



## Short Communication

## Level of patient satisfaction at government Unani &amp; Ayurvedic Medical College Hospital in Dhaka, Bangladesh



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## ABSTRACT

**Objectives:** This study was aimed to assess the level of patient satisfaction at Government Unani & Ayurvedic Medical College Hospital in Dhaka, Bangladesh.

**Study design:** This was a cross-sectional study conducted among 165 patients attended at the out-patient department of Government Unani & Ayurvedic Medical College Hospital, Dhaka, Bangladesh. Patients who were equally or more than 18 years with a history of at least two referral visits were eligible to participate in the study.

**Methods:** Patients satisfaction was measured by the Patient Satisfaction Questionnaire (PSQ-18), composed of 18 items translated in Bangla.

**Results:** Among 165 out-patients, 135 (81.8%) were satisfied and 30 (18.2%) were dissatisfied with medical services. The mean and standard deviation of total patient satisfaction was 69.1 ( $\pm 16.9$ ). Financial aspects were the major area of patient dissatisfaction 29 (17.6%) towards Unani and Ayurvedic treatment due to lack of free medicine supply and high cost of medicine.

**Conclusion:** The results would shed light on the present conditions of medical services at Government Unani & Ayurvedic Medical College Hospital which could be used to influence the outlook of the policymakers of our country.

Over the last 2500 years, there have been very strong traditional systems of medicine such as Chinese, Ayurvedic, and the Unani, born and practiced [1]. Bangladeshi traditional medicine is a unique conglomerate of different ethnic-medical influences. Due to socio-demographic and geographical characteristics of the country, it involves traditionally rooted components influenced by native people and close-by Ayurveda and Unani medicine [2,3]. Patient satisfaction is considered an important outcome of the quality of healthcare which made it more interesting as a research area [4,5].

The study of patient satisfaction towards modern medicine as well as Ayurvedic medicine is very common throughout the world. A recently conducted study found high patient satisfaction (>90%) on the utilization of traditional and complementary medicine [6]. In Bangladesh, the majority of the people, especially from the low socioeconomic class, depend on traditional healers until the failure of their treatment. If

modern medicine failed, they again return to the traditional healers, which may be due to increased satisfaction towards traditional medicine [7]. Therefore, it is important to conduct a study to determine the level of patient satisfaction regarding Unani and Ayurvedic treatment, as research on this issue is very rare in Bangladesh.

This cross-sectional study conducted from July to November 2019 among 165 patients of out-patient departments (OPDs) of Government Unani & Ayurvedic Medical College Hospital. Ethical approval was obtained from the Institutional Review Board (IRB) of North South University (NSU) and informed written consent from the participants was obtained. The translated Bengali version of the Patient Satisfaction Questionnaire (PSQ-18), originally developed by Marshall and Hays [8], was used to determine the level of patient satisfaction. Data analysis was performed using IBM SPSS (version 23).

Among 165 study participants, 60 (36.4%) were males and 105

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(63.6%) were females. The most frequent complaints received were gastrointestinal disorders (24.3%), hair and skin disorders (21.8%), menstrual problems (19.4%), musculoskeletal disorders (13.9%), headache (6.1%), metabolic and endocrine disorders (4.8%).

The mean ( $\pm$ SD) of patient satisfaction score was the highest in “Accessibility and Convenience” 15.73 ( $\pm$ 3.9), followed by “Technical Quality” to health care services 15.38 ( $\pm$ 3.8). The mean ( $\pm$ SD) of patient satisfaction score was the lowest in “Financial Aspects” 7.30 ( $\pm$ 1.85). The mean ( $\pm$ SD) of the total patient satisfaction score was 69.1 ( $\pm$ 16.9).

The level of patient satisfaction was categorized into a “satisfied” and “dissatisfied” group. 135 (81.8%) respondents were satisfied with medical services at Govt. Unani & Ayurvedic Medical College Hospital. Highest 29 (17.6%) were dissatisfied due to lack of free medicine supply and high cost of medicine. This indicates the price of Unani and Ayurvedic medicine is still higher than the people expectations. Thus, the availability of free medicine from the government, and lowering the cost of medicine may further increase the satisfaction level.

There was no statistically significant association between patient satisfaction and sociodemographic characteristics except an education level in  $\chi^2$  [2] analysis. A statistically significant association was observed between patient satisfaction and education level,  $\chi^2$  [2] (3) = 9.72,  $p$  = 0.021. Respondents of “HSC/Equiv. &/higher” group of education level had higher patient satisfaction than other groups. A multiple linear regression model was performed to predict the level of patient satisfaction based on the sociodemographic characteristics of respondents. Where the education level of respondents ( $p$  = 0.002) and occupation ( $p$  = 0.028) were identified as significant determinants of patient satisfaction at Government Unani & Ayurvedic Medical College Hospital. (Table).

It is noticeable that patient satisfaction towards modern medicine is decreasing due to high cost and side effects. Moreover, consumers believe that Ayurvedic medicines are safe as they are coming from natural sources and cost-effective. That might be the reason of relatively better patient satisfaction towards Ayurvedic therapy in our study and previously conducted studies [9–11]. Ayurvedic therapy aims to integrate and balance the body, mind, and spirit to help prevent diseases and promote wellness [9,10]. Therefore, traditional medicines should be more focused due to its high patient satisfaction, adverse drug reactions of modern medicine, cost-effectiveness [11].

#### Availability of data

Data can be provided on a properly justified request.

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#### Authors contributions

SAS, MMA equally contributed to study design, data analysis, and manuscript drafting; SAS collected data; SD, SAS, and AB involved in research design and manuscript writing; MDHH supervised the overall study.

#### Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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#### Appendix A. Supplementary data

Supplementary data to this article can be found online at <https://doi.org/10.1016/j.puhip.2020.100037>.

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