

Day Starts with 'Corona' & Ends with 'Corona': We Completed Half of the Magic Year '2020'

We have passed half of the year '2020' by hearing the chanting of 'Coronavirus/COVID-19'. The invisible virus affected almost every person in the planet in one or other way. Below are some of the important events related to COVID-19 happened in India and around the world during the past six months:

31 st December 2019	Pneumonia of unknown cause reported to WHO China Office
7 th January 2020	The virus was named novel coronavirus (nCoV)
10 th January 2020	WHO issued its first guidance on the novel coronavirus
11 th January 2020	First death by novel coronavirus disease reported in Wuhan
13 th January 2020	First case of novel coronavirus outside of China confirmed (in Thailand)
20 th January 2020	Human-to-human transmission of novel coronavirus was confirmed by the WHO
20 th January 2020	The United States along with other countries confirmed the positive cases of novel coronavirus
30 th January 2020	The WHO declared Public Health Emergency of International Concern
30 th January 2020	India reports its first case of novel coronavirus in Kerala
2 nd February 2020	Reported first death of novel coronavirus disease patient outside China in Philippines
2 nd February 2020	India confirms its second novel coronavirus case in Kerala
11 th February 2020	ICTV announced “severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)” as the name of the novel coronavirus The WHO announced “COVID-19” as the name of the novel coronavirus disease
13 th February 2020	Second COVID-19 patient from Kerala was discharged
14 th February 2020	France announces the first COVID-19 death in Europe
19 th February 2020	Test results of the first COVID-19 patient in India reported negative
26 th February 2020	Latin America reports its first SARS-CoV-2 case
28 th February 2020	Sub-Saharan Africa records its first SARS-CoV-2 case
2 nd March 2020	Two new COVID-19 cases reported in India, one in New Delhi and other in Telangana
10 th March 2020	Eight new cases were reported in Kerala
11 th March 2020	The WHO declared COVID-19 as a pandemic
12 th March 2020	First death was reported in India due to COVID-19 in Karnataka
14 th March 2020	India declared COVID-19 a notified disaster India reports second death due to COVID-19 in New Delhi
16 th March 2020	Government of India announced nationwide lockdown and ordered all institutions, shopping malls, theatres, gyms to be shut until 31 st March 2020
17 th March 2020	India recorded third death due to COVID-19 in Mumbai
18 th March 2020	The WHO and its partners launched SOLIDARITY trial
22 nd March 2020	India observed Janta Curfew for a day
24 th March 2020	Prime Minister of India announced 21-day lockdown across the country
28 th March 2020	India made its first COVID-19 test kit
5 th April 2020	130 crore Indians in solidarity from 9:00 pm -9:09 pm by turning off lights and lighting diyas, candles torches and flashlights
14 th April 2020	Prime Minister of India extended the 21-day lockdown to 3 rd May 2020, with a conditional relaxations after 20 th April 2020
1 st May 2020	The Government of India extended the nationwide lockdown further by two weeks until 17 th May 2020
17 th May 2020	The lockdown in India was further extended till 31 st May 2020 by the National Disaster Management Authority
30 th May 2020	India announced that the ongoing lockdown would be further extended till 30 th June 2020 in containment zones, with services resuming in a phased manner starting from 8 th June 2020 (Unlock 1)
29 th June 2020	The Government of India issued guidelines for 'Unlock 2' beginning from 1 st July to 31 st July 2020

In India

By WHO

Fate of Hydroxychloroquine in the Treatment of COVID-19

'Hydroxychloroquine' is a buzzword in the era of COVID-19. The use of hydroxychloroquine in the treatment of COVID-19 become a thriller story with twists on everyday progress. Below are the list of important events in the story of 'hydroxychloroquine in tCOVID-19'.

