



KARNATAKA REGISTERED PHARMACISTS ASSOCIATION[®]

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Roundtable Meeting on DEVELOPING PHARMACEUTICAL ENTREPRENEURS AND INDUSTRIES IN MYSURU REGION

ROUNDTABLE MEETING



Under the Presidentship of Honorable

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President, Pharmacy Council of India
Pro-Chancellor, JSSAHER, Mysuru

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2. Point of Care Testing by Ms. Meghna Gosi, Mr. Balaji S, Ms. Shilpa Palaksha
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DEVELOPING PHARMACEUTICAL ENTREPRENEURS AND INDUSTRIES IN MYSURU REGION



A Round table meeting on Developing Pharmaceutical Entrepreneurs & Industries in the Mysuru Region was curated by the Karnataka Registered Pharmacist Association in support with JSS Academy of Higher Education & Research (JSSHER) on 21st August 2021 at the Board room of JSS Medical College, Mysuru. The proceedings were held under the presidentship of Honourable Dr.B Suresh, president of, Pharmacy Council of India also the Pro-Chancellor, JSSHER, Mysuru.

The organising credits are shared by Dr. T.M. Pramod Kumar, Principal JSS College of Pharmacy, Mysuru, Dr. Kaushik Devaraju, President Karnataka Registered Pharmacist Association, Director Veenaraj Technologies Pvt. Ltd. and Mr. Sunil Chiplunkar, VP-Business Development, Group Pharmaceuticals, Advisory Member – KRPA.

This avant-garde event was harnessed by several notable personalities and entrepreneurs which included Prof. K.S. Rangappa, former Vice-Chancellor, University of Mysore and past president-Indian Science Congress Association, Dr.Surinder Singh, Vice-Chancellor JSS Academy of Higher Education and Research, former Drugs Controller General of India, Mr.Amaresh Tumbagi, Additional Drugs Controller, Drugs Control Department, Karnataka, Mr. Sunil Attavar, President- Karnataka Drugs & Pharmaceuticals Manufacturer's Association, Mr. Harish Jain, Director, Embrionic Laboratories (P) Ltd., Ms. Ramya Kumbale, Director, Resonance Laboratories Pvt. Ltd., Dr. Lakshmi Desiraju, CEO and Co-founder, Triphase Pharmaceuticals Pvt. Ltd., Dr. S.N.Rao, Chairman and Managing Director- Suprem Pharmaceuticals Mysore Pvt. Ltd., Dr. Subba Swamy, Founder, and Senior Director, Resonance Laboratories Pvt. Ltd., Mr. N.Raghavan, Proprietary Raghulal & Co, and Raghulal Surgicals, Mr. Kasturi S, Director, SRK Health Care, Phoenix Vitamins.

The event commenced by welcoming the speakers and a group photo to capture the ineffaceable experience. This was followed by a swift and stimulating address by Dr. B Suresh where he called attention to the importance of commitment and the vigor to sustain success as the core to any entrepreneurship. He emphasized not to limit pharmaceutical entrepreneurship to a fundamental tablet or capsule

manufacturing but also extend it to technology-oriented sectors.

The event progressed with the speech by Mr.Amaresh Tumbagi, Additional Drugs Controller, Drugs Control Department, Karnataka. He put a spotlight on Government assistance to support the entrepreneurs. He elaborated on the extensive Government support to both manufacturing and development activities in Karnataka. Product permissions and exports have increased in multitudes in Karnataka owing to the strengthening of the quality while catering to the markets worldwide.

Presenting a distinctive thought to the program was Mr. Sunil Attavar, President- Karnataka Drugs & Pharmaceuticals Manufacturer's Association who highlighted the sensitive ecosystem of Mysuru and proposed to develop Pharma Knowledge Hub which can generate great entrepreneur mind without wiping out the biological community in and around Mysuru. He suggested establishing Incubation Centres across Mysuru, similar to the Catapult program in the UK where any person with an idea can be trained to commercialise it especially by protecting it through the intricacies of Intellectual Property Rights (IPR). Dr.L Lakshmi Desiraju added that the Government is encouraging in similar directions by already slashing the patent fees, especially for women at an 80% discount.

