



KARNATAKA REGISTERED PHARMACISTS ASSOCIATION[®]

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Dr. B. Ramesh

Principal and Dean

Sri Adichunchanagiri College of Pharmacy
Adichunchanagiri University,
B.G.Nagara, Karnataka

PREFACE

It is a feeling of immense pride and joy to witness the launch of monthly newsletter by Karnataka Registered Pharmacists Association. I would like to congratulate

Dr. Kaushik Devaraju President, KRPA and other team members.

My best wishes are with each one of you to keep spreading knowledge, keep growing and keep venturing beyond what you already know and make a difference to this world as responsible pharmacists. KRPA is already involved in conducting continuing education programs for fellow pharmacists as pharmacy remains a very exciting profession; in fact, more opportunities are available for pharmacists, pharmacy students and educators than ever before. The roles of pharmacists in inter-professional health care teams continue to evolve, as does their recognition by payers and policymakers. Pharmacists continue to transform the delivery of their services to accentuate the critical nature of public health and proactive health care. But with new opportunities also comes challenges, including the challenge of how to manage the personal and professional resources necessary to succeed in today's ever-changing environment.

I convey my best wishes to the editorial board of the newsletter and request them to not only keep up with changes in pharmacy practice but also anticipate and prepare our fellow pharmacists for opportunities and contingencies that will arise throughout their professional careers.



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IMMUNITY

The ability of the body to resist disease is immunity. Simply put, immunity is the body's resistance to disease. When a person's self-defense system or immunity is low or impaired, his or her vulnerability to sickness increases. Immunological disease is not just about infectious diseases; it is also about chronic non-communicable diseases (NCDs). In the case of NCDs, chronic inflammation is the result of impaired immunity. Immune disease can also manifest as autoimmune disease such as rheumatoid arthritis. In autoimmune diseases, the body's self-defense cells and self-defense molecules attack normal body cells to cause the auto-immune disease. Type 1 diabetes mellitus is also suspected to be an autoimmune disease as per certain researchers. Thus, a healthy normally functioning immune system is critical for good health.



IMMUNE SYSTEM

The body's immune system forms the first line and the second line of defense. The first line of defense is the skin (integument), which is impervious to the entry of water and bacteria. Thus the skin forms a formidable barrier to the entry of pathogens or disease-causing agents into the body. The second line of defense is the leucocytes or white blood cells or white blood corpuscles (WBCs).

The WBCs are of two main types: granular leucocytes and agranular leucocytes. The granular leucocytes contain granules or powdery material in their cytoplasm. If the granules in the cytoplasm get stained by acidic stains (colouring agents), the WBCs are called acidophils or eosinophils. The WBCs whose granules in cytoplasm get stained by a basic stain are called basophils. And if the WBCs granules are not stained by either acidic or basic stain, are called neutrophils or polymorphonuclear leucocytes (PMNLs) (the nucleus is multi-lobed). The agranular leucocytes are of two types: monocytes and lymphocytes. Monocytes are large WBCs. There are two types of lymphocytes – B lymphocytes (that produce antibodies or specific proteins that help destroy specific antigens or foreign bodies) and T lymphocytes. All WBCs except B lymphocytes have the property of phagocytosis or cell eating (the WBC cell approaches the antigen, surrounds, engulfs and destroys the antigen). The phagocytic WBCs have their special “tastes”, for example neutrophils are general soldiers who launch their phagocytic activity in tissues where antigen presence is present. WBCs also produce pro-inflammatory molecules and antibacterial or antimicrobial peptides that help augment the body's immunity. So the antibody production, phagocytosis, production of pro-inflammatory molecules and antimicrobial compounds are essentially the activities of a normal immune system.

INDUCING IMMUNITY

Vaccination is the most common method of inducing immunity. A vaccine is a biological preparation that provides active acquired immunity to a particular infectious disease. A vaccine typically contains an agent that resembles a disease-causing microorganism and is often made from attenuated (weakened) or killed forms of the microbe, its toxins, or one of its surface proteins.

