



# PHARMAWIZ



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**GUEST COLUMN**  
Empowering Community Health: The Role of Social Prescribing in Indian Pharmacy  
PAGE 1-2

**EXBLIFEP**  
New Treatment Option for Complicated urinary tract infections including pyelonephritis  
PAGE 3

**INTERACTION ALERTS**  
Drug- Drug Interaction in Clinical Practice  
PAGE 4

**INTERVENTION ALERT**  
Co-administration of methylphenidate and fosphenytoin led to increased phenytoin levels, raising the risk of adverse side effects.... READ MORE!  
PAGE 4

**ACHIEVEMENTS**  
Overall Winner in Inter Bharati Table Tennis Tournament 2024  
PAGE 5

## GUEST COLUMN

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# Empowering Community Health: The Role of Social Prescribing in Indian Pharmacy

Social prescribing, a holistic approach to healthcare that connects patients with non-medical support in their community, is gaining traction globally. In India, this concept could revolutionize community pharmacy practice, offering a unique opportunity to address health and well-being issues beyond traditional medication dispensing.

Community pharmacists in India are well-positioned to implement social prescribing due to their accessibility and trusted status within local communities. By leveraging existing government initiatives, pharmacists can play a crucial role in improving public health outcomes.

## Potential Applications in India

Swachh Bharat Mission and Jal Jeevan Mission: Pharmacists could promote hygiene practices and safe water consumption, addressing preventable illnesses at their root.

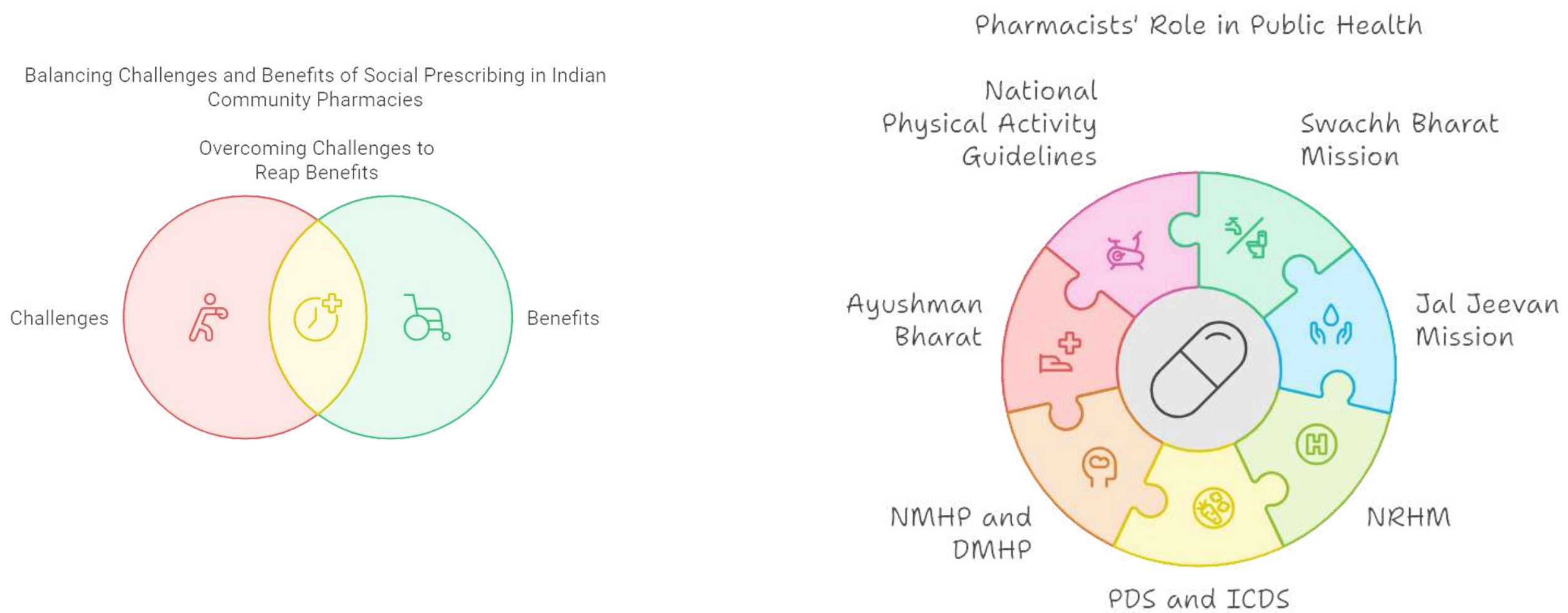
National Rural Health Mission (NRHM): Community pharmacies in rural areas could serve as hubs for health education and referrals to local support services.

