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CHAPTER MOTIVATION OVERVIEW

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CHAPTER MOTIVATION OVERVIEW

Impact of Vitamins and Minerals Enriched Food in the Management of Calciphytoliths: A Special Focus on Vitamin D

Edited by: Dr. S. S. Srinivasulu Reddy, Dr. S. S. Srinivasulu Reddy, Dr. S. S. Srinivasulu Reddy

DOI: 10.1007/978-81-322-2717-7

CHAPTER MOTIVATION OVERVIEW

Dr. S. S. Srinivasulu Reddy, Dr. S. S. Srinivasulu Reddy, Dr. S. S. Srinivasulu Reddy, Dr. S. S. Srinivasulu Reddy, Dr. S. S. Srinivasulu Reddy, Dr. S. S. Srinivasulu Reddy, Dr. S. S. Srinivasulu Reddy, Dr. S. S. Srinivasulu Reddy, Dr. S. S. Srinivasulu Reddy, Dr. S. S. Srinivasulu Reddy

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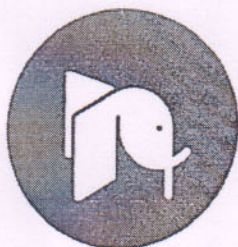
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Impact of Vitamins and Minerals Enriched Flora in the Management of Calciphytoliths: A Special Focus on Vitamin E

Submitted: September 28th, 2020, Reviewed: April 19th, 2021, Published: May 28th, 2021

DOI: 10.5772/intechopen.97777

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Dr. J. SAAIE CHENDRA, Mrs A. JHANSI RANI, Dr. KIRAN KUMAR YADA,
Dr. YASJ PRASANNA KUMARI, Dr. G. NEELAMMA, Mr KVLN MURTHY

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BASIC PRINCIPLES, THEORIES AND TECHNIQUES OF SPECTROSCOPY (THIRD EDITION)

ISBN: 978-93-90781-90-4

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Chapter 5

Nutraceuticals

B.Nagarani^{1*} and G.Neelamma²

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Nutraceuticals are known as nutritious foods for human health. Nutraceuticals include dietary supplements, Herbal products, Probiotics and prebiotics, Dietary supplements used to treat diseases. Most Nutraceuticals have an increased consumer interest due to its various therapeutic effects without any side effects. There is significant growth in the Nutraceutical market especially in the United States, India and European countries. The rapid growth I have in this market when it comes to business partnership models, Compliance with Effective Control and customer feedback testing. Current research focuses on the basics of neutraceuticals, market growth and the health benefits of nutraceuticals.

Keywords: Nutraceuticals, Dietary supplements, Probiotics, Prebiotics

INTRODUCTION

The name Nutraceuticals is derived from the two words 'Nutrition' and 'Medicines'. According to AAFCO, 1996, 'Nutraceutical' could be defined as a nutrient that nourishes and supports the health of the whole animal. (Kathleen C, 2013). Products that are separated or distilled from the food available through treatment will not be included in the diet. Nutraceutical has a therapeutic value that provides protection from chronic diseases (Rajasekaran A, 2008). Once a year about 1000 new products come on the market, as well as about 29,000 food ingredients found in the US.

The global market for vitamins will increase by 6 percent a year to more than \$ 13 billion in 2014. Due to inequalities and shortages in the national medical delivery system, it keeps a large number of people connected

Dengue Virus Entry/Fusion Inhibition by Small Bioactive Molecules.

