

HEALTH

MEDICINES

SAFE USE

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News Letter



Looking Ahead 2021

Pharmacists across the Country as
Corona Warriors

Pharmaceutical Care Everywhere

Association of Community Pharmacists of India

South India Branch

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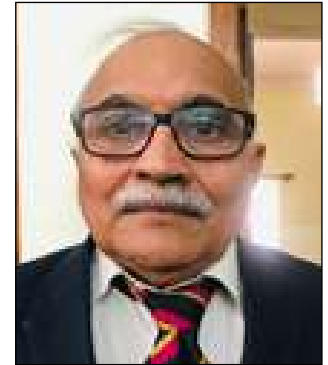
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Last two years ago the COVID-19 came into prominence and spread like a wildfire across the globe. The first attack was comparatively mild and went off to give way to the second attack which was full of uncertain morbidity and mortality. So many people succumbed to come to variety of causes for which there is no answer. The panic caused by the COVID-19 has led to anxiety and depression among people and several suicides had happened. The role of media like television, whatsapp, Instagram and Facebook in spread of information has caused much harm than help. It has led to myths and misinformation among public. In such a crisis there are incidents of off cheating and black marketing of medicines, diagnostics and personal protection kits. Several incidences of fake medicines, vaccines are reported in the media.



Despite of above negativity there are some instances of heroic episodes where in people have behaved in extraordinary manner like serving the public selflessly and help in reducing the suffering of the fellow human beings.

Community pharmacist all over the country are engaged in supply of medicines to covid and non-covid patients, helping them with steady supply of prescription medicines and except few medicines 99% of supply chain management of vital medicines going on uninterrupted. We have to appreciate the commitment of community pharmacist across the country.

All patients and health consumers have great trust in knowledge and seek advice the community pharmacist in confidential health issues. Community pharmacists are taking pride in guiding the patients and health consumers without expecting a financial gain. This selfless counselling services are going unnoticed; hence we must recognize and appreciate the professional services of community pharmacist. We have to start documenting by recognizing and appreciate the service by decorating with stars and ultimately, we should be able decorate a community pharmacist by seven-star pharmacist.

The Association of Community Pharmacist of India shall start this award scheme very soon.

-Prof Anantha Naik Nagappa
President, ACPI –INDIA





Association of Community pharmacy in India is serving for community services and for the benefit of suffering patients
It has broad objectives

- Like patient counselling.
- Advices to parents and custodians of patients dosage of medicine
- Correct uses of medicines, correct storage of medicines etc.
- Pharmacists are custodians of medicines
- Pharmacist know a to z like procurements
- Production material handling manufacturing process control production control
- Quality control and assurance regulatory guidelines
- Adverse drug reactions
- Incompatibility
- Assistance
- Advice regarding medication
- Cost reduction packaging
- Drug distribution
- Correct usages of medicines
- Avoiding misuse of drugs
- Drug adulteration etc.

Through proper drug utilization survey And research activities and various Community projects association of Community pharmacy of India will like to promote and develop excellent Future policies for the benefit of patients

With various State And student chapter's Community pharmacists association serves the nation with broad objectives
I wish great success and best wishes to ACPI bulletin

- Prof. N Udupa
ACPI- advisor board member



The editorial board is glad to release the current issue of acpi newsletter, 1st volume -2021. The contribution and dedication of faculty members and members of various pharmacy colleges is much appreciated for making this acpi newsletter in stepwise manner for achieving a new milestone. The newsletter provides a perfect platform to highlight the articles related to community pharmacy, clinical pharmacy and academic pharmacy of the acpi family. The purpose of this newsletter is to unlock the potential within the members and bring the new knowledge regarding contemporary medication related updates.



I want to extend my sincere thanks to my editorial team for the support to make this acpi newsletter remarkable. The editorial board welcomes the comments and suggestions to improve the quality of impending newsletter.

I would like to thank all the advisors, office barriers of acpi for your kind and continuous support in the progress of this organization. May Almighty God shower his choicest blessing upon all.

“Everyone has inside them a piece of good news. The good news is you don’t know how great you can be! How much you can love! What you can accomplish! And what your potential is.” – Anne Frank

Dr. Hanumanthachar Joshi
Editor in Chief





“Science and technology is not formal logic, which cannot be taught but its growth can be encouraged in those who already possess it. The joy of discovery is a pleasure a man can ever feel, as no problem can stand the assault of sustained thinking”.

I am very happy to learn that Association of Community Pharmacists of India is coming up with a newsletter to cater the needs of the community pharmacists of the country. I am sure it will serve as a platform for exchanging views and experiences and a forum for sharing of knowledge of emerging trends in the field of Community Pharmacy. I hope that the outcome of this newsletter will prove to be beneficial for the community pharmacists.

It is my pleasure to radiate about the surpassing team of editorial members whose assiduous work resulted in the publishing of this newsletter. The hectic task of making this inaugural ACPI newsletter in a huge way is an outcome of sincere and hard work extended by the editorial team. I congratulate the editorial team for their efforts in bringing this newsletter.

On behalf of ACPI AP & TS branches I extend my best wishes for the grand success of the ACPI news letter to scale new height than ever.

- Dr. BALAGANI PAVAN KUMAR
M.Pharm, Ph.D, FIC, FBSS, FICCP, FAGE, MISTE,
Vice President – ACPI, SOUTH,
President – ACPI AP & TS branches,
Professor & Principal, Gokula Krishna College of
Pharmacy
Sullurpeta, SPSR Nellore, AP.



ACPI is for the Pharmacist by the Pharmacist and of the Pharmacist. This moment is memorable in the professional life of every Pharmacist in India.

I am very happy to know that ACPI's first newsletter is born. I am delighted to welcome the first newsletter of ACPI.

NEWS is an abbreviation of North East West and South. ACPI newsletter will be the voice of Pharmacists from North, East, West, and South of India. I believe that ACPI's newsletter is God's gift to the Pharmacist in India, wrapped with love and professionalism.

ACPI'S newsletter is an expression of the passion of a Pharmacist towards his profession.

Long live the profession of Pharmacy.

Jai Hind.

- **Prof. DR. GOPAL V,**
HoD, Principal, College of Pharmacy,
ACPI – Puducherry Branch
Registrar Academic,
Mother Theresa Post Graduate and Research Institute of
Health Sciences,
A Govt of Puducherry Institution accredited by NAAC with
'A' grade, Puducherry.





IS ONLINE STUDY MORE EFFECTIVE THAN THE TRADITIONAL ONE?

**Prof. Mrs. Nirmala Milind Kasekar, M. Pharm, DMM, DIPL.
Bharati Vidyapeeth Institute of Pharmacy, C.B.D., Navi Mumbai-400614**

Online and distance learning has steadily grown in the whole world in no time. A benefit of taking online courses is that they offer flexibility to the aspiring student. The online courses available mostly follow a weekly format wherein once students are admitted, they are expected to log in, as per their convenience read course materials, if possible contribute to online class discussions and complete the given assignments. Looking into advantages like cost-effectiveness and reach of online learning, education providers are now offering courses and training online.

Advantages of Online Classes

- Flexibility
- Multimodal Delivery
- Interactive Nature
- Potentially lower costs
- Access to more college
- More updated curriculum
- There is no travel time.

Disadvantages of Online Classes

- No face-to-face interaction
- Increased personal responsibility
- Networking challenges
- Requires self-motivation

The most interesting thing about online learning is that students can take a course from the comfort of their office or home. Even with an ultra-busy schedule, one can find a few hours to take a course or study for it.

Some communication options in online courses include:

- Email
- Messageboards
- Instant messaging
- Video conferencing
- Chat rooms

In the case of traditional learning time spent in school, work is most it also includes travel time spent every day. Thus online learning may be more suitable for adults who are continuing their education while they're working in their regular jobs. Both traditional and online education certainly requires some real-time discipline to succeed. The flexibility and convenience of online learning allow you to study at any time, virtually anywhere if you have an internet connection. It's a real solution for people with hectic work schedules and family obligations. In many situations, you can pause the topic under consideration or go back to a portion to refresh your memory. This is very helpful when you need to spend extra time on a difficult topic.

Traditional classroom education requires you to attend classes regularly. This is still the most common and effective way of learning. Despite technological advances, traditional education is still a better option for those who thrive on face-to-face communication. Online and traditional education each has their perks. A few years back online courses were considered inferior to traditional degrees. Traditional classroom learning is more helpful due to continuous face-to-face interaction of students with the teachers, as it helps students to get rid of their fears regarding exams and spot doubt solving which can rarely happen with online guidance.

Advantages of classroom learning

- There is face-to-face instruction.
- You can ask questions at the moment.
- There is face-to-face interaction with classmates.
- Networking is easier.
- Direct interactions with expert teachers help motivate students to achieve their goals.

Disadvantages of classroom learning

- Lot of time is wasted traveling.
- Class is held at a specific time and you must attend.
- You have to work at the speed of the class.

Online learning can be a very rewarding experience. It allows aspirants to continue education without having to give up their careers; it is also possible for them to interact with other students around the globe. It is very clearly visible that online learning has caught up and even surpassed traditional learning.

Many students want to earn their degree quickly without much hard work with the online accelerated study programs, but they don't understand or respect the amount of time required for understanding and studying needed in the traditional way of learning. Successful students understand the importance of traditional methodology and are always willing to work at a pace that takes into account all that they have to do and these are the students who complete their educational goals.

The decision is yours!!!!!!





UNDERSTANDING COVID ASSOCIATED MUCORMYCOSIS – A PARADIGM

**Dr.M.RangaPriya, M.Pharm., Ph.D., Professor,
Swamy Vivekanandha College of Pharmacy, Tamilnadu**

Introduction

COVID-19, the most dreadful pandemic the world had ever faced has claimed an alarming situation in its management as well as controlling the secondary infections. More specific is the vital role played by supportive therapy. The dreadful virus has proved to be successful in immune dysregulation and taking the help of the immune modulators is the only choice laid before to bring down the mortality rate. But, these immunomodulatory drugs along with the steroids may pose critical illness and enhance the prevalence of secondary infections.

Amidst the multiple risk factors, diabetes serves the first place. The presence of co-morbidity along with the steroidal therapy might increase the immune suppression, which in turn becomes a predisposing for invasive mold infections. Pulmonary aspergillosis is continued with the infection of Mucorales in the list of secondary infections. Diagnosing and managing these infections require deep understanding and evaluation of the underlying conditions. Insights on the mucormycosis pathogenesis and the host response may provide targets for novelty in the therapeutic interventions.

Mucormycosis

Mucormycosis was coined by the American pathologist R.D. Baker and is also known as zygomycosis. Mucorales and zygomycotic species of fungi are said to be the causative organisms for mucormycosis which is characterized by the rapid progression of the Mucorales.

History

The first case of Mucormycosis was reported in 1885 by the German pathologist Paltauf and was increasingly seen among

immunocompromised individuals during the 1980s and 1990s.

Etiopathogenesis

Deep tissues get infected by ingestion or inhalation of Mucorales spores. The first line of defense in a healthy host destroys the spores with the oxidative metabolites and cationic peptides once the spores enter the lungs. Patients with DKA are highly susceptible to mucormycosis that supports the role of iron uptake in pathogenesis. Specifically, patients receiving dialysis along with iron chelators are uniquely susceptible to a deadly form of mucormycosis.

Neutropenia, immunosuppression, hyperglycemia, ketoacidosis, and other factors impair the host defenses and increase the serum iron thus helping the pathogen growth. The fungus with the special iron assimilation mechanisms makes alterations in the cell wall composition and genetic material. Fungal invasion is augmented by the elaboration of the lytic enzymes and proteases along with mycotoxins.

One of the most critical characteristics of mucormycosis is its angio - invasive property resulting in thrombosis of the vessels and subsequent necrosis of the tissue. Glucose-regulated protein (GRP78) acts as a receptor in mediating the endothelial cells penetration and damage by Mucorales. GRP78 expression gets enhanced by the elevated concentrations of glucose and iron which result in the penetration and damage of the endothelial cells by the Mucorales in a receptor-dependent manner.

Clinical Presentations

Mucorales can enter into the host through inhalation, ingestion of contaminated food, or

abraded skin which results in various forms of the infection. Mucormycosis in humans occurs mainly in two forms. The characteristic superficial form is seen in the external ear, fingernails, and skin. On the other hand, visceral forms are manifested as pulmonary, gastrointestinal, and rhino cerebral types. Mucormycosis usually develops after 10 – 14 days of hospitalization. Patients can develop a slowly progressive form of rhino-orbito-cerebral mucormycosis with signs and symptoms of more than 4 weeks duration. Pulmonary mucormycosis is identified with micronodules development in the lungs.

Signs and symptoms include fever, headache, reddish and swollen skin over nose and sinuses, dark scabbing in the nose by eye(s), visual problems, eye(s) swelling, facial pain, coughing sometimes with bloody or dark fluid production, shortness of breath, diffuse abdominal pain, bloody and sometimes dark vomitus, abdominal distension, flank pain, an ulcer with a dark center and sharply defined edges, and mental-status changes may occur.

Treatment

The current guideline recommends the use of liposomal amphotericin B, which is well tolerated and safe in patients with severe co-morbidities. But, the optimal duration of the therapy remains unclear. As the currently available monotherapy shows a high mortality rate, the most recommended choice of treatment for mucormycosis is a combination of rapid accurate diagnosis, early use of liposomal

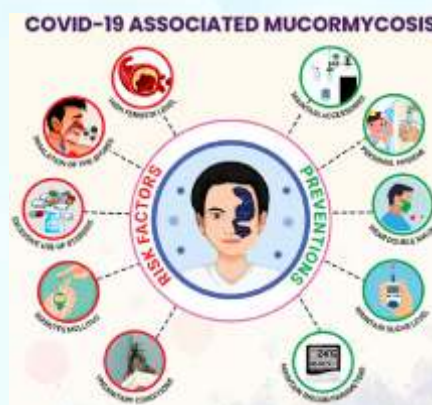
amphotericin B, surgical debridement and administration of drugs, adjunctive application of hyperbaric oxygen, recombinant cytokines, or transfusion of granulocyte and prosthetic obturator.

Prognosis and Morbidity

The extent of manifestation of the disease seeks the proper prognosis and effective treatment initiation. The mortality rate varies with the prevalent co-morbidities. In Pulmonary diseases, the survival rate remains nil. Patients without any systemic disease may show a survival rate up to 75% while others bring a 20% of survival. The low baseline serum concentration of iron/ferritin, neutropenia, and malignant cases show a better survival rate.

Conclusion

The varied pathological conditions of mucormycosis have remained a challenge in diagnosing the disease that has shown an aggressive and alarming mortality rate. A high level of clinical suspicion is required in the management. It is expected that early and appropriate diagnosis, managing the predisposing factors, timely intervention with surgical debridement and efficacious drugs are the only measures that throw hope in saving society from this dreadful disease. More comparative clinical studies are also suggested for better optimization and consolidation of the therapy.





ROLE OF PHARMACIST'S DURING COVID PANDEMIC

**Ms. Ranjitha M, Assistant Professor, Department of Pharmacology
Sarada Vilas College of Pharmacy, Mysuru**

While many people are hunkered down in their homes, showed reduced responsibility to prevent viral infection, but pharmacists and other health professionals throughout the world are stepping up to help, manage and prevent the spread of COVID-19

As we recognize Pharmacists are, medication professionals providing patient care in a variety of settings including hospitals, clinics, community pharmacies, long-term care, physician offices, national and public health. Pharmacy practice has evolved with ever-increasing roles in patient care and providing the right information to the community about the use of medicines.

Throughout the SARS-CoV-2 (COVID-19), i.e., a global pandemic which was raised in December 2019, since from 2019 to till today, pharmacists were rarely mentioned as essential frontline health care providers by the news media, the public, or politicians. But around the world, pharmacists are dedicated their work to health care segments every day by providing essential health care services to Covid patients.

Recently, in an editorial, it was titled “Hero Clinical Pharmacists and the COVID -19 Pandemic: Overworked and overlooked.

The main role of Hospital pharmacists is to provide or evaluating emerging COVID-19 therapy by monitoring and managing the patients in hospitals by giving the right medication with proper guidance to prevent ADR, side effects.

Pharmacists are using their extensive medication expertise to promote the appropriate use of antibiotics and antiviral medications to treat Covid patients.

The main role of hospital pharmacists is to manage numerous drug shortages, upholding uninterrupted drug supply, deciding supply chain issues for critical care medicines, adjusting

workflow to preserve personal protective equipment, and launching new pharmacy services in temporary emergencies COVID-19 hospitals.

Community Pharmacists have always been the most accessible health care provider.

Community pharmacists are setting up COVID-19 clinics, using telehealth to provide chronic care management, and providing COVID-19 testing and guidance in this pandemic. They are also applying their extensive knowledge and training in medication use, management, and problem-solving to provide COVID-19 public health education to the public.

Despite the initial shortage of personal protective equipment, both hospital and community pharmacy staff continued to make it available directly at COVID health care.

Pharmacists must deliver the medications to COVID patients free of charge, educating patients on telehealth services particularly for COVID isolation patients, clarifying misunderstandings about COVID-19 treatments, and contributing to COVID-19 screening.

Except these, nowadays they are having a close relationship with ICU nurses, physicians, and respiratory therapists in the hospitals by contributing to COVID-19 patients by participating in inpatient rounds, ensuring sufficient medication supply to support ICU beds while managing critical drug shortages through the implementation of conservation strategies and sourcing alternatives.

Along with this, hospital pharmacists are directly involved in planning and developing local treatment protocols particularly in repurposing antivirals drugs, and keep on monitoring the use of antibiotics in cases of bacterial co-infections in COVID-19 patients.



RETT SYNDROME AND ITS UPDATES

**Dr. K Krishna Veni, Associate Professor, Department of Pharmacy Practice,
J K K Nattraju College of Pharmacy, Tamil Nadu.**

Rett syndrome is a rare, genetic, neurological disorder that affects mostly girls and leads to severe impairments, affecting nearly every aspect of the child's life. This condition affects an estimated 1 in 10,000 females children. Most children with Rett syndrome have a mutation on the X chromosome on a gene called methyl CpG binding protein 2 (MECP2) and the mechanism is not clear. The most well-known switches typically show up when children are somewhere in the range of 12 and 18 months, and they can be abrupt or progress gradually. The disorder was recognized by Dr. Andreas Rett, an Austrian doctor who previously depicted it in an article in 1966. It was not until following a second article about the syndrome, published in 1983 by Swedish analyst Dr. Bengt Hagberg, that the disorder was generally recognized.

Symptoms of Rett syndrome include slowed growth, wring or rub their hands together (hallmark sign), a decline of social and

language skills, walking awkward, scoliosis, microcephaly, bruxism, irritability, crying, cognitive disability, difficulty feeding, uncoordinated breathing, seizure, and sleep disturbances. Genetic testing (DNA analysis) confirm the diagnosis of Rett syndrome in 80% of the case. There is no cure for Rett syndrome but symptomatic treatment and supportive therapy are available to improve the symptoms in most cases.

Researchers realize that the absence of an appropriately working MeCP2 protein disturbs the function of mature brain cells but they do not know the exact mechanisms by which this happens. Agents are attempting to discover other hereditary switches that work along these lines to the MeCP2 protein. When they find how the protein functions and find comparative switches, they may devise treatments that can fill in for the malfunctioning switch. Gene therapy to accomplish the regulated expression of an



ordinary MECP2 gene is likewise under investigation in animal models.¹

Anavex 2-73 (blarcamesine), an investigational treatment for Rett disorder, decreased the infection's trademark social highlights, its seriousness, and levels of the glutamate biomarker with no genuine results, top-line consequences of Phase 2 clinical trial.

The double-blind and placebo-controlled Phase 2 trial (NCT03758924) assessed the wellbeing, pharmacological profile, and adequacy of Anavex 2-73, given orally as a fluid, in 25 ladies with Rett syndrome. They were randomized to once-daily doses of either 5 mg Anavex 2-73 or a placebo for seven weeks.

Results showed that 66.7% of treated patients had statistically significant decreases in the infection's characteristic behavioral features, which can incorporate hand stereotypies, hyperventilation, and breath-holding, as surveyed by the guardian revealed Rett Syndrome Behavior Questionnaire (RSBQ), compared with 10% of those on a placebo. RSBQ score improvements compared with lower blood levels of glutamate, a marker of Rett advancement, a neurotransmitter that attempts to enact nerve cells.

Moreover, treated patients showed a statistically significant facilitating in illness seriousness, as estimated by the Clinical Global Impression Improvement Scale (CGI-I) that clinicians use to

survey changes over time. Information found that 86.7% of patients utilizing Anavex 2-73 encountered a supported improvement, as did 40% of those given placebo. The result of this trial is exceptionally encouraging regarding both wellbeing and clinical improvement. In spite of the challenges of the older age of the cohort (patients were more than 18 years old) and the generally low dose (5 mg day by day), ANAVEX 2-73 showed clinically significant enhancements in result measures assessing different impairments.²

References:

1. National Institute of Neurological Disorders and Stroke (NINDS). Rett Syndrome Fact Sheet. Available at <https://www.ninds.nih.gov/Disorders/Patient-Caregiver-Education/Fact-Sheets/Rett-Syndrome-Fact-Sheet>. Updated March 17, 2020. Accessed March 15, 2021.
2. Aisha Abdullah. Rett Syndrome News. Anavex 2-73 Seen to Safely Ease Rett Severity in Women in Phase 2 Trial. Available at <https://rettsyndromenews.com/2020/12/18/anavex-2-73-safely-reduces-rett-severity-in-women-phase-2-trial-shows/>. Published December 18, 2020. Accessed April 2, 2021.



EFFECTS OF CHEWING GUM USAGE ON COMMUNITY AND ITS HEALTH

**Dr. Ravindra P Choudhary, Assistant professor, Dept. of Pharmacy Practice,
Sarada Vilas College of Pharmacy, Krishnamurthypuram, Mysuru.
ACPI - KARNATAKA.**

Chewing gum is popularly known as bubble gum, is a soft, cohesive substance that is designed to chewing without being swallowed, which is used as a mouth fresher.

In the past, chewing gums were made up of tree resins. As the demand for chewing gum increased in the past few decades, to maintain its supply chain to customers, commercialize the product, and reduce the cost, the manufacturers started using synthetic polymers-based gum base, colours, and flavours. In recent days, chewing gums are consumed as part of lifestyle or culture among children, teens, and adult age groups.

Excessive unwanted usage of modern Chewing gums among the community has a serious effect on the health, as its ingredients contain synthetic gum bases, artificial flavours, and colours: which may cause or increase the risk of cancer, toothache, tooth decay, staining of teeth, irritable bowel syndrome, temporomandibular joint disorder, weight gain, headaches, abdominal pain, bloating, earache, pain in facial muscles, sudden choking and even may death. If the health of the young population is affected, it causes great loss for the nation's health and manpower resources.

Chewing gum is considered one of the most

littered items in the street. It takes around 50-200 years for decomposition; till now whatever chewing gums are consumed and littered, will remain in the environment and pollutes it. Thus, it is indirectly affecting the health of the community. So, many countries like Singapore, Japan passed several laws and even banned /consider illegal usage of chewing gums in public places.

Measures/advice for community:

- ❖ Stop consuming chewing gum as part of culture or lifestyle.
- ❖ Awareness for the younger generation regarding the negative impact of chewing gums consumption in the community.
- ❖ Don't litter chewing gums in street, water bodies, or don't stick it to trees, any other public places. it should be covered in a piece of paper and then dumped into dustbins.
- ❖ Consume chewing gum which is naturally made and sugar-free gums, in limited quantity.
- ❖ Establishing the chewing gum recycling plants and introducing gumnetic products for the community.

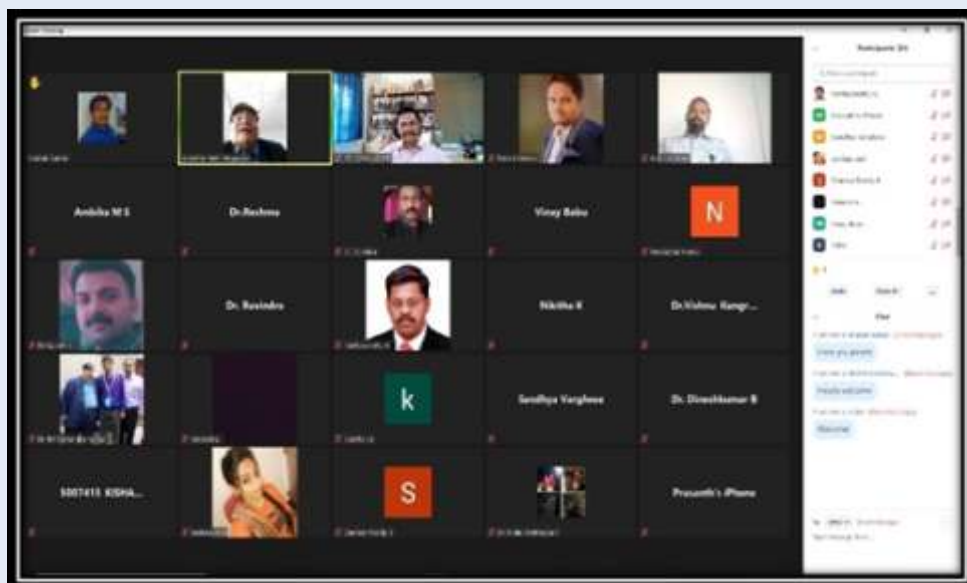
**SMALL CHANGE IN OUR
LIFESTYLE CAN MAKE A BIG
DIFFERENCE IN THE
COMMUNITY AND ITS HEALTH.**





Events

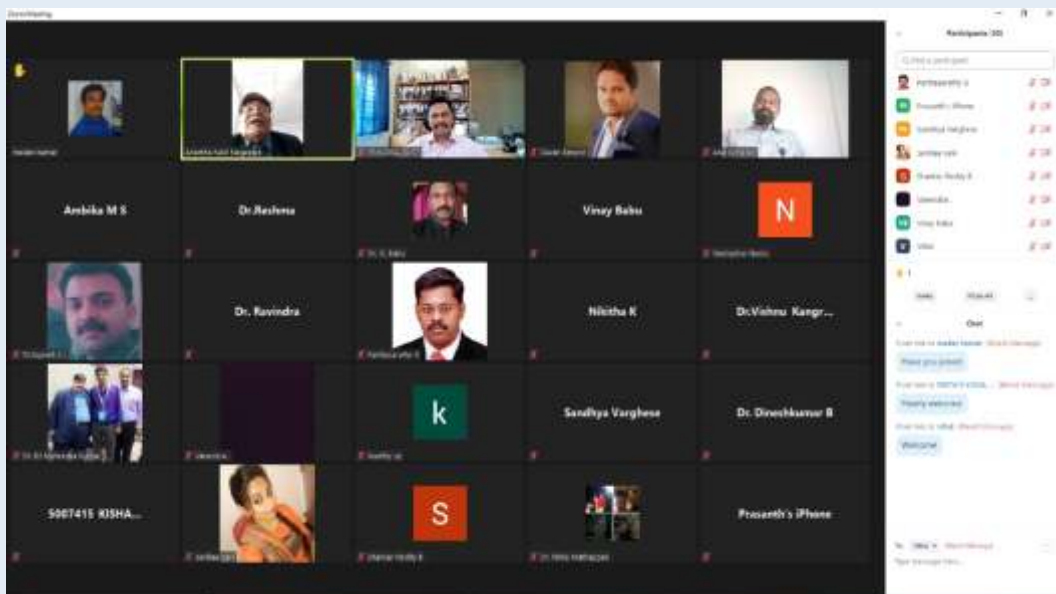
Preliminary Meeting held on **24th March 2021** presided by Dr. A.N Nagappa, President, ACPI





Events

Preliminary Meeting held on 24th March 2021 presided by Dr. A.N Nagappa, President, ACPI



Inauguration of ACPI- South India Chapter

ASSOCIATION OF COMMUNITY PHARMACISTS OF INDIA®
Estd. 2007

President, Secretary and Members of Association of Community Pharmacists of India (ACPI)
Cordially invite you to the

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President, Indian Pharmaceutical Association

Chief Guests
Dr. Anant Naik Nagappa
National President, ACPI
Director, Amity Institute of Pharmacy, Amity University, Gwalior

Prof. N. Udupa
Executive Director, ACPI
Research Director, Shri Dharmasthala Manjunath University, Dharwad

Sri D. A. Gundu Rao
Vice President, Karnataka State Pharmacy Council

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Principal, D Y Patil Deemed to be University's School of Pharmacy, Navi Mumbai

Sri N. Raghavan
Director, Raghulal and Co., Mysuru


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Principal, KTN College of Pharmacy, Chalavara, Kerala

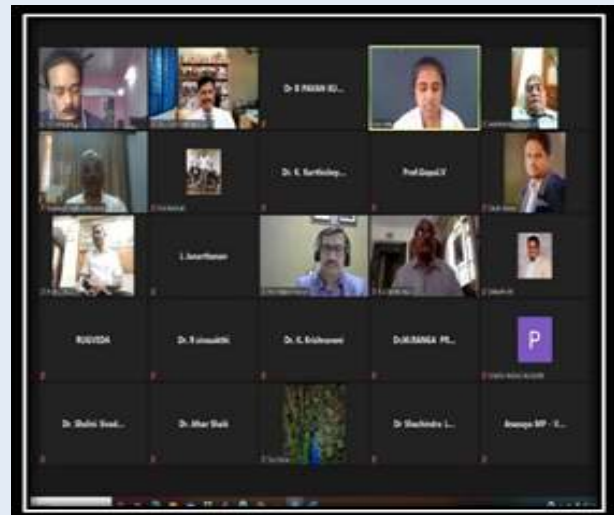
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Jaya College of Paramedical Sciences College of Pharmacy, Thiruninravur, Tamil Nadu

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Principal, Sarada Vilas college of Pharmacy, Mysuru

Date: 03-04-2021 **Time: 11.00 A. M.**

Pharmaceutical Care Everywhere  <https://youtu.be/SNECBURm>



Inauguration of ACPI- South India Chapter held on 3rd April 2021. Inaugurated by Dr. T.V Narayana, President, Indian Pharmaceutical Association.

Webinar on

“Safe disposal of unused and expired medicines” held on 4th May 2021.

Speakers: Mrs. Sonika Chawla Malik, Dr. Sourabh Koshy and Dr. Pradeep M. Muragundi





International webinar on
“Community Pharmacy in India- Bridging the gap” held on 2nd July 2021
 Speaker: **Sri Rajvaidya**, Chief Pharmacist, Hindu Pharmacy, Goa.



Role of Community Pharmacists

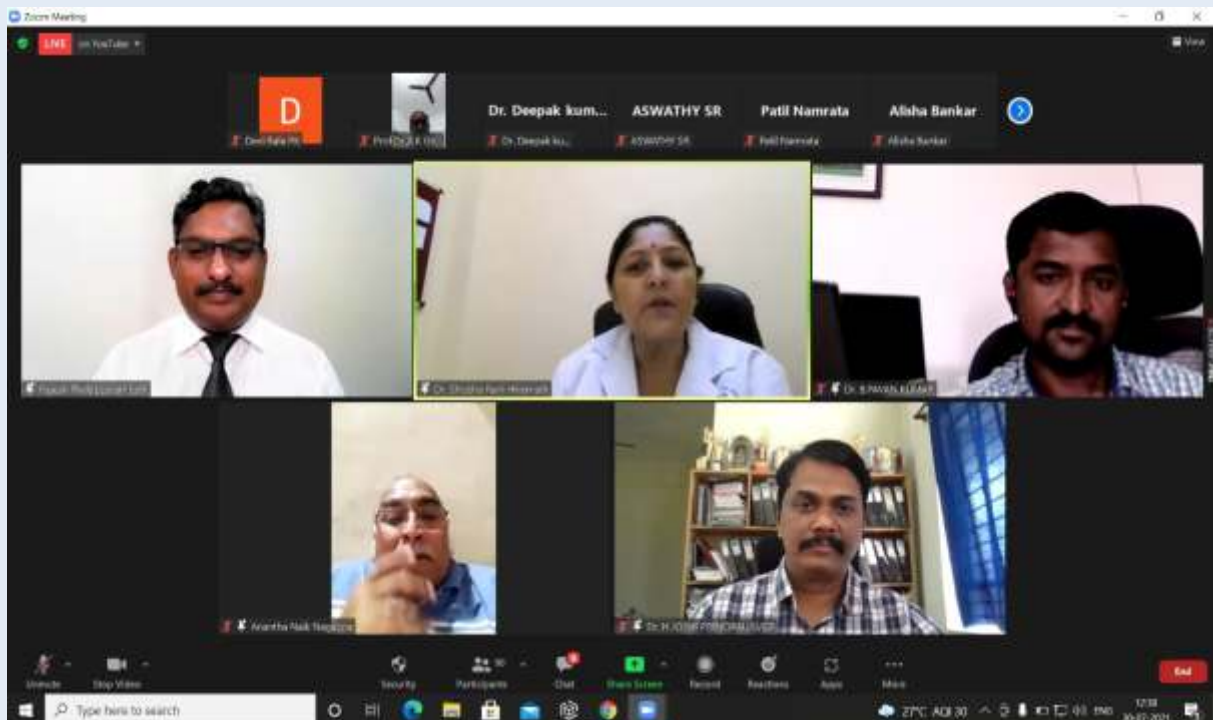
- Screening services
- Tobacco cessation
- Vaccinations
- Diabetes Clinics
- Hypertension Clinics
- Research in practice settings



International webinar on

“Medication errors in Community Pharmacies: Potential Causes & Prevention strategies” held on 30th July 2021

Speaker: **Mr. Rajesh Thalapparambath**, John Hopkins Aramco Health Care, Dhahran, Kingdom of Saudi Arabia.



Drug labelling, packaging and nomenclature

