETS 150 mg 60</b>	\$3.80	← Concessional price
Generic name →	(RANITIDINE)	(Full cost \$21.96)	
	Take one tablet daily		
	<b>Mrs Joan Smith</b>	16/08/04	
	Dr Chang		

chains have their own brands of ranitidine, such as Chemmart Ranitidine, healthsense Ranitidine, Terry White Chemists Ranitidine.

Usually, both the generic name and the brand name appear on the label. The generic name appears in brackets below the brand name. To find out if two medicines are the same, look for the generic names on the labels. If the generic names are the same, the medicines are different brands of the same medicine. If the generic names are different, the medicines are not the same. (Also, medicines come in different strengths, so check that the strengths are the same too.)

The first brand of a medicine is often referred to as the 'original brand' or 'premium brand'. Later brands are often referred to as 'generic

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### **Different brands of a particular medicine share the same generic drug name.**

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brands'. Generic brands have to meet the same manufacturing quality and safety standards as the original brand. They also have to be tested to show that they work in the same way in the body as the original brand. The advantage of generic brands is that they usually cost less.

#### **Tips**

- If you are unsure whether two medicines are the same, ask your pharmacist or doctor.
- Don't rely on what the tablets or capsules, etc look like. Sometimes, different brands of the same medicine look the same, and sometimes they look different (see picture).
- If given a medicine with a new name, ask if you should take it as well as, or instead of one of your usual medicines.
- If possible, stick with one brand, whether it is the original brand or a generic brand. Let your doctor and pharmacist know which brand you prefer.

## **Young people talk about medicines**

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*counselling before trying a pill ... Doctors could try to educate patients before automatically prescribing.*

*'I am usually more focused on getting out of the GP's office more than anything else so I don't ask many questions about medications and side effects.'*

### **Medicines at school**

Some young people told of the difficulties they experienced with medicines at school.

*'I had to change my medication times as I was having a hard time getting out of class. I have to time my medication to the correct amount of hours apart, so changing the hours can leave me up late at night — so this is frustrating at times.'*

### **Sharing medicines**

The 10–12 year olds thought sharing medicines was wrong. However, many of the older participants regarded it as normal, and some talked about sharing, buying and selling medicines at school. The most commonly shared medicines appeared to be Ritalin, Ventolin puffers and weight loss medicines.

*'I don't think you should share your medicines, because what if it doesn't fit your body?'*

*'Giving drugs (medications) to your friends is not a big deal — you can't stop it — it's just inevitable.'*

Some young people did not feel it was always necessary to warn their friends about the dangers or side effects of the medicines they were trading, because they thought they were safer than illegal and age-restricted drugs.

*'If they're good friends you will tell them the side effects, but if you don't know the person you will just give it to them and say, "just take this".'*

### **Conclusion**

'The research highlights the importance of knowing how to communicate, build relationships and involve children and young people in decisions about medications,' said Gillian Calvert, NSW Commissioner for Children and Young People.

A more detailed report of the research can be found on the Commission for Children and Young People website at [www.kids.nsw.gov.au](http://www.kids.nsw.gov.au).

# Finding good information on the internet

The internet is a vast resource of health information, but the quality and reliability of the information varies widely. This article provides hints to help you find reliable health and medical information, including information about medicines, on the web. An article on other sources of information about medicines will appear in a future issue of *MedicinesTalk*.

## Is it Australian information?

Information about medical conditions and the principles of the wise use of medicines are much the same the world over, but information about specific medicines differs between countries. If looking for information about medical conditions and medicines in general, good quality websites around the globe will give you reliable information. However, if looking for information about specific medicines, including over-the-counter, alternative and complementary medicines, seek out Australian websites. Medicine names, including brand names, safety information, and the conditions a medicine can be used for vary from country to country. Using overseas websites may give you information that is misleading or not relevant in Australia.

Deciding whether a website is Australian can be difficult. Look for details, such as an Australian street address and telephone number, to confirm that it is an Australian site.

