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IN ASSOCIATION WITH
SRI PADMAVATHI MEDICAL COLLEGE FOR WOMEN HOSPITAL (SPMCWH)- SVIMS,
Tirupati, AP, INDIA.

Editorial

Five Reasons Why We Should Publish Article During Graduation

Dr. Yogendra Shrestha

Enhanced Academic Profile

If a student publishes articles, it shows they are really dedicated to their studies. It proves they are good at academics and committed to learning. Publishing articles means they are deeply involved in their subject, more than just getting good grades. By doing this, students show they are involved in the academic community, making friends and connections with others in their field. Having a lot of published work not only makes a student's academic record stronger but also opens up opportunities like internships, scholarships, and going to graduate school.

Professional Development

Developing professionally is the process of improving your work or career. Students acquire critical abilities like critical thinking, effective communication, and research when they conduct their own studies, write about them, and publish them. These are highly practical skills for both work and education. Thus, students are producing more than just writing for a grade when they go through the process of writing an article. Additionally, they are learning how to improve their performance going forward . It's similar to receiving additional training that advances their professional success.

Networking Opportunities

Writing articles means that students write pieces of work about their studies or research. When they do this, they can meet and get to know other researchers, scholars, and professionals who work in the same area. This meeting and getting to know each other is called networking. Networking can be really helpful because it can lead to working together on projects , having someone more experienced help and guide you (called mentorship), and getting access to useful things like books or data that can help with your studies or work. When you connect with people who are interested in the same things as you and know a lot about them, you can learn more and find chances to work together on research, get better jobs, or grow personally. Writing articles and making connections can help students build important relationships and work together to do great things in their field.

Career Advancement

Writing and sharing articles shows that you're committed and good at what you do. This can help you get job offers, internships, scholarships, or even get into grad school. Employers and schools like to see that you've worked hard to learn and share your knowledge. It's like showing off your skills and how much you care, which can make you really stand out when you're looking for a job or applying to school.

Contribution to Knowledge

Students share their fresh perspectives and knowledge of their subjects through writing articles. These concepts can spark discussions and have an impact on upcoming laws or studies. What students learn and consider matters because it has the power to influence people's beliefs and behaviours in the future. Thus, when students write, they are contributing to our understanding and shaping future developments in their field of study, not just finishing their homework.

Vision

To emerge as one of the premier pharmacy colleges in the country and produce pharmacy professionals of global standards.

Mission

1. To deliver quality academic programs in Pharmacy and empower the students to meet Industrial Standards.
2. To build student community with high ethical standards to undertake R&D in thrust areas of national and international needs.
3. To extend viable outreach programs for the health care needs of the society.
4. To develop industry institute interaction and foster entrepreneurial spirit among graduates.

Standard Practice

Drug Information Center
Drug Formulary Management
ADR Reporting
Patient Counseling
Drug Information Resources
Prescription Audit
Medication Error Reporting
Antimicrobial Stewardship
Journal Club Activities

Editorial News

Unlocking Potential: The Rise of Biosimilars in the Pharmaceutical Landscape

Dr. Jyothi Basini

In recent years, the pharmaceutical industry has witnessed a significant paradigm shift with the emergence of biosimilars. These biologic medicines, analogous to their reference products, offer not just therapeutic alternatives but also promise affordability and accessibility to patients worldwide.

Biosimilars are not mere replicas of their originator biologics; they are highly similar versions with no clinically meaningful differences in terms of safety, efficacy, and quality. This similarity is thoroughly demonstrated through comprehensive comparability exercises, including analytical studies, non-clinical evaluations, and clinical trials. Such stringent regulatory requirements ensure confidence among healthcare professionals and patients alike.

One of the most significant advantages of biosimilars lies in their potential to enhance treatment accessibility and affordability. By introducing competition into the market, biosimilars can drive down prices, making life-saving therapies more economically viable for healthcare systems and patients. This affordability aspect is particularly crucial in chronic diseases where biologics play a pivotal role in disease management. Moreover, the rise of biosimilars fosters innovation and bolsters the sustainability of healthcare systems. With cost savings redirected towards research and development, the industry can focus on addressing unmet medical needs and advancing novel therapeutic options. This virtuous cycle of innovation and accessibility holds the promise of improving healthcare outcomes globally.

