HEB

Viscosupplements



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ABSTRACT

Arthritis is a joint disorder involves inflammation of one or more joints. There are several types of arthritis but most common is osteoarthritis which results from joint trauma, infection and age. Diagnosis is based on signs, symptom and medical imaging. Treatment includes exercise, efforts to decrease joint stress, weight loss for overweight and analgesics. Other alternative such as dietary supplements, an Ayurvedic and chinense preparation, acupuncture therapy may leads to pain relief. If pain interferes with normal life despite other treatments, joint replacement surgery is recommended. External joint lubrication can be provided as viscosuppliments for moderate osteoarthritis. It is a therapeutic modality for the treatment of osteoarthritis based on the physiologic importance of hyaluronic acid joint synovial fluid to restore the visco-elasticity of synovial fluid, thereby decreasing pain, improving mobility and restoring the natural protective function.

Key words: Viscosuppliments, joint disorders, osteoarthritis.



Study And Evaluation of Medication Errors in a Multispecialty Private Hospital

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ABSTRACT

Medication errors are most common, occurring in medical set up. The study was aimed to detect and evaluate medication errors in multispecialty hospital, Ahmadabad. A prospective study was carried during November 2012 to February 2013. Inpatients records of patients from all wards were reviewed. Detected medication errors were documented and evaluated. A total of 100 cases was selected. Total 46% of them were above 61 years of age. The incidence of medication error was found to be 64%. A total of 64 medication errors was observed, among them 82.8% were errors in prescribing and requisition, 17.2% were errors in medication administration. The causes of medication error were 52.6% were due to physician, 47.4% were due to nurses. Medication errors were mostly occurred on the 2nd day of hospital stay. Training programmers were conducted for staff for improvement. The study concluded that prescribing errors were most common and revealed that a pharmacist can play a key role in preventing errors.

Keywords: Medication errors, Inpatient medicine ward, Prescribing error



Non adherence and Its contributing factors to Anti-TB Drug in children's at Adama Referral Hospital, Oromia, Ethiopia.



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ABSTRACT

Objective: The objective of this study was to assess of factors affecting adherence of pediatric TB patients to anti TB drugs in Adama referral hospital.

Methodology: Retrospective cross sectional study has been conducted from March 19th to May 20th, 2014 to assess factors affecting adherence of pediatrics TB patients to anti TB drugs in Adama referral hospital. Data collection format was used to collect data from available data sources such as patients' medical cards and DOT registration book. Simple random sampling technique has been used in this research and data was presented in table and categorized and analyzed by using SPSS computer software package.

Result: Among 91 patients 42(46.1%) were males and 49(53.8%) were females. And 16 (17.6%) of patients were below 5 years of age, 30(32.96%) and 45(49.5%) of patients were between age of 6-10years and between 11-15 years of age, respectively. Among all pediatrics patients 59(64.83%) of them adhered to treatment program while 27(29.67%) patient defaulted (not adhered to) the treatment program. But for 5(5.5%) patients at end of program it was not known whether they defaulted or completed the treatment. At the end of treatment program 14(15.38%) of patients were cured while 6(6.6%) of the patients were not cured due to either MDRTB development or relapse, and 6(6.6%) of the patient were died. The most common factor identified to affect pediatrics adherence to anti TB medication were parents' knowledge of TB, parents relationship with provider, presence or absence of other reason like feeling better, forgetfulness and residence area.

Conclusion: As this study shows 29.67% of patients did not adhere to their treatment program. Also, this study shows that adherence of pediatric patients to their medication is not only affected by patient taking medication as prescribed but also by parent knowledge of TB, parent relationship with provider, presence or absence of other reason like feeling better, forgetfulness and residence area.

Key word: pediatric patients, Adama, Adherence, TB patients



A study on impact of pharmaceutical care in improving medication adherence in COPD patients



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ABSTRACT

COPD is a gradually progressive lung disease associated with continuous deterioration of health. Adherence is crucial for optimizing clinical outcomes in COP patients, and also non adherence results in significant health and economic burden. A prospective, observational and comparative study conducted in a 700 bedded tertiary care teaching hospital for a period of three months. COPD patients' medication adherence to their regular therapy was assessed using Morisky medication adherence questionnaire. Reasons for non-adherence also analysed through detailed patient interview. Patient counseling regarding proper use of inhaler techniques, need of medication adherence and lifestyle modifications were given to all patients with low adherence. At the end of the study medication adherence was reassessed and a drastic elevation in adherence score was founded.



WOLFRAM SYNDROME: A BRIEF DISCUSSION



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ABSTRACT

Wolfram syndrome (MIM 222300) is the association of juvenile onset diabetes mellitus and optic atrophy, also known as DIDMOAD (Diabetes Insipidus, Diabetes Mellitus, Optic Atrophy, and Deafness). Patients present with diabetes mellitus followed by optic atrophy in the first decade, cranial diabetes insipidus and sensorineural deafness in the second decade, dilated renal outflow tracts early in the third decade, and multiple neurological abnormalities early in the fourth decade. Other abnormalities include primary gonadal atrophy. Death occurs prematurely, often from respiratory failure associated with brainstem atrophy. A Wolfram gene has recently been mapped to chromosome 4p16.1, but there is evidence for locus heterogeneity, and it is still possible that a minority of patients may harbour a mitochondrial genome deletion. The best available diagnostic criteria are juvenile onset diabetes mellitus and optic atrophy, but there is a wide differential diagnosis which includes other causes of neurodegeneration. In families in which the causative mutations have been characterized, molecular carrier detection and prenatal diagnosis can be performed. Management is supportive and includes an annual screening for DM, vision, D, urodynamic testing, nephropathy and daily insulin injections and a controlled diet to treat DM.

KEYWORDS: Wolfram syndrome, juvenile onset diabetes, optic atrophy, sensorineural deafness, wolfram gene, neurodegeneration, urodynamic testing.