- **Source:** Current Trends in Biotechnology & Pharmacy . Apr2020 Suppl, p149-150. 2p.
- **Author(s):** Naresh, Podila; Jubie, S.; Girija, K.; Shyam, P.
- **Abstract:** Dengue virus enters the cell by receptor mediated endocytosis followed by viral E (envelope) protein mediated membrane fusion. Membrane fusion is a central molecular event during viral entry into host cell. E protein is a major component of the virion surface plays an important role in binding to the host receptor and assists virus fusion. Rearrangement and or conformational changes in the hinge region by small molecules may interrupt the fusion process. Among the three domains present in the E protein, Hinge region movement of domain I and II, facilitates the fusion process. Upon lowering the PH, the E protein undergoes major conformational changes in the Hinge Region springing-upwards to bring the fusion peptide closer to the host membrane for fusion to occur. A small detergent molecule n-octyl- β -D-glucoside (β OG) occupies the hydrophobic pocket which is in the hinge region plays a major role in the rearrangement. It has been clearly reported that mutations within this binding pocket leads to the alterations of pH threshold for fusion. In addition to this the protonation of histidine residues present in the hydrophobic domain would also impart the conformational change of the E protein. The previously reported fusion inhibitors such as peptidic antivirals suffer from poor absorption from the gastrointestinal tract, necessitating intravenous delivery and high manufacturing costs. Keeping these views, it is proposed to design and synthesize a library of novel small bioactive molecules. Inserted at this position may have the ability to interrupt further conformational changes and hence can inhibit the fusion transition.
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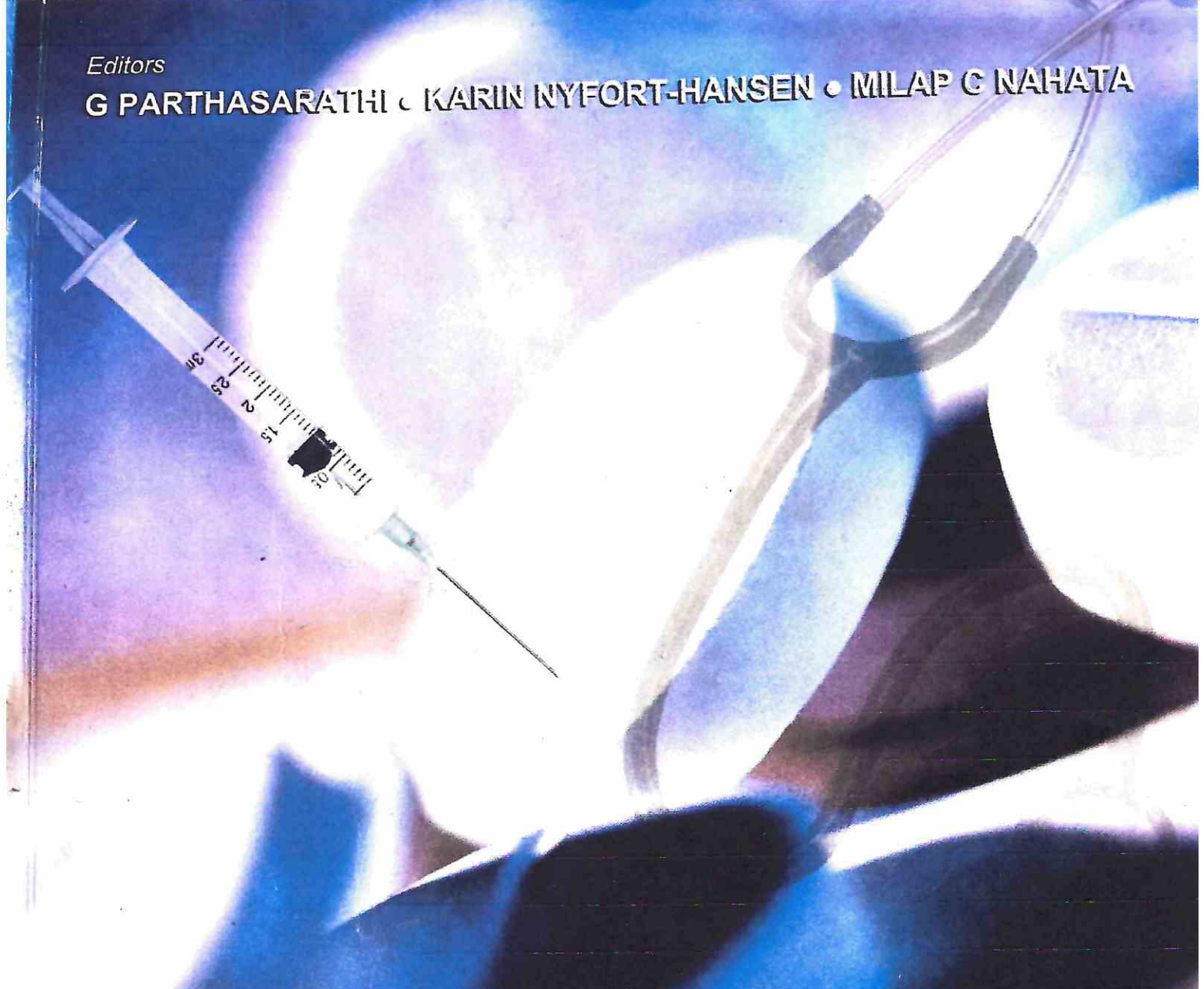
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A Textbook of Clinical Pharmacy Practice

