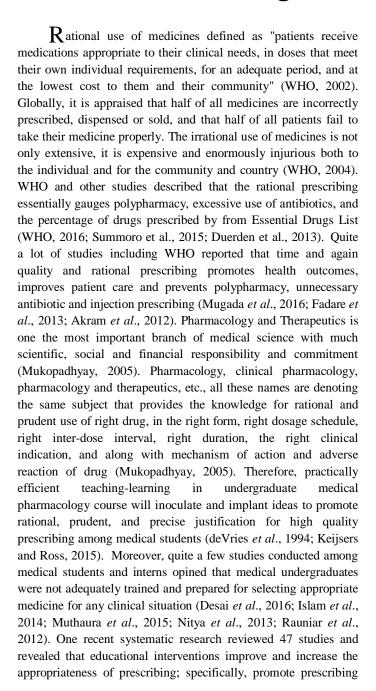
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## Pharmacology is the Backbone of Rational Prescribing





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first-line therapy or reduce inappropriate prescribing (Kamarudin *et al.*, 2013).

WHO developed more than a few manuals on principles of rational prescribing for undergraduate medical students for developing and developed countries (deVries et al., 1994; Hogerzeil et al., 2001). The notion of P-drug pronounced in "Guide to Good Prescribing" for the medical students, hands-on, program of study, is a good tool to promote the practice of rational use of medicine with the objective to promote use of cost effective, safe and suitable medicines (Khilnani, 2008; Singh, 2008). Guide to Good Prescribing teaches and promotes personal drug selection on basis of science, henceforth, prescribers can choose medicine rationally. Thereafter, reduces irrational prescribing and improve the prescribing behavior of healthcare professionals (Shankar, 2011). There are lot of successful studies reporting that P-Drug exercise among medical students has promoted much better and rational selection of medicines (Banerjee et al., 2014; Shankar, 2013; Shankar et al., 2011, Shankar et al., 2007). Nonetheless, the P-drug exercise among medical students has not been widely executed in medical and health professional schools in South Asia (Shankar, 2011). Another study also reported that essential drugs concept plays the most critical part to rational prescribing (Akhtar, 2009). Educational mediation and arbitration especially bed-side clinical teaching promoted by the Basic and Clinical Pharmacology through full of life teamwork with other clinical departments were considered essential as like backbone of rational prescribing, nevertheless, need to be combined with management and regulatory intervention and strict policy needed for new drug molecule registration (WHO, 2002; Akhtar, 2009).

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