However, despite their immense potential, biosimilars face several challenges, including regulatory complexities, market access barriers, and lingering concerns regarding interchangeability and immunogenicity. Regulatory authorities must continue to streamline approval processes, ensuring a balance between safety, efficacy, and expeditious market entry.

Furthermore, education and awareness campaigns are pivotal in dispelling misconceptions surrounding biosimilars among healthcare providers, patients, and policymakers. Robust pharmacovigilance programs are essential for monitoring post-market safety and maintaining trust in these therapeutic alternatives. As we navigate the evolving landscape of biosimilars, collaboration among stakeholders is imperative. Pharmaceutical companies, regulatory agencies, healthcare providers, patient advocacy groups, and payers must work hand in hand to realize the full potential of biosimilars and deliver on the promise of accessible, high-quality healthcare for all.

Some of the examples of biosimilars are

Inflectra (infliximab-dyyb): Inflectra is a biosimilar to Remicade (infliximab), which is used to treat various autoimmune diseases such as rheumatoid arthritis, Crohn's disease, and psoriasis. It works by targeting tumor necrosis factor alpha (TNF-α), thereby reducing inflammation. **Basaglar (insulin glargine)**: Basaglar is a biosimilar to Lantus (insulin glargine), a long-acting insulin used to control blood sugar levels in patients with

diabetes mellitus. It helps manage both type 1 and type 2 diabetes by regulating glucose metabolism. **Zarxio (filgrastim-sndz)**: Zarxio is a biosimilar to Neupogen (filgrastim), which stimulates the production of white blood cells in patients undergoing chemotherapy or bone marrow transplantation. It helps reduce the risk of infection in these vulnerable populations. **Truxima (rituximab-abbs)**: Truxima is a biosimilar to Rituxan (rituximab), which is used to treat certain types of cancer (e.g., non-Hodgkin's lymphoma, chronic lymphocytic leukemia) and autoimmune diseases (e.g., rheumatoid arthritis, granulomatosis with polyangiitis). It works by targeting CD20-positive B-cells, thereby suppressing the immune response. **Renflexis (infliximab-abda)**: Renflexis is another biosimilar to Remicade (infliximab), indicated for the treatment of various autoimmune diseases such as rheumatoid arthritis, Crohn's disease, and psoriasis. Similar to Inflectra, it targets TNF-α to alleviate inflammation.

In conclusion, biosimilars represent a transformative force in the pharmaceutical industry, offering a pathway towards enhanced patient access, affordability, and sustainability. With concerted efforts and continued innovation, we can harness the power of biosimilars to address global healthcare challenges and improve the lives of millions worldwide.

Case Report

A PECULIAR CASE REPORT ON SCRUB TYPHUS

P. Bharathi
Pharm D Intern

ABSTRACT

Although scrub typhus is endemic in our country, it is grossly under diagnosed owing to the nonspecific clinical presentation, lack of access to specific diagnostic facilities in most areas, and low index of suspicion by the clinicians. It presents as either a nonspecific febrile illness with constitutional symptoms such as fever, rash, myalgia and headache or with organ dysfunctions involving organs such as kidney (acute renal failure), liver (hepatitis), lungs (acute respiratory distress syndrome), central nervous system (meningitis), or with circulatory collapse with hemorrhagic features.

Keywords: Scrub typhus; Acute renal failure; Hepatitis; Meningitis.

INTRODUCTION

Scrub typhus is an acute febrile illness caused by *Orientia tsutsugamushi* (Rickettsia tsutsugamushi). In India, the presence of scrub typhus and other Rickettsia diseases has been known for several decades. During World War II, scrub typhus produced considerable morbidity and mortality among troops Asia. However, there has been a considerable decline in the incidence of scrub typhus in the later decades. Rickettsiosis is generally believed to have disappeared from many parts of India. Recent reports from several parts of India, including South India, indicate that there is a resurgence of scrub typhus. In India, epidemics of scrub typhus have been reported from North, East and South India. The public health importance of this disease is underestimated because of difficulties with the clinical diagnosis and lack of laboratory methods in many geographical areas. So, we are presenting a case of scrub typhus.

