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A Newsletter on Pharmacy Practice

Dear reader

Medicine is a "miracle elixir" which helps in maintenance and restoration of health by the prevention and treatment of illness. Cancer is a complex disease and the positive notion of finding a cure for it makes it always alive in the minds of researchers, clinicians, physicians, druggists and the fraternity involved in this activity. There have been articles about experiments on a particular drug or therapy or extracts from fruits would kill the malignant tumor cell, but still fail to find a place in

prescription practice. Preclinical studies at the National Cancer Institute, recommend a possible solution to *necroptosis*, a phenomenon of controlled cell death to make the human immune system free of cancer causing cells. Research on targeted cancer therapy brought into lime light the importance of colostrum and breast feeding in improving the natural immune system against cancer causing cells. Let the combined efforts result in the engineering of better approaches to create an immune response in various types of cancers.

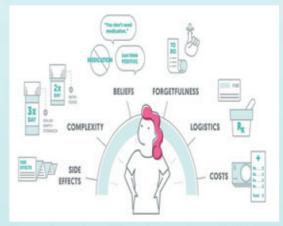
A PROSPECTIVE OBSERVATIONAL STUDY ON IMPROVEMENT OF MEDICATION ADHERENCE BY HIGH TOUCH MODEL IN HIV-1 PATIENTS IN TERTIARY CARE HOSPITAL

Medication adherence is defined by the World Health Organization as "The degree to which a person's behavior corresponds with the agreed recommendations from a health-care provider." Medication non-adherence in patients leads to substantial worsening of disease, death, and increased health care costs. Despite the availability of effective agents, it is a growing challenge, with rates as high as 50% in chronic disease. Poor medication adherence can lead to unnecessary disease progression and complications reduced functional abilities and quality of life, more medical costs and physician visits. Reasons are patient-related, prescriber-related, health system's team building-related, treatment and condition related factors.

Patient-centric models can develop effective health care The aim of this study is to prevent the medication non-adherence and to improve patient care groups and exclusion criteria was patients other than HIV-1.

The total number of patients included in medication non adherence study are 89 includes both males and females of different age groups selected randomly out of which males were 45 and females were 44. Average adherence was calculated in both males and females of HIV-1 before and after the HTM. The results are calculated by two-tailed Student t-test. In males, the calculated t-value (3.125) is greater than table t-value (2.447). In females, the calculated t-value (4.911) is greater than table t-value (2.447). The results concluded that after conducting HIGH TOUCH MODEL, there is a significant change

of medication adherence in HIV patients. The average adherence among males of various age groups before conducting HTM was found to be 74.5%, which increased to 85.75% after conducting HTM. The average adherence among females of various age groups before conducting HTM was found to be 73%, which increased to 86.5% after conducting HTM. The study results has been observed that there is a great increase in adherence of HIV patients of about 11.25% in males and 13.5% in females. This study concludes that the forgetfulness and interruptions of daily routine were the most common reasons for non-adherence among the patients. The High touch model has helped to improve the medication adherence of the patients suffering with HIV. The pharmacist has to be responsible in improving the Medication Adherence in patients with various chronic diseases such as HIV, Diabetes, Hypertension, Cardiovascular diseases, Asthma and COPD.



Source: Source:https://journals.sagepub.com/doi/10.1177/1545109712454333?icid=int.si-abstract.similar-articles.



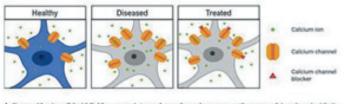
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IDENTIFIED ADVERSE DRUG REACTIONS IN GOVERNMENT GENERAL HOSPITAL (VJA.)

S.No	ADVERSE DRUG REACTION	ACTION TAKEN
1	Artesunate induced Dyspnea	Drug was stopped
2	Furosemide induced Tinnitus Treatment given for tinnitus	
3	Lamotrigine induced Akinesia Drug was stopped	
4	Prednisolone induced Rash Drug was stopped	
5	Ceftriaxone induced Diarrhea	Drug was stopped
6	Aspirin induced Ulceration of mouth	Treatment given for mouth ulcer
7	Pregabalin induced Constipation	Syp.Dulcolex was given
8	Amphotericin-B induced Vertigo Drug was given for vertigo	
9	Isoniazid induced peripheral neuropathy	Vitamin B. Complex was given for treating peripheral neuropathy
10	Oxcarbazepine induced Steven Johnson syndrome Drug was stopped	