Mr. Harish Jain, Director, Embrionic Laboratories (P) Ltd. concentrated on the need to understand the customer problems and desires to be a successful entrepreneur. He stressed on the necessity to have a product mix and analyse the mix by (i) the efforts to sell the product and (ii) the revenue generated by the product. Similarly, the customers should be broadly categorised on (i) the efforts to customer acquisition and (ii) the revenue generated by the customer. He further educated that entrepreneurs must incorporate the following divisions into their business – the Research and development team, Human Resources, Management, Finance, Operations, Sales, and Marketing. He added that a strong team can be the wisest investment for growing a business.

Supporting the words of Mr. Sunil Attavar, Ms. Ramya Kumbale, Director, Resonance Laboratories Pvt. Ltd. added the need for less polluting companies in Mysuru respecting its ecosystem. This can be in the form of establishing knowledge-based industries where budding entrepreneurs can test their ideas before undertaking higher risks, she added. She brought attention to Government collaboration in entrepreneurial sectors. Also, highlighted the scope of establishing Special Economic Zones where subsidised land and tax benefits could be provided to attract entrepreneurs.

Dr. Lakshmi Desiraju, CEO and Co-founder, Triphase Pharmaceuticals Pvt. Ltd. brought to prominence the significance of establishing Technology Commercialisation Cells in Universities, where, universities could streamline ideas into products and further attract investors while sharing a fraction of the profit. Incorporating Technology Commercialisation into the curriculum can be an excellent starting point, she added. She delineated factors like the idea, finance, trained resources, and securing the idea through IPR to be the most critical points to be taken into consideration by every aspiring pharmaceutical entrepreneur. She also pointed to the scope of developing technologies and outsourcing them. She necessitated the establishment of Biocommons.

Dr. S.N.Rao, Chairman and Managing Director- Suprem Pharmaceuticals Mysore Pvt. Ltd. At the outset communicated some of the challenges to setting a Pharmaceutical Industry. These included stringent regulatory compliance, cost of compliance, infrastructure challenges, connectivity issues, competent academic teachings and practices, the superfluous relationship of industry and academia, time challenges, etc. He focused his talk on the ways these challenges could be turned around. Some of the solutions elaborated were entrepreneurship in the Herbal and nutraceutical industry as it has less stringent regulatory requirements, Single window clearance, attracting industry growth with incentives from the government like tax holidays, encouraging roadshows, and a course curriculum inclusive of entrepreneur training. He weighed on the need and prospects of Active Pharmaceutical Industries.

Dr. Subba Swamy, Founder, and Senior Director, Resonance Laboratories Pvt. Ltd. enlightened the audience with his journey to entrepreneurship and the challenges.



Dr. Badri Narayan, Managing Director, S3V Vascular Technologies, highlighted the need to create a bank of industries that are at a threat and reconstructing them in Mysuru. He emphasised the importance of holistic approaches to entrepreneurship like developing vendor-management programs. Facilitating strong mentorship is the key to raise entrepreneurs, he added.

Mr. N.Raghavan, Proprietary Raghulal & Co, and Raghulal Surgicals brought homogeneous thoughts parallel to his fellow mates calling attention to the challenges for Mysuru to shift from tourism to industry hub. He too intensifies financial and government support as critical factors for the successful industrial germination in Mysuru.

Mr. Kasturi S, Director, SRK Health Care, Phoenix Vitamins, stated that for the industry to flourish in Mysuru reducing bio-burden should be a key focus area along with the determination to fight the challenges coming when seeking approval from various government departments for several legal establishments. He also underlined less cost of establishment as the most attractive reason to invest in Mysuru.

Altogether, the program envisaged the establishment of a knowledge hub, technology commercialization cell and Centre of excellence for Biocommons in academia and non-profits will ensure entrepreneurship and industry development. Further, industrial growth needs tremendous assistance from the government.

In conclusion, there is a high quality of life and lesser cost associated with setting up the enterprises in Mysuru and nearby areas; hence, there is a need to encourage incubated and scale-up companies. Additionally, inspiring qualified personnel to stay in Mysuru and contribute to the establishment and growth of pharmaceutical firms is vital. Finally, it is important to market the knowledge, industry supportive regulatory compliances, and human resources simultaneously focusing on the ecosystem of Mysuru and Karnataka.