Case Report

A 58-year-old female presented to the Emergency department with insidious onset of high-grade intermittent fever associated with headache & body pains for 10 days. History of rashes & past admission in private hospital, diagnosed for Dengue NS1 AG+ve with TC-7400 & PTC-70000. Visited another hospital with complaints of same for which symptomatic treatment was given & referred to SVIMS for further evaluation. On examination she was disoriented with poor sensorium. All relevant investigations were forwarded. All pertinent investigations were forwarded. Due to poor sensorium, the patient was intubated, and a lumbar puncture was performed, revealing 8 leukocytes in the cerebrospinal fluid (CSF) with no significant ethology identified. Upon Neurology consultation metabolic causes of encephalopathy was under rule out. Her serum ammonia levels done at other hospital found to be 184 (twice the upper limit) with MRI brain suggestive of bilateral posterior cerebral artery stroke. She was started on antiplatelets. She had a drop in hemoglobin levels for which transfusion of 1-pint pRBC's was done. Blood culture and sensitivity test was suggestive of *E. coli*.

On 31st January 2024, an insightful guest lecture on "Navigating the Pharmacovigilance Landscape: Insights and Experiences" was conducted via an online platform. The lecture was delivered by Dr. Kishor Chand, a renowned expert in the field of pharmacovigilance.

Agenda and Topics Covered

The session commenced with a warm welcome by Dr. Uma Maheshwar Rao, the Head of the Department of Pharmacology, SVIMS – SPMCW. Dr. Chand's presentation covered a comprehensive range of topics related to pharmacovigilance, providing a holistic understanding of the subject. The key areas addressed during the lecture included: Introduction to Pharmacovigilance, Regulatory Landscape, Key Components of Pharmacovigilance, Technologies in Pharmacovigilance, Pharmacovigilance in Clinical Trials, Challenges in Pharmacovigilance, and Future Trends in Pharmacovigilance.

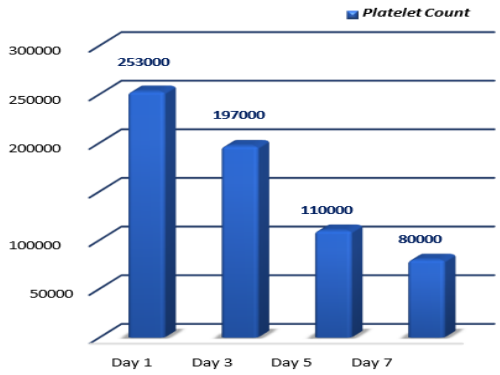
Audience

The lecture attracted a diverse audience, primarily consisting of Pharm D students in their IV, V, and VI years. Additionally, clinical pharmacists from SVIMS actively participated in the session, contributing to the richness of the discussions.

Highlights and Insights

Dr. Chand's presentation was not only informative but also interactive. The participants had the opportunity to engage in a Q&A session, where they could seek clarifications and share their perspectives on pharmacovigilance. The guest lecture proved to be a valuable resource for both students and professionals interested in pharmacovigilance. Dr. Kishor Chand's vast knowledge and experience in the field provided valuable insights, and the comprehensive coverage of topics ensured a well-rounded understanding of the current pharmacovigilance landscape.

S.Aureus and she was treated with sensitive antibiotics Polymyxin B & Amikacin. Her deep coma-MR Angio+ DWI and MRI whole spine screening was suggestive of diffuse cerebral oedema and exudates in Bilateral ventricles. She was finally diagnosed to have Bilateral Posterior cerebral artery stroke with Dengue & Scrub typhus meningoencephalitis with poor sensorium on MV support. Presence of metabolic encephalopathy and secondary hyperammonemia, bacteremia, thrombocytopenia with anemia status post 2 pRBC's transfusion despite of day 10 MV support and treatment arouse suspicion. Her condition was not improved with Vitals BP- 154/100 mmHg, PR-102 bpm & Temperature- 99 F. She needs further treatment & ICU care but due to financial issues patient's attenders suggestive of moving to other hospital of their choice. The informed consent form from the patient was obtained and she was discharged in unstable condition and left against medical advice (LAMA).