## Who produced the information?

The name of the individual or organisation that produced the website should be clearly stated and easy to find. If the author is an individual, information about their qualifications and credentials should be given. If the author is an organisation, information about the nature of the organisation and its aims should be given. These details can usually be found in the 'About us' page.

Such information may give you clues about the reliability of the information, its relevance to you, and its potential biases. For example, it may enable you to decide whether the website has been produced to provide balanced information or to encourage you to buy a product or service.



As a general rule, information produced by larger, well established health and education institutions is more likely to be reliable and balanced than information produced by individuals and commercial companies. However, there are many exceptions to the rule, so you need to evaluate the information yourself.

Larger, well established institutions are often better equipped to prepare quality websites because they have access to the resources needed to prepare reliable information and expert staff to do the work. In contrast, the information prepared by individuals is often based on the author's personal experience, which may be useful when looking for

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**Look for information that discusses a range of treatment options and their potential benefits, risks and side effects.**

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information about the likely impact of a medical condition or treatment. Information produced by commercial companies is often designed to promote a product as well as educate, so it may give only part of the story.

## Has it been checked?

Websites that have been reviewed (checked) by experts who were not involved in preparing the information tend to be more reliable and balanced than those that have not. Look for mention of an advisory committee or review panel.

## Is it comprehensive?

If seeking information about the treatment of a condition, look for information that discusses a range of treatment options and their potential benefits, risks and side effects. Be aware of sites that discuss only one or two treatment options, which may be the producer's preferred treatments or products, and ignore other options that may be equally valid.

If seeking information about a specific medicine, look for information that discusses the side effects and risks of the medicine as well as the benefits.

## What is the evidence?

The evidence supporting the information in a website may be the results of clinical trials involving thousands of people, the knowledge and experience of medical specialists who belong to a professional organisation like the Royal Australian College of Obstetricians and Gynaecologists, the beliefs of an individual doctor, or the testimonial of a customer. Each of these types of evidence has a different level of credibility.

Sites that use customers' testimonials, practitioners' anecdotes and celebrities' endorsements have little credibility and should be treated with scepticism. Similarly, sites that promise miraculous cures, talk about medical breakthroughs, or sound too good to be true should be avoided.

## Could it be advertising?

In Australia, pharmaceutical companies are not allowed to promote prescription medicines to consumers via websites or provide links to sites that promote such medicines. However, subject to certain rules, promotion of over-the-counter, alternative and complementary medicines is allowed.

Sometimes, there is a fine line between balanced information and promotion, particularly in over-the-counter, alternative and complementary medicines. Clues to the site being promotional include

- it endorses one product only
- it includes testimonials
- it emphasises the positives but ignores or brushes over the negatives
- it has links to sites that sell products.

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## Use well known and recommended sites

When looking for information, don't rely solely on search engines such as Google. Use well known sites, and sites recommended by health professionals and consumer groups. Some larger sites, such as HealthInsite and Better Health Channel, primarily provide links to specialised websites that meet their quality standards. In effect, they direct you to quality information by doing some of the checking for you.

### Health and medical sites

#### HealthInsite

[www.healthinsite.gov.au](http://www.healthinsite.gov.au)

#### Better Health Channel

[www.betterhealth.vic.gov.au](http://www.betterhealth.vic.gov.au)

#### MedlinePlus

[www.medlineplus.gov](http://www.medlineplus.gov)

#### Mayo Clinic

[www.mayoclinic.com](http://www.mayoclinic.com)

#### My Doctor Health Information

[www.mydr.com.au](http://www.mydr.com.au) (click on health information search)

#### Informed Health Online

[www.informedhealthonline.org](http://www.informedhealthonline.org)

#### ABC Health Matters

[www.abc.net.au/health](http://www.abc.net.au/health)

### Medicines sites

#### NPS Medicines Information

[www.nps.org.au](http://www.nps.org.au) (click on consumers, then medicines information (CMI))

#### Better Health Medicines Guide

[www.betterhealth.vic.gov.au](http://www.betterhealth.vic.gov.au) (click on library, then medicines guide)

#### My Doctor Medication Search

[www.mydr.com.au](http://www.mydr.com.au) (click on medication search)

# Getting a good night's sleep

Most people have difficulty getting a good night's sleep at some stage in their lives. People often look to sleeping tablets to help them sleep. However, it is now realised that using these medicines for more than a few days at a time can cause major problems. It is usually better to deal with sleep difficulties using non-drug methods.