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Point-of-Care Testing



As healthcare is becoming more consumer-focused, the need for appropriate diagnosis, monitoring and screening test is expanding rapidly. Patient volunteered testing can be helpful in early screening, which may signal the healthcare professional for further work up regarding the respective patient. This process can simplify the steps at the screening level and follow-up.

Point-of-care testing (PCOT) is one of the major advances in healthcare where testing is done near the patient rather than in a centralized laboratory. It can also be addressed by many different names, such as near-patient testing, remote testing, satellite testing, and rapid diagnostics. In general, point-of-care testing is any tests that are performed near a patient and at the site where care or treatment is given.

Point-of-care testing allows the medical staff to achieve real-time, lab-quality diagnostic results within minutes rather than hours. Point-of-care tests can be done in various locations like at home by patients themselves, at a healthcare practitioner's office, in the emergency department, in ambulances, at an accident scene, in the military, in the radiology department. Many people including physicians, nurses, pharmacists, emergency first responders and laboratory professionals can perform point of care tests. They can be even done by patients themselves, sometimes called “self-tests” or “home tests.”

At-home glucometers can be used by diabetic patients to monitor their glucose levels and adjust their insulin therapy, in case of emergency departments or at the accident site. Point-of-care testing can be used to provide information about blood gases, electrolytes, heart rate and blood pressure.

BENEFITS OF POINT OF CARE TESTING:

Improved clinical outcomes by helping in faster decision making, Quicker optimization of therapy and reducing the incidence of complications.

Reduces economic burden by reducing the number of clinical visits, reducing the length of hospital stay, by reducing the use of staff and equipment.

Point-of-care testing can also be used in areas where clinical laboratories are too far for frequent visits like in rural regions.

For the last few decades, many efforts have been made to make the Point of Care tests more sensitive and specific. For some conditions like monitoring of blood glucose, oxygen saturation, pulse rate, blood gases and electrolytes, PCOT is widely used. Newer technologies may emerge in the future for testing various conditions and to manage critically ill patients in the emergency room and ICU.

As POCT is expanding, the major concern with this is reliability. POCT results may not be compared with central laboratories and lack of knowledge by the patients may lead to wrong interpretations of results. To overcome this, pharmacists can play a major role as they serve as the first point of contact for providing test kits and for doing the initial interpretation of results leading to a better care plan.



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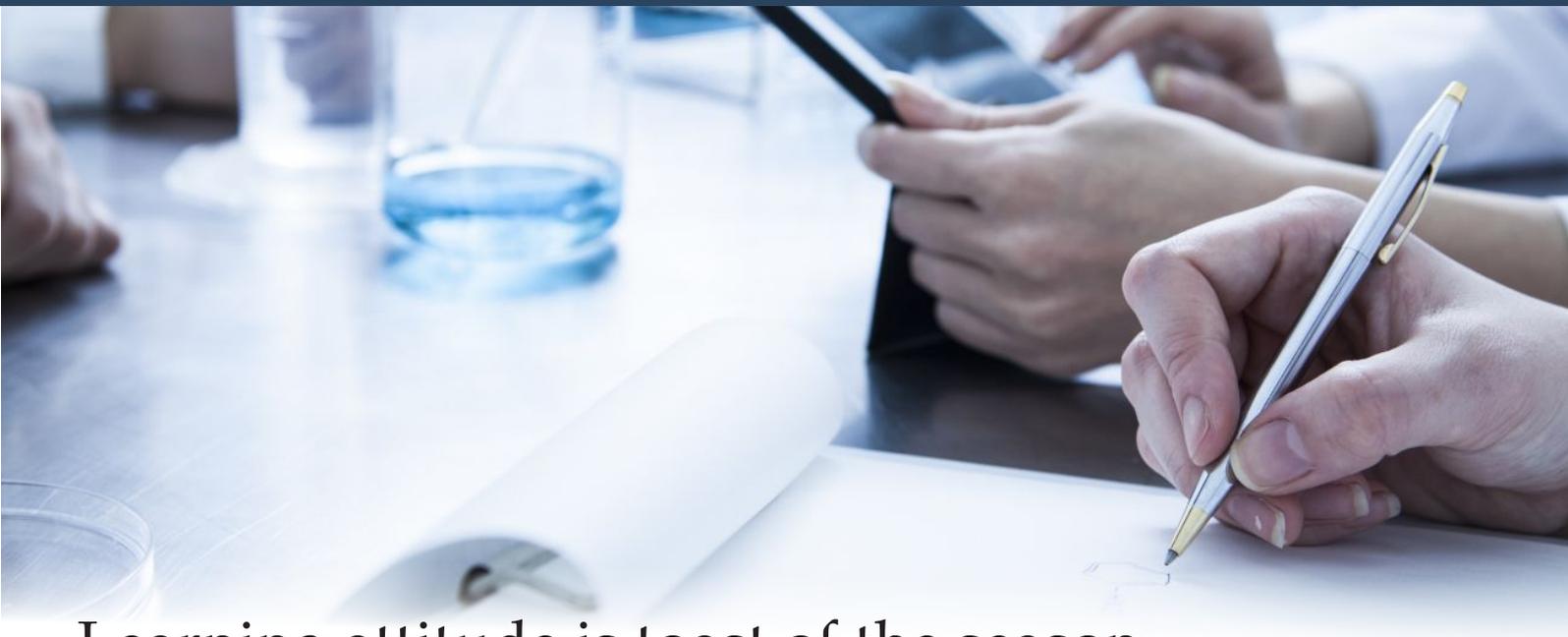
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CONTINUOUS LEARNING AND THE PHARMACIST



