

Fourth Year

4.1 PHARMACOTHERAPEUTICS – III (THEORY)

Theory : 3 Hrs. /Week

- 1. Scope :** This course is designed to impart knowledge and skills necessary for contribution to quality use of medicines. Chapters dealt cover briefly pathophysiology and mostly therapeutics of various diseases. This will enable the student to understand the pathophysiology of common diseases and their management.
- 2. Objectives:** At completion of this subject it is expected that students will be able to understand –
 - a. the pathophysiology of selected disease states and the rationale for drug therapy;
 - b. the therapeutic approach to management of these diseases;
 - c. the controversies in drug therapy;
 - d. the importance of preparation of individualised therapeutic plans based on diagnosis;
 - e. needs to identify the patient-specific parameters relevant in initiating drug therapy, and monitoring therapy (including alternatives, time-course of clinical and laboratory indices of therapeutic response and adverse effects);
 - f. describe the pathophysiology of selected disease states and explain the rationale for drug therapy;
 - g. to summarize the therapeutic approach to management of these diseases including reference to the latest available evidence;
 - h. to discuss the controversies in drug therapy;
 - i. to discuss the preparation of individualised therapeutic plans based on diagnosis; and
 - j. identify the patient-specific parameters relevant in initiating drug therapy, and monitoring therapy (including alternatives, time-course of clinical and laboratory indices of therapeutic response and adverse effects).

Text Books

- a. Clinical Pharmacy and Therapeutics - Roger and Walker, Churchill Livingstone publication
- b. Pharmacotherapy: A Pathophysiologic approach - Joseph T. Dipiro et al. Appleton & Lange

Reference Books

- a. Pathologic basis of disease - Robins SL, W.B.Saunders publication
- b. Pathology and therapeutics for Pharmacists: A Basis for Clinical Pharmacy Practice - Green and Harris, Chapman and Hall publication
- c. Clinical Pharmacy and Therapeutics - Eric T. Herfindal, Williams and Wilkins Publication
- d. Applied Therapeutics: The clinical Use of Drugs. Lloyd Young and Koda-Kimble MA
- e. Avery's Drug Treatment, 4th Edn, 1997, Adis International Limited.
- f. Relevant review articles from recent medical and pharmaceutical literature.

4.1 PHARMACOTHERAPEUTICS – III (PRACTICAL)

Practical : 3 Hrs./Week

Practicals:

Hospital postings for a period of at least 50 hours is required to understand the principles and practice involved in ward round participation and clinical discussion on selection of drug therapy. Students are required to maintain a record of 15 cases observed in the ward and the same should be submitted at the end of the course for evaluation. Each student should present at least two medical cases they have observed and followed in the wards.

Etiopathogenesis and pharmacotherapy of diseases associated with following systems/ diseases:

Title of the topic

- 1 **Gastrointestinal system:** Peptic ulcer disease, Gastro Esophageal Reflux Disease, Inflammatory bowel disease, Liver disorders - Alcoholic liver disease, Viral hepatitis including jaundice, and Drug induced liver disorders.
- 2 **Haematological system:** Anaemias, Venous thromboembolism, Drug induced blood disorders.
- 3 **Nervous system:** Epilepsy, Parkinsonism, Stroke, Alzheimer's disease,
- 4 **Psychiatry disorders:** Schizophrenia, Affective disorders, Anxiety disorders, Sleep disorders, Obsessive Compulsive disorders
- 5 Pain management including Pain pathways, neuralgias, headaches.
- 6 Evidence Based Medicine

Assignments:

Students are required to submit written assignments on the topics given to them. Topics allotted should cover recent developments in drug therapy of various diseases. A minimum of THREE assignments [1500 – 2000 words] should be submitted for evaluation.

Format of the assignment:

1. Minimum & Maximum number of pages
2. Reference(s) shall be included at the end.
3. Assignment can be a combined presentation at the end of the academic year
4. It shall be computer draft copy
5. Name and signature of the student
6. Time allocated for presentation may be 8+2 Min.

Scheme of Practical Examination :

	Sessionals	Annual
Synopsis	05	15
Major Experiment	10	25
Minor Experiment	03	15
Viva	02	15
Max Marks	20	70
Duration	03hrs	04hrs

Note : Total sessional marks is 30 (20 for practical sessional plus 10 marks for regularity, promptness, viva-voce and record maintenance).

