

# ANNAMALAI UNIVERSITY (ACCREDITED WITH "A" GRADE BY NAAC) DEPARTMENT OF PHARMACY

[UGC-SAP & DST-FIST Assisted Department]



# MEDICINE INFORMATION

# NEWSLETTER

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# **Editors' Desk**

We have just completed four years of publication and the first issue of the fifth year is in your computer. It has all our regular features and from this edition onwards we plan to have a section on new drugs approved by Indian Regulatory Authority. The readers are our strength and hope to receiving readers' continuing patronage and constructive feedback.

Forty years before in 1978, the world leaders joined together to pledge "Health for All by 2000 AD through strengthening primary health care". This is known as "Alma Ata Declaration". We could not achieve this. In the sideline of Global Conference on Primary Health Care in Astana on 25-26 October 2018, the Director General of World Health Organization echoed "Instead of Heath for All, we have health for some". In Astana again, forty years after 'Alma Ata Declaration', in 2018 the WHO member states pledged to strengthen their primary healthcare system as a tool to achieve universal health coverage.

India has long history of promoting primary healthcare system and we

see its reflection in the current Health Policy. The Government of India's one of the two flagship healthcare plans is towards promoting primary health care. The plans are: Establishment of Health and Wellness Centres: and National Health Protection Scheme. Establishment of Health and Wellness Centres are upgraded Primary Health Care System where the people can be provided not only just preventive care but also promoting health of the individuals and families close to their place of stay. On the other hand, it does not get focussed either in terms of resource allocation or programme implementation compared to other flagship initiative, National Health Protection Scheme, an insurance based secondary and tertiary care. Government needs rethinking and perhaps more focus is necessary on primary care for achieving universal health coverage at earlier than the target.

Wishing you all happy, healthy and prosperous 2019.

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### Quote

Medicine is not only a science; it is also an art. It does not consist of compounding pills and plasters; it deals with various processes of life, which must be understood before they may be guided.

-Paracelsus

# Courses

16th International Course on Dengue, Zika and other Emergent Arboviruses, 12 - 23 August 2019: The PAHO/WHO Collaborating Center for the Study of Dengue and its Control of the Institute of Tropical Medicine "Pedro Kourí"/MINSAP, the Cuban Society of Microbiology and Parasitology, the Cuban Ministry of Public Health and PAHO/WHO announce the 16th International Course on Dengue, Zika and Other Emergent Arboviruses to be held from 12 - 23 August 2019. More details can be accessed at: http://instituciones.sld.cu/ipk/16th-international-course-on-dengue-zika-and-other-emergent-arboviruses/

#### **Education on Climate Change and Health:**

Climate Change and Health course teaches about the effects of climate change on human health (through online didactics), and gives a chance to practice techniques to reduce those effects (with globally-available peers and mentors). All components of this training are free, including registration, learning, testing, and a certifi ate of completion. There are 4 modules to complete through online study and peer-to-peer activities. More details are available at: http://www.nextgenu.org/course/view.php?id=73#0

#### **Important Health Days**

January 31	Anti Leprosy Day
February 4	World Cancer Day
February 12	Sexual & Reproductive Health Awareness Day
March 4	National Safety Day
March 8	International Women's day
March 11	No Smoking Day
March 12	World Kidney Day
March 16	Measles Immunisation Day
March 21	World ForestryDay
March 22	World Disabled Day
March 23	World Water Day
March 24	World Tuberculosis Day

### **Opportunities**

TDR Clinical Research and Fellowship: TDR provides fellowships for early- to mid-career researchers and clinical trial staff (e.g. clinicians, pharmacists, medical statisticians, data managers, other health researchers) in low- and middle-income countries (LMICs) to learn how to conduct clinical trials. Successful applicants are scheduled to be placed for 12 months in host training organizations (pharmaceutical companies, product development partnerships (PDPs) or research organizations) and then receive a reintegration plan for 12 months at their home institution. The last date of submission of application is 7th March 2019. More details are at: http://www.who.int/tdr/grants/calls/crdf-2018/en/

# Focus: Vitamin D: Not an option for preventing falls and fractures in elderly

Falling down is a common occurrence in older persons. About 10% of the falls result in fractures. More than 95% of the hip fractures in older persons are caused by falling. Falls resulting broken bones severely compromise quality of life. There are three common strategies followed for prevention of falls and falls related injuries: Vitamin D supplementation, Exercise and Customized approach on individual's need.