Learning attitude is toast of the season

Is learning a natural instinct? Again there are two schools of thought, while one set of scientists aver that learning is a constant natural process based on human instinct, required for survival; psychologists reiterate that learning is a change in behavior or knowledge that results from experience and is not instinctive. Whatever the jury may be on this issue, definitely, learning is a major human trait required for each one of us to survive and thrive.

Productive behavior refers to thoughts, words and actions of an individual that produces desirable results either in the employer workplace or in one's place of self-employment or in domestic and social situations. Thus, the focus of productive behavior is to generate desired results. Let us assume, a diabetic patient comes into the pharmacy for his regular purchases, a marketing-oriented pharmacist will try to converse and the understand newer needs of the diabetic. It may be related to musculoskeletal pains that get aggravated in cold weather, or oral cavity discomfort when consuming cold or hot beverages. After establishing to the customer that these needs can be suitably addressed, the enterprising pharmacist can show him various products that will help him relieve the discomfort or pain – examples: Shy NM toothpaste for management of teeth sensitivity discomfort and pain in the oral cavity; Dolo 650 that provides reliable and safe musculoskeletal pain relief. This approach of the pharmacist may be classified as productive behavior.

Is productive behaviour revenue-centric?

The instinct of many a pharmacist is that finally, the active interaction with a customer or prospect should end up in a profitable transaction. Yes, ideally, this should happen when there is productive behavior of the pharmacist that is mutually beneficial to the customer. However, many times, the transaction shall not yield immediate business results, the advice or counsel provided by the pharmacist will lay the foundation for a future purchase. For example, a pharmacist notices that a person's eyes are reddish probably due to excessive digital reading and online activity. While the person may not accept a passing mention by the pharmacist that certain eye care drops are useful to relieve the eye strain, eventually, the subject may buy the medication in an upcoming visit.

The wise pharmacist knows that giving counsel is not just to create the purchase orientation; the productive behavior of the pharmacist is a knowledge-based transaction that will strengthen the bonding between patient and pharmacist for future profitable transactions too.

How to generate productive behaviour?

It is a no-brainer that a pharmacist's productive behavior is based on his knowledge of medicines, nutritional products and disease patterns. The inputs provided by pharmacists to patients and patient attenders can be lifesaving and shall definitely improve the quality of life of the sufferer. The role of the pharmacist has been appreciated to a great extent in various geographies in different ways: it is startling to observe that in the state of Illinois, USA, there is legislation called 'mandated patient counseling'. Under this law, a pharmacist must to provide counsel while dispensing a prescription to ensure favourable outcomes to the patient. The various points of counseling for pharmacists of Illinois are suggested as in the below list:

- a) Tips for parents to manage vomiting in children
- b) Remedies for tough coughs during the cold season
- c) Knowledge regarding flu vaccination
- d) Aspects of obesity in kids
- e) Information and evaluation of various medical and health apps on smartphones
- f) Treatment of burns
- g) Regarding home remedies

This link provides interesting insights on what practicing pharmacists do in Illinois, USA: <https://pharmacy-staffing.com/examples-pharmacy-patient-counseling/>

There are patients who do not understand paracetamol poisoning and hepatic stress due to paracetamol, a drug available easily across the counter. There are cases where a patient takes brand A with paracetamol for headaches and on the same day takes another brand B which also contains paracetamol in combination, for anti-cold activity. This leads to excess paracetamol intake and may complicate matters to the patient, particularly if he is a regular alcohol consumer.