December 2019	Scientists in China and France started using Hydroxychloroquine as off label for COVID-19 and in clinical trials
January-April 2020	Early results of small clinical trials on hydroxychloroquine suggested a faster clearance of the coronavirus, and possibly faster recovery
March 22, 2020	The National Task Force for COVID-19 constituted by the ICMR recommended the use of hydroxychloroquine for prophylaxis of SARS-CoV-2 infection for high risk population
April 24, 2020	FDA cautions against use of hydroxychloroquine or chloroquine for COVID-19 outside of the hospital setting or a clinical trial due to the risk of heart rhythm problems
May 22, 2020	A multinational registry analysis study published by the Lancet reported that the hydroxychloroquine independently associated with an increased risk of in-hospital mortality and de-novo ventricular arrhythmia
May 26, 2020	Based on the findings of the Lancet paper, WHO implemented a temporary pause of the hydroxychloroquine arm within the on-gong clinical trials
June 3, 2020	The Lancet published the expression of concern on the paper on hydroxychloroquine due to important scientific questions have been raised about data reported in the paper
June 3, 2020	WHO suggested to investigators of studies on hydroxychloroquine to resume their work, and also the Hydroxychloroquine arm of Solidarity Trial
June 5, 2020	The Lancet retracted the paper on hydroxy chloroquine due to several concerns raised with respect to the veracity of the data and analyses conducted
June 17, 2020	WHO announced that the hydroxychloroquine arm of the Solidarity Trial was being stopped
July 1, 2020	A total of 217 studies found for Hydroxy chloroquine AND COVID-19 in Clinical Trials. gov, 15 studies in Clinical Trials Registry – India

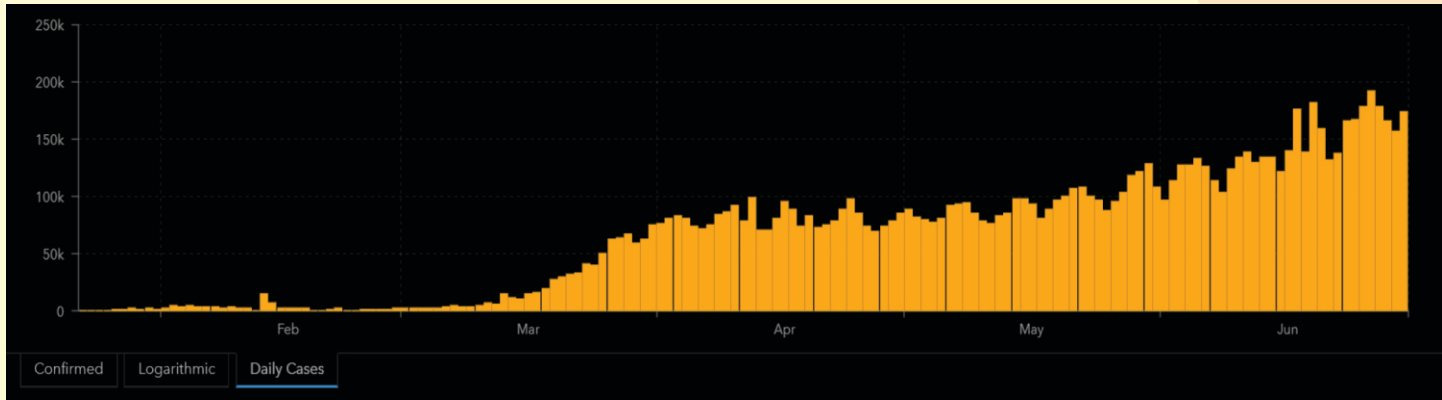
They call me HCQ, and I was minding my own business.....
I am Hydroxychloroquine and they affectionately call me HCQ
I was curing malaria patients and caring for people in pain
I was minding my own business and very happy with it
I suddenly found one day the whole world talking about me
I pondered why there is so much Hue and Cry
I was Trumped as a miracle drug and Modified to reach out to the world
I was the cynosure of attention and talked about with great interest
I was produced in large quantities and asked to travel across long distances
I was portrayed as the saviour and I became the object of being possessed
I pondered whether this is for real or is it only a dream
I was born in 1949 in the United States in a place called Albany
I was patented by my father Alexander Surrey not known to many
I played with Malaria when I was young and as I aged Lupus was my company
I was humane and served many years without looking for much money
I pondered whether this was right but was happy to have saved lives a many
I was asked suddenly to fight a war that I had not fought before
I did my best alone and also with my macrolide allies to the fore
I was told to fight a war but I am good at preventing the war to the core
I fought bravely but the world was judgemental to the lore
I pondered whether my efforts were worthwhile to pursue more
I had a nightmare one night that I was being attacked with a Lancet
I was told that my journey is over and they have better a combatant
I was shocked when someone told me all this is politics decadent
I can't understand how one can play with lives predominant
I pondered to end my life, but I cannot desert my friends who are still reliant
I will be there around to help people who still need me
I will be known as the saviour as I start playing with malaria again
I know humans are humans always looking for sensation
I believe that patience and courage always carries you forward in a situation
I pondered whether saving lives is more important or proving science
I am Hydroxychloroquine, and I was minding my own business.....