The study has shown that intake of Vitamin D supplementation does not prevent fracture or falls, or improve bone mineral density. The meta-analysis of the available trial data confi ms "no benefits from Vitamin D supplementation in the incidence of falls or deaths". On the other hand, the high dose of Vitamin has association with potential harms which include kidney stones, high blood calcium levels, high urine calcium levels and high blood sugar levels. Indians, with generous exposure to Sun, is not likely to have Vitamin D deficie cy. Given the lack of clear benefit and potential for signifi ant harms, it is preferable not to have Vitamin D supplementation (if no osteoporosis or Vitamin D deficie cy) in order to prevent falls.

The exercise is found to have shown a small but statistically signifi ant reduction in the risk of falling. The study confi med that exercise interventions provide a moderate net benefit in preventing falls in community –dwelling elderly persons who are at increased risk of falls. Regular exercise programme involving a mix of aerobic conditioning, muscle strengthening, balance and flex bility training are helpful.

The multifaceted and personalized interventions including exercise, psychology, diet education and medication management, environmental modifi ation at home, physical and occupational therapy, social service consultation and consultation with specialists have found to have reduced number of falls. This is basically matter of individual decision.

# **Conferences**

10th Biennial Monash Pharmacy Education Symposium 2019: Th symposium is focussed on teaching and learning within the pharmacy including inter-professional learning. The event is scheduled at Prato Centre (Italy) of Monash University during 7-10 July 2019. The abstracts are being accepted in the four themes: Educational Research, Teaching Innovation, Educational Framework Development and Practice Research. The abstract submission closes on 25th January 2019 and the details can be accessed at: https://www.monash.edu/pharm/about/events/education-symposium/abstracts

International Conference on Prevention & Infection Control (ICPIC 2019): ICPIC provides an unique forum for the exchange of knowledge and experience in the prevention of healthcare-associated infection and control of antimicrobial resistance around the world. ICPIC 2019 is scheduled during 10-13 September 2018 at Geneva, Switzerland. Online abstracts submission will be open from 1 February 2019 to 29 May 2019. More details can be accessed at: https://www.conference.icpic.com/

**ISPOR 2019: International Society for Pharmacoeconomic and Outcomes Research (ISPOR)** is recognized globally as the leading educational and scientific organization for health economics and outcomes research (HEOR) and its use in healthcare decisions. ISPOR 2019 plans to focus on innovative research methods, health policy development using outcomes research, patient preferences, real-world data, and clinical, economic, and patient reported outcomes. The event is scheduled during 18-22 May 2019 at New Orleans, USA. The abstract submission closes on January 16, 2019. More details are available at: https://www.ispor.org/conferences-education/conferences/upcoming-conferences/ispor-2019/abstract-submission

# **Preventing Cancer**

Cancer is a leading cause of death worldwide accounted for estimated 9.6 million deaths in 2018. The most common cancers are: lung, breast, colorectal, skin cancer and stomach. The major risk factors are: tobacco use, alcohol use, unhealthy diet and physical inactivity. Some chronic infections such as Helicobacter pylori, Human papillomavirus, Hepatitis B virus, Hepatitis C virus and Epstein-Barr virus are too risk factors which are very relevant to low and middle income countries.

About 30-50% of the cancers can currently be prevented by avoiding risk factors and following other preventing strategies. Many cancers have a high chances of cure if diagnosed early and treated adequately. Modifying or avoiding risk factors can signifi antly reduce the burden of cancer. The strategies to prevent cancer includes avoidance of:

- tobacco use including cigarettes and smokeless tobacco;
- being obese or overweight; unhealthy diet with low fruit or vegetable intake;
- lack of physical activities; alcohol use;
- sexually transmitted HPV infection; infection by hepatitis or other carcinogenic infection;
- ionizing and ultraviolet radiation;
- urban air pollution; and
- indoor smoke from household use of solid fuels.