4.2 HOSPITAL PHARMACY (THEORY)

Theory : 2 Hrs. /Week

1. **Scope:** In the changing scenario of pharmacy practice in India, for successful practice of Hospital Pharmacy, the students are required to learn various skills like drug distribution, drug dispensing, manufacturing of parenteral preparations, drug information, patient counselling, and therapeutic drug monitoring for improved patient care.
2. **Objectives:** Upon completion of the course, the student shall be able to –
 - a. know various drug distribution methods;
 - b. know the professional practice management skills in hospital pharmacies;
 - c. provide unbiased drug information to the doctors;
 - d. know the manufacturing practices of various formulations in hospital set up;
 - e. appreciate the practice based research methods; and
 - f. appreciate the stores management and inventory control.

Text books: (latest editions)

- a. Hospital pharmacy by William .E. Hassan
- b. A text book of Hospital Pharmacy by S.H.Merchant & Dr. J.S. Qadry. Revised by R.K.Goyal & R.K. Parikh

References:

- a. WHO consultative group report.
- b. R.P.S. Vol.2. Part –B; Pharmacy Practice section.
- c. Handbook of pharmacy – health care. Edt. Robin J Harman. The Pharmaceutical press.

3. Lecture wise programme :

Topics

- 1 **Hospital - its Organisation and functions**
- 2 **Hospital pharmacy-Organisation and management**
 - a) Organizational structure-Staff, Infrastructure & work load statistics
 - b) Management of materials and finance
 - c) Roles & responsibilities of hospital pharmacist
- 3 **The Budget – Preparation and implementation**
- 4 **Hospital drug policy**
 - a) Pharmacy and Therapeutic committee (PTC)
 - b) Hospital formulary
 - c) Hospital committees
 - Infection committee
 - Research and ethical committee
 - d) developing therapeutic guidelines
 - e) Hospital pharmacy communication - Newsletter

5 Hospital pharmacy services

- a) Procurement & warehousing of drugs and Pharmaceuticals
- b) Inventory control
Definition, various methods of Inventory Control
ABC, VED, EOQ, Lead time, safety stock
- c) Drug distribution in the hospital
 - i) Individual prescription method
 - ii) Floor stock method
 - iii) Unit dose drug distribution method
- d) Distribution of Narcotic and other controlled substances
- e) Central sterile supply services – Role of pharmacist

6 Manufacture of Pharmaceutical preparations

- a) Sterile formulations – large and small volume parenterals
- b) Manufacture of Ointments, Liquids, and creams
- c) Manufacturing of Tablets, granules, capsules, and powders
- d) Total parenteral nutrition

7 Continuing professional development programs

Education and training

8 Radio Pharmaceuticals – Handling and packaging**9 Professional Relations and practices of hospital pharmacist****4.2 HOSPITAL PHARMACY (PRACTICAL)****Practical : 3 Hrs./Week**

1. Assessment of drug interactions in the given prescriptions
2. Manufacture of parenteral formulations, powders.
3. Drug information queries.
4. Inventory control

List of Assignments:

1. Design and Management of Hospital pharmacy department for a 300 bedded hospital.
2. Pharmacy and Therapeutics committee – Organization, functions, and limitations.
3. Development of a hospital formulary for 300 bedded teaching hospital
4. Preparation of ABC analysis of drugs sold in one month from the pharmacy.
5. Different phases of clinical trials with elements to be evaluated.
6. Various sources of drug information and systematic approach to provide unbiased drug information.
7. Evaluation of prescriptions generated in hospital for drug interactions and find out the suitable management.

Special requirements:

1. Each college should sign MoU with nearby local hospital having minimum 150 beds for providing necessary training to the students' on hospital pharmacy activities.
2. Well equipped with various resources of drug information.

Scheme of Practical Examination:

	Sessionals	Annual
Synopsis	05	15
Major Experiment	10	25
Minor Experiment	03	15
Viva	02	15
Max Marks	20	70
Duration	03hrs	04hrs

Note : Total sessional marks is 30 (20 for practical sessional plus 10 marks for regularity, promptness, viva-voce and record maintenance).

