Continuing Pharmacy Education Program (CPE) for Practicing Pharmacists

Organized by:
Department of Pharmacy Practice
JSS College of Pharmacy
Udhagamandalam
&
Indian Pharmaceutical Association
(Nilgiris Local Branch)

Date:
25th September 2018

Program:
Continuing Pharmacy Education Program (CPE) for practicing Pharmacists

Time:
02:00 AM – 06:00 PM

Venue:
Seminar Hall, JSS College of Pharmacy, Ooty

Report on
Continuing Pharmacy Education Program for Practicing Pharmacists

Venue: Seminar Hall, JSS College of Pharmacy, Ooty
Date: 25th September 2018

Organized By: Dept. of Pharmacy Practice, JSS College of Pharmacy, Ooty

Report submitted by:
Dr S Ponnusankar
Professor & Head / CPE Program Coordinator
Dept. of Pharmacy Practice

25th September 2018

One Day Continuing Pharmacy Education (CPE) program for practicing pharmacists of hospital, community and primary health centers pharmacy was organized by the Dept. of Pharmacy Practice, JSS College of Pharmacy, Ooty on 25.09.2018 for the benefit of the practicing pharmacists of The Nilgiris. The goal of this CPE is to support life-long learning and to create an environment of continuing professional development and provide an opportunity for the pharmacy practitioners in newer Pharmacy Practice concepts that are presently emerging in Indian pharmaceutical / pharmacy scenario and also assists them to acquaint with the recent developments in pharmaceutical science and technology.

Session 0I
Topic: Public Health Services: Opportunities for Pharmacists
Presenter: Dr Aneena Suresh, Lecturer, Dept. of Pharmacy Practice

The pharmacist's role is expanding beyond the traditional product-oriented functions of dispensing and distributing medicines and health supplies. The pharmacist's services of today include more patient-oriented, administrative and public health functions. There are many functions of public health that can benefit from pharmacists' unique expertise that may include pharmacotherapy, access to care, and prevention services. Apart from dispensing medicine, pharmacists have proven to be an accessible resource for health and medication information. The pharmacist's centralized placement in the community and clinical expertise are invaluable. The reexamination and integration of public health practice into pharmacological training and pharmaceutical care is essential. The encouragement of cross-training will also maximize resources and aid in addressing the work force needs within the fields of pharmacy and public health.

Session 02
Topic: Antibiotic Policy: Development and current scenario
Presenter: Dr. GK Sadagoban, Lecturer, Dept. of Pharmacy Practice

Antimicrobial resistance is an important concern for the public health authorities at global level. However, in developing countries like India, recent hospital and some community based data showed

increase in burden of antimicrobial resistance. Research related to antimicrobial use, determinants and development of antimicrobial resistance, regional variation and interventional strategies according to the existing health care situation in each country is a big challenge. During the presentation, he discussed about the situational analysis of antimicrobial resistance with respect to its problem, determinants and challenges ahead with strategies required in future to reduce the burden in India. Hospital based studies showed higher and varied spectrum of resistance in different regions while there are limited number of community based studies at country level. There exists lacunae in the structure and functioning of public health care delivery system with regard to quantification of the problem and various determining factors related to antimicrobial resistance. There is an urgent need to develop and strengthen antimicrobial policy, standard treatment guidelines, national plan for containment of AMR and research related to public health aspects of AMR at community and hospital level in India.

Session 03

Topic: Role of Pharmacist in Pharmaceutical Care

Presenter: Dr S Ponnusankar, Prof & Head, Dept. of Pharmacy Practice

Dr Ponnusankar started his presentation with the traditional role played by the pharmacists in various settings. The elements of pharmaceutical care for individual patients, taken together, describe comprehensive pharmaceutical care, the delivery of which requires an ongoing, covenantal relationship between the pharmacist and the patient. The pharmacist must use his clinical judgement to determine the level of pharmaceutical care that is needed for each patient.

Examples of situations which call for comprehensive pharmaceutical care include:

- Patients who are particularly vulnerable to adverse effects because they are physiologically compromised (e.g. infants; the elderly; those with kidney, liver or respiratory failure)
- Patients with medical conditions that require ongoing evaluation and manipulation of drug therapy to achieve optimal results (e.g. diabetes mellitus; asthma; hypertension; congestive heart failure).
- Patients who are taking multiple medication thereby placing them at higher risk for complex drug-drug or drug-disease interactions and for drug-food interactions.
- Patients requiring therapy with drugs that can be extremely toxic, especially if they are dosed, administered or used improperly (e.g. cancer chemotherapeutic agents, anticoagulants, parenteral narcotics.
- Patients whose acute illnesses can become life threatening if the prescribed medications are ineffective or used improperly (e.g. certain infections, severe diarrhoea).

Session 04

Topic: Drug and Therapeutic Advisory Board (DTAB) - Role in Hospital

Presenter: Dr Khayati Moudgil, Clinical Resident, Dept. of Pharmacy Practice

Essential medicines are one of the most cost-effective ways of saving lives and improving health, and constitute 20-40% of health budgets in many developing countries. Increasing costs and lack of resources often result in public health systems being unable to procure sufficient medicines to meet

patient demand. Despite this, medicines are often managed and used inefficiently and irrationally. This may be due to many factors, for example inadequate training of health staff, lack of continuing education and supervision, or lack of updated, reliable, unbiased drug information. Particular areas of inefficiency and drug use problems include:

- Poor selection of medicines, without consideration for relative efficacy, cost-effectiveness or local availability
- Inefficient procurement practices, resulting in non-availability, inadequate quality, wastage, or use of unnecessarily expensive medicines
- Prescribing not in accordance with standard treatment protocols
- Poor dispensing practices resulting in medication errors, and patients' lack of knowledge about dosing schedules
- Patients not adhering to dosing schedules and treatment advice.

The goal of a DTAB is to ensure that patients are provided with the best possible cost-effective and quality of care through determining what medicines will be available, at what cost, and how they will be used. In order to achieve this goal a DTAB will have the following objectives:

- To develop and implement an efficient and cost-effective formulary system which includes consistent standard treatment protocols, a formulary list and formulary manual
- To ensure that only efficacious, safe, cost-effective and good quality medicines are used
- To ensure the best possible drug safety through monitoring, evaluating and thereby preventing, as far as possible, adverse drug reactions (ADRs) and medication errors
- To develop and implement interventions to improve medicine use by prescribers, dispensers and patients; this will require the investigation and monitoring of medicine use.

Session 05

Topic: Safety and efficacy of new approved drugs

Presenter: Mrs. BS Roopa, Lecturer, Dept. of Pharmacy Practice

Prescribers seek to provide their patients with access to the latest innovations in medicine to maximize their health status. When a new drug comes to market, it often has not been as widely tested as other available therapies, and its effectiveness and safety cannot be fully evaluated. To address this problem, physicians can use the STEPS (Safety, Tolerability, Effectiveness, Price, and Simplicity) mnemonic to provide an analytic framework for making better decisions about a new drug's appropriate place in therapy. A key element is to base this evaluation on patient-oriented evidence rather than accept disease-oriented evidence (which may be misleading), while avoiding inappropriate reliance on studies that report only non-inferiority results or relative risk reductions. The primary question to ask for each new drug prescribing decision is, "Is there good evidence that this new drug is likely to make my patient live longer or better compared with the available alternatives?"

Session 06

Topic: ADR reporting – Skills and Opportunities

Presenter: Mrs. M. Deepalakshmi, Lecturer, Dept. of Pharmacy Practice

Pharmacovigilance plays a consequential role in the surveillance of adverse drug reactions, which is provoked by the drugs used to cure diseases. Adverse drug reactions (ADRs) produce detrimental or

undesirable effects to the body after administration of drugs. It has been reported that the number of patients dying because of contrary effects of drugs per year increased upto 2.6-fold. Moreover, rates of hospitalization of patients are increasing owing to adverse effects of drugs. Thus, it becomes challengeable for physician, health care providers, WHO and pharmaceutical industries to resolve the associated problem of ADRs. During the clinical trial of a novel drug, it is prominent to explore the dependability of drug.

Session 07
Topic: Fixed Dose Combinations (FDC) – do we have sufficient evidence?
Presenter: Dr. C. Keerthana, Clinical Resident, Dept. of Pharmacy Practice

Combination products, also known as fixed dose drug combinations (FDCs), are combinations of two or more active drugs in a single dosage form. The Food and Drug Administration, USA defines a combination product as 'a product composed of any combination of a drug and a device or a biological product and a device or a drug and a biological product or a drug, device, and a biological product. It is widely accepted that most drugs should be formulated as single compounds. Fixed ratio combination products are acceptable only when the dosage of each ingredient meets the requirement of a defined population group and when the combination has a proven advantage over single compounds administered separately in therapeutic effect, safety or compliance. FDCs are highly popular in the Indian pharmaceutical market and have been particularly flourishing in the last few years. The rationality of FDCs should be based on certain aspects such as:

- The drugs in the combination should act by different mechanisms.
- The pharmacokinetics must not be widely different.
- The combination should not have supra-additive toxicity of the ingredients.

Most FDCs have the following demerits:

- Dosage alteration of one drug is not possible without alteration of the other drug.
- Differing pharmacokinetics of constituent drugs pose the problem of frequency of administration of the formulation.
- By simple logic there are increased chances of adverse drug effects and drug interactions compared with both drugs given individually.

Session 08
Topic: Over-the-counter medicines
Presenter: Mr. Vishwas, Lecturer, Dept. of Pharmacy Practice

Over-the-counter (OTC) drugs are medicines sold directly to a consumer without a prescription from a healthcare professional, as opposed to prescription drugs, which may be sold only to consumers possessing a valid prescription. In many countries, OTC drugs are selected by a regulatory agency to ensure that they are ingredients that are safe and effective when used without a physician's care. OTC drugs are usually regulated by active pharmaceutical ingredients (APIs), not final products. By regulating APIs instead of specific drug formulations, governments allow manufacturers freedom to formulate ingredients, or combinations of ingredients, into proprietary mixtures.