Essential Concepts and Skills

Universities Press

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3

COMMUNITY PHARMACY PRACTICE

BG Nagavi, Ramesh Adepu and Grant Kardachi

Learning Objectives

Upon completion of this chapter, the reader should be able to:

- Explain the importance of community pharmacy in healthcare
- List medication use problems which are common in India
- Summarise the professional responsibilities of community pharmacists
- Discuss the findings and implications of research studies on community pharmacy practice in India

Community pharmacy is the term used to describe the provision of pharmaceutical care by pharmacists in primary healthcare settings. In India, a community pharmacy is a drug store or medicine shop used by people residing in the nearby area. It may be located in a remote village, district centre or busy metropolitan city. In other words, it is a pharmacy set up in a community to meet the public's medicine and other healthcare needs. This includes stocking and dispensing prescription and over-the-counter (OTC) medicines, and professional services such as patient counselling and health education. Depending on the location, the responsibilities of community pharmacists include processing prescriptions, making up extemporaneous preparations, manufacturing traditional medicines on a small scale, supplying medicines, responding to ailments, monitoring medication use, and providing patient education.

The World Health Organization (WHO) has identified community pharmacists as the healthcare professionals who are most accessible to the public. They supply medicines in accordance with a prescription or sell them without a prescription when legally permitted. Depending on the location, the responsibilities of community pharmacists include processing prescriptions, making up extemporaneous preparations, manufacturing traditional medicines on a small scale, supplying medicines, responding to ailments, monitoring medication use, and providing patient education.

6 PATIENT COUNSELLING

Ramesh Adepu

Learning Objectives

Upon completion of this chapter, the reader should be able to:

- Understand the need for patient counselling
- Identify outcomes of effective patient counselling
- Discuss the verbal and non-verbal communication skills required by a good counsellor
- Describe the steps in the counselling process
- Identify the barriers to patient counselling and strategies to overcome them
- List the main points of medication use which may be discussed during counselling
- Identify patient groups who require counselling

The safe and effective use of drugs depends on patients being well informed about their medication. In India, healthcare is provided at the primary, secondary and tertiary levels, and at each level, most patients receive medications as part of their treatment. Due to heavy patient load, most prescribers have little time to explain the use of these medicines to their patients. Pharmacists in community pharmacies and hospitals

including how and when to take it, how to take it, what to do if side effects occur if a dose is missed.

Lack of information may result in patient not taking the medication that was intended to be used, which in turn result in therapeutic failure, adverse effects, additional expenditure on investigations and hospitalisation.