# Did You Know?

#### **Inventor of e-cigarettes:**

e-cigarettes, Electronic Nicotine Delivery Systems, have been promoted as safer alternative to the traditional Now, cigarettes. based the advisory from the Union Government, many states have banned the e-cigarettes' use. The e-cigarette was invented in 2003 by a Chinese Pharmacist, Hon Lik. Th s was fi st sold in 2004.

#### Websites of Interest

NextGenU.org: This is the portal to the world's first free and accredited higher education. Starting with a focus in the health sciences, our accredited courses span from college-level pre-health sciences and community health worker trainings, through public health graduate training, and a MedSchoolInABox (co-developed with Stanford, U of Toronto, and U Central Florida) that includes Graduate Medical Education. More details can be accessed at: http://www.nextgenu.org

Research4life: Research4Life the collective name for the five programmes - Hinari (Research for health), AGORA (Research in Agriculture), OARE (Research in Environment), ARDI (Research for Innovation) and GOALI (Research for Global Justice)- that provide developing countries with free or low cost access to academic and professional peer-reviewed content online. This is a public-private partnership of the WHO, FAO, UNEP, WIPO, ILO, Cornell and Yale Universities, the International Association of Scientific, Technical & Medical Publishers and up to 175 international publishers. More details can be accessed at: https:// www.research4life.org/about/

[http://www.who.int/en/news-room/fact-sheets/detail/cancer]

# **NEWS**

**New Flu Drug:** USFDA has recently approved a new Flu Drug, Xofluza. One dose of the drug can reduce the symptoms of flu. It is intended for persons of 12 years and older. US price of the new drug is \$150 without insurance.

Compensation for ASR Hip Implant Victims: The central government has advised the affected patients who are implanted faulty ASR hip implant and are suffering from disability and other losses may approach either central expert

committee or state level committee as per their convenience. The central expert can be approached to: Legal Cell, CDSCO (HQ), FDA Bhawan, Kotla Road, New Delhi – 110002, E. mail: legalcell@cdsco.nic.in. At state level people may approach State Drugs Controller. The application form for this can be accessed at: https://cdsco.gov.in/opencms/opencms/system/modules/CDSCO.WEB/elements/download\_file\_division.jsp?num\_id=MjE0Mw==

# New Drugs Approved in India

Drug Name & Available Strength	Dose	Indications	Approved date
Vardenafil Hydrochloride Trihydrate (Bulk) & Vardenafil 2.5 mg/ 5 mg/ 10 mg/ 20 mg	10 to 20 mg	Treatment of erectile dysfunction in adult men.	11.06.2018
Trientine Hydrochloride bulk & 250 mg capsule	750 to 1250 mg in 2 to 4 divided doses and maxi of 2 g/ day	Treatment of hepatolenticular degeneration (Wilson's disease) in patients intolerant to Penicillamine.	11.06.2018
Apremilast bulk & Apremilast 10 mg, 20mg, 30 mg; film coated tablets (orphan drug)	10 to 30 mg in gradual increase	Treatment of plaque psoriasis	25.06.2018
Gadoteridol - 279.3 mg/ ml for injection; Pack size – 10 ml, 15 ml and 20 ml.	0.2 ml/ kg for IV infusion & 0.4 ml/ kg for IV bolus	Lesions with abnormal vascularity in the brain, spine and associated tissues	25.06.2018

#### Reference:

https://cdsco.gov.in/opencms/opencms/en/Approval\_new/Approved-New-Drugs/ - Accessed on 28.11.2018

# Resources

Where there is no Psychiatrist: The second edition (2018) is released. The book is aimed at general health workers in low- and middle-income country settings and has some chapters on perinatal mental health. It has defin te applicability in high-income country settings too! In the new edition, there has been a big expansion of the psychosocial interventions. The book is freely available for download: https://www.cambridge.org/core/books/where-there-is-no-psychiatrist/47578A845CAFC7E23A181749A4190B54