Discussion

Fever is most common feature of scrub typhus and in endemic areas it is one of the causes of "fever of unknown origin." The clinical manifestations of this disease range from subclinical disease to organ failure to fatal disease. After ruling out complicated malaria, leptospirosis and dengue fever, many of these cases remained undiagnosed. Scrub typhus is grossly under-diagnosed in India due to its nonspecific clinical presentation limited awareness and low index of suspicion among clinicians, and lack of diagnostic facilities. Serious complications of scrub typhus are not uncommon and may be fatal; they include pneumonia, myocarditis, meningoencephalitis, acute renal failure and gastrointestinal bleeding. Early diagnosis is important because there is usually an excellent response to treatment, and timely antimicrobial therapy may help prevent complications developing countries with limited diagnostic facilities, it is prudent to recommend empiric therapy in patients with undifferentiated febrile illness having evidence of multiple system involvements.

Conclusion

Scrub typhus, a common acute febrile illness in India causing severe morbidity accounts for a large number of deaths. Most infectious outbreaks are seen in Taminnadu, Meghalaya & Darjeeling. The burden of the disease has been underappreciated. Early diagnosis & prompt treatment can significantly reduce complications & mortality.

References

Bhanushali J, Ghewade B and Jadhav U. Case Report: Scrub Typhus manifesting as acute respiratory distress syndrome (ARDS) with corresponding radiological findings: A Case Report [version 1; peer review: awaiting peerreview]. *F1000Research* 2023, **12**:1596 (https://doi.org/10.12688/f1000research.141986.1)

Drug Monograph

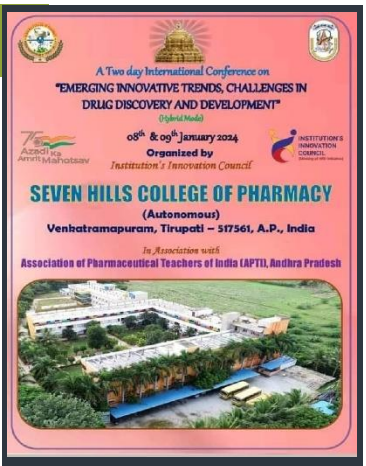
ZELSUVMI – DRUG MONOGRAPH

S. Thanuja
Pharm D Intern

Generic name: Berdazimer

Dosage form: Topical gel

Zelsuvmi (berdazimer 10.3%) is a topical gel preparation that can be applied to the skin by patients, parents, or caregivers at home for up to 12 weeks at a time to treat molluscum contagiosum (MC) in adults and children aged 1 year and older.



On 08th & 9th January 2024, A Two-day international conference on 'Emerging Innovative Trends, Challenges in Drug Discovery and Development' was conducted on hybrid platform in the association with Association of Pharmaceutical Teachers of India (APTI), AP.

Resource Person

Prof. Dr. Chaturvedula Ayyappa,
Sr. Director, Clinical Pharmacology,
Arcus Biosciences,
Hayward, CA USA.

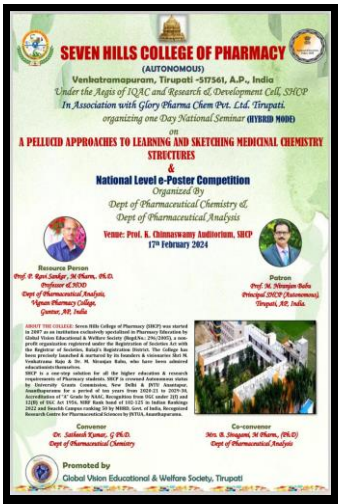
Dr. K Gowthamarajan
Professor & Head,
Department of Pharmaceutics,
JSS College of Pharmacy,
Ooty, India.

Dr. Ashok Thulluru
Professor,
Department of Pharmaceutics,
Sandip university School of Pharmaceutical Sciences,
Maharashtra, India.

Professor M Rajasekhar
Professor,
Department of Zoology,
Sri Venkateswara University,
Tirupati,, India.

Audience

The conference attracted a diverse audience, primarily consisting of B Pharmacy, Pharm D students, M Pharmacy, and Ph.D. across the country. discussions.



On 17th February 2024, One Day National Seminar on "A Pellucid Approaches to Learning & Sketching Medicinal Chemistry Structures" was organized by the Department of Pharmaceutical Chemistry & Analysis, in association with Glory Pharma Chem India Private Limited, Tirupati. The seminar aimed to provide a platform for researchers, academicians, and industry professionals to discuss and exchange insights on the latest developments in medicinal chemistry and sketching medicinal chemistry structures.