So having a knowledge-hungry attitude, knowing how to access knowledge and having a systematic method of memorizing the essentials will help the pharmacist deliver better patient outcomes, and improve revenues to his pharmacy.

Productive behaviour for pharmacists in the industry and other areas

Today the valuable services of well-trained pharmacists are sought across the pharmaceutical industry and other areas such as pharmacovigilance (PV), clinical research, intellectual property (IP) and media. Marketing is a huge absorber of pharmacists in front-line selling jobs, field managerial roles, product management and top management. Pharmacists find it easy to absorb the product concepts and thus provide value-added working in marketing and other domains. The well-defined roles of pharmacists in R and D, manufacturing and quality of pharmaceutical industry is popular, today, pharmacists are getting into regulatory, medical devices, HRD and even marketing communication segment of advertising companies.

In all these aspects, the main drive empowering pharmacists to do better and better is the learning drive. When a pharmacist works with a learning attitude, he or she will be updated and shall provide appropriate solutions to his patients, or clients or company. Domain specialist pharmacists in IT companies help create PV, ADR and even ERP software. The pharmacist's role in society is evolving in various fields of activity. This is possible due to the learning attitude of every pharmacist, the stimulus provided to the learning process by pharma teachers and the hard-working attitude of pharmacists to achieve Golan Heights.

Endnote

A fascinating encouragement to learning behaviour among pharmacists: <https://www.ausmed.com/cpd/articles/patient-medication-counselling> Just click this link, you will be amazed to learn that a pharmacist in Australia can read this article and claim four minutes of CPD and equivalent points (where CPD = Continuing Professional Development). Just check out this link: <https://www.guild.org.au/guild-branches/nsw/training-events/training-education/cpd> Pharmacy Board of Australia has given authority to certain organizations like The Pharmacy Guild of Australia to provide CPD to pharmacists. It is high time that such a system is brought in India too. KRPA is wonderfully placed to conduct such CPDs.

EVER CHEER TO PHARMACISTS!
JAI KRPA!!



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ONLINE PHARMACY SERVICES

An Ethical Conundrum



The concept

An online pharmacy by definition, is an internet-based vendor which sells medication which includes that includes both prescription and non-prescription drugs. For a pharmacy, to qualify as an online pharmacy it must have a single contact point for patients or consumers i.e., a single domain or website. Unlike conventional pharmacies, where a single pharmacy can have multiple outlets. The other prerequisite for online pharmacy is that at no point vendor vendors or patients should interact physically.

The trend of E-commerce

The contemporary trend of online shopping in the modern times worldwide has been recently adopted in the pharmacy system also. The overall concept is relatively new, hardly a couple of decades old. This trend which was relatively foreign to India, now has picked up the pace with major money being invested in the system.

Along with the trend of the subject, problems have also reaped in and magnified multi-fold due to a set of laws and high population densities.

The laws

Laws which that majorly govern online pharmacies include Information Technology Act, 2000, Drug and Cosmetics Act 1945, Pharmacy Act 1948 and Indian Medical Act 1956.

Standard rules and regulation regulations which govern conventional pharmacies also apply to online pharmacies which includes, drug dispensing which will occur in the presence of a qualified and registered pharmacist which shall remain at all times. The safety and architectural requirements which apply to a brick-and-mortar pharmacy applies by letter to the online pharmacy as well.

Advantages of online pharmacies:

- Better prices due to increased competition.
- Accessibility with limited mobility to remote areas.
- Convenience and greater anonymity
- Round the clock service
- Doorstep delivery within substantially short time, Cost comparison and substitute brands are also available on these website
- Easy to access drug information is also provided (generally English readers)
- Dispensing practices are done without scrutiny of validation of prescriptions.
- In the times of global pandemics, online pharmacies can serve a greater purpose.