## Sleeping tablets

Sleeping tablets disturb the natural rhythm of your sleep, so the sleep is not as deep or restful. They also cause side effects, such as drowsiness, dizziness, memory loss and poor concentration. The side effects often continue into the next day, particularly in seniors, and sometimes make people more likely to have falls and other problems.

Sleeping tablets can be addictive, and coming off them becomes harder the longer you take them. In addition, most people develop a tolerance to them after a few days, so they need increasingly larger doses to make them sleep.

Talk to your GP if you have been taking sleeping tablets for a while and want to come off them.

## Non-drug tips

In the long term, overcoming sleep difficulties using non-drug methods is usually more successful than using sleeping tablets. The tips below have helped many people overcome insomnia, so it might be worthwhile trying some of them if you are having difficulty sleeping.

### During the day

- Maintain a regular routine for meals, chores and activities.
- Spend 30–60 minutes outdoors in the late afternoon or early evening. Regular exposure to sunlight at this time will help you become sleepy in the late evening.
- Avoid having a daytime nap.
- Be as active as possible during the day.

### In the evening

- Do 20–30 minutes of light exercise, such as walking or stretching, early in the evening.

Exercise tends to make you sleep more deeply 4–6 hours later.

- Avoid drinks containing caffeine, such as coffee, tea, cola and cocoa, for at least 5 hours before bedtime. Caffeine makes it difficult to get to sleep and stay asleep.
- Avoid alcohol near bedtime. Alcohol will help you get to sleep more quickly, but it will also make your sleep lighter and more disturbed, and you will wake up more easily.
- Relax and get ready for sleep by winding down with an hour of television, reading or listening to music before bedtime.
- 'Switch off' from the day's activities and problems. If necessary, make a list of all the things on your mind, and decide to deal with them the next day.
- If you have trouble 'switching off' at night, learn a relaxation technique and practice it before using it to help you get to sleep.
- Make sure your bed and bedroom are not too hot nor too cold.

### At bedtime

- Develop a bedtime routine (warm bath, snack, clean teeth, etc) and carry it out every night. Your body will learn to recognise that it is time for sleep.
- Go to bed only when you feel 'sleepy'.
- Don't read or watch television in your bedroom.
- Enjoy relaxing in bed even if you don't fall asleep immediately.
- If you can't fall asleep or get back to sleep, think of pleasant things.
- Get up at the same time each morning.

# Community QUM Program update

## Rural QUM Project

People in rural and regional Australia have poorer access to health information than people in metropolitan areas. To help redress the situation, the NPS Community Quality Use of Medicines (CQUM) Program has embarked on the Rural QUM Project. The project will help rural people

- find balanced and credible information about medicines
- communicate with their health care providers
- become active medicines partners
- use multiple medicines safely.

The project has four components. A community engagement program will help communities and small groups run one-off events to promote the quality use of medicines (QUM) to consumers. This component will be coordinated by the Consumers' Health Forum of Australia, the national health consumer organisation.

A number of rural communities and organisations will be given grants of up to \$25,000 to help them develop and implement long-term QUM projects in their areas. This component will be run in association with the National Rural Health Alliance and the Health Consumers of Rural and Regional Australia.

These two components will be supported by a resource kit and media campaign. The kit will provide tips and resources (one-stop shop) for consumers and community organisations running QUM activities. The media campaign will promote the Rural QUM Project's messages and activities, and encourage people and organisations to participate.