Resource Person
Dr. P Ravi Sankar,
Professor & Head
Department of Pharmaceutical Analysis,
Vignan Pharmacy College
Guntur, AP, India.

The seminar commenced with an inaugural session, presided over by esteemed dignitaries from academia and industry. Renowned experts in the field of medicinal chemistry delivered keynote addresses, shedding light on the importance of clear approaches to learning and sketching medicinal chemistry structures. Parallel sessions were conducted, covering various topics such as computational methods in drug design, synthesis techniques, and structure-activity relationship studies. Poster presentations provided a platform for young researchers to showcase their work and receive feedback from peers and experts. A panel discussion on emerging trends and challenges in medicinal chemistry sparked insightful conversations among participants.

MC is a viral skin disease characterized by distinctive raised, skin-toned-to-pink-colored lesions called Mollusca that can cause pain, inflammation, itching, and bacterial infection. Zelsuvmi (berdazimer) is a nitric oxide-releasing agent, which has been shown to have antiviral effects, although how berdazimer works to treat MC is unknown.

Approved Date: JAN 9, 2024

Approval was based on the B-SIMPLE4, a phase 3 clinical trial (n=891) that reported complete clearance of MC lesions in 32.4% of patients assigned Zelsuvmi compared to only 19.7% assigned an inactive vehicle gel.

The Zelsuvmi carton contains 2 tubes and a dosing guide:

- 1 tube contains berdazimer gel (Tube A).
- 1 tube contains hydrogel (Tube B).

The gels contained in Tube A and Tube B must be mixed on the Dosing Guide before youapply Zelsuvmi to your skin.

- The dosing guide has 2 lanes – a blue one for Tube A and a yellow one for Tube B. Squeeze gel from Tube A onto the blue lane to cover the entire area of the lane. Screwthe cap back on. Repeat with tube B as per the dosing guide.
- Do not mix the gels until you are ready to apply. Use a clean fingertip to thoroughlymix the 2 gels in the center of the dosing guide using a circular motion for about 20 seconds. Clumps may form but these are normal. Apply a thin layer of the mixed gel right away to the MC bumps. All bumps should be treated with gel.
- Apply once each day to each lesion for up to 12 weeks.
- Do not apply near or in your eyes, mouth, vagina, or areas of your skin where you donot have MC.
- Allow Zelsuvmi to dry for 10 minutes and do not swim, take a bath or shower, or wash the areas where you applied it for 1 hour after you apply it.
- Wash your hands after applying the gel, unless your hands are being treated for MC. If someone else applies Zelsuvmi for you, they should wash their hands after applyingit.

Mechanism Of Action:

Berdazimer is known to be a nitric oxide (NO)-releasing agent from the N-diazeniumdiolate nitric oxide donors. NO has been known to have broad-spectrum antimicrobial and antiviral activity, likely due to the S-nitrosylation of proteins and cytotoxicity to viral replication from reactive oxygen species.

Pharmacokinetics:

Plasma hydrolyzed MAP3 (hMAP3), a structural marker for berdazimer, and nitrate levels were evaluated in n=34 subjects 2 to 12 years of age with MC. Subjects applied berdazimer once daily for two weeks to a total treatment area of 484 cm^2 (mean lesion count=34), applying a mean dose of approximately 3 mL/day. No subjects had quantifiable plasma hMAP3 concentrations on day 1 two subjects had quantifiable concentrations on day 15. Mean plasma nitrate levels were similar on days 1 and 15 and remained relatively flat during the PK sampling period (baseline through 1-, 3-, and 6-hours post-application). There were no apparent differences in methemoglobin levels throughout the study.

Side Effects:

Application site reactions, including allergic skin reactions, are common where Zelsuvmi is applied to your skin, but can also be severe. Stop using Zelsuvmi and tell your healthcare provider right away if you develop pain, burning, stinging, itching, swelling, or redness of your skin that lasts for more than 24 hours after treatment. The most common side effects of Zelsuvmi affecting 1% or more people are skin reactions where the gel is applied. Symptoms may include include:

- Redness (11%)
- Swelling (3.5%)
- Blisters (1.5%)
- Pain, burning or stinging (18.7%)
- Breakdown of the outer layer of the skin (erosion) (1.6%)
- Lightening or darkening of the skin (1.5%)
- Itching (5.7%)
- Irritation (1.2%)
- Peeling or flaking (5%)
- Infection (1.1%)
- Itchy, dry skin rash (4.9%)

Storage:

Before dispensing, Zelsuvmi should be stored in a refrigerator between 2°C and 8°C (36°F and 46°F) until dispensed to the patient. Do not freeze.