The term over-the-counter may be somewhat counterintuitive, since, in many countries, these drugs are often placed on shelves in self-service areas of stores, like any other packaged products. In contrast, prescription drugs are almost always passed over a counter from the pharmacist to the customer. Some drugs may be legally classified as over-the-counter (i.e. no prescription is required), but may only be dispensed by a pharmacist after an assessment of the patient's needs or the provision of patient education. In many countries, a number of OTC drugs are available in establishments without a pharmacy, such as general stores, supermarket etc. Regulations detailing the establishments where drugs may be sold, who is authorized to dispense them, and whether a prescription is required vary considerably from country to country.

After the presentation, Dr S P Dhanabal, Principal, JSS College of Pharmacy, Ooty distributed the certificates to the participants and speakers.

I take this opportunity to thank JSS Academy of Higher Education & Research, Mysuru for providing financial assistance to organize this event at our department and Principal, JSS College of Pharmacy, Ooty for providing permission to organize this CPE at our institute.

Dr. S. Ponnusankar
CPE Program Coordinator
Prof & Head, Dept. of Pharmacy Practice

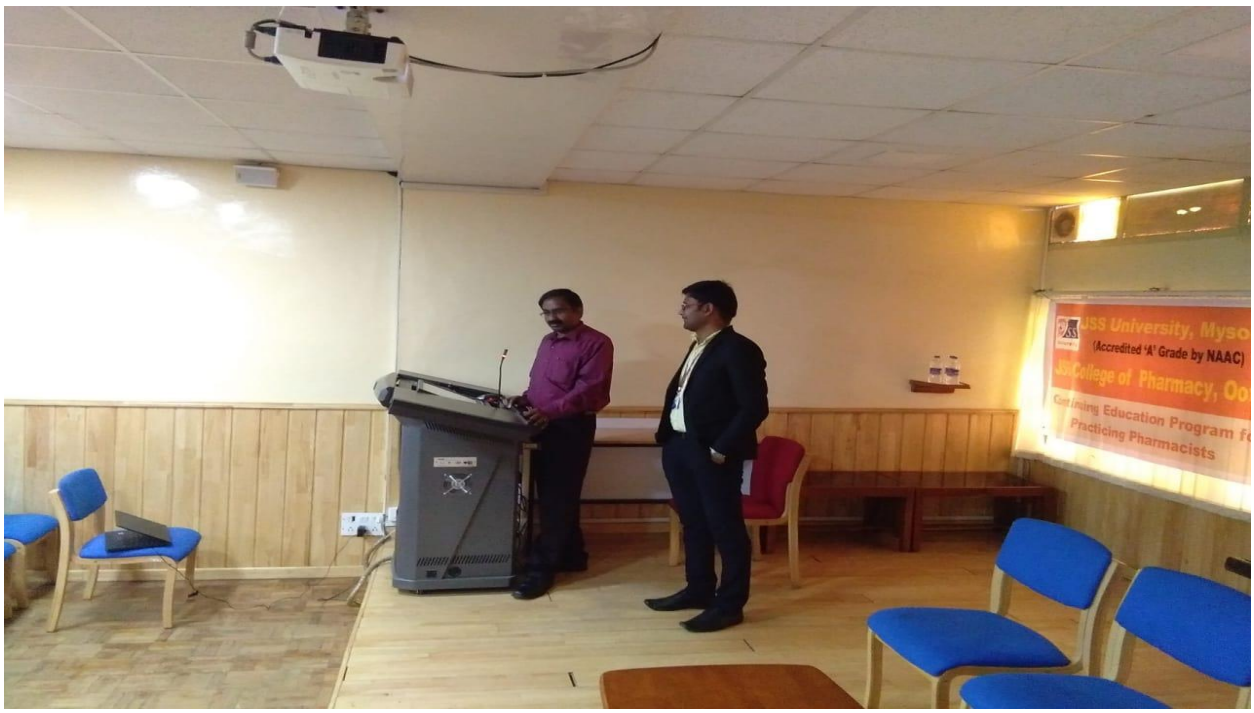
Presentation Materials

Glimpses of some moments during Continuing Pharmacy Education (CPE) Program

DR S Ponnusankar, Program Coordinator introducing the faculty of CPE to the participants

DR Aneena Suresh delivering lecture on Public health services- opportunities for pharmacists

DR GK Sadagoban delivering his lecture on antibiotic policy – development and current scenario



Mr. Jeyaraman, Pharmacist, GHQH, Ooty – sharing his experiences of introducing the antibiotic policy at public hospital, Ooty

DR S Ponnusankar, Program Coordinator delivering his lecture on
role of pharmacists in pharmaceutical care

DR Khayati Moudgil delivering her lecture on Drug Technical Advisory Board (DTAB)

Ms. BS Roopa delivering lecture on safety and efficacy of newly approved drugs

Ms. M. Deepalakshmi delivering her lecture on ADR reporting – skills and opportunities

DR C Keerthana delivering her lecture on fixed dose combinations – do we have sufficient evidence

Pharmacists of various institutions attending the CPE program

Participants and faculty receiving the certificates from DR S P Dhanabal, Principal, JSS CoP, Ooty