If your group would like more information about the project, or would like to become involved, telephone Amanda Bray of the CQUM Program on 02 8217 8700 or email her at [cqum@nps.org.au](mailto:cqum@nps.org.au).

## MIP Project wins award

The Medicine Information Persons (MIP) Project, run by the Combined Pensioners and Superannuants Association of NSW (CPSA), recently won the community section of the National QUM Awards.



Raquiba Jahan accepting the National QUM Award (community section) on behalf of the Medicine Information Persons (MIP) Project.

The National QUM Awards are an initiative of the National Prescribing Service (NPS) and the Pharmaceutical Health And Rational use of Medicines (PHARM) Committee. They acknowledge the achievements of quality use of medicines projects in Australia.

The Medicine Information Persons (MIP) Project, which began in 1991, helps older people learn about medicines and use them wisely. In Sydney, the project recruits older people from 13 different language communities, and trains them to educate their peers in the community. For more information about the project, ring Dr Raquiba Jahan on 02 9281 3588, or visit the CPSA website at [www.cpsa.org.au](http://www.cpsa.org.au).

## CQUM workshop

On 27 May 2004, 74 people gathered in Sydney to participate in the 'Building on the Foundations' workshop, which was organised by the NPS Community Quality Use of Medicines (CQUM) Program. Participants represented all the quality use of medicines stakeholders: consumers, community organisations, health professionals, governments and the pharmaceutical industry. The participants endorsed the directions and achievements of the program to date, and discussed their visions for the future. The workshop report is available on the NPS website at [www.nps.org.au](http://www.nps.org.au). For further information about the workshop, contact Amanda Bray on 02 8217 8700 or at [cqum@nps.org.au](mailto:cqum@nps.org.au).

# Expiry dates

Medicines usually deteriorate over time due to the effects of heat, light and air. As they deteriorate, they may become less effective, or undergo changes that make them harmful. To avoid such problems, every medicine is given an expiry date.

The expiry date is usually found on the back panel of bottle labels and on the end flaps of boxes, near the batch number. The expiry date is indicated by a prefix such as 'Expiry', 'Expires', 'Exp', 'Expiry date', 'Exp date' or 'Use before', and the date in months and years after which it should not be used.

The expiry date given depends on the length of time the medicine is expected to remain safe and effective when stored as recommended. Some medicines last only a few months, while others last many years.

Always check the expiry date before using medicines that you've had for a while. Also, store medicines as recommended, so they don't deteriorate prematurely.

Take any expired medicines to your local pharmacy, so the pharmacist can dispose of them safely. Don't flush them down the toilet or pour them down the drain, because they will pollute our environment, particularly our waterways.



Finding good information on the internet

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## Is it consistent with other information?

It is usually worthwhile using more than one website when searching for information, particularly if seeking information about a medical condition and its treatments. Using more than one website will help you determine the reliability of the information. If the information is consistent across several websites, you can be reasonably sure it is reliable. Using several sites also provides a more comprehensive coverage of the topic and the range of treatment options available.

Most good websites will help you find other useful sites by providing links that take you to relevant sites. Many will also give you a brief summary of the information in the linked site. However, beware of links to overseas sites about medicines.

## Is it up to date?

Out-of-date information may be superseded, misleading or irrelevant, so look for the date the information was last revised. Old information is not necessarily inappropriate, but a recent date of last revision may give you confidence that someone is keeping track of the information and updating it as needed. The date when last revised often appears at the bottom of the front page of the website or at the bottom of the page containing the information.

*MedicinesTalk* aims to inform consumer groups about policies and activities related to the Quality Use of Medicines (QUM), and to encourage groups to become involved in QUM activities. We particularly want to publish stories about QUM activities conducted by or in collaboration with consumer groups. Please contact the Editorial Team if your group has a story, news or feedback.

*MedicinesTalk* is written and edited by Ros Wood and Sarah Fogg, overseen by an Editorial Committee comprising representatives of consumer organisations and the National Prescribing Service (NPS).

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