

## Role of Pharmacology Education for Physiotherapists

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Physiotherapy has core association with human anatomy and movement and maximizing physical endurance, promotes improvement in one's valued of life and movement potential in the horizon of promotion, prophylactic, cure and management, habilitation and rehabilitation. Over time, the Physical Therapy Profession has seen dramatic change and physiotherapists now deal with not just orthopedic conditions such as fractures, osteoarthritis and joint problems but physiotherapy has been shown to be of a lot of importance for neurologically ill patients, post cerebrovascular accidents, in various cardiopulmonary conditions and sports injuries. Moreover, physiotherapy has become an integral part when it comes to rehabilitation and caters to all types of population, be it pediatric, adolescents, pregnant women and geriatric patients.

Pharmacology deals with drugs and profound different aspects pharmacodynamic and pharmacokinetics parameters. Pharmacology is an intrinsic compartment in a physical therapist profession. For a practicing physiotherapist, essential and basic concept of a drug, how it acts with physical, emotional and psychological interests, concentration of drug being used, the routes of administration, and the BMR of the person taking the medicine is significant. With the increasing prevalence of lifestyle disorders, such as obesity, diabetes mellitus and hypertension and increased screen time in people of all ages, majority of the individuals take some form of medicine or supplements when it comes to maintenance of health. Over the counter available NSAIDs and analgesics are few of the most commonly used medicines for symptomatic relief in Indian population.

Physical therapists (PT) encounter many patients that have co morbidity and significant information medicines and their effects - both intended and undesired allow PT's to facilitate treatment in customized patient centric way. Often medications are relatively safer, but concern must be taken particularly when dealing schedule H drugs, biologics, monoclonal antibodies and anti-neoplasia agents. Physical therapists are in high demand especially to geriatric patients and dealing with degenerative joint manifestations like osteoarthritis, total joint replacement stroke, cardiopulmonary and health complications, these conditions are treated with the above mentioned drugs and are responsible for the common side effects. Physiotherapists, when noting a history or conducting a systemic review to document all the pharmacological interventions (prescription, OTC medications and dietary supplements) must be careful with prescribed medicines to patient and other non-prescription medicines they have been taking. Numerous prescriptions that have all the earmarks of being protected are conceivably wrong for the geriatric populace. An OTC drug used to treat pain identified with osteoarthritis is ibuprofen, is associated with high risk for GI tract disturbance and bleeding or peptic ulcer in the overall aged. Furthermore, patients with congestive heart failure have relatively more risk for fluid retention and exacerbation of cardiovascular symptoms.

Perhaps statins are majorly prescribed for reducing vascular cholesterol. This class of medication has been appeared to build the danger of myopathy, may cause skeletal muscle squeezing, irritation, exhaustion, shortcoming and muscle breakdown. Monitoring the results and danger of statins, physiotherapist can differentially

analyze whether muscle pain and soreness are an aftereffect of the activity and action endorsed or be a symptom of the statin. The case study, statin treated induced muscles cramp may not be corrective using physical intervention but cured with discontinuous of statin based treatment.

Regularly recommended prescriptions (e.g. fluoroquinolone) been credited to peripheral neuropathy, tendinopathy including rupture. Thus, physical therapists play significant role in safe medication by being expert professional of the medications.

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