4.3 CLINICAL PHARMACY (THEORY)

Theory : 3 Hrs. /Week

1. Objectives of the Subject :

Upon completion of the subject student shall be able to (Know, do, appreciate) –

- a. monitor drug therapy of patient through medication chart review and clinical review;
- b. obtain medication history interview and counsel the patients;
- c. identify and resolve drug related problems;
- d. detect, assess and monitor adverse drug reaction;
- e. interpret selected laboratory results (as monitoring parameters in therapeutics) of specific disease states; and
- f. retrieve, analyse, interpret and formulate drug or medicine information.

Text books (Theory)

- a. Practice Standards and Definitions - The Society of Hospital Pharmacists of Australia.
- b. Basic skills in interpreting laboratory data - Scott LT, American Society of Health System Pharmacists Inc.
- c. Biopharmaceutics and Applied Pharmacokinetics - Leon Shargel, Prentice Hall publication.
- d. A text book of Clinical Pharmacy Practice; Essential concepts and skills, Dr.G.Parthasarathi et al, Orient Orient Langram Pvt.Ltd. ISSN8125026

References

- a. Australian drug information -Procedure manual. The Society of Hospital Pharmacists of Australia.
- b. Clinical Pharmacokinetics - Rowland and Tozer, Williams and Wilkins Publication.
- c. Pharmaceutical statistics. Practical and clinical applications. Sanford Bolton, Marcel Dekker, Inc.

2. Detailed syllabus and lecture wise schedule:

Title of the topic

1. **Definitions, development and scope of clinical pharmacy**
2. **Introduction to daily activities of a clinical pharmacist**
 - a. Drug therapy monitoring (medication chart review, clinical review, pharmacist interventions)
 - b. Ward round participation
 - c. Adverse drug reaction management
 - d. Drug information and poisons information
 - e. Medication history
 - f. Patient counseling
 - g. Drug utilisation evaluation (DUE) and review (DUR)
 - h. Quality assurance of clinical pharmacy services

3. **Patient data analysis**
The patient's case history, its structure and use in evaluation of drug therapy & Understanding common medical abbreviations and terminologies used in clinical practices.
4. **Clinical laboratory tests used in the evaluation of disease states, and interpretation of test results**
 - a. Haematological, Liver function, Renal function, thyroid function tests
 - b. Tests associated with cardiac disorders
 - c. Fluid and electrolyte balance
 - d. Microbiological culture sensitivity tests
 - e. Pulmonary Function Tests
5. **Drug & Poison information**
 - a. Introduction to drug information resources available
 - b. Systematic approach in answering DI queries
 - c. Critical evaluation of drug information and literature
 - d. Preparation of written and verbal reports
 - e. Establishing a Drug Information Centre
 - f. Poisons information- organization & information resources
6. **Pharmacovigilance**
 - a. Scope, definition and aims of pharmacovigilance
 - b. Adverse drug reactions - Classification, mechanism, predisposing factors, causality assessment [different scales used]
 - c. Reporting, evaluation, monitoring, preventing & management of ADRs
 - d. Role of pharmacist in management of ADR.
7. Communication skills, including patient counselling techniques, medication history interview, presentation of cases.
8. Pharmaceutical care concepts
9. Critical evaluation of biomedical literature
10. Medication errors

4.3 CLINICAL PHARMACY (PRACTICAL)

Practical : 3 Hrs./Week

Students are expected to perform 15 practicals in the following areas covering the topics dealt in theory class.

- a. Answering drug information questions (4 Nos)
- b. Patient medication counselling (4 Nos)
- c. Case studies related to laboratory investigations (4 Nos)
- d. Patient medication history interview (3 Nos)

Assignment:

Students are expected to submit THREE written assignments (1500 – 2000 words) on the topics given to them covering the following areas dealt in theory class.

Drug information, Patient medication history interview, Patient medication counselling, Critical appraisal of recently published articles in the biomedical literature which deals with a drug or therapeutic issue.

Format of the assignment:

1. Minimum & Maximum number of pages.
2. Reference(s) shall be included at the end.
3. Assignment can be a combined presentation at the end of the academic year.
4. It shall be computer draft copy.
5. Name and signature of the student.
6. Time allocated for presentation may be 8+2 Min.