After dispensing, store Zelsuvmi at room temperature, between 20°C to 25°C (68°F and 77°F) in a dry location. Discard 60 days after removal from refrigeration. Write the "Discard after" date in the space provided on the carton. Zelsuvmi contains alcohol and should be kept away from open flame.

Tube A:

- Active ingredient: berdazimer sodium 10.3%.
- Inactive ingredients: cyclomethicone, hexylene glycol, hydroxypropyl cellulose, andisopropyl alcohol.

Tube B:

- Inactive ingredients: benzoic acid, carboxymethylcellulose sodium, cyclomethicone, ethanol, glycerin, potassium phosphate monobasic, and purified water.

References

Link: https://www.drugs.com/zelsuvmi.html

Activities Conducted

Beloved Principal's Birthday Celebration Culminates in Heartwarming Community Event

We are delighted to share with you the joyous celebration of our beloved Principal's birthday, which took place on January 25, 2024. It was indeed a momentous occasion filled with warmth, camaraderie, and goodwill. The entire management, staff, and students came together to extend our heartfelt wishes to our esteemed Principal., we also conducted a blood donation camp as a part of our commitment to serving the community and giving back to society. It was inspiring to see members of our college enthusiastically participate in this noble cause, demonstrating our collective commitment to making a positive impact on the lives of others.

Guest Lecture on "Recent Views on Pharmaceutical Care"

On the 20th of January, the esteemed Seven Hills College of Pharmacy (Autonomous) hosted a captivating guest lecture centered around the theme "Recent Views on Pharmaceutical Care." This enlightening conference welcomed renowned speaker Prof. Dr. AK Gnana Chandran, a distinguished authority in the field, serving as Professor and Dean of the esteemed Pranav Institute of Pharmaceutical Research in Gwalior. Drawing from his extensive expertise, Prof. Dr. Chandran delved into the latest perspectives shaping pharmaceutical care, offering attendees invaluable insights and fostering a dynamic exchange of ideas. The event proved to be a cornerstone in advancing knowledge and collaboration within the pharmaceutical community, leaving a lasting impact on all those fortunate enough to participate.

Awareness Programme on “Road wise: Empowering Communities for Safer Streets"

In a bid to enhance road safety and empower communities for safer streets, an insightful Awareness Programme titled "Road wise: Empowering Communities for Safer Streets"was organized by SHCP (Autonomous) on January 24th. This significant event was organized in collaboration with the Road Transport Office (RTO) in Tirupati and the National Service Scheme (NSS) Unit at SHCP. Dr. Kusuma, a distinguished Motor Vehicle Inspector from the RTO in Tirupati, graced the occasion as the keynote speaker. The awareness program served as a platform for fostering awareness and understanding among participants regarding crucial road safety measures and strategies to mitigate risks on the streets. With a focus on community involvement and education, the event aimed to instill a sense of responsibility and vigilance among citizens towards creating safer road environments.

Inaugural of Cricket Net Practice Court

Uniting for a Brighter Future: Celebrating New Partnerships at SHCP's Grand MoU Ceremony

On March 30, 2024, the Prof. K. Chinnaswamy Auditorium within the serene campus of the Seven Hills College of Pharmacy (SHCP) in Tirupati witnessed a momentous gathering, symbolizing the commencement of a transformative journey in academic collaboration. Led by the esteemed Dr. M. Niranjan Babu, Principal of SHCP, the ceremony marked the formal signing of a Memorandum of Understanding (MoU) with five distinguished institutions renowned in the field of pharmacy education: Krupanidhi College of Pharmacy in Bengaluru, Shri Venkateswara College of Pharmacy in Puducherry, Santhiram College of Pharmacy in Nandyal, Annamacharya College of Pharmacy in Rajampet, and Sri Venkateswara College of Pharmacy in Chittoor. The atmosphere was charged with anticipation and enthusiasm as representatives from each institution came together to pledge their commitment towards collaborative endeavors. Throughout the event, keynote addresses delivered by leaders of the participating institutions resonated with the shared vision of advancing pharmacy education and research through mutual cooperation. Moreover, the cultural performances presented by SHCP students not only added a touch of vibrancy to the occasion but also served as a poignant reminder of the rich cultural heritage that binds the academic community together. The networking session that followed provided a fertile ground for fruitful discussions and brainstorming sessions, laying the groundwork for future collaborative projects and initiatives. As attendees mingled and exchanged ideas, it became evident that the signing ceremony was not just a ceremonial event but a significant step towards fostering enduring partnerships that would redefine the landscape of pharmacy education and research in the region.