Public Distribution System (PDS) and Integrated Child Development Services (ICDS): Pharmacists could guide eligible individuals to these nutritional support programmes, combating malnutrition and its associated health issues.

National Mental Health Programme (NMHP) and District Mental Health Programme (DMHP): With appropriate training, pharmacists could offer initial mental health screenings and refer patients to local support groups or counseling services.

Ayushman Bharat: Pharmacists could assist in raising awareness about this health insurance scheme and help eligible individuals access its benefits.

National Physical Activity Guidelines and Active Healthy Kids India: Community pharmacies could become local champions for physical activity, offering advice on exercise and connecting patients with local sports clubs or fitness groups.



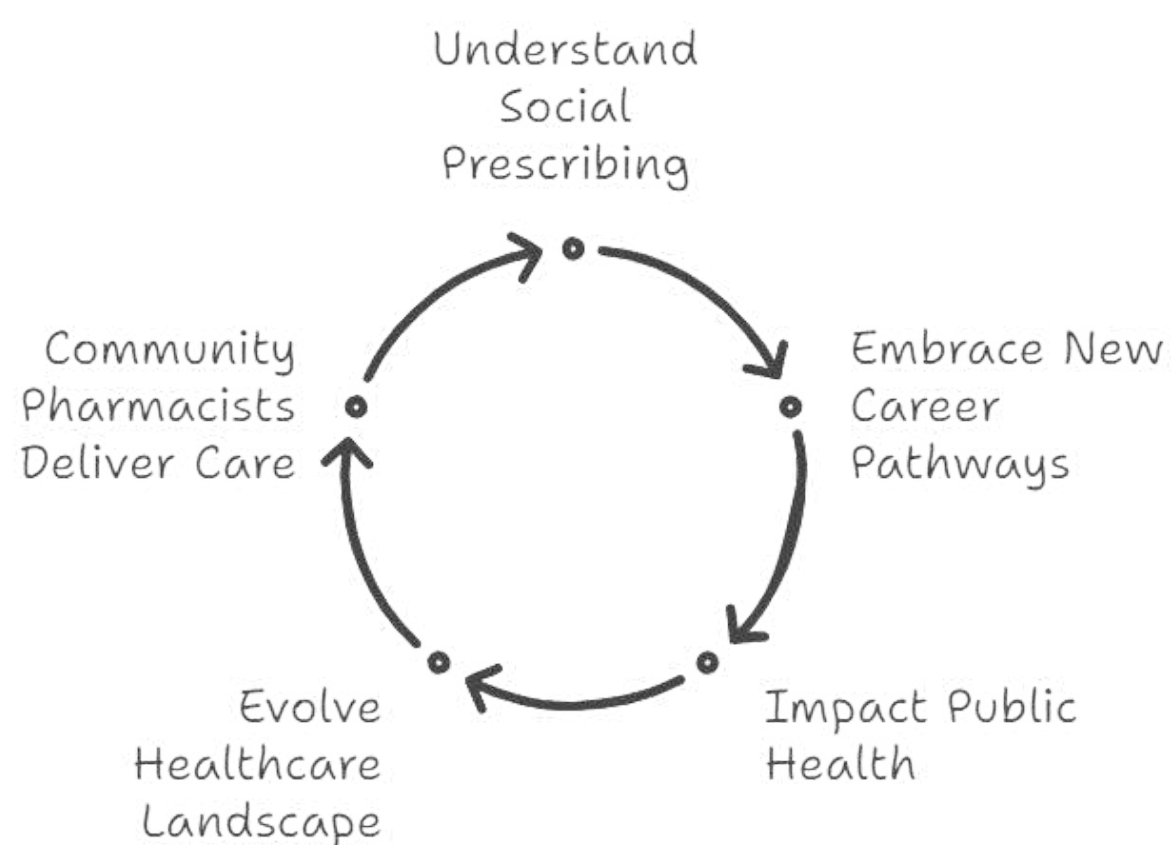
## Recent Developments

The recent announcement of Google Health and Eka Care's collaboration to make Ayushman Bharat Health Account (ABHA) ID cards available to Indian citizens presents an exciting opportunity. Community pharmacists could assist in the registration process, helping to create a unified digital health ecosystem.

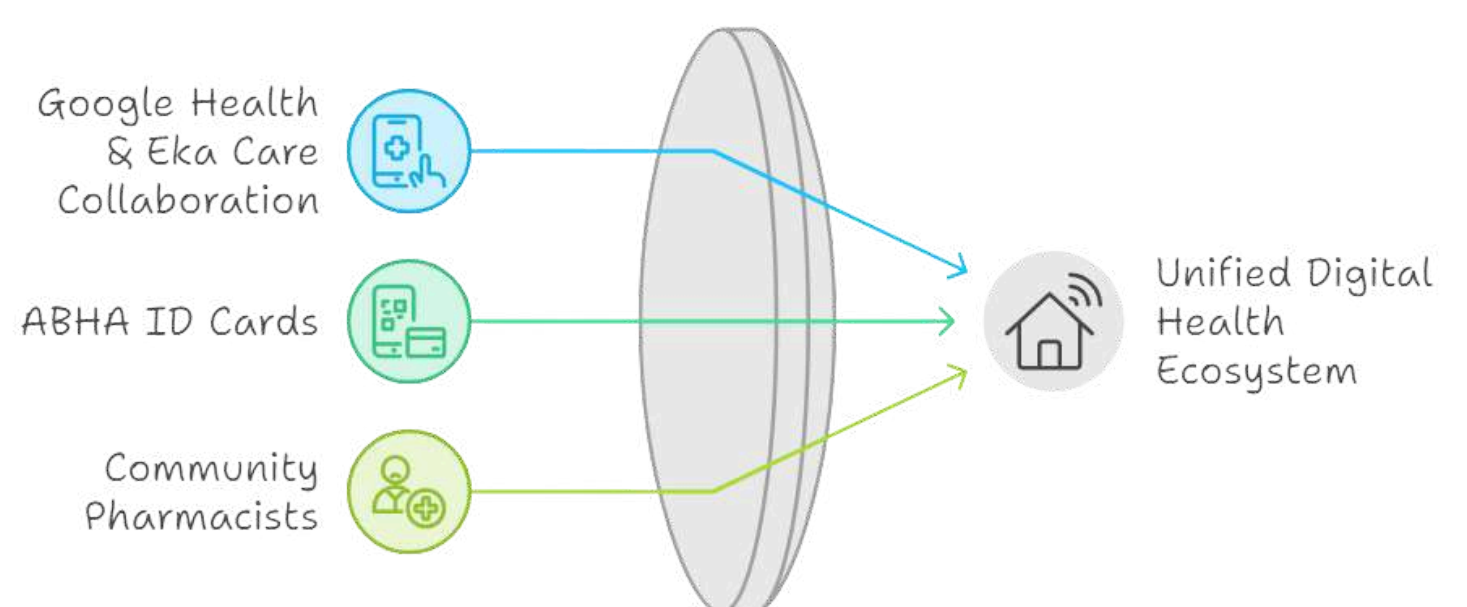
## Challenges and Opportunities

Implementing social prescribing in Indian community pharmacies faces challenges, including limited awareness, lack of formal training, and potential time constraints. However, the benefits could be substantial, including improved patient outcomes, reduced burden on primary care, and enhanced community engagement.

### Cycle of Social Prescribing in Pharmacy



### Building a Digital Health Ecosystem



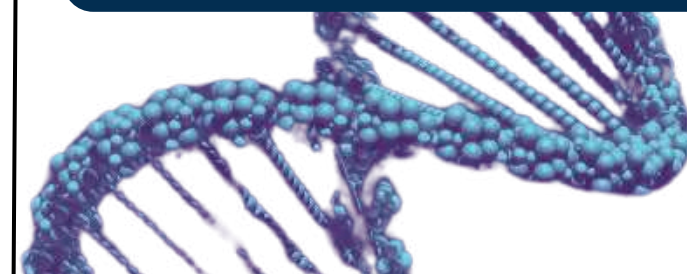
For pharmacy students, understanding and embracing social prescribing could open up new career pathways and opportunities to make a significant impact on public health. As India's healthcare landscape evolves, community pharmacists have the potential to become key players in delivering holistic, patient-centered care through social prescribing.



## DID YOU KNOW ?

### The Origin of Adverse Drug Reactions

The concept of Adverse Drug Reactions (ADRs) dates back to the early 20th century, but it gained serious attention in the 1960s following the thalidomide tragedy. Thalidomide, a drug prescribed to pregnant women for morning sickness, led to severe birth defects in thousands of babies. This disaster highlighted the need for stricter drug monitoring and led to the creation of formal systems for reporting and analyzing ADRs, shaping modern pharmacovigilance practices.



### ASK YOUR PHARMACIST!

#### PHARMACY



"It's the latest advancement in cardiac pacemakers. It gives you an electric shock when it detects pizza or doughnuts in your bloodstream."

# EXBLIFEP

## A New Treatment Option for Complicated urinary tract infections including pyelonephritis

A complicated **urinary tract infection (UTI) with pyelonephritis** occurs when the infection extends from the bladder (cystitis) to the kidneys (pyelonephritis) in individuals with structural or functional abnormalities of the urinary tract. It often presents with systemic symptoms like fever, flank pain, nausea, and vomiting. Patients at higher risk include those with diabetes, immunosuppression, or urinary obstructions. The condition is typically more severe and **requires prolonged antibiotic therapy, often including intravenous antibiotics**. Pyelonephritis can lead to renal damage or sepsis if untreated.

#### Indications:

EXBLIFEP is indicated for the treatment of patients 18 years of age and older with complicated urinary tract infections (cUTI) including pyelonephritis, caused by the following susceptible microorganisms: **Escherichia coli, Klebsiella pneumoniae, Pseudomonas aeruginosa, Proteus mirabilis, and Enterobacter cloacae**.

#### Formulation Content:

EXBLIFEP is supplied as a **dry powder in a single-dose vial** that must be reconstituted and further diluted prior to intravenous infusion as outlined below. EXBLIFEP does not contain preservatives. Aseptic technique must be used for reconstitution and dilution.

#### Dosage and Administration:

The dosage of EXBLIFEP is **2.5 grams (2 grams cefepime and 0.5 grams enmetazobactam) administered every 8 hours by intravenous (IV) infusion over 2 hours in patients 18 years of age and older with an estimated glomerular filtration rate (eGFR) between 60 and 129 mL/min**. The duration of treatment is 7 days and up to 14 days for patients with concurrent bacteremia.

#### Adverse Reactions Data:

The most commonly reported adverse reactions in 5% or more of patients receiving EXBLIFEP included elevated **transaminase** levels, increased **bilirubin**, **headaches**, and **phlebitis** or **infusion site reactions**.

#### Warnings and Precautions:

Healthcare professionals must be vigilant regarding potential risks associated with EXBLIFEP therapy. These include the risk of **Hypersensitivity reactions, Neurotoxicity, and Clostridioides Difficile-Associated Diarrhea (CDAD)**.

#### Drug Interactions:

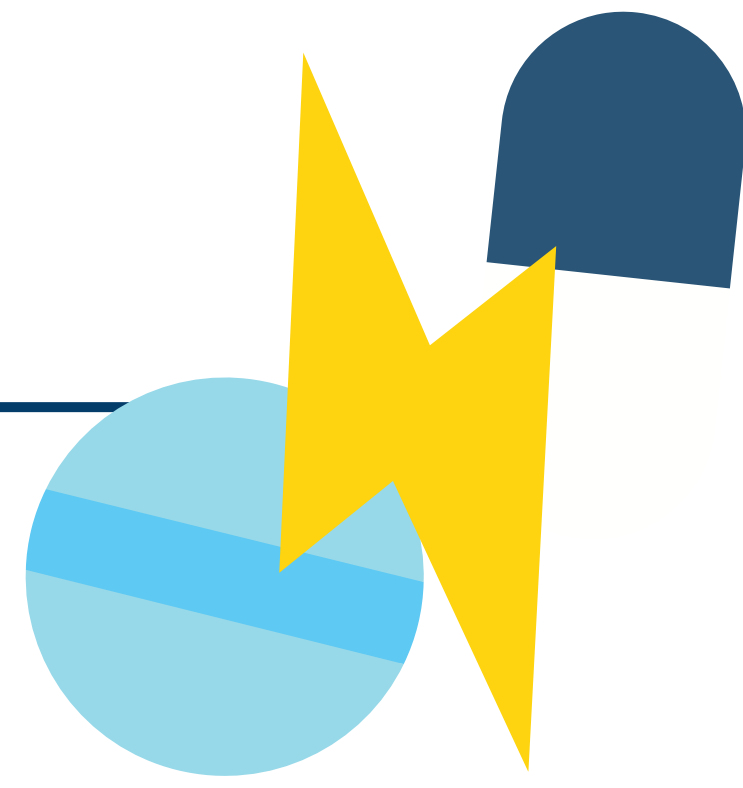
Renal function monitoring is required when there is concomitant use of EXBLIFEP with Aminoglycosides and Diuretics. Awareness of potential drug interactions is paramount to mitigate the risk of adverse outcomes and optimize therapeutic efficacy.

#### Special Populations:

**Serious neurologic adverse reactions** have occurred in geriatric patients with renal insufficiency given unadjusted doses of cefepime, a component of EXBLIFEP. Care should be taken in dose selection for elderly patients and renal function should be monitored as appropriate

In conclusion, **EXBLIFEP is an effective treatment option for complicated urinary tract infections and pyelonephritis, combining cefepime and enmetazobactam to combat resistant bacteria**. It requires careful dosage adjustments based on renal function and monitoring for potential adverse effects like hypersensitivity reactions, neurotoxicity, and CDAD. Proper use of EXBLIFEP can help manage bacterial infections while minimizing the risk of drug resistance.

# INTERACTION ALERTS IN CLINICAL PRACTICE



In clinical practice, understanding drug interactions is crucial for ensuring patient safety and optimizing therapeutic outcomes. This report highlights significant drug-drug interactions involving cefazolin, dapagliflozin, and gabapentin, which can lead to serious complications.

## CEFAZOLIN

Cefazolin is an antibacterial agent commonly used to treat acute cholecystitis, uncomplicated urinary tract infections (UTIs), pneumococcal pneumonia, and endocarditis. A notable interaction between cefazolin and rifampin can result in severe bleeding complications. This interaction underscores the importance of monitoring patients receiving these medications concurrently.

## DAPAGLIFLOZIN

Dapagliflozin, an SGLT2 inhibitor, is primarily indicated for managing Type 2 diabetes and is also beneficial for heart failure patients with a history of diabetes. However, when used alongside abiraterone acetate—an anticancer agent for prostate cancer—there is an increased risk of hyperglycemia. Additionally, dapagliflozin may interact with certain diuretics, leading to further hyperglycemia and necessitating higher doses of insulin. Furthermore, concurrent use of somatostatin analogues has been associated with an increased risk of hypoglycaemia and metabolic dysfunction.

## GABAPENTIN

Gabapentin is a GABA analogue used for treating seizures, postherpetic neuralgia, restless leg syndrome, and insomnia. Clinical observations have indicated that gabapentin can cause respiratory complications when administered alongside central nervous system (CNS) depressants. The FDA has issued warnings regarding the heightened risk of respiratory depression in patients taking gabapentin with other CNS depressants such as opioids and benzodiazepines. This risk is particularly pronounced in elderly patients and those with pre-existing respiratory conditions.

## CONCLUSION

Healthcare providers must remain vigilant regarding potential drug interactions that may pose risks to patient safety. The interactions highlighted above demonstrate the importance of thorough medication reviews and patient monitoring. By understanding these interactions—specifically between cefazolin and rifampin, dapagliflozin with abiraterone acetate and diuretics, and gabapentin with CNS depressants—clinicians can better manage therapy and mitigate adverse effects. Ongoing education about these interactions is essential for improving patient outcomes in pharmacy practice.



## CLINICAL PHARMACIST INTERVENTION!

A 6-year-old child with ADHD and autism spectrum disorder was admitted to the hospital after experiencing a focal seizure on the left side. The initial treatment regimen included Inj. Mannitol, Inj. Pantoprazole, Inj. Emset, Inj. Fosolin (fosphenytoin) and Inj. Methylphenidate. However, the co-administration of methylphenidate and fosphenytoin led to increased phenytoin levels, raising the risk of adverse side effects. As a result, fosphenytoin was replaced with sodium valproate, while methylphenidate was continued, as the patient was responding well to this medication.

# IPA-SF PUNE BRANCH HIGHLIGHTS

## THE INDIAN PHARMACEUTICAL ASSOCIATION STUDENTS' FORUM PUNE (ESTD. 2014)

**1ST INTERNATIONAL CP SUMMIT 2023**  
The 1st International Clinical Pharmacy Summit 2023, hosted by DVPU Poona College of Pharmacy and IPA-SF Pune on November 25-26, attracted 200 attendees. The event featured sessions, a panel discussion, a quiz, and poster presentations on clinical pharmacy, concluding with prize distributions and inspiring remarks.

**DECODING LINKEDIN**  
In November, we collaborated with the ED Cell of Poona College of Pharmacy to host former chairperson Dr. Swatantra Shukla, who shared expert insights on optimizing LinkedIn profiles and effective networking.

**E-NVICTA**  
The BDM competition, part of IPA-SF's "E-nvicta" esports event, promoted strategic thinking and teamwork. Managed by Mr. Parth Jain, Mr. Vinay Gokwad, and volunteers, it featured participants from across India and was live-streamed via TOPFRAGGER GAMING.

**DECODING CAT**  
On November 17, 2023, ARO & IRO hosted "Decoding CAT" on YouTube live for over 40 pharmacy students. Mr. Debolata Gaha's keynote on excelling in the CAT exam provided valuable insights and raised awareness of IPASF Pune Branch activities.

**IPA-SF MODEL UNITED NATIONS**  
The IPA-SF Pune hosted "MUN 2.0" on January 6-7, 2024, where students debated global issues like marijuana legalization, honing their diplomatic, public speaking, and critical thinking skills.

**ADOBE PREMIER PRO LIVE SESSION**  
In November 4, 2023, the IPA-SF Pune branch hosted an Adobe live session at Poona College of Pharmacy, featuring guest speaker Mr. Jason Jose. Attendees learned about Adobe Premiere Pro, participated in a group video project on "college student life."

**PEDIATRIC HEALTH CAMP**  
On January 23rd, 29th, and 30th, 2024, the Public Health Office held pediatric health camps at schools in Nigdi and Konar, offering check-ups and awareness sessions on puberty, mental health, and first aid for children aged 5 to 15.

**RESEARCH METHODOLOGY**  
In early November, the Public Education Office hosted a session by Dr. Shruti Aksharal on Research Methodology and Medical Writing, covering its importance, types, challenges, and potential career pathways.

**NUKKAD NATAK**  
The Cultural Committee and Public Health Office of IPASF Pune organized a mental health awareness event on 3rd February 2024 at Balgandharva Udyan, featuring a Nukkad Natak with over 20 volunteers to destigmatize depression and promote therapy as a solution.

**PHARMATHON**  
The first addition of pharma Dharani was held on 3 March 2024 at Balewadi Stadium. The experience, thrills of endurance and the beauty of nature. Pharmathon attracts runners from all around pune seeking adventure, personal growth, and the opportunity to surpass their limits.

**HAPPY TO SHARE, POONA COLLEGE OF PHARMACY SECURED**

- **OVERALL GENERAL CHAMPIONSHIP-WINNER TROPHY (PG CATEGORY) .**
- **OVERALL GENERAL CHAMPIONSHIP-RUNNERS-UP ( UG CATEGORY) TROPHY FOR NPW EVENTS 2023-24.**

## 1<sup>ST</sup> INTERNATIONAL CLINICAL PHARMACY SUMMIT

The 1st International Clinical Pharmacy Summit 2023, organized by Bharati Vidyapeeth (Deemed to be) University, Poona College of Pharmacy, in association with Indian Pharmaceutical Association Students Forum, Pune Branch and Federation of Clinical Pharmacists in India at Sushruta, Medical College Auditorium, Bharati Vidyapeeth Campus, Katraj. The event consisted of 07 different sessions, a panel discussion, quiz competition and poster presentation competition.

**DAY 1**

**DAY 2**

**COMPETITIONS**

**Session 1: Bridging the gaps between Academia and Clinical Pharmacy Practise**

**Session 2: A day in the life of a PharmD Intern**

**Session 3: Upskill your Clinical Pharmacy Career**

**Session 4: Covert but Crucial Roles of a Clinical Pharmacist**

**Panel Discussion:**

**Session 5: Make Clinical Pharmacy Specializations your Forte**

**Session 6: Prioritize Quality Excellence in Clinical Practice**

**Session 7: Beyond Clinical Pharmacy Practice you must know**

**Quiz Competition**

**Poster Presentation**

**UPCOMING CP SUMMIT 2024**

**Date: 14<sup>th</sup> & 15<sup>th</sup> December 2024**

**Theme: Navigating Students towards Clinical Pharmacy Excellence**

**2<sup>nd</sup> National Clinical Pharmacy Summit comprises of two days.**

- Day 1 consisting of workshops
- Day 2 consisting of conference

For more details scan the QR code below

# ISPOR HIGHLIGHTS

## ISPOR BHARATI VIDYAPEETH (DEEMED TO BE) UNIVERSITY STUDENT CHAPTER 2022-2024 (SINCE 2016)

**ISPOR BHARATI VIDYAPEETH (DEEMED TO BE) UNIVERSITY  
STUDENT CHAPTER 2022-2023**

Ranked 1<sup>st</sup>

**In outstanding LMIC Student Chapter Awards-  
ASIA-PACIFIC REGION**

This achievement wouldn't have been possible without the support and dedication of all the amazing members who contributed their hard work and passion to our cause

**Bhavika Sharma**  
Secretary  
ISPOR BVDU SC

**Rishabh Tathed**  
President  
ISPOR BVDU SC

**Darshan Parkhi**  
Treasurer  
ISPOR BVDU SC

On 25<sup>th</sup> October 2023, breast cancer awareness event was conducted at Lijjat Papad, where 120 people were screened.

On 12<sup>th</sup> January 2024, a session on HEOR 101 (basic HEOR session) was conducted at Poona College of Pharmacy, with 70 participants attending.

On 21<sup>st</sup> October 2023, a blood donation camp was held at Poona College of Pharmacy, collecting 105 bags of blood.


An antimicrobial awareness camp was conducted at Kamala Nehru Park, where 150 people were surveyed.

The HEOR Conclave 2024, held at Poona College of Pharmacy on 1<sup>st</sup> and 2<sup>nd</sup> March, featured R software hands-on training and the Outcomes Odyssey competition, with approximately 80 participants in attendance.

On 18<sup>th</sup> and 19<sup>th</sup> January 2024, a session on antimicrobials in oncology was conducted, along with a poster presentation competition, with 80 participants attending.

The HEOR Conclave 2023, held at Poona College of Pharmacy on 11<sup>th</sup> and 12<sup>th</sup> March, along with CPR training and panel discussion, was conducted with 70 participants in attendance.

# ACHIEVEMENTS



Pharmacology in Drug Discovery  
Drug Discovery Update  
2024, Pages 471-486

**Chapter 22 - Molecular cardiopharmacology and Therapeutics-I**

Pooja Tiwary<sup>a</sup>, Krishil Oswal<sup>a</sup>, Dileep Kumar<sup>a b c</sup>

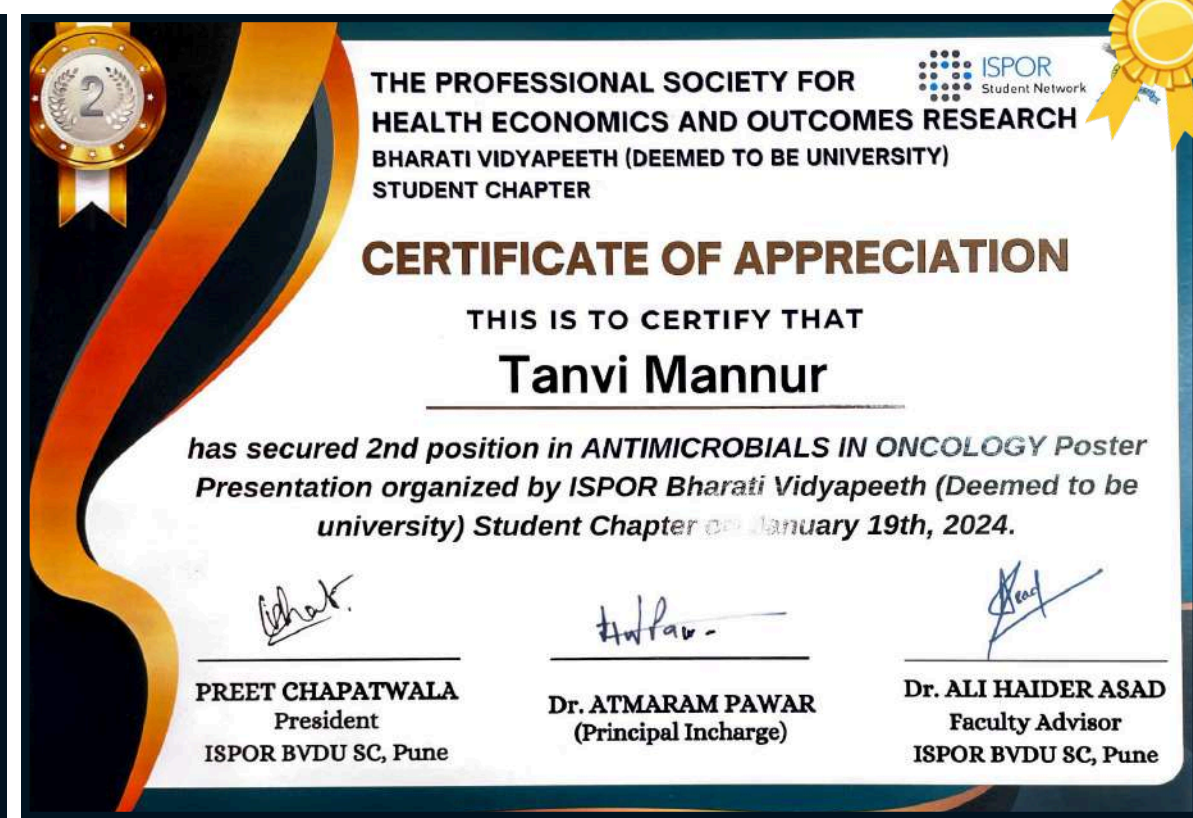
<https://doi.org/10.1016/B978-0-443-16013-4.00022-1>

Abstract  
Cardiovascular diseases are a major concern worldwide, causing high rates of both illness



**Divya Karav from Fourth Year Pharm D and, Yukta Ekbote from Sixth Year Pharm D secured 2nd place in ISPOR HEOR Conclave - Outcome Odyssey: HEOR Quest.**

**Pooja Tiwari and Krishil Oswal from Fourth Year Pharm D have Published the Following Articles "Carbon Nanotubes (CNTs): A Novel Therapeutic Approach in the Management of Allergic Airway Diseases - 26 June 2024 book chapter Published by Springer Nature p. 137-145 [https://doi.org/10.1007/978-981-97-1953-2\\_8](https://doi.org/10.1007/978-981-97-1953-2_8) Molecular cardiopharmacology and Therapeutics-I January 2024 DOI:10.1016/B978-0-443-16013-4.00022-1 In book: Biochemical and Molecular Pharmacology in Drug Discovery (pp.471-486) Early-onset subacute sclerosing panencephalitis and its rapid clinical course of progression to vegetative state: An atypical presentation September 2024 Indian Journal of Case Reports "**



**Tanvi Mannur and Shreya Gorantala from Fourth Year Pharm D Secured second prize in antimicrobials in oncology which was organized by ISPOR BVDU students Chapter**

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# PHARMA WIZ