4.4 BIOSTATISTICS AND RESEARCH METHODOLOGY (THEORY)

Theory : 2 Hrs. /Week

1. Detailed syllabus and lecture wise schedule

1 Research Methodology

- a) Types of clinical study designs:
Case studies, observational studies, interventional studies,
- b) Designing the methodology
- c) Sample size determination and Power of a study
Determination of sample size for simple comparative experiments, determination of sample size to obtain a confidence interval of specified width, power of a study
- d) Report writing and presentation of data

2 Biostatistics

2.1 a) Introduction

- b) Types of data distribution
- c) Measures describing the central tendency distributions- average, median, mode
- d) Measurement of the spread of data-range, variation of mean, standard deviation, variance, coefficient of variation, standard error of mean.

2.2 Data graphics

Construction and labeling of graphs, histogram, piecharts, scatter plots, semilogarithmic plots

2.3 Basics of testing hypothesis

- a) Null hypothesis, level of significance, power of test, P value, statistical estimation of confidence intervals.
- b) Level of significance (Parametric data)- students t test (paired and unpaired), chi Square test, Analysis of Variance (one-way and two-way)
- c) Level of significance (Non-parametric data)- Sign test, Wilcoxon's signed rank test, Wilcoxon rank sum test, Mann Whitney U test, Kruskal-Wallis test (one way ANOVA)
- d) Linear regression and correlation- Introduction, Pearson's and Spearman's correlation and correlation co-efficient.
- e) Introduction to statistical software: SPSS, Epi Info, SAS.

2.4 Statistical methods in epidemiology

Incidence and prevalence, relative risk, attributable risk

3. Computer applications in pharmacy

Computer System in Hospital Pharmacy: Patterns of Computer use in Hospital Pharmacy – Patient record database management, Medication order entry – Drug labels and list – Intravenous solution and admixture, patient medication profiles, Inventory control, Management report & Statistics.

Computer In Community Pharmacy

Computerizing the Prescription Dispensing process

Use of Computers for Pharmaceutical Care in community pharmacy

Accounting and General ledger system

Drug Information Retrieval & Storage :

Introduction – Advantages of Computerized Literature Retrieval

Use of Computerized Retrieval

Reference books:

- a. Pharmaceutical statistics- practical and clinical applications, Sanford Bolton 3rd edition, publisher Marcel Dekker Inc. NewYork.
- b. Drug Information- A Guide for Pharmacists, Patrick M Malone, Karen L Kier, John E Stanovich , 3rd edition, McGraw Hill Publications 2006

4.5 BIOPHARMACEUTICS AND PHARMACOKINETICS (THEORY)

Theory : 3 Hrs. /Week

1. Biopharmaceutics

1. Introduction to Biopharmaceutics
 - a. Absorption of drugs from gastrointestinal tract.
 - b. Drug Distribution.
 - c. Drug Elimination.

2. Pharmacokinetics

2. Introduction to Pharmacokinetics.
 - a. Mathematical model
 - b. Drug levels in blood.
 - c. Pharmacokinetic model
 - d. Compartment models
 - e. Pharmacokinetic study.
3. One compartment open model.
 - a. Intravenous Injection (Bolus)
 - b. Intravenous infusion.
4. Multicompartment models.
 - a. Two compartment open model.
 - b. IV bolus, IV infusion and oral administration
5. Multiple – Dosage Regimens.
 - a. Repetitive Intravenous injections – One Compartment Open Model
 - b. Repetitive Extravascular dosing – One Compartment Open model
 - c. Multiple Dose Regimen – Two Compartment Open Model
6. Nonlinear Pharmacokinetics.
 - a. Introduction
 - b. Factors causing Non-linearity.
 - c. Michaelis-menton method of estimating parameters.
7. Noncompartmental Pharmacokinetics.
 - a. Statistical Moment Theory.
 - b. MRT for various compartment models.
 - c. Physiological Pharmacokinetic model.
8. Bioavailability and Bioequivalence.
 - a. Introduction.
 - b. Bioavailability study protocol.
 - c. Methods of Assessment of Bioavailability