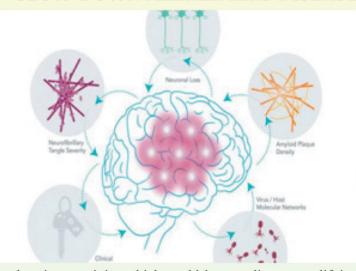
HYPERTENSIVE DRUG HAS POTENTIAL TO SLOW DOWN ALZHEIMERS DISEASE

Alzheimer's disease is a progressive disorder which causes brain cells to degenerate and leads to death of cells. Alzheimer's disease is most common cause of dementia – a progressive decrease in thinking, behavioral and social skills which disrupts a person's ability to function independently. As the disease progresses, the person may develop severe memory impairment and lose the ability to perform their daily activities. Worldwide millions of people are affected with dementia. There is no current therapy which cures Alzheimer's disease or alters the process of disease in brain. The current available medications may temporarily improve the symptoms or slow the rate of decline, which maximizes the function of the individual. Researchers have been looking for treatment which slows down the progression of the disorder and recently it has been found that the Antihypertensive drug Nilvadipine, may



A diseased brain cell (middle) has more L-type channels, and consequently more calcium ions inside it, than a healthy brain cell (jeft). Treating the diseased cells with a blocker of the L-type channel reduced the number of calcium ions able to flow into the cell (right).

have a positive effect on the cerebral blood flow of patients with Alzheimer's disease. Nilvadipine is a calcium channel blocker that causes relaxation of blood vessels and lowers the blood pressure which is used to treat hypertension. Nilvadipine used to treat Hypertension, reduces amyloid production, increases regional cerebral blood flow and anti-inflammatory



and anti-tau activity which could have a disease-modifying effects of Alzheimer disease. A study was conducted on 44 participants for 6 months who were randomly given a nilvadipine or a placebo. They measured the blood flow to specific areas of the brain, using an MRI technique and, the findings showed that there was a 20% increase in blood flow to the hippocampus, the brain area was linked to memory learning, among the group who took nilvadipine in comparison to the placebo group. The treatment did not have any effects on the blood flow to other regions on the brain. Nilvadipine at a dose of 8 mg found no overall effect on slowing the rate of cognitive behavior in a population of mild to moderate Alzheimer disease.

Source: https://www.mayoclinic.org/diseases-conditions/alzheimers-disease/symptoms-causes/syc-20350447

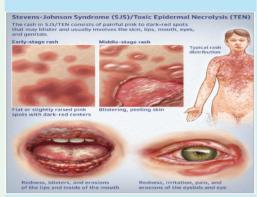
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OFLAXACIN

Risk of Stevens Johnson Syndrome (SJS) / Toxic Epidermal Necrolysis (TEN)

Ofloxacin Risk of Stevens Johnson Syndrome (SJS) / Toxic Epidermal Necrolysis (TEN). The NCC-PvPI, IPC has advised the CDSCO to request that the PIL for ofloxacin is revised to incorporate SJS/



TEN as a clinically significant adverse drug reaction. Ofloxacin is used for the treatment of bacterial infections of the skin, lungs, prostate, or urinary tract. Between July 2011 to July 2018, the NCC-PvPI received 81 ICSRs reporting SJS/TEN with the use of ofloxacin. The cases were reviewed by SRP at the NCC-PvPI, IPC, and a strong causal relationship between ofloxacin and SJS/TEN was found.

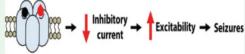
Reference: Based on the communication from NCC-PvPI, IPC India (ipc.gov.in)

REGULATORY NEWS TRANEXAMIC ACID

Risk of seizure/convulsion

Tranexamic acid Risk of seizure/convulsion. The NCC-PvPI, IPC has made a recommendation to incorporate seizure/convulsion as a clinically significant adverse drug reaction into the PIL for tranexamic acid marketed in India. Tranexamic acid is used to prevent or reduce bleeding in certain conditions, such as dental surgery in people with hereditary blood clotting

Effect of TXA



Co-apply Anesthetics





disorders, cervical surgery, heavy menstrual bleeding, nose bleeds and bleeding inside the eye. Between July 2011 and July 2018, NCC-PvPI received nine ICSRs of seizure/convulsion associated with tranexamic acid use.

Reference: Based on the communication from NCC-PvPI, IPC India (ipc.gov.in)

GLIBENCLAMIDE

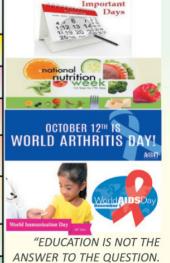
Risk of palpitations

Glibenclamide Risk of palpitations. The NCC-PvPI, IPC has advised CDSCO to request the revision of the PIL for glibenclamide to include palpitations as an adverse drug reaction. Glibenclamide is used for the treatment of diabetes mellitus. Between July 2011 and December 2018, NCC-PvPI received 12 ICSRs of glibenclamide associated palpitation. The NCC-PvPI also assessed 103 relevant reports from the WHO global database for reports of adverse events and the literature. A signal was published by the WHO Collaborating Centre for International Drug Monitoring (Uppsala Monitoring Centre, UMC) which identified this reaction as a signal in the Asian population. The cases were reviewed by SRP at the NCC-PvPI, IPC, and a strong causal relationship between glibenclamide and palpitations was suggested. The revision of the PIL was necessary based on the results of the investigation of the currently available evidence.

Reference: Based on the communication from NCC-PvPI, IPC India (ipc.gov.in)

DRUG NAME	ACTIVE INGREDIENT	APPROVAL DATE	USES
Ibsrela	Tenapanor	12.09.19	To treat irritable bowel syndrome with constipation in adults.
Aklief	Trifarotene	04.10.19	For the topical treatment of acne vulgaris in patients nine years of age and older.
Reyvow	Lasmiditan	11.10.19	For the acute treatment of migraine with or without aura, in adults.
Redlozyl	Luspatercept— aamt	08.11.19	For the treatment of anemia in adult patients with beta- thalassemia who require regular blood cell transfusions.
Fetrozja	Cefiderocol	14.11.19	To treat patients with complicated urinary tract infections who have limited or no alternative treatment options
Xcopri	Cenobamate	21.11.19	To treat partial onset seizures.
Dayvigo	Lemborexant	20.12.19	To treat insomnia

Source: https://www.fda.gov/drugs/new-drugs-fda-cders-new-molecular-entities-and-new-therapeutic-biological-products/novel-drug-approvals-2019



EDUCATION IS THE MEANS TO THE ANSWER TO ALL

QUESTIONS"

-WILLIAM ALLIN.



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Campus News

- On 19, Aug 2019, 16th Indo-African Conference on Global Issues and Trends in Pharmaceutical Sciences GTIPS 2019 was organized.
- On 6, Sep 2019, Awareness on PCOS, a student seminar by V Pharm D students was organized at SDMS Mahila Kalasala, Vijayawada to degree students.
- On 13, Sep 2019, Awareness session by IV Pharm D students on Health and Nutrition at Maris Stella College, Vijayawada.
- On 24, Sep 2019, On the occasion of Golden Jubilee Celebrations of NSS, students of III Pharm.D were made to be a part of Mega Eye Camp, organized by Lions Club, at KBN College, Vijayawada. Dr. K. Vijayasekhar of Akshaya Eye Hospital guided the NSS volunteers
- On 14, Oct 2019, On account of *World Diabetes Day* at new GGH, Vijayawada, students of Pharm .D participated in an awareness programme.
- 58th National Pharmacy Week Celebrations 18th to 23rd Nov., 19, on 8th Nov Inauguration Guest Lectures by Dr. Chakradhar and Dr. Vamsi Krishna, GGH, Vijayawada, 19th and 20th Nov,19 Power Point Presentations on the theme, Pharmacist: Your Medical Counsellor, 21st and 22nd Nov., 19 Pharma Expo 2019, Inauguration: Dr. A. Prameela Rani, Principal, Pharmacy College, Acharya Nagarjuna University, Guntur Dr. K. Vijayasekhar, Ophthalmologist, GGH, Guntur.
- On 30, Nov 2019, On the eve of World Aids Day on 1-12-19, Dr. T. Prabhu Kumar, MBBS, Clinical Mentor, ART. Centre, GGH, Vijayawada addressed the students.
- On 6-12-19, 8th Indo-US Conference was organized in association with APP International Branch, Tamilnadu. Prof. K. Sankar, Registrar, NTRUHS was the Chief Guest, Prof. Alekha K. Dash, USA, Prof. S. Sathesh Kumar, Vels University, Tamilnadu and Prof. T.E. Gopala Krishna Murthy were the Guests of Honour.

To.

We are pleased to receive your feedback and suggestions to:

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