Drawbacks in the online pharmacy system

- 1) There is no guarantee or method for verification of qualification of the person responsible for dispensing.
- 2) No law or are rules laid out for practices in the online pharmacies, in order to protect the consumer.
- 3) Irregular manner of functioning.
- 4) Their warehouse management either lacks manpower or storage facilities required for storing different medication medications.
- 5) Lack of monitoring encourages fraudulent practices such as sending incorrect dosages or generic variants when the physician has prescribed a brand name.
- 6) Complete lack of human interaction between patients and pharmacists.
- 7) Naught to very little emphasis given on patient counselling, medication review or prescription audit.
- 8) The Patient has no way of cross- checking or verifying the delivered articles with prescription.
- 9) In the warehouses, not all the personnel handling medications are registered and qualified pharmacists.
- 10) As it is, in conventional pharmacies with all the scrutiny, rules and regulations, a approx. 100,000 people suffer every year in united states the United States alone due to dispensing errors. Sadly, there is no credible way to monitor or report such errors from online pharmacies.
- 11) A major drug- specific problem aggravated due to this easy dispensing of these pharmacies, is faced by antibiotics in the form of multi-drug resistant stains strains of many pathogens.



Direct comparison of online vs conventional pharmacies

The idea of a pharmacy and a pharmacist was developed in order to provide patients with information about the drugs in layman terms without compromising on quality and scientific temperament. The job of a pharmacist in a conventional is to perform various patient care activities including patient counselling, medication review, cost benefit analysis etc, by using the best available evidence-based medicine and practice. Most importantly forming an impeccable bond with the community so that, at the time of crisis they rely on advice of the professional whom they can trust but share a bond. Psychologically, having a familiar face in the times of crisis always helps.

Whereas, in the case of online pharmacies the role of a pharmacy is primarily reduced to one of a data entry operators. It is strictly based on a business model, which overviews patient care in terms of monetary benefits or losses. There are no robust guidelines or parameters to find out potentials errors in prescription which stands over 5 million a year according to many dedicated studies in the field.

Humans are social animals, hence physical contact or touch has its own relevance, for e.g.,e.g. the importance of non-verbal cues in a communication. As far as patient counselling is concerned online pharmacies take away this concept totally out of the picture.

The technical glitches in online pharmacies

According to several media reports (print), online pharmacy companies don't comply with rules set out for running a successful pharmacy which includeincludes, hesitancy in hiring accredited pharmacists, discrepancies in handling of warehouses and in dispensing practices such as dispensing without prescriptions which ultimately adds to the already existing problems of substance abuse, multi-drug resistant strains of bacterial and viral pathogens, etc. It is a well-known fact that companies are even going as far as basing themselves offshore, in order to avoid jurisdiction by states.

Conclusions

There are no straight answers as to whether the concept itself is ineffective or the implementation of protocols or laws is the problem. As far as the current scenario is concerned, one cannot deny the adequacy of online pharmacy systems in the current scenario of times of pandemics. Although it is to be noted that some laws and protocols are required to make the practice safer for patient -care. Currently, the practice seems to be keeping monetary benefits at the core of its ideology, which is not necessarily wrong because every service provider needs to create an economically viable business model to survive. But this economic viability cannot overtake patient -safety and hence it would be idea

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INSPIRATIONAL PHARMACIST



Navinchandra Jamnadas Engineer

Navin Engineer is a well-known businessman in the United Kingdom. He was born on September 13, 1912, in the United Kingdom. He is known as the Richest graduated pharmacist in the world. His father was a Kenyan civil servant. He was sent to live with his aunt in London in 1969 when he was 16 years old, with only £75 in his pocket. He supported himself through the sixth form and then the London School of Pharmacy by working in the Wimpy burger restaurant on Oxford Street in the evenings and on weekends. In contrast to his father, who worked for years in the Kenyan civil service, Navin Engineer was driven by a burning desire to work for himself when he arrived in Britain in 1969.

After his graduation, his first job was at Boots, a chain of chemists and pharmacies. He was enraged by a visiting area manager's demand for a cup of tea while he was busy dispensing prescriptions, already thinking the company was "a little bit like the civil service and reportedly quit on the same day.