By

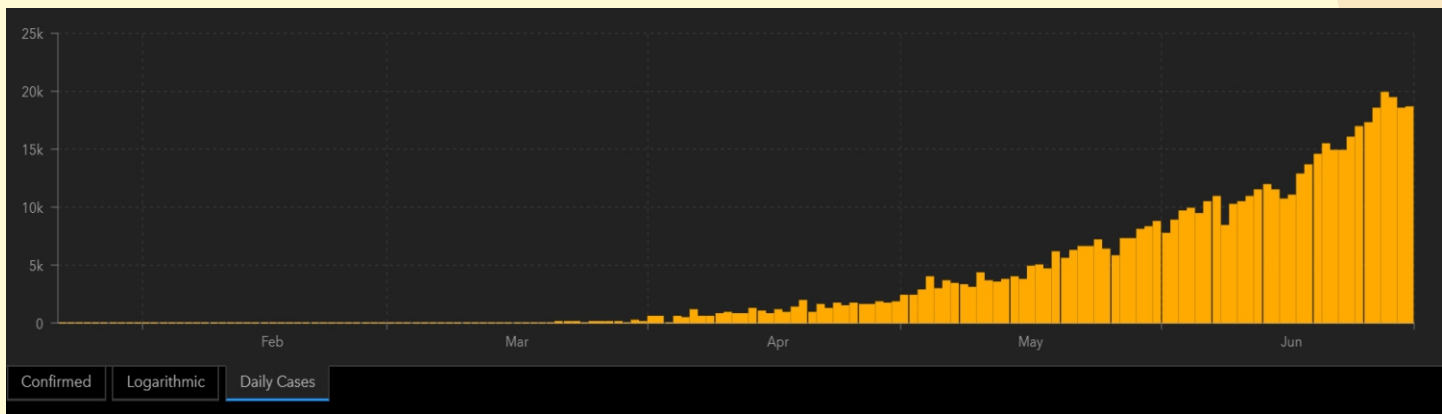
Dr B Suresh

President, Pharmacy Council of India, New Delhi &
Pro-Chancellor, JSS AHER, Mysuru

