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Research Article

## CONSEQUENCES OF REFFERALS FROM A SECONDARY HEALTH CARE CENTER

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**Abstract:**

**Objective:** The main objective of this research work is to evaluate the recent referral nature from an institute with secondary health care facility and to determine what the consequences were in real condition to the patients. These facilities play very important part in the system of health care especially for the people from remote areas or undeveloped areas of city.

**Methodology:** Hospital of Lal Quarter Samanabad, Lahore was the venue of this research work. This research work was retroactive as well as retrospective in nature. The study of total 50 referrals carried out retroactively and study of fifty referrals carried out retrospectively from March 2018 to June 2018. We obtained the various indications for the referrals from the record of referrals for patients; record was under the custody of institute. The analysis of collected information carried out with SPSS V.10.

**Results:** In current research work about 86.0% patients recovered after treatment at the referral health care centers whereas 12 patients did not go to the referral centers after achievement of relief from received medicines from referring center. Two patients died, one because of uncontrollable diabetes mellitus and second died because of myocardial infarction.

**Conclusion:** Ischemic heart diseases in these areas require particular attention. There is also vital requirement to build the tertiary care center adjacent to those referring centers to handle the cases with extreme emergency condition.

**KEY WORDS:** Secondary, tertiary, referring, ischemic, disease, diabetes mellitus, SPSS, methodology.

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**INTRODUCTION:**

Secondary health care centers are the backbone for the system of public health in urban as well as nonurban areas in our country Pakistan. These health care centers have faced serious criticism about the care quality & adverse infrastructure; these health care centers are the main secondary health care facilities for most of the population of our country especially in non-urban areas. These services are not complete if these facilities have deficiencies and need effective referral systems to the tertiary health care hospitals. The authors from west have largely studied the type and nature of referrals from these centers [1], there was not much importance provided to the referrals from these health care facilities to the tertiary care health facilities.

In one research work conducted fifteen years ago, Pratinidhi and his colleagues stated two hundred and forty seven referrals for secondary health centers. They found that most of the patients availed the referral system & longer distance referral centers decreased suitable consequences. This research work carried out to evaluate the real nature of referral from secondary health care institute and also what were the consequences of those referrals on patients.

**METHODOLOGY:**

This research work carried out in Hospital of Lal Quarter Samanabad, Lahore. The design of this research work was retroactive as well as prospective. The study of total 50 referrals carried out retroactively and study of fifty referrals carried out retrospectively from March 2018 to June 2018. We obtained the

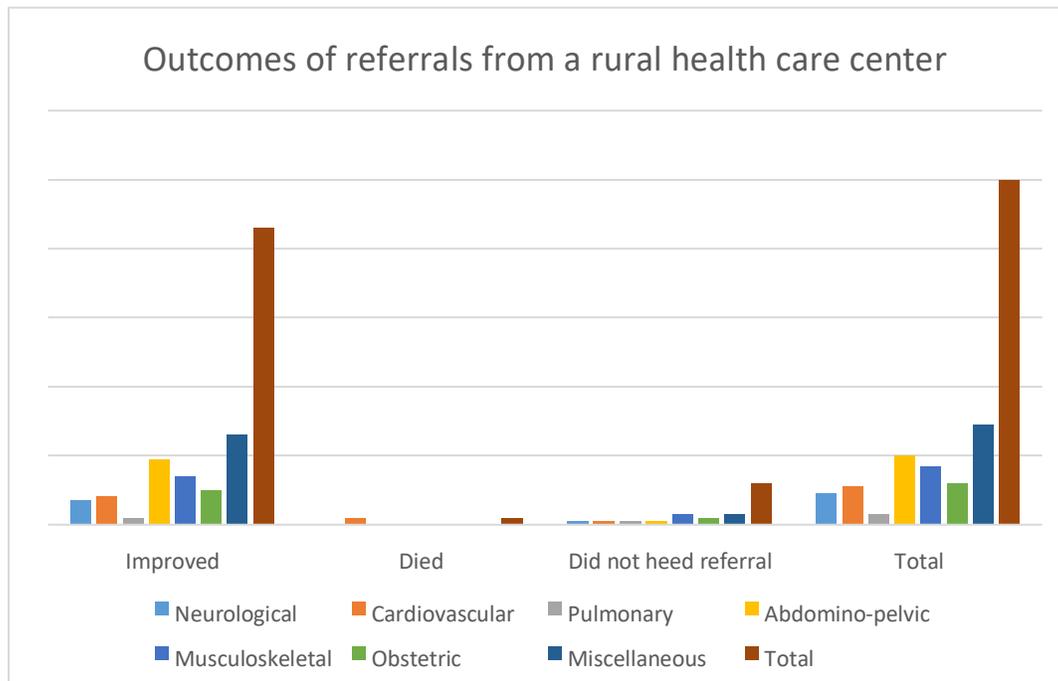
various indications for the referrals from the record of referrals for patients; record was under the custody of institute. We also recorded the outcomes after obtaining them by going to the homes of those patients, interviewing the patients or kin if the patients was not alive at the time of this visit. There were different items in the interview regarding the information about the treatment conducted in next hospital, what were the improvements after the referrals? Or what are the reasons behind not observing the referrals? The referrals who were neither the patient nor close member of family were not the part of this research work. The duration and timings of the research work were according to the posting of medical students in this health care center.