On 30th March 2024, The One Day National Seminar on "Traditional Medicine Potential to Modern Therapeutics" by conducted by SHCP in the association with APTI, AP State Branch, aimed to bridge traditional medicine with modern therapeutics. Speakers discussed integration, bioactive compounds, research, and regulatory challenges. Panel discussions covered standardization, collaboration, and public awareness. Poster presentations showcased research findings. The seminar highlighted the synergy between traditional and modern medicine, advocating for interdisciplinary collaboration, regulatory standards, and public education to realize their potential in healthcare.

Resource Person
Dr. C. K. Ashok Kumar,
Deputy Director, Amity University of Pharmacy, Haryana.

Dr. R Jayaraman,
Principal,
Shri Venkateswara College of Pharmacy, Puducherry.

The primary objective of the seminar was to provide a platform for researchers, academicians, and industry professionals to discuss and deliberate on the integration of traditional medicine practices into modern therapeutics. The seminar aimed to highlight the significance of traditional medicine in addressing current healthcare challenges and exploring innovative approaches to drug discovery and development.

On March 30, 2024, Seven Hills College of Pharmacy (Autonomous) in Tirupati celebrated the launch of *Foundation of Clinical Research Principles & Practices*, authored by Dr. Yogendra Shrestha, during a One Day National Seminar. Dr. Shrestha, an Associate Professor in the Department of Pharmacy Practice, introduced his book, which delves into the essential principles and contemporary practices in clinical research, aiming to serve as a crucial resource for students and professionals in pharmaceutical sciences. The event, well-attended by academics and industry practitioners, highlighted Dr. Shrestha's contributions to the field and the college's commitment to academic excellence, receiving widespread acclaim from the community and fostering a deeper understanding of clinical research advancements.

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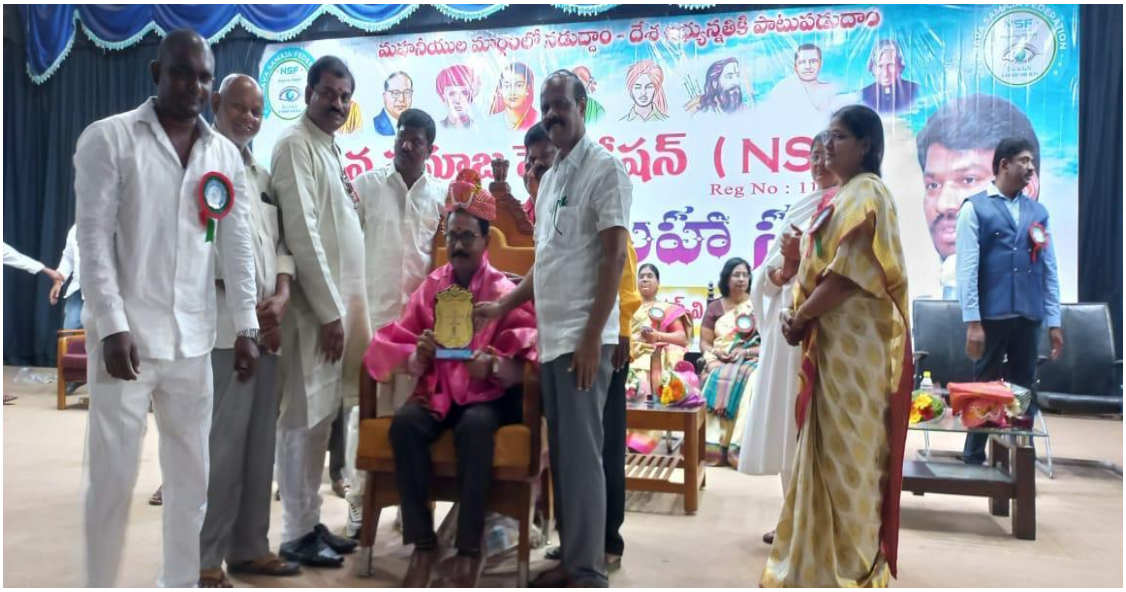
Awards Received by Faculty