Inducing immunity is also called acquired immunity, which can happen naturally or by artificially inducing the immunity. Thus, adaptive immunity is the one induced by natural exposure to a pathogen or by vaccination. This acquired immunity is a continuous process that happens during one's lifetime. For example, we are bombarded continuously by pathogenic bacteria and viruses, including the common cold virus. Most common cold viral infections are self-limiting and we overcome the disease because our body learns to produce antibodies that overpower the common cold virus. Coronaviruses and rhinoviruses cause the common cold viral infection. Thus: '*Acquired immunity is by infection or vaccination (active immunity) or by the transfer of antibody or lymphocytes from an immune donor (passive immunity). Acquired immunity is in contrast to innate immunity (natural immunity)*'. Once in a way, the COVID-19 happens. In this case, the SARS-CoV-2 coronavirus jumped from the animals to humans, it is a case of zoonotic infection. Ebola, Nipah, MERS and SARS are types of zoonotic viral infections, which are difficult for our human body to overpower. Smallpox virus and poliovirus too are deadly viruses that we cannot overcome without vaccination. Hence, it is wise to have some means to acquire immunity against such viruses, and vaccination is an important method to induce immunity against such viruses.

POLIO VACCINE:

Jonas Salk produced the first effective vaccine against the poliovirus, approved in 1995. He never patented it; the Salk vaccine saved millions across the world from polio viral infection. Salk is a true vaccine hero. While Salk's vaccine is injectable, the next invention by Albert Sabin of oral polio drops vaccine was another heroic contribution. Vaccines against measles, mumps, rubella, and rabies are all lifesavers.

Vaccines are traditionally manufactured by weakening the whole virus (live attenuated vaccine), or a dead virus-based vaccine (inactivated) is produced. However, newer vaccine technologies may use specific portions of the germ (for example Subunit, recombinant, polysaccharide, and conjugate vaccines). Toxoid vaccines use toxins of the germ to produce immunity post-administration.

COVID-19 VACCINE TECHNOLOGIES:

Pfizer and Moderna have used mRNA technology, MynVax (IISc) incubate company has a warm vaccine candidate in which a portion of the spike protein of SARS-CoV-2 is used and Astra Zeneca Oxford is based on adenovirus vector technology.

ENDNOTE:

Strong immunity is required for a healthy body and mind. Vaccination is a successful approach to provide boost to the immunity of a person. The COVID-19 vaccine is a gold rush for pharma companies and a boon to humanity.

Mr. Sunil S Chiplunkar

M Pharm (Pharmacology) MBA (Marketing) PGDHRM (PhD)
VP – Business Development, Group Pharmaceuticals, Bangalore,
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Antimicrobial resistance (AMR) is a major public health concern with a profound impact on both global healthcare and the economy. There is no single straightforward approach to tackling AMR, although antimicrobial stewardship (AMS) is widely accepted as a good place to start.

AMS is a design of an inter-professional workout, for an improved, optimal, antimicrobial use in the health care settings. The saying, “The right antibiotic for the right patient, at the right time, with the right dose, the right route, causing the least harm to the patient and future patients” is the motto of AMS. It is a supervisory program over the appropriateness of the treatment, like drug selection, correct dosing, duration of therapy, administration interval, therapeutic drug monitoring for certain antimicrobial agents. AMS program assures the best clinical outcome in the treatment of infection by not only halting antimicrobial resistance, but also minimizing toxic effects to the patients and by decreasing adverse events, and controls health care cost.



ROLE OF PHARMACIST IN ANTIMICROBIAL STEWARDSHIP

Pharmacists, when given a prominent role in AMS program can play a responsible role and fulfil the objectives like promotion of the optimal antimicrobial use, reduction in the transmission of infections, and education of other health professionals, patients, and the public. In India, ICMR initiated a program Antibiotic Stewardship, Prevention of Infection & Control (ASPIC), in 2012, and brought together faculty from clinical pharmacology, microbiology and other disciplines to collaborate on initiating and improving antibiotic stewardship and concurrently curbing hospital infections through feasible infection control practices. One of an exemplary program reported in 2008, the Center for Antimicrobial Stewardship and Epidemiology (CASE) formed at St. Luke's Episcopal Hospital (SLEH) to improve the quality of care for patients related to antimicrobial therapy.

This program aimed at the following factors,

- Optimize antibiotic therapy by ensuring the selection of the most appropriate agent, dose, and duration of therapy
- Screening for significant adverse drug reactions and drug-drug interactions
- Modifying initial therapy based on patients' culture and sensitivity reports

The CASE team consists of at least two infectious diseases pharmacists and one physician (the medical director) who provide direct oversight for antimicrobial utilization within the hospital. The charter of CASE contained specific aims, for improving patient care, furthering clinical research, and training the next generation of clinical infectious diseases pharmacists. Another key innovative feature of CASE is its extensive involvement in training new infectious diseases pharmacists and conducting research. Trained pharmacists in antimicrobial stewardship along with the physicians (the medical director) could provide direct oversight for antimicrobial utilization within the hospital. Such trained pharmacists can contribute to the research and development of policies on antimicrobial use. Pharmacist educated in AMS in the health care and research areas, can achieve success over AMR.