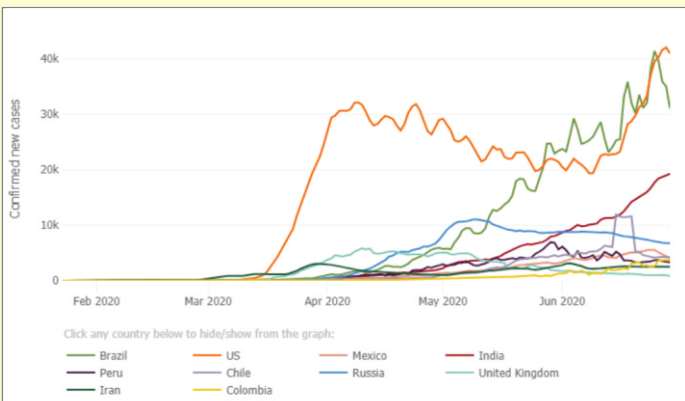
Graphical Representation of COVID-19



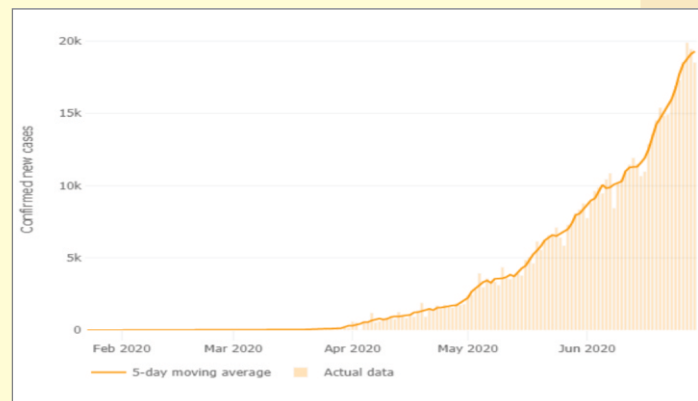
COVID-19 Cases in the World



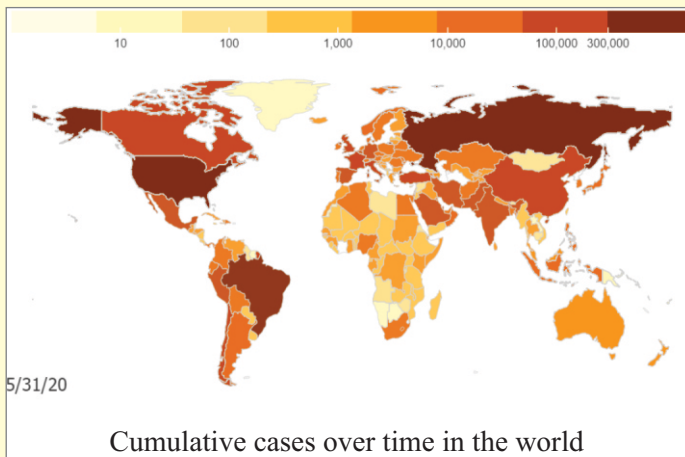
COVID-19 Cases in India



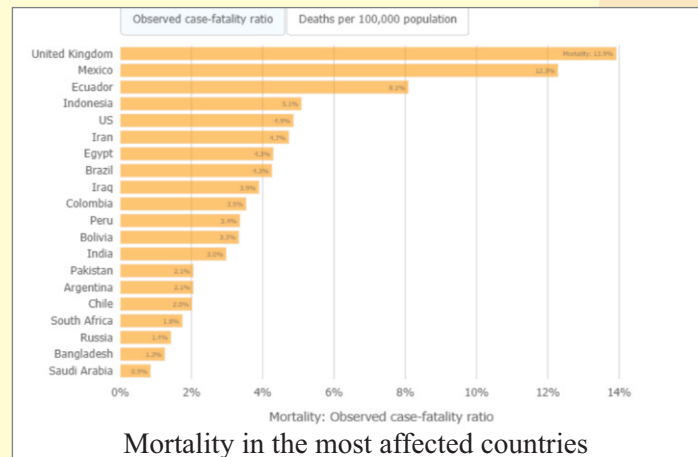
Daily confirmed new cases (5-day moving average) in the World