WHO standards for improving the quality of healthcare for children and adolescents: Quality of Healthcare is often a public concern. The need of improving the quality care especially in children and adolescent is more felt in low income countries. Sometimes there has been lack of clear and simple description of how to improve quality in difficult settings, of the standards that need to be achieved to improve health outcomes, and of the contributions that can be made by individuals and nurses and doctors working together. In order to offer guidance WHO published standards for improving the quality of care in children and young adolescents in healthcare facilities. This can be freely downloaded from:

http://apps.who.int/iris/bitstream/handle/10665/249155/9789241511216-eng.pdf?sequence=1



Valproic acid and Divalproex have high risk of birth defects: Valproic acid has been in use for the treatment of epilepsy and Divalproex (similar to Valproic acid) has been in use to treat seizure, bipolar disorder and to prevent migraine. Both the drugs have been reported to have serious adverse effects on foetal development during pregnancy which include heart defects, facial and skeletal abnormalities, and cleft clip and palate, and delay in developmental milestones following birth. The US FDA has issued safety communications on the use of valproates and advised that valproate should never be used in pregnant women to prevent migraines and should only be used in pregnant women to treat epilepsy or bipolar disorder if other medications are ineffective or otherwise unacceptable. Women of child bearing age with seizure or bipolar disorder should be advised to avoid valproate or use contraceptives while using them.

Do not use opioid containing cough and cold medicines in children: Cough is a common symptom of illness. It is a defence mechanism of the body which helps to clear the throat and breathing airways. Self-medication is a common practice with OTC medications which usually contain anti-histamines and decongestants. The usefulness of these medications are often doubtful. The prescription cough and cold medicines in children are not recommended.

Codeine and hydrocodone are two opioids often available in combination with anti-histamines and decongestants are approved for the treatment of cough. They relieve cough by suppressing the cough centres in brain that stimulate coughing. In early 2018, USFDA had issued instructions to restrict their use to adults of 18 years and older persons. The healthcare professionals are advised to reassure parents that the cough due to cold or upper respiratory infection is usually self- limiting and does not require medications. The risk associated with the use of prescription cough and cold medicines in children are: over dose, slower or difficult breathing, abuse, addiction, misuse and death.

The following non-medication treatment may be useful:

- Give the child plenty of fluids
- Use of these may also be helpful relieving cough: cool (not warm) mist humidifie, saline nose drop or spray and a teaspoonful of honey at bedtime.

Saccharomyces boulardii probiotics: Do not use in critically ill or immunocompromised patients – Saccharomyces boulardii has been used as a replacement for intestinal fl ra. It is used for adjuvant symptomatic treatment of diarrhoea as well as for prophylaxis and treatment of antibiotic associated diarrhoea and recurrence of Clostridium difficile disease in addition to vancomycin and metronidazole. Estonia regulatory authority has warned that this probiotic should not be used in critically ill or immunocompromised patients, as they can cause fungaemia in very rare cases. It has also advised for special care when handling of S. boulardii medicinal products in the presence of patients with central venous catheters, and peripheral catheters, in order to avoid any contamination by touch and the spread of microorganisms by air.

**Loperamide Misuse:** The USFDA has received reports of serious heart problems occurring with excessive doses of anti-diarrhoeal medicine, Loperamide. Most of these cases are linked to misuse and abuse of Loperamide like to increasing its euphoric effects by combining with other drugs, or to treat symptoms of opioid withdrawal. The maximum daily dose of loperamide as approved in US is 8 mg per day for OTC use and 16 mg per day for prescription use. The USFDA advises for single dose packaging to limit the number of doses in a package.



Tamil Nadu State Inter-University Football Tournament 2018 (Women – Winner) Annamalai University (A. Karthika of Department of Pharmacy is in the winning team)



Inaugural Function of DST – PURSE Phase II National Seminar on Current Trends in Pharmaceutical Education, Pharmaceutical Industries and Pharmaceutical Profession 2018 at Department of Pharmacy, Annamalai University, on 22nd October 2018.



DST-PURSE-Phase II and Pharmaceutical Industries Sponsored National Conference on "Interdisciplinary Interaction on Recent Innovations and Prospects of Phytopharmaceuticals (RIPP -2018)" – Inaugural Function on 26th October 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.