He along with his wife, established a company named Chemidex in 1981 in Egham, Surrey. Chemidex's first pharmacy was unbolting in Chertsey, Surrey, in 1981. He had 14 pharmacies in 1999, which he sold for £12 million to the German company Celesio. Chemidex went on to become a pharmaceutical company, and in 2000, it acquired its first brand.

Engineer invested much of the proceeds in his much smaller wholesale business. He bought some small branded pharmaceuticals from big pharma companies, typically medicines with a turnover of £2 million or less, and switched production to established factories in Eastern Europe and the Far East, resulting in immediate cost savings.

Then he moved into generics, a field that necessitates a high level of expertise as well as a willingness to take calculated risks. Engineer estimates that developing generic pharmaceuticals costs between £200,000 and £250,000 and takes two to three years. The first step is to locate a patent that is about to expire, and then to ensure that you do not infringe on it while developing a knockoff version.

Despite the challenges, Chemidex now has 42 generics. They include gout and depression treatments, an anthrax antibiotic, and even a generic version of the well-known Prozac. The company also manufactures Haymine (chlorphenamine) Tablets, Lyflex (baclofen) 5mg/5ml Oral Solution, Mucogel Suspension (aluminum hydroxide gel, magnesium hydroxide), Penbritin (ampicillin) Capsules, Ponstan (mefenamic acid) Capsules 250mg, Tagamet (cimetidine) 200mg Tablets and Uniroid-HC Ointment and Suppositories (hydrocortisone, cinchocaine hydrochloride). They all contributed to £9 million in profits last year, which is impressive for a wholesaler that was once subordinate to Engineer's retail pharmacies.

Currently, his net worth is about £1.1 billion making him one of the world's richest graduated pharmacists who rose from being ordinary to the Richest known.

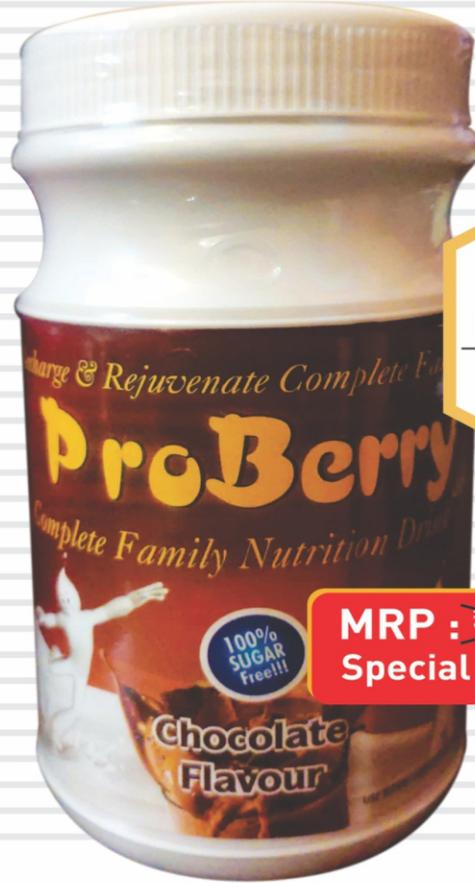


Priya J Aradhya
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1. Correct answers will be rewarded 1 point each (10 marks)
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 3. Those who get the highest marks, their photo will be published in our next bulletin and also a cash prize of Rs.500/- will be rewarded to them
 4. The answer must be sent within 20th August 2021 to this E Mail ID- krpaindia@gmail.com
- A confirmation mail will be sent to you on receiving your e-mail.

1. The alkaloid found in Calabar Bean is _____
2. Devil's dung used as a carminative and anti-spasmodic
3. This does not possess narcotic properties and is therefore sometimes called anarcotine. Name the substance
4. _____ is a HMG-CoA reductase inhibitor
5. _____ is a synthetic pyridinylmethylenediacetate ester derivative stimulant laxative.
6. _____ is a Neurokinin-1 receptor antagonist.
7. _____ training will be conducted for all employees on the procedures of their respective functions and related or cross functional department process
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9. _____ drug can cause lactic acidosis.
10. Indian pharmacovigilance system is regulated by _____



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