Daily confirmed new cases (5-day moving average) in India



Cumulative cases over time in the world

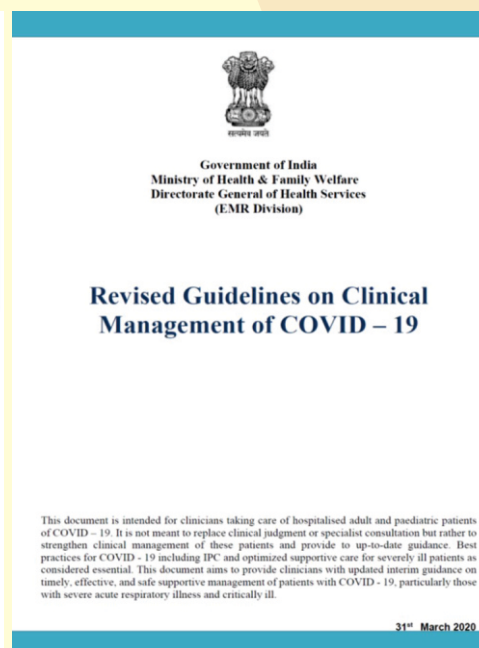
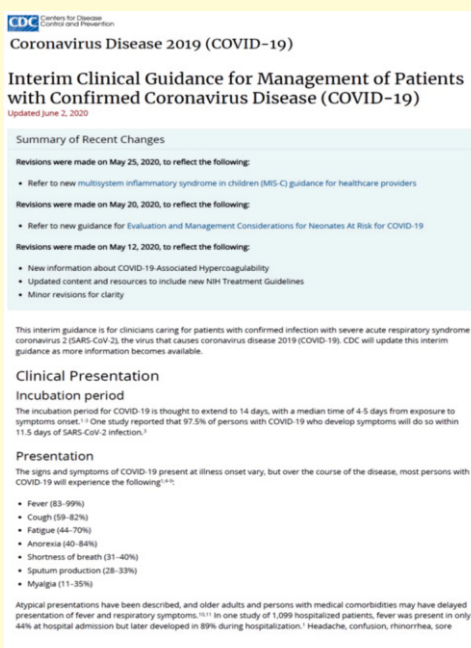
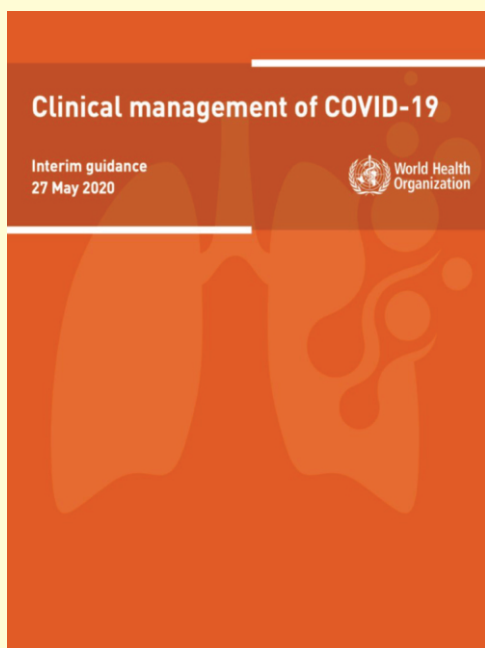


Mortality in the most affected countries

Source: Coronavirus Resource Centre, Johns Hopkins University & Medicine, <https://coronavirus.jhu.edu/>

Management of COVID-19

For the common man and not the person infected with SARS-CoV-2, understanding on the management of COVID-19 is very minimal. Here are the guidelines for the management of COVID-19 released by the World Health Organization, Centers for Disease Control and Prevention, USA and Ministry of Health & Family Welfare, Government of India.



<https://www.who.int/publications/i/item/clinical-management-of-covid-19>

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-guidance-management-patients.html>

<https://www.mohfw.gov.in/pdf/RevisedNationalClinicalManagementGuidelineforCOVID1931032020.pdf>

WHO guidelines NOT recommended the use of chloroquine or hydroxychloroquine (+/- azithromycin), including but not limited to antivirals (lopinavir/ritonavir, remdesivir, umifenovir, favipiravir), immunomodulators (tocilizumab and interferon- β -1a) and plasma therapy as treatment or prophylaxis for COVID-19, outside of the context of clinical trials. However, the Indian guidelines suggested to use hydroxychloroquine (Dose 400mg BD – for 1 day followed by 200mg BD for 4 days) in combination with azithromycin (500 mg OD for 5 days) in patients with severe disease and requiring ICU management.

Remdesivir

In view of the pandemic situation, on 1st June 2020, the Indian drug regulatory authority, the Central Drugs Standard Control Organization (CDSCO) granted the marketing authorisation to Gilead Sciences' anti-viral drug Remdesivir injection 5 mg/mL and Remdesivir lyophilised powder for injection 100 mg for "restricted emergency use" for the treatment of suspected or laboratory-confirmed COVID-19 in adults and children hospitalised with severe disease. Drug firm Hetero has received the manufacturing and marketing approval for Remdesivir from the Drug Controller General of India (DCGI) for the treatment of COVID-19, the generic version of Remdesivir is marketed under the brand name 'Covifor' in India.



Favipiravir

India-based Glenmark Pharmaceuticals has secured regulatory approval on June 19, 2020 for the manufacturing and marketing of antiviral drug Favipiravir (200 mg) under the brand name 'FabiFlu' to treat mild to moderate Covid-19, the first oral COVID-19 treatment approved in India. Since 2014, Favipiravir holds approval in Japan to treat new or re-emerging influenza virus infections. Favipiravir can be used in COVID-19 patients with co-morbid conditions such as diabetes and heart disease with mild to moderate COVID-19 symptoms.



Boom of COVID-19 Vaccine

Researchers from various countries striving hard to come out with the vaccine to combat COVID-19. We can expect a person out-side the clinical trial taking the vaccination to prevent COVID-19 soon. Here is the list of some important vaccines under development:

Platform	Type of Candidate Vaccine	Developer	Current Stage of Clinical Evaluation
Non-Replicating Viral Vector	ChAdOx1 -S	University of Oxford/AstraZeneca	Phase 2b/3 Phase 1/2
Non-Replicating Viral Vector	Adenovirus Type 5 Vector	CanSino Biological Inc. and Beijing Institute of Biotechnology	Phase 2 Phase 1
RNA	LNP-encapsulated mRNA	Moderna/NIAID	Phase 2 Phase 1
Inactivated	Inactivated	Wuhan Institute of Biological Products/ Sinopharm	Phase 1/2
Inactivated	Inactivated	Beijing Institute of Biological Products/ Sinopharm	Phase 1/2
Inactivated	Inactivated + alum	Sinovac	Phase 1/2
Protein Subunit	Full length recombinant SARS-CoV-2 glycoprotein nanoparticle vaccine adjuvanted with Matrix M	Novavax	Phase 1/2
RNA	mRNA	BioNTech/Fosun Pharma/Pfizer	Phase 1/2
Inactivated	Inactivated	Institute of Medical Biology, Chinese Academy of Medical Sciences	Phase 1
DNA	DNA plasmid vaccine with electroporation	Inovio Pharmaceuticals	Phase 1

India's First COVID-19 Vaccine Candidate Cleared for Huma Trials

The Drug Controller General of India (DCGI) has approved the Bharat Biotech's application to conduct a Phase I and Phase II clinical trial of company's COVID-19 vaccine candidate (Covaxin), making it India's first domestic vaccine candidate to get the nod from the government's drug regulator. Covaxin was developed along with the Indian

Council of Medical Research's National Institute of Virology (NIV). Human clinical trials are scheduled to start across the country in July 2020 for the vaccine.



Department Activities on COVID-19

Research Work

Assumptions for disparities in case-fatality rates of corona virus disease (COVID-19) across the globe

In a short span, Coronavirus disease (COVID-19) has become the world pandemic by rapidly spreading almost to all the countries around the globe, irrespective of the continent, population size, economic status and healthcare system. Despite the number of cases increasing exponentially in most of the countries, there exist certain disparities in terms of case-fatality rates. As of April 24, 2020, the case-fatality rate of COVID-19 is about 7.0%, with 193,671 deaths and 2,761,121 confirmed cases around the world. Although the United States of America (USA), Spain, Italy, France, and Germany are the top-most affected countries in terms of confirmed cases; France, Italy and Spain are leading the list in terms of case-fatality rates. Therefore, through this mini-

review, authors sought to brief on following possible assumptions (five D's) that might contribute to the varying case-fatality rates among different countries across the globe:

- Demographic Characteristics of Population
- Definition of COVID-19- Related Deaths
- Differences in Testing Strategies
- Differences in Healthcare Systems
- Dissimilarity in Preventive Strategies

By *Krishna Undela & Sai Krishna Gudi, Eur Rev Med Pharmac Sci 2020;24:5180-5182*

Knowledge and beliefs towards universal safety precautions during the coronavirus disease (COVID-19) pandemic among Indian public: a web-based cross-sectional survey

Background: The novel Coronavirus disease (COVID-19) is being considered as the most serious health threat that the world has never witnessed in recent times and significantly affecting the daily routine of mankind. Yet there is no treatment nor a vaccine that was approved, universal safety precautions (USPs) are the only way to deal with this emergency crisis.

Aim: The aim of this survey was to assess the knowledge and beliefs towards USPs during the COVID-19 pandemic among Indian Public.

Methods: A cross-sectional, web-based survey was conducted during March 2020. A 20-item self-administered questionnaire was developed, validated and distributed using Google Forms through social media networks. Chi-square test was used to identify the association between the demographic characteristics of the population and the knowledge on COVID-19. Binary logistic regression analysis was used to identify the factors influencing knowledge towards USPs.

Results: Of 1,117 individuals who participated in the survey, the mean age of participants was 28.8 ± 10.9 years, while the

majority were post-graduates (32.9%), professional job holders (45%) and belonged to the upper-middle (40%) economic class. Overall, the average of correct responses of knowledge (63%) and beliefs (83%) of participants towards USPs and mitigating strategies varied between moderate to high. All the socio-demographic variables have shown statistically significant associations ($p < 0.001$) with the participants' knowledge levels. Importantly, participants with occupational status as students have demonstrated a higher level of knowledge [OR 0.35 (0.23-0.53); $p < 0.001$] towards USPs compared to other study participants.

Conclusion: Although the knowledge and beliefs of the Indian public towards USPs are encouraging, there is a need for long-term educational interventions as the dynamics and severity of the COVID-19 have been changing at a rapid speed. These study findings could guide the public health authorities in making and implementing decisions related to precautionary measures in combating this pandemic.

By Sai Krishna Gudi, Manik Chhabra, **Krishna Undela**, Rajesh Venkataraman, Uday Venkat Mateti, Komal Krishna Tiwari and Sanath Nyamagoud, *Drugs & therapy perspectives 2020*; DOI: 10.1007/S40267-020-00752-8

Knowledge and beliefs of general public of India on COVID-19: a web-based cross-sectional survey

Context: Despite many awareness programs conducted by the governments and other agencies, there are certain false beliefs among the general public of India towards transmission, prevention and treatment of COVID-19.

Aims: To assess the knowledge and beliefs of general public of India on COVID-19.

Settings and Design: A web-based cross-sectional survey was conducted between 20th March and 15th April 2020. A 17-item questionnaire was developed, validated, and used for the study. The questionnaire was randomly distributed among the public using Google forms through social media networks. Descriptive analysis was performed to represent the study characteristics, Chi-square test for assessing the associations among the study variables, and logistic regression analysis for identifying the factors influencing the beliefs.

Results: A total of 462 participants with a mean (SD) age of

30.66 (11.31) years were responded to the questionnaire. Study participants are having fairly good knowledge on basic aspects of COVID-19. However, considerable fraction of participants were having false beliefs towards transmission of new coronavirus, and prevention & treatment of COVID-19. It was observed that the participants who were aged 31-60 years and >60 years, education level of intermediate or diploma and high school certificate, and occupation as unskilled worker had more of false beliefs towards COVID-19 compared to their counterparts.

Conclusion: Though the overall knowledge on COVID-19 was good enough among the general public of India, still there is need of education to avoid the false beliefs especially among the people who are elderly, having low level of education, and non-professional workers.

By Puvvada Rahul Krishna, **Krishna Undela**, **Shilpa Palaksha** and **Balaji Sathyanarayana Gupta** (Communicated)

Psychological impact of COVID-19 lockdown among healthy individuals in India: a self-assessed cross-sectional study

Background: The pandemic coronavirus disease-19 (COVID-19) is spreading rapidly in India and worldwide. As a preventive measure, the Indian government put in place the nationwide lockdown which may be impacting the psychological distress among healthy individuals.

Aims: To assess the psychological impact of COVID-19 lockdown among healthy individuals in India.

Method: A self-assessed cross-sectional web-based survey was conducted between 1st April and 14th April 2020. Centre for Epidemiological Study for Depression questionnaire was

administered for assessing the depressive symptoms among general public during the COVID-19 lockdown. Using the google forms the questionnaire was circulated among the public through social media. Descriptive analysis was performed to represent the study characteristics, Chi-square test for assessing the associations of depressive symptoms among the study variables, and the logistic regression analysis for identifying the factors influencing the depressive symptoms.

Results: A total of 588 participants with a mean (SD) age of 27.59 (8.72) years were responded to the questionnaire. The prevalence of depressive symptoms were higher among males (54%) compared to females (36%). It was identified that the participants with educational background of pre-university education/diploma (58.22%) and middle school (71.42%), and occupation as semiskilled (60%) and unskilled workers (70%), social history of consumption alcohol (56.52%) and smoking (75%), and belong to joint family (53.10%) were the predictors for depressive symptoms. Subgroup analysis identified that these factors

influence depressive symptoms especially among male population.

Conclusion: It is an alarming situation that the depressive symptoms found in approximately 45% of healthy individuals during the COVID-19 lockdown. Educational interventions by the government and non-government organizations are very much required to combat the progression of depressive symptoms into disorder.

By **Samaksha P B, Krishna Undela, Puvvada Rahul Krishna, Balaji Sathyanarayana Gupta, Kishore M and Shilpa Palaksha** (Communicated)

Webinars Organized

Roles of Pharmacists in COVID-19 Pandemic

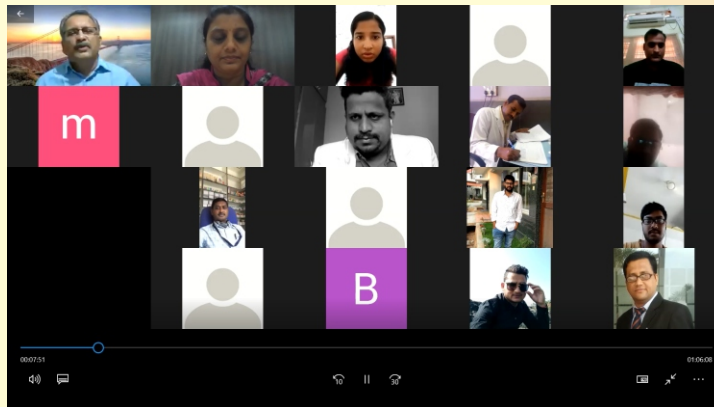
A Webinar on 'Roles of Pharmacists in COVID-19 Pandemic' was organized by Department of Pharmacy Practice, JSS College of Pharmacy, JSS Academy of Higher Education & Research (JSS AHER), Mysuru on 2nd May 2020 between 3.00 PM and 4:00 PM. Following were the objectives of the webinar:

- To create awareness about the roles & responsibilities of pharmacist during COVID-19 pandemic
- To create awareness about importance of self-hygiene among all the front-line warriors

The webinar was started with the welcome & briefing on objectives of the webinar by **Dr. T M Pramod Kumar**, Dean, Faculty of Pharmacy, JSS AHER, Mysuru. The first speaker was **Mrs Shilpa Palaksha**, Assistant Professor, Dept. Pharmacy Practice, JSSCP, Mysuru and she delivered a lecture on the topic "COVID-19: As a pharmacist what we should know". During her lecture, she highlighted the roles and responsibilities of clinical pharmacist and hospital pharmacist during the COVID-19 pandemic. Lecture also included the important information on the drug hydroxychloroquine, about its dose, dispensing precaution and information on patient counselling aspects. Also, she emphasised on safety measures to be ensured by the pharmacist. Following which **Dr Srikanth M S**, Faculty, Dept. Pharmacy Practice, JSSCP, Mysuru emphasised more on the community pharmacist role and responsibility,

measures to ensure during dispensing, need to upgrade their knowledge pertaining to the situation and also about the safety measures need to be provided for the customers. Webinar was concluded with the closing remarks by **Dr M Ramesh**, Professor & Head, Dept. Pharmacy Practice, JSSCP, Mysuru, who congratulated and motivated the pharmacists as front-line warriors, by appreciating their service as healthcare professional during the pