



# MEDICINE INFORMATION NEWSLETTER

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## IN THIS ISSUE

Editors' Desk	1	Did You Know?	3
Quote	1	Website of Interest	3
Courses	2	World Health Days	3
Focus	2	News	4
Conferences	2	Resources	4
Saving Money in Medicines	2	Opportunities	4
Alerts	3	Gallery	5

## Editors' Desk

It has been reported that about 50% of the authors of the prestigious and most trusted worldwide textbook 'Harrison's Principles of Internal Medicine' have received substantial payments from pharmaceutical and medical device industries. But there are no declaration of conflicts. This has shaken the trust of the people on the textbook. One concerns whether the guideline given in the textbook are free of biasness and independent.

In addition, two revised guidelines: one on diabetes and the other on hypertension have caused confusions among the clinicians. The American College of Physicians has just published the desired blood sugar control levels for people with type 2 diabetes. The new guideline recommends the relaxation in blood sugar targets in patients. It recommends that the clinicians should aim to achieve a glycated haemoglobin (HbA1c) between 7 and 8%. The earlier recommendation was to achieve the desired glycated haemoglobin level between 6.5 to 7%. With most people with type 2 diabetes, achieving an A1C between 7 percent and 8 percent will best balance long-term benefits with harms such as low blood sugar, medication burden, and costs. This means there is a need of de-intensifying drug therapy at less than 6.5% level. However, Indian physicians find this unacceptable for Indian population.

On the other hand, the new blood pressure treatment guideline issued by the American Heart Association and American College of Cardiology lowers the blood pressure cut off for hypertension diagnosis from 140/90 mm Hg. The normal blood pressure means the blood pressure should be below 120/80 mm Hg. The stage 1 hypertension now refers to 130 to 139 mm Hg Systolic and 80-89 mm Hg Diastolic pressure. 120-129 mm Hg Systolic and less than 80 mm Hg Diastolic pressure is categorized as elevated. The stage 2 hypertension is 140/90 mm Hg. Previously what was called as pre-hypertension is now stage 1 hypertension. The reclassification makes people who were earlier in pre-hypertension stage to go now for drug therapy. This has also not gone well across as it tries to make the desired level same for all age groups.

The guidelines are aimed to promote best practices. But the conflicting views bring more controversy. The authorities should look into the issues and provide clear guideline for treatment of type 2 diabetes and hypertension in Indian population.

The current issue has all our regular features and hope you would find them interesting read. We shall be glad to have your feedback to improve the quality and contents of the newsletter.

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## Quote

No families take so little medicine as those of doctors, except those of apothecaries.

Oliver Wendell Holmes, 1860

# Courses

**Online Course:** *Public Health Interventions in Pandemics and Epidemics – An introductory level online course aims to guide learner through the new landscape by providing information and tools one needs to better manage disease outbreaks and health emergencies. The course can be started at any time.*

More details are available at: <https://openwho.org/courses/public-health-interventions>

**Epidemiological evaluation of vaccines: efficacy, safety and policy at London School of Hygiene and Tropical Medicine, UK - Course dates: 2 - 13 July 2018.** *The aim of this short course is to provide an understanding of the methods used in the evaluation of vaccines; from early human trials through to assessment of population impact and policy. Although the course focuses on human diseases the same concepts apply to animal diseases. More details available at: <https://www.lshtm.ac.uk/study/courses/short-courses/epidemiology-vaccines>*

## Focus: Emergency Contraceptive Pill with Levonorgestrel

Levonorgestrel, a progestogen, is the preferred choice for emergency contraception. The dose recommended is 1.5 mg and to be taken within 72 hours of unprotected sexual intercourse. Emergency contraceptive pills prevent pregnancy by preventing or delaying ovulation. The drug is metabolized by the cytochrome P450 enzyme system. Enzyme inducing drugs enhance this metabolism and reduce the contraceptive effects of Levonorgestrel.

Full enzyme induction can take 2 to 3 weeks to develop and similar period of time to subside after discontinuation of enzyme inducer. Anti-epileptics, anti-retrovirals, anti-TB drugs and St John's wort are potential enzyme inducers. The Committee for Medicinal Products for Human Use of European Medicine Agency has recommended doubling the dose of Levonorgestrel used for emergency hormonal contraception for women who have taken an enzyme inducer during the previous 4 weeks. 3 mg dose is suggested (two pills) when an enzyme inducer drug is taken in previous one month.

Before prescribing, it is necessary to ascertain what other drugs including herbals the patient is taking or taken. If the woman has taken an enzyme inducer, it is reasonable to advice 3 mg of Levonorgestrel to reduce the risk of intended pregnancy. As the dose doubles just to counter the reduced efficacy of the hormone as occurs due to enzyme induction, there is no additional safety concern.

[Source: Prescribe, March 2017]

## Saving Money in Medicines

The cost of medicines are often reported unaffordable. The unaffordability not only is a major cause of avoiding treatment but also a cause of bringing people to below poverty line. Here are few tips which would help the individuals to reduce medicine expenditure:

- If feasible explore the non-drug treatment like diet control and physical exercises.
- Avoid using new drugs. They are under patent and are very expensive. Their complete safety is yet to be established. Many new drugs are withdrawn from the market due to safety issues.
- Use Generic Drugs. They are cheaper compared to branded and branded generics. One of the biggest myth is brands ensure quality. The quality issues are reported for both brands and generics. Janaushadhi Stores promoted by Government of India and many other stores promoted by different state governments offer quality generic medicines at cheaper rate. Janaushadhi Stores offers medicines manufactured by public sector pharmaceutical companies.

# Conferences

## 1st International Conference FIP Pharmacy Practice Research:

This conference aims to increase the quality and quantity of pharmacy practice research by exchanging and disseminating information at an international level. New networks and collaborations will be established on major themes for experienced researchers and higher degree students. The conference is scheduled during 25-27 June 2018 at Lisbon, Portugal. More details are at: [https://fip.org/files/fip/Events/FIP\\_PPR\\_2018\\_003.pdf](https://fip.org/files/fip/Events/FIP_PPR_2018_003.pdf)

## Global Congress on Intellectual Property and the Public Interest:

American University Washington College of Law's Program on Information Justice and Intellectual Property announced the hosting of Fifth Global Congress on Intellectual Property and the Public Interest. This is scheduled during September 27-29, 2018, at Washington D.C. Further details may be accessed at <http://infojustice.org/globalcongress2018>

## MyDispense International Symposium 2018:

MyDispense is an online pharmacy simulation that allows students to develop and practise their dispensing skills. It provides a safe environment in which they may make mistakes without experiencing the serious consequences of practicing in the real world. The second MyDispense International Symposium will be held in Prato, Italy 15th - 17th July 2018. More details at: <https://info.mydispense.monash.edu/community/symposium/mydispense-symposium-2018/>

## ISPOR 21st Annual European Congress:

International Society for Pharmacoeconomics and Outcome Research schedules the European Congress 10-14 November 2018 at Barcelona, Spain. The abstract submission period is from 01st March to 13th June 2018. More details can be accessed at <https://www.ispor.org/Event/index/2018Barcelona>

## 1st Malaria World Congress 2018:

The First Malaria World Congress is scheduled to be held at Melbourne from 1 - 5 July 2018. The inaugural Malaria World Congress aims to bring all stake holders to one platform for deliberation and share information to build a solid framework for collaborative action against malaria. The more details are available at: <https://www.malariaworldcongress.org/>

# Alerts

**Clarithromycin Risky in Patients with Heart Disease:** Clarithromycin is reported to have a strong association between increased risk of heart problems or death when used in heart patients. The death was reported after one year of use clarithromycin for two weeks. Clarithromycin has been used in the treatment of a variety of infections affecting the skin, ears, sinuses, lungs, and other parts of the body, including Mycobacterium avium complex (MAC) infection, a lung infection that often affects people with HIV. Healthcare providers should exercise caution when prescribing clarithromycin to patients with coronary heart disease. Though not clear whether there is increased risk in other patients, it is preferable to consider benefit-risk ratio before prescribing clarithromycin.

**Chlorhexidine Containing Products are with risk of serious allergic reactions:** Chlorhexidine is a broad-spectrum antiseptic which is effective against gram-positive and gram-negative bacteria on the skin and is widely used to reduce the risk of bacterial infection. Safety evaluation by regulatory authorities of Singapore and Japan have reported the risk of serious allergic reactions

including anaphylactic reactions. Health-care professionals are advised to inform patients to stop using the product and seek immediate medical attention if they experience symptoms of a serious allergic reaction, such as wheezing, swelling of the face, or severe rashes.

**Fluconazole associated with potential risks to pregnancy outcomes:** Fluconazole is used for the treatment of systemic mycosis and prophylaxis of cryptococcal meningitis, oesophageal and orophageal candidiasis, vaginal candidiasis and systemic candidiasis. There is a potential risk of pregnancy loss and birth defects. It is advisable not to recommend its use in women who are trying to become pregnant. Fluconazole's use is also associated with hyperpigmentation.

**Codeine Products – Restrict its use in children and ultra-rapid metabolisers:** The codeine products should not be used in children below 12 years, in age group of 12 – 18 years who have recently undergone surgery to remove their tonsils or adenoids. These products are also contraindicated to breast feeding mothers or in ultra-rapid metabolizing patients.

## Did You Know?

### Scientist who invented Soxhlet!

Continuous hot percolation affected by the use of Soxhlet Extractor is the main method of drug extraction. The Soxhlet apparatus has been used extensively by the researchers for isolating the active constituents from plant materials and exploring them for possible medicinal activities. The apparatus is known after its inventor, Franz Ritter von Soxhlet, a German Agriculture Chemist. He invented this in 1879 and used the apparatus initially to extract fats from the milk.

## Website of Interest

**Procurement iNET** is the integrated initiative in public procurement. "Procurement iNET", short for "Information, Networking, Education and Transaction", aspires to become the digital space for public procurement professionals from around the world. It offers both free and paid procurement training programmes. The web site address: <https://www.procurementinet.org/>. The training programmes can be accessed at: <https://www.procurementlearning.org/index.php>

## World Health Days (April - June)

April	7	World Health Day
	11	World Parkinson Day
	17	World Haemophilia Day
	19	World Liver Day
	22	Earth Day
	25	World Malaria Day
May	6	World Asthma Day
	8	World Red Cross Day
	9	World Thalassaemia Day
	12	World Chronic Fatigue Syndrome Awareness Day/ International Nurses day
	19	World Hepatitis Day
	28	International Women's Health Day
June	31	Anti-tobacco Day/World notobacco Day
	5	World Environment Day
	8	World Brain Tumor Day
	14	World Blood Donation Day

# NEWS

## Reporting TB Cases

Realizing the necessity to collect the detailed information about the TB patients in the interest of public health and to prevent and control TB, the central government has notified making it mandatory for healthcare providers and clinical establishments to notify every patient. It requires the notification in the prescribed format to the local public health authority like District Health Officer, Chief District Medical Officer, Municipal Health Officer or Designated District TB Officer. There are separate formats for medical laboratories and medical practitioners. The dispensing pharmacists of the pharmacy or other drugs selling units too need to notify tuberculosis patients along with details medicines in the specified format. Pharmacists require to keep the copy of the prescription. Patients are encouraged to self-notification too. More details are available at: [www.tbcindia.gov.in](http://www.tbcindia.gov.in) and <https://nikshay.gov.in>

Failure to notify invites punishments: imprisonment

extending up to 2 years, fine or both.

## Triclosan Containing Antiseptic Products Not Safe for Use

The US Food and Drug Administration (FDA) has ruled that 24 active ingredients used for preparing OTC healthcare antiseptics are not recognised as safe and effective. The FDA wants to evaluate them as new drugs. Triclosan is one of these 24 ingredients most frequently used in India. Wide variety of products, available in Indian market, like toothpaste, antibacterial soap, deodorant, and hand wash are reported to have this chemical.

**Typhoid Vaccine available:** The World's first conjugate typhoid vaccine, Bharat Biotech's Typbar – TCV, is approved for use and is pre-qualified by the World Health Organization. The pre-qualification status means it meets the acceptable standards of quality, safety and efficacy. A single dose offers 87% protection against typhoid. It costs about Rs.1500.

## Resources

**The Selection and Use of Essential Medicines:** This publication is the final report of the 2017 WHO Expert Committee on Selection and Use of Essential Medicines including the updated WHO Model Lists of Essential Medicines - 20th List. The report has now a structured format for each medicine evaluated by the Expert Committee so that (like for structured abstracts in scientific journals) the reader can go more easily to the most relevant sections like: benefits and harms, additional evidence, Committee considerations and finally the Expert Committee recommendations. This can be downloaded from:

<http://www.who.int/medicines/publications/essentialmedicines/trs-1006-2017/en/>

**Free Resources in Social Sciences for Global Health:** It provides a host of free resources including an entire set of training resources (Social Science Sessions), and brings together numerous guidance articles, YouTube videos, templates and tools, including the experiences of other researchers working in a similar setting. Membership is absolutely free. One can access them at: <https://globalhealthsocialscience.tghn.org/qualitative-and-participatory-research-methods/social-sciences-sessions/>