Community Pharmacy Practice

Ramesh Adepu



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Community Pharmacy Practice

In India, Community Pharmacy Practice is considered as retail store pharmacy where the primary focus is trade. Although the concept of pharmacy practice is well defined and appreciated and practiced in western part of the world since 90's, in India, it is growing concept. Patient focused practice is slowly realizing with introduction of clinical pharmacy education in India since 1996. Unfortunately lack of trained staff, non availability of the text books to meet the academic needs of students studying pharmacy practice was a big challenge. To overcome this challenge, a sincere effort was made to bring out this textbook on community pharmacy practice. The textbook covers

- Scope and Growth of Community Pharmacy Practice
- Pharmaceutical Care Practices
- Pharmacy Management
- Patient Focused Services
- Ethics in Pharmacy Practice

About the Author



Dr. Ramesh Adepu graduated from University College of Pharmaceutical Sciences, Kakatiya University, Warangal, received Master and Doctorate degrees from Rajiv Gandhi University of Health Sciences, Bangalore in Pharmacy Practice. He secured VIMTA Gold medal in post graduation and received a special training in Clinical Pharmacy Practice at Repatriation General Hospital, Adelaide, South Australia. He also underwent intensive training in Clinical Research from Institute of Population Research, St John's Medical College, Bangalore. He is presently working as Professor of Pharmacy Practice, JSS College of Pharmacy, JSS University, Mysore. Supervised 47 post graduation research projects and 10 Pharm D dissertations and published 42 research papers in various National and International peer reviewed journals and has Four best research paper awards and one best publication award to his credit. He is currently supervising two Ph.D and two post graduate and eight Pharm D students. His areas of interest include clinical pharmacy and community pharmacy and outcomes research. He developed 14 Continuing Professional Development modules for practicing community pharmacists and involved in CPD activity since 2000 and conducted 300 workshops. He is an International member of Pharmaceutical Society of Australia (PSA), International Pharmaceutical Federation (FIP) Community Pharmacy Division member, International Society for Pharmacoeconomics and Outcomes Research (ISPOR), Life member of IPA, APTI and Associate Life Member of IHPA.



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ISBN: 978-93-83635-61-0



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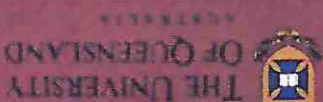
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ISPE's 10th Asian Conference on Pharmacoepidemiology
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ACPE 2017



253 **Initiation and evaluation of home medicines review program in Mysuru, a south Indian City**

Dr Ramesh Adepu¹, Prof Shilpa Palaksha², Mr Sai Teja Thatikonda², Mr Shafeek Ali², Ms Patibandla Divyanjali², Ms Jisna Joseph², Mr Ram Lal Dina²

¹Vikas College of Pharmaceutical Sciences, Suryapet, India, ²JSS College of Pharmacy, JSS University, Mysuru, India

Objective: To initiate and evaluate Home Medicines Review (HMR) services in primary health care settings in Mysuru, a South Indian city.

Methods: A prospective interventional study was conducted over a period of 12 months at Mysore city, South India. Upon receiving referral from the treating physician, the research pharmacist collected patient's demographic and clinical details from the physician. An appointment was taken from the patient for home visit, the case was reviewed by having personal discussion with the patient and family members. Drug related problems were assessed and noted. Medication adherence behaviour was assessed by using 8-item Morisky Medication Adherence Scale. Health related quality of life was assessed by using 5D questionnaire. Report was prepared and it was further discussed with the clinician for suitable action.

Results: During the study period, 69 patients were enrolled. The mean age of study population is 65.23 ± 11.32 years. Female patients were more in the study (65%). 44 patients (80%) were with hypertension and diabetes. A total of 45 drug related problems were identified and discussed the same with clinician for rectification. According to Morisky Medication Adherence Score, a significant improvement was observed from baseline to final follow up, $P=0.001(<0.01)$ and health related quality of life of patients was found improved. Patients' had expressed a complete satisfaction with the HMR service

Conclusion: The new HMR service found useful in assessing and preventing drug related problems and improving medication adherence behaviour and health related quality of life.



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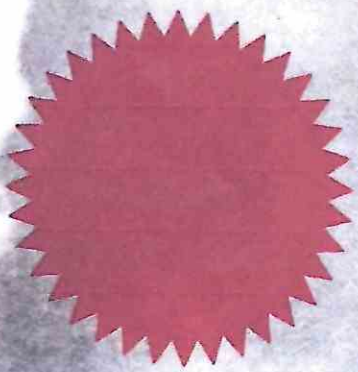
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Datuk Nancy Ho

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