

Pharmacological treatment of mental disorders in primary health care



**World Health
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The World Health Organization (WHO) definition of rational use of medicines, formulated in 1985, emphasizes that patients need to “receive medications appropriate to their clinical needs, in doses that meet their own individual requirements, for an adequate period of time, and at the lowest cost to them and their community” (World Health Organization, 1985). According to this definition irrational use of medicines may refer to lack of access to essential medications or to inappropriate use of medications that are accessible and available.

According to *The World Health Report 2001*, access to essential medications is a priority. Essential psychotropic drugs should be provided and made constantly available at all levels of health care. These medicines should be included in every country’s essential drugs list, and made available whenever possible. In some countries, this may require enabling legislation changes. These drugs can ameliorate symptoms, reduce disability, shorten the course of many disorders, and prevent relapse. They often provide the first-line treatment, especially in situations where psychosocial interventions and highly skilled professionals are unavailable.

In addition to access, appropriate use of medicines for mental disorders should be improved. Use of medicines for mental disorders is influenced by several factors, including lack of adequate knowledge about prescription and use, economic influences, cultural factors, community beliefs, poor communication between prescribers and patients, and poor adherence to correctly prescribed medicines. Consequently, strategies to promote more appropriate use of medicines need to involve those who prescribe medicines (physicians, nurses, other health care providers), those who dispense medicines (community and hospital pharmacists) and those who use medicines or supervise its proper intake (patients, care givers, family members) (World Health Organization, 2005).

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