On February 26, 2024, Principal Dr. M. Niranjan Babu, a distinguished figure in the field, was honoured with the prestigious 'Pharma Vidya Raatan' award. This accolade was bestowed by the Nava Samaj Federation in recognition of his extensive contributions to pharmaceutical education.

On February 04, 2024, Dr. Rekha and Mrs. Sivagami madam, both had received best teacher award was bestowed by Savithri Bai Phule Educational Charitable Trust, Tirupati.

On February 04, 2024, Mr. Mallikarjuna, Mr. Prudhvi Raj, and Miss. Reddemma, were honoured with the prestigious 'Best Teacher ' award. This accolade was bestowed by the Nava Samaj Federation in recognition of his extensive contributions to pharmaceutical education.

Awards Received by Students

Stephania J & Akash MB

First prize in “Case Study” in Pharma Vision 2024 organized by Vignan University

Bharathi P & Thanuja S

First prize in “Interactive Technology Demonstration” in Pharma Vision 2024 organized by Vignan University

Sundu Harshitha, N Manasa & G Pravallika
Second prize in “Poster Presentation” in Pharma Vision 2024 organized by Vignan University

H. Prakruthi, I. Janavi, B. Haseena & Buthe Gowd
First prize in “Oral Presentation” in Pharma Vision 2024 organized by Vignan University

Mr. Karunakaran K, Mr. Vamshi Kumar A, & Miss Rupalatha P
Consolation prize in Quiz in Pharma Vision 2024 organized by Vignan University

Adverse Drug Reaction Reported from January to March 2024

S. No.	*Department*	*Adverse Drug Reaction*	*Reported By*
1	General Medicine	Drug Induced Lupus	Bharathi
2	General Medicine	ATT Induced Gastritis	Bharathi
3	General Medicine	Drug Induced Hypokalaemia	Bharathi
4	Endocrinology	Steroid Induced Secondary Diabetes Mellitus	Bharathi
5	Nephrology	Tacrolimus Induced Tremors	Bharathi
6	Neurology	Prednisolone Induced Diabetes Mellitus and Myopathy	Anusha
7	Medical Oncology	Capecitabine Induced Hyperpigmentation	Rupalatha
8	Neurology	Acitrom Induced Stroke with Right Hemiplegia	Anusha
9	Emergency Medicine	Atropine Induced Psychosis	Stephania
10	Emergency Medicine	Diazepam Induced Respiratory Failure/ Depression	Stephania
11	Medical Oncology	Oxaliplatin Induced Thrombocytosis	Rupalatha
12	General Medicine	Methotrexate Induced Multiple Erosions Over the Whole Body	Stephania
13	General Medicine	Methotrexate Induced Pancytopenia with Oral Ulcers	Stephania
14	Medical Oncology	Chemotherapy Induced Neutropenia	Jasmitha
15	Endocrinology	Metformin Induced Gastritis	Jasmitha
16	Neurology	Amlodipine And Telmisartan Induced Hyponatremia	Rupalatha
17	General Medicine	Cilnidipine And Medoxomil Chlorthalidone Induced Hypokalaemia and Hyponatremia	Reshma
18	Neurology	Inj. Mannitol Induced Acute Kidney Failure	Jasmitha
19	General Medicine	Rifampicin Induced Breathlessness	Bharathi
20	Medical Oncology	Rituximab Induced Neutropenia with Mouth Ulcer	Hemalatha
21	Endocrinology	Pyrazinamide Induced Liver Injury	Sandhya
22	General Medicine	ATT Induced Hepatitis with Hepatic Encephalopathy	Stephania
23	Neurology	Amlodipine Induced Swelling	Bharathi
24	Endocrinology	Sitagliptin Induced Dizziness	Anusha
25	Surgery	Clopidogrel Induced Breathlessness	Bharathi

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