**RESULTS:**

The referrals indications were unsure identification or improper or deficient treatment facilities or presence of both of these factors. All these patients got referrals to the close hospital with tertiary care. The nearest tertiary centers were the teaching hospitals with tertiary care located within the thirty kilometers from the referring center. There were total forty eight females and fifty two male referrals with fifty one acute cases & fifty nine chronic patients in this research work. The provisional identifications of the referrals are available in Table-1. Total 88 patients obeyed the referral advice whereas twelve patients did not. The patients who observed referral, eighty seven patients called on a government hospital but one patients met his death in route.

**Table-I: Outcomes of referrals from a Primary Health Institution**

Indication	Improved	Died	Did not heed referral	Total
Neurological	7.0	0.0	1.0	9.0
Cardiovascular	8.0	2.0	1.0	11.0
Pulmonary	2.0	0.0	1.0	3.0
Abdomino-pelvic	19.0	0.0	1.0	20.0
Musculoskeletal	14.0	0.0	3.0	17.0
Obstetric	10.0	0.0	2.0	12.0
Miscellaneous	26.0	0.0	3.0	29.0
Total	86.0	2.0	12.0	100.0



The patients who did not bother the referral found with some chronic complications as migraine, high BP, bronchitis, candidiasis of vagina, osteoarthritis, diabetes mellitus & gastritis. The main reason behind the ignoring was relief from symptoms while following medicines obtained from the main referring center adverse economic condition, no transport facility and attendant's deficiency. In all the referred patients, 86.0% patients got improvement following the treatment of health care facility of tertiary center. Two patients among referrals died. First patient was available with diagnosed background history of not controllable diabetes mellitus and suffered from myocardial infarction and died in the way to next health care center. The second patient was suffering from myocardial infarction who died in the same referring institute.

### DISCUSSION:

In this research work, referrals were depending upon the issue associated to identification & presence of proper resources of treatment. In his review article, O'Donnell concluded the suggestion of Coulter that that suitable referrals were very necessary for the patients, in time with the disease course, effectual in the achievement of the purposes and cheap [1]. The similar research work stated that referrals were very frequent when the tertiary hospitals were near from the location of such secondary care centers. In this research work, the most near tertiary hospital was within 30 kilometers which is also the same case in various areas of our country Pakistan.

The results of this research work concluded that about equal amount of referrals were suffering from chronic conditions 49.0% as well as acute conditions in 51.0%. Though, there are various research work emphasizing problems adjoining acute referrals, we were unable to

determine any work discouraging referrals of the patients with chronic complications.

Acute abdomen abnormality, obstetric anomalies, insect's bites and traumas were the various surgical conditions among referral of this research work. The other challenging condition was chronic in the no developed areas of the city. Treatment of this issue involves dressings for a regular period and surgical interventions in severe cases. Most of the patients found with satisfaction with occasional dressings to perform their activities to run their circle and medical professionals were aware that it will decrease the process of healing.

Total 88.0% patients of this research work availed referrals. This finding was very much similar with the conclusions of Prathinidhi [2], who stated the 87.50% patients observed referral. Whereas 86.0% patients stated of having improvement from the treatment obtained from the tertiary health care center. It was very important to notice that every patient who did not

observe the referral was suffering from the chronic disease. Poor economic condition & deficiency of support from family prevented them to get high level of health care facilities and in consequence of these reasons, some patients got the treatment for only short term. Additionally, the complacency's sensation about various conditions that they were suffering from a long duration and then recovered from those complications, enhances to the motivation deficiency to get high amount of medical care. Although, this phenomenon is not specific for the countries which are under development. A current research work from Washington DC [4] stated that the residents of rural areas mostly depends on the local services of health care which is largely due to the prevention from travelling to large distances.

The diseases of heart which were the main reason of deaths of two persons in this research work are increasing in our country Pakistan [5] and these diseases are common in both urban as well as non-urban areas. There is a need of modification in the prevention techniques because of myocardial infarction with high level facilities and proper training and enhancement in the level of the medical staff of the secondary health care centers. There is an urgent need for the modification in facilities & training of professionals for the patients with serious conditions who will not be able to reach the next higher health facilities because of long travels. This issue is very serious problem for the people living in the rural areas of our country. The utilization of the technology of telemedicine [5] is probable way to handle the administration of severe heart diseases in those health care centers without full medical facilities.

### CONCLUSION:

The finding of this research work concluded that improvement in the capacity of the medical professional to handle maximum number of patients of chronic and acute diseases as well as better supply of the health machinery and facilities are the main contributory factors for good health outcome. There is a requirement of particular attention to the issues of IHD in those areas. The strong association of these centers with the tertiary health care centers can be helpful for better management of the patients suffering from heart diseases.

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