## Opportunities

**JBI Low and Lower-Middle Income Country (LMIC) Evidence-based Clinical Fellowship 2018:** These fellowships are fully funded positions for practicing healthcare professionals in LMIC settings. The JBI Evidence-Based Clinical Fellowship Program is a six-month work place, evidence-based, implementation program involving 2 x ten-day intensive training workshops in the Joanna Briggs Institute in Adelaide, and conducting a work place evidence implementation project in the intervening months. Applicants must be health professionals currently working in their home country, with access to a clinical setting. More details are available at: <https://www.eventbrite.com.au/e/clinical-fellowship-program-2018-lmic-application-registration-42518412717>





The final B. Pharm. Students underwent employability skill enhancement programme in January 2018. The students are with Head of the Department and Placement Group Teachers.



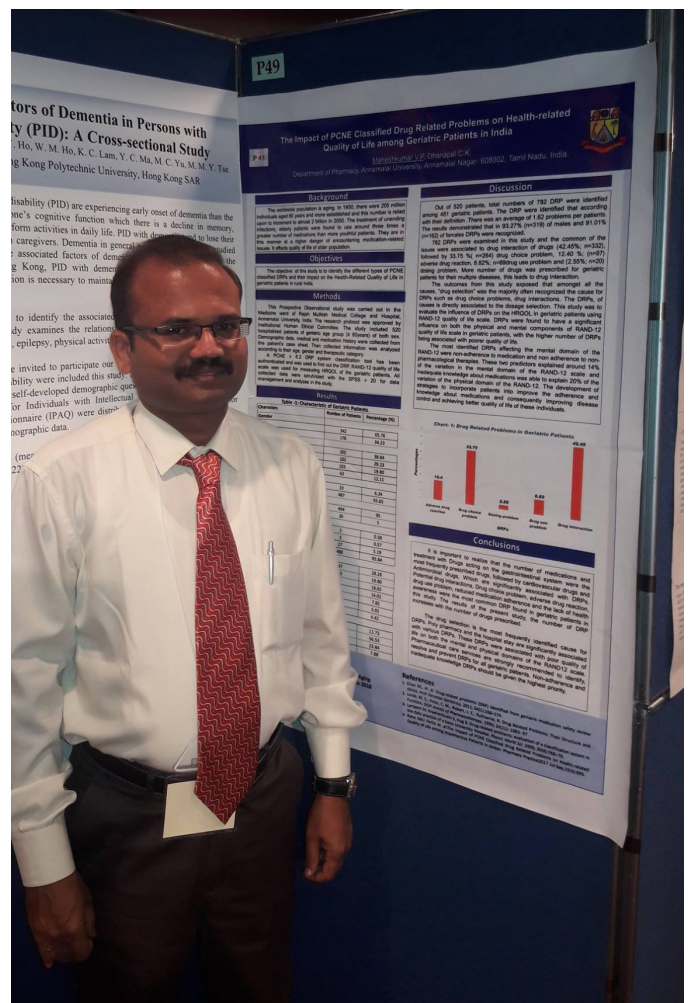
Professor Guru Prasad Mohanta is felicitated by Dr DC Katoch, Advisor, Ayurveda, GOI, after his lecture in the Induction Programme on Pharmacovigilance Programme for Ayurvedic, Siddha, Unani and Homeopathic Medicines at All India Institute of Ayurveda, New Delhi, on 19th March 2018



Mr. D. Venugopal, Senior Executive, Marketing of Bharat Coats, is felicitated by Dr. P. K. Manna, Professor and Head, following his lecture on Pharmaceutical Marketing to B. Pharm. Students on 22nd March 2018.

**DISCLAIMER:**

The Newsletter intends to provide updated and reliable information on medicines and other related issues in an attempt to equip healthcare professionals to take informed decision in recommending medicines to the patients. However, they are encouraged to validate the contents. None of the people associated with the publication of the Newsletter nor the University shall be responsible for any liability for any damage incurred as a result of use of contents of this publication. The brand names of medicines, if mentioned, are for illustration only and the Newsletter does not endorse them.



Dr. V. P. Mahesh Kumar, Assistant Professor, presenting his paper at 13th International Symposium on Healthy Aging “Aging- Health -Happiness” on 10 – 11 March 2018 at Sheraton Hong Kong Hotel & Towers, organized by the University of Hong Kong.