4.5 BIOPHARMACEUTICS AND PHARMACOKINETICS (PRACTICAL)

Practical : 3 Hrs./Week

1. Improvement of dissolution characteristics of slightly soluble drugs by some methods.
2. Comparison of dissolution studies of two different marketed products of same drug.
3. Influence of polymorphism on solubility and dissolution.
4. Protein binding studies of a highly protein bound drug and poorly protein bound drug.
5. Extent of plasma-protein binding studies on the same drug (i.e. highly and poorly protein bound drug) at different concentrations in respect of constant time.
6. Bioavailability studies of some commonly used drugs on animal/human model.
7. Calculation of K_a , K_e , $t_{1/2}$, C_{max} , AUC, AUMC, MRT etc. from blood profile data.
8. Calculation of bioavailability from urinary excretion data for two drugs.
9. Calculation of AUC and bioequivalence from the given data for two drugs.
10. In vitro absorption studies.
11. Bioequivalency studies on the different drugs marketed.(eg) Tetracycline, Sulphamethoxazole, Trimethoprim, Aspirin etc., on animals and human volunteers.
12. Absorption studies in animal inverted intestine using various drugs.
13. Effect on contact time on the plasma protein binding of drugs.
14. Studying metabolic pathways for different drugs based on elimination kinetics data.
15. Calculation of elimination half-life for different drugs by using urinary elimination data and blood level data.
16. Determination of renal clearance.

References:

- a. Biopharmaceutics and Clinical Pharmacokinetics by, Milo Gibaldi
- b. Remington's Pharmaceutical Sciences, By Mack Publishing Company, Pennsylvania.
- c. Pharmacokinetics: By Milo Gibaldi Donald, R. Merckel Dekker Inc.
- d. Hand Book of Clinical Pharmacokinetics, By Milo Gibaldi and Laurie Prescott by ADIS Health Science Press.
- e. Biopharmaceutics and Pharmacokinetics; By Robert F Notari
- f. Biopharmaceutics; By Swarbrick
- g. Bio pharmaceutics and Pharmacokinetics-A Treatise, By D. M. Brahmankar and Sunil B.Jaiswal, Vallabh Prakashan Pitampura, Delhi
- h. Clinical Pharmacokinetics, Concepts and Applications: By Malcolm Rowland and Thomas, N. Tozen, Lea and Febiger, Philadelphia, 1995.
- i. Dissolution, Bioavailability and Bioequivalence, By Abdou H.M, Mack, Publishing Company, Pennsylvania 1989.
- j. Biopharmaceutics and Clinical Pharmacokinetics-An introduction 4th edition Revised and expanded by Robert F Notari Marcel Dekker Inc, New York and Basel, 1987.
- k. Encyclopedia of Pharmaceutical Technology, Vol 13, James Swarbrick, James, C. Roylan, Marcel Dekker Inc, New York 1996.

4.6 CLINICAL TOXICOLOGY (THEORY)

Theory : 2 Hrs. /Week

1. General principles involved in the management of poisoning
2. Antidotes and the clinical applications.
3. Supportive care in clinical Toxicology.
4. Gut Decontamination.
5. Elimination Enhancement.
6. Toxicokinetics.
7. Clinical symptoms and management of acute poisoning with the following agents –
 - a) Pesticide poisoning: organophosphorous compounds, carbamates, organochlorines, pyrethroids.
 - b) Opiates overdose.
 - c) Antidepressants
 - d) Barbiturates and benzodiazepines.
 - e) Alcohol: ethanol, methanol.
 - f) Paracetamol and salicylates.
 - g) Non-steroidal anti-inflammatory drugs.
 - h) Hydrocarbons: Petroleum products and PEG.
 - i) Caustics: inorganic acids and alkali.
 - j) Radiation poisoning
8. Clinical symptoms and management of chronic poisoning with the following agents –
Heavy metals: Arsenic, lead, mercury, iron, copper
9. Venomous snake bites: Families of venomous snakes, clinical effects of venoms, general management as first aid, early manifestations, complications and snake bite injuries.
10. Plants poisoning. Mushrooms, Mycotoxins.
11. Food poisonings
12. Envenomations – Arthropod bites and stings.

Substance abuse:

Signs and symptoms of substance abuse and treatment of dependence

- a) CNS stimulants :amphetamine
- b) Opioids
- c) CNS depressants
- d) Hallucinogens: LSD
- e) Cannabis group
- f) Tobacco

References:

- a. Matthew J Ellenhorn. ELLENHORNS MEDICAL TOXICOLOGY – DIAGNOSIS AND TREATMENT OF POISONING. Second edition. Williams and Wilkins publication, London
- b. V V Pillay. HANDBOOK OF FORENSIC MEDICINE AND TOXICOLOGY. Thirteenth edition 2003 Paras Publication, Hyderabad