This can be therefore possible when the fundamental principles of antibiotic stewardship made integrated into preclinical medical curricula. ASHP also recognizes the current shortage of advanced trained pharmacists in infectious diseases and supports the need for an evolutionary change in pharmacy education and postgraduate residency training on infectious diseases to produce adequate and well-trained pharmacists who can deliver essential services. In connection to this, in America, there is a special training program available for pharmacists in Infectious disease control. A mini-review on professional development describes the importance and principle concepts for training clinical professionals in AMS practices. AMS education, included in Pharm D curricula is most suggested, where students introduced to patient care under the guidance of a preceptor, similar to an apprenticeship, in their final year of coursework. This will develop future training opportunities on infectious diseases, research scope and improves patient outcomes with the appropriate use of antimicrobials.

Common barriers identified for the implementation of AMS in India include lack of funding, human resources, lack of information technology, lack of awareness in the administration and healthcare team and prescriber's option. A well-trained clinical pharmacist in infectious diseases working in hospital settings can fix all the barriers. Therefore, the country should also think in this way and make the necessary expansions in the Pharm D curricula. For pharmacist, ways for rational use of antimicrobials can be discovered with sound research on antimicrobial use, resistance patterns, and drug-related problems. Data from CDC's National Healthcare Safety Network say one-third of antibiotic prescriptions in hospitals involve potential prescribing problems. India, the being world's largest consumer of antibiotics, lack national surveillance data on resistant pathogens. Research in India focused predominantly on drug discovery and development rather than on stewardship and drug-related problems. Discovery of possible ways to control irrational antimicrobial use is possible with a sound research on antimicrobial use, resistance, drug related problems. Assessment of percentage use of antimicrobials in the health care settings enables to suggest the actions to control the irrational use. National Action Plan on AMR (NAP-AMR) launched by the government of India in 2017, to promote research investment in AMR research in India with the main focus on, epidemiology, which understands the incidence and burden of resistant pathogens upon the community settings.

People using antibiotics, on their own, without therapy realization, will affect individuals and the entire society. A recent publication 'Scoping Report on Antimicrobial Resistance in India', made recommendations on future research, the author has said the need for the development and study of the impact of various antimicrobial stewardship activities and infection control measures. All the countries involve pharmacist in such stewardship programs is highly recommended in Indian health care. A pharmacist-led AMSP was good research with better outcomes reported in many literatures.

Ms. Nayana P Kunderi

Assistant Professor

Department of Pharmacy Practice
R R College of Pharmacy, Bengaluru

RATIONALITY OF AZITHROMYCIN IN COVID-19 ERA



The Tripartite committee constituting of World Health Organization (WHO), Food and Agriculture Organization of the United Nations (FAO) and World Organisation for Animal Health (OIE) declared that World Antimicrobial Awareness Week (WAAW) will be held from 18th to 24th November every year starting from 2020. Antimicrobial Resistance had always been an alarming sign and their overuse in humans, livestock, and agriculture along with poor sanitation and hygiene indeed increased the intensity of the alarm.

India was the largest consumer of antibiotics in the world with 12.9×10^9 units (10.7 units per person) sold in the year 2010, which is the highest among all the countries. Empirical evidence indicates a strong association between antibiotic consumption and subsequent development of bacterial resistance at both individual and community levels. Given of the excessive use of antibiotics and the impending threat of antimicrobial resistance, there is a great scope to implement principles of antimicrobial stewardship in our country.

The prevailing Covid-19 pandemic is posing a serious question on the rational use of antibiotics especially the macrolide class of antibiotics. A Hydroxychloroquine (HCQ) is being recommended as chemoprophylaxis drug for asymptomatic health-care personnel handling COVID-19 cases, frontline workers and asymptomatic contacts of the confirmed cases, while the hydroxychloroquine-azithromycin combination is being prescribed for patients with serious sickness.

It's a highly learned fact that Azithromycin and other macrolide antibiotics, in addition to their antibacterial effects, possess immunomodulatory and anti-inflammatory effects. Macrolides regulate the inflammatory response, attenuating the production of anti-inflammatory cytokines thereby reducing the complications of respiratory viral infections. In Covid-19, Azithromycin appears to decrease the virus entry into cells, inhibit several cytokines involved in cytokine storm which is a classic feature of the novel coronavirus.

However, opposing conclusions regarding viral clearance and clinical benefit with the regimen of hydroxychloroquine plus azithromycin have been published leading to uncertainty over the use of this drug. Also, the actual dosing of Azithromycin i.e., 500mg OD on day 1 followed by 250mg OD on days 2 to 5 were not being followed and different regimens of azithromycin with or without Hydroxychloroquine are being practiced all over the country. There are instances where the macrolide antibiotics are being prescribed as a prophylactic for primary contacts which weren't proven till date. Also, the duration of use is highly varied in different parts of the country where they are being prescribed from standard 5 day therapy to almost 10 days.

Macrolide resistance is an increasingly recognised problem. Increasing resistance of azithromycin towards *Treponema pallidum*, the causative pathogen of syphilis, is a great concern in recent times. With the possible more widespread use of azithromycin to treat COVID-19, we may lose azithromycin in our antimicrobial armamentarium to treat bacterial infections, for which the role of azithromycin has been well-established, including community-acquired pneumonia, non-tuberculous mycobacterial infections, and Group A streptococcal pharyngitis.

There is a significant lack of clinical evidence on the use of macrolide antibiotics in Covid-19. Thus, clinicians managing patients with COVID-19 should consider possible development of acquired resistance when prescribing azithromycin, especially in regions where azithromycin resistance is already a concern.



Mr. Raghava Kalyan. M
Assistant Professor
Dept. of Pharmacy Practice

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EVENTS AND ACTIVITIES

HURRAH TIME FOR REWARD!!!



Another reason to rejoice. An important event to recognise the efforts of pharmacists. On the occasion of Kannada Rajyotsava celebrations held in front of Mysuru Palace, our dear pharmacist Raghavan sir was awarded with District Rajyotsava award for his greater contribution as a pharmacist. KRPA takes the pride in congratulating him for this achievement.



This month KRPA was a part of national pharmacy week, in this regards certain competitions was organised for pharmacist and students by the Indian Pharmaceutical Association. Congratulations to the winners of the competition. The 1st prize goes to Mr. C.S. Mujeebuddin, Clinical Research Private Limited, Telangana, second to prize was won by Mr. K.V. Gopinath, TTD Ashwini Hospital, Tirumala, Andhra Pradesh, third prize winner was Mr. Gaurav Bhiku Naikk, Goa Medical College & Hospital, Goa. & fourth prize winner is Mr. Sunil S Chiplunkar, VP Group Pharmaceuticals. Special wishes to our own Sunil sir, you are motivator and support for KRPA.

**ಡಾ.ಹನುಮಂತಾಚಾರ್ ಜೋಷಿಗೆ
ಅಂತಾರಾಷ್ಟ್ರೀಯ ಹೆಲ್ತ್ಕೇರ್ ಪ್ರಶಸ್ತಿ**



ಮೈಸೂರು, ನ.6- ಮೈಸೂರಿನ ಶಾರದಾ ವಿಲಾಸ ವಿವಿಧ ವಿದ್ಯಾರ್ಥಿ ಮತ್ತು ವಿದ್ಯಾ ಆಯದ ಪ್ರಾಂಶುಪಾಲ ಡಾ.ಹನುಮಂತಾಚಾರ್ ಜೋಷಿ ಅವರು ಪ್ರಮುಖ ವಿಶೇಷತೆಗಳನ್ನು ಉಂಟು ಮಾಡಿದ ಅಂತಾರಾಷ್ಟ್ರೀಯ ಹೆಲ್ತ್ಕೇರ್ ಪ್ರಶಸ್ತಿಗೆ ಭಾವಿಸಲಾಗಿದೆ. ಪುರವಿಕೆ ಸಂಯೋಜಿಸಿದ ಅಲ್ಟಿಮೇಟ್ ಮತ್ತು ಹೆಚ್ಚಿನ ರೋಗಗಳ ಲಗತ್ತಿಸಿ ಇವರು ಸಹಜ ಸಾಧಾರಣ ಅರೋಗ್ಯ ವಿದ್ಯಾರ್ಥಿ ಕ್ಷೇತ್ರದ ಸೇವೆ ಸಮಾಜಮುಖಿ ಕಾರ್ಯಗಳನ್ನು ಸುರಕ್ಷಿತ ಪ್ರಶಸ್ತಿ ನೀಡಲಾಗಿದೆ. ಜೋಷಿ ಅವರು ಈವರೆಗೆ 27 ಸಾಧಾರಣ ಲಗತ್ತಿಸಲಾಗಿದ್ದು, ಪ್ರತಿ 37 ವರ್ಷಗಳ ನಡುವೆ ಸಮೀಪಗಳಲ್ಲಿ ಅಪಾರವಾಗಿ ಭಾವಿಸಲಾಗಿದೆ. ಪ್ರತಿ ಪ್ರಶಸ್ತಿ ಕಾರ್ಯಕ್ರಮದಲ್ಲಿ ಅಂತಾರಾಷ್ಟ್ರೀಯ ಕ್ಷೇತ್ರದ ಲಗತ್ತಿಸಿ ಮತ್ತು ಅಭಿವೃದ್ಧಿ ಭಾಗವಹಿಸಿದ್ದರು. ಕ್ಷೇತ್ರದ ಮತ್ತು ಡಾ.ಜೆ.ಕೆ. ಎಂ.ಎ. ಉದರ ರೋಗ ಮತ್ತು ಡಾ. ಸುಬಾಂತ್ ಸೇಠಿ, ಡಾ. ಅಲಕಾ ಅಭಿಷಾ ಸಂಭಾಲ್ ಕಾರ್ಯಕ್ರಮದಲ್ಲಿ ಹಾಜರಿಗೈರು. ಶಾರದಾ ವಿಲಾಸ ವಿವಿಧ ಸಂಸ್ಥೆ ಡಾ. ಹನುಮಂತಾಚಾರ್ ಜೋಷಿ ಅವರನ್ನು ಆಧರಿಸಿದೆ.

KRPA is delighted to convey the best wishes to Dr. Hanumanthachar Joshi, Principal Sarada Vilas College of Pharmacy for receiving the International Healthcare Award. This a prestigious award given by Times Media Private Ltd., for his eminent research work in the area of Alzheimer's and Dementia.

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Pharmacists played pivotal role during pandemic as frontline healthcare professionals: Union minister

Nandita Vijay, Bengaluru
Tuesday, November 24, 2020, 08:00 Hrs (IST)

From dispensing medicines to advising patients on prescription usage protocols and monitoring adverse drug reactions, the role of pharmacists as frontline healthcare professionals has assumed great importance in the fight against COVID-19 to bridge the gap in patient care.

India's 12 lakh pharmacists have been recognized as frontline health professionals. Globally too, it is the pharmacist who is the most easily accessible healthcare professional, said Union minister for chemicals and fertilizers, Sadananda Gowda.

In a message to the National Pharmacy Week 2020 event held from November 16 to 22 with the theme 'Pharmacists: Frontline Health Professionals', organised by the Karnataka Registered Pharmacists Association, Mysuru and the RR College of Pharmacy, Bengaluru, the Minister, who is recuperating from COVID-19, acknowledged that pharmacists were true frontline corona warriors since they provided medicines, including doorstep delivery to elderly patients, even during the lockdown period despite considerable personal risk.

"Currently, there is no lockdown for economic activities, but there is no lockdown for the COVID-19 viral fever. Hence, everyone should take precautions while carrying out their official duties and meeting social commitments," he added.

Pharmacy professionals have always risen to the occasion including those in the industry which manufactures high quality generics for global use and vaccines for the world. In the coming days, COVID-19 vaccines will also be manufactured in India, he said.

The theme of National Pharmacy Week in 1962 was Pharmacy as a career, in 2020 the theme is Pharmacists: Frontline health professionals. This is an appropriate theme to recognize the stellar role played by pharmacists in the pandemic era. The pharmaceutical industry too has risen to the occasion by providing medicines, including those that help patients recover from COVID-19. Further, pharmacists in hospitals and the community have rendered yeoman service by providing medicines and timely counselling to build confidence in community, the Minister said.

The Union government too is committed to the improvement of pharmaceutical profession and industry. We are proactively looking to provide industrial parks with facilities to manufacture active pharmaceutical ingredients (APIs), and nutraceuticals. This way, Indian pharma industry will continue to play a prominent role as the pharmacy of the world. We are also encouraging innovation in pharmaceuticals and medical devices. R&D funds and other facilitator programmes are a key focus of this government which is helping to improve pharmaceutical offerings. We are also sensitive to the grievances of pharmacists, Gowda stated.

KRPA is putting lot of efforts in upgrading the position of the pharmacists in the healthcare system. On the eve of National Pharmacy Week celebrations, KRPA in collaboration with RR College of Pharmacy had organized an webinar. Union minister was one of the speaker in the webinar. At that occasion, union minister applauded the contribution of the pharmacist and acknowledged the pharmacists as frontline corona warriors. This was appreciably printed in the Pharmbiz Publications.

Presented by:
INTERNATIONAL FREE PUBLIC & PHARMACIST E-CONFERENCE

NPW 2020 SPECIAL! PHARMACEUTICAL CARE: CHALLENGES AND OPPORTUNITIES
on 21st (Saturday) Nov. 2020, @ 04.00 pm

Welcome: **Dr. Narayanaswamy V B** M.Pharm PhD
Principal, R R College of Pharmacy,
Chikkabanavara, Bangalore

Chief guest: **MR. D V SADANANDA GOWDA**
Union Minister for Chemicals and Fertilizers
AND FORMER CHIEF MINISTER OF KARNATAKA

Keynote: **Dr. Mahesh Burande** M.Pharm PhD
Director, IPER, Pune

Closing remarks: **Prof. R Raveendra**
HOD Department of Pharmaceutical Chemistry,
R R College of Pharmacy, Chikkabanavara, Bangalore

Moderator and co-speaker: **Sri. Sunil S Chiplunkar**
M.Pharm (Pharmaceut), MBA, M.Phil, PGDIP, PGDIP
Advisory Member, KRPA, Bangalore

Vote of thanks: **Dr. Kaushik Devaraju**
M.Pharm PhD
President, KRPA

Link: <https://bit.ly/KRPARRPHARMACYNPW>

CERTIFICATE SHALL BE PROVIDED TO ALL WHO ATTEND THE WEBINAR

Logos: Inosept, Glident

A webinar was organized to embrace the glorious National Pharmacy Week (NPW) on 21.11.2020. The theme of the webinar was Pharmacists and their responsibilities. The event started with welcome speech delivered by Dr. Narayanaswamy V.B., M. Pharm, PhD, Principal, R R College of Pharmacy, Chikkabanavara, Bangalore. The occasion was witnessed by MR. D V Sadananda Gowda, Union Minister for chemicals and fertilizers and former chief minister of Karnataka. He congratulated all the pharmacist and elaborated on the responsibilities the pharmacist took up in the era of the pandemic. The webinar had one more iconic pharmacist orator, Dr. Mahesh Burande, Director, IPER, Pune, he enlightened on “Pharmaceutical care: challenges and opportunities.” KRPA and R R College of Pharmacy.

Closing remarks was given by Prof. R Raveendra, HOD Department of Pharmaceutical Chemistry, R R College of Pharmacy, Chikkabanavara, Bangalore. The event was moderated by Mr. Sunil S Chiplunkar Advisory Member, KRPA, Mysuru who was also the co-speaker. Dr. Kaushik Devaraju, President, KRPA, Mysuru presented the vote of thanks.

Another remarkable webinar was conducted by KRPA in collaboration with Visveshwarapura Institute of Pharmaceutical Science, Bangalore. The spotlight was an IAS Dr. B R Mamatha IAS, currently Mission Director, National Rural Livelihood Programme, Govt. of Karnataka was the main speaker in the webinar. The title of the webinar was COVID-19 AND SOCIETY, held on 30th October 2020. Opening remarks was delivered by Dr. G Y Narmada Principal, Visveshwarapura College of Pharmaceutical Science (VIPS), Bangalore. Closing remarks was given by Dr. Chandrashekar N S, Scientific Researcher. The session was moderated by Mr. Sunil S Chiplunkar, Advisory Member, KRPA, Mysuru and Vote of thanks was delivered by Dr. Kaushik Devaraju, President, KRPA, Mysuru.

A REMARKABLE FREE INTERNATIONAL WEBINAR AWAITS YOU

30.10.2020, FRIDAY (4.00 PM)

COVID-19 and SOCIETY

Opening remarks:
Dr. G Y Narmada M.Pharm PhD
Principal, Visveshwarapura
College of Pharmaceutical
Science (VIPS), Bangalore

Distinguished Main Speaker
Dr. B R Mamatha IAS,
Additional Mission Director,
SAVAJI Mission,
Government of Karnataka

Closing remarks:
Dr. Chandrashekar N S
M.Pharm PhD
Scientific Researcher

Moderator and co-speaker:
Sri. Sunil S Chiplunkar
M.Pharm (Pharmaceut)
MBA, M.Phil, PGDIP, PGDIP
Advisory Member, KRPA,
Bangalore

Vote of thanks:
Dr. Kaushik Devaraju
M.Pharm PhD
President, KRPA

Link: <http://bit.ly/KRPACOV19SOCIETY>

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An international webinar on “A curtain raiser: 59th National Pharmacy Week Celebrations” was conducted.

The event started with the presidential remarks by Dr. T V Narayana, National President, Indian Pharmaceutical Association (IPA), Mumbai. This was followed by the first Speakers talk by Dr. T M Pramod Kumar, M.Pharm PhD, President, Indian Pharmaceutical Association (IPA), Mysuru; and Principal, JSS College of Pharmacy, Mysuru and the second speaker was Dr. Md. Salahuddin, Vice President, Indian Pharmaceutical Association (IPA), Mysuru and Principal, Farooqia College of Pharmacy, Mysuru.

The speakers also announced the events that was to be conducted on the occasion of National Pharmacy Week by IPA, Mysuru Branch.

Closing remarks was delivered by Dr. R S Chandan Gen. Sec., IPA, Mysuru and Asst. Prof., JSS College of Pharmacy, Mysuru.

The event was moderated by Mr. Sunil S Chiplunkar, Advisory Member, KRPA, Mysuru. Vote of thanks and take away message was delivered by Ms. Shilpa Palaksha, Director KRPA and Dr. Kaushik Devaraju, President, KRPA, Mysuru.

INTERNATIONAL webinar on
**A CURTAIN RAISER:
59TH NATIONAL PHARMACY WEEK CELEBRATIONS**
on 7th Nov. (Saturday), 2020, @ 4.00 pm
E-CERTIFICATE WILL BE ISSUED TO ALL WHO REMAIN TILL END OF WEBINAR

Presidential remarks: **Dr. T V Narayana** M.Pharm M.Phil PhD
National President,
Indian Pharmaceutical Association (IPA),
Mumbai

Speaker 1: **Dr. T M Pramod Kumar** M.Pharm PhD
President, Indian Pharmaceutical Association (IPA), Mysuru
and Principal, JSS College of Pharmacy, Mysuru

Speaker 2: **Dr. Md. Salahuddin** M.Pharm PhD
Vice President, Indian Pharmaceutical Association (IPA),
Mysuru and Principal, Farooqia College of Pharmacy, Mysuru

Closing remarks: **Dr. R S Chandan** M.Pharm PhD
Gen. Sec., IPA, Mysuru and
Asst. Prof., JSS College of Pharmacy, Mysuru

Moderator and co-speaker:
Sri. Sunil S Chiplunkar
M.Pharm (Pharmacology) MDS (Geriatrics) PDDHIM (PHD)
Advisory Member, KRPA, Bangalore

Vote of thanks:
Dr. Kaushik Devaraju
M.Pharm PhD
President, KRPA

Link: <http://bit.ly/IPANPWCURTAINRAISER>

Please fill your details and register, and to be email id given by you in the registration form, you will get an attendee link, just click that and join us on 7.11.2020, Saturday, 4:00 pm... don't forget it is free Saturday, 7.11.2020 (4:00 pm) - you forward to all your contacts!

HOST:
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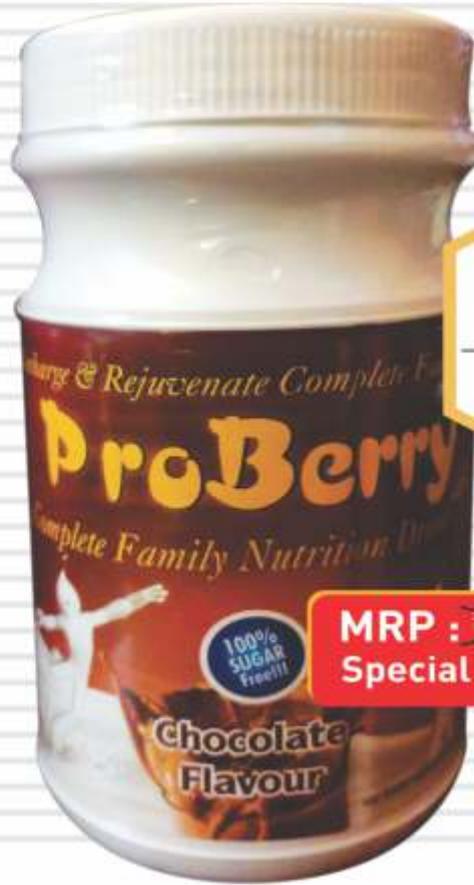
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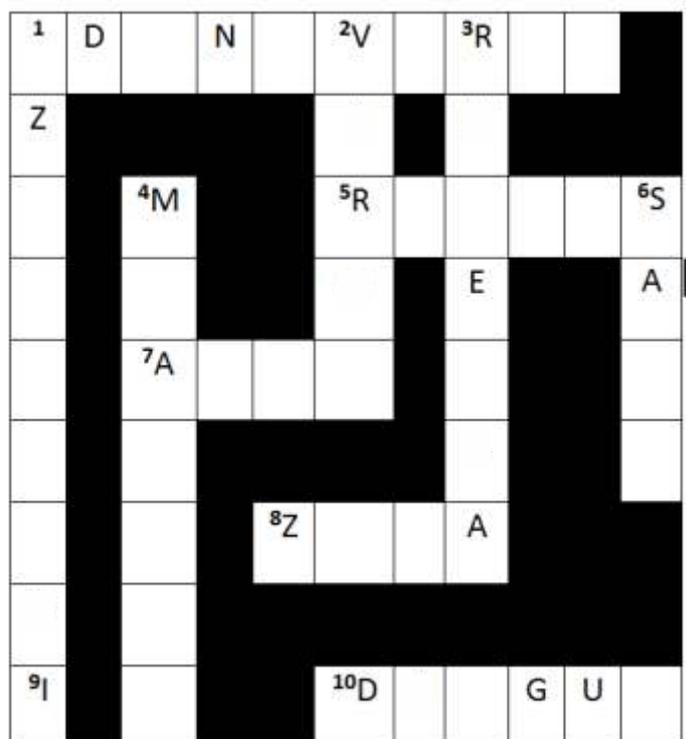
RULES

1. Correct answers for Crossword game section will be rewarded 1 point each (10 marks)
 2. Each correct answer in pharma entrepreneur and their company carry 1 point (2 marks)
 3. Caption me (Show case your Humour) (3 marks)
 4. Answer of the quiz will be evaluated by panel of judges and their decision is final. (Max mark:15)
 5. 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
 6. The answer must be sent within 20th December 2020 to this E Mail ID- krpaindia@gmail.com
- A confirmation mail will be sent to you on receiving your e-mail.

I. Solve the crossword

The crossword is related to virus and their diseases

1. (across) A family of non-enveloped viruses, a type of which can cause pink eye (conjunctivitis)
2. (down) This is an infectious agent that is neither placed in plant kingdom nor animal kingdom
3. (down) This virus causes the German measles
4. (down) Highly contagious illness characterized by red rash
5. (across) This deadly virus is spread to humans from the saliva of infected animals through a bite
6. (down) A airborne respiratory syndrome caused by associated coronavirus that first emerged in china around 2003
7. (across) If the virus is not treated, it can lead to severe drop in CD4 immune less to <200 cell/mm causing ----
8. (across) This virus caused a widespread epidemic in Brazil, South and North America in early 2015. Transmitted by mosquito and can cause birth defect as well as neurological problems
9. (bottom to top) Is a viral infection commonly known as the flu
10. (across) Mosquito borne tropical disease characterized by high fever with incubation period ranging from 3-14 days but most often 4-7 days

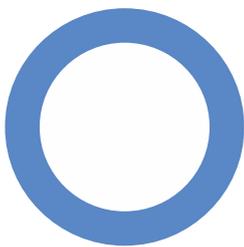


I. **Guess the pharmaceutical company**

In 1901, his pioneering effort resulted in the foundation of the first chemical factory in India. The company became the first Indian company to manufacture quality chemicals, drugs, pharmaceuticals and home products, employing indigenous technology, skill and raw materials.

II. Caption me:

I am the symbol of _____



Congratulations

to the winner of Eighth Edition
KRPA Quiz Competition

Ritu Agrawal,
People Dental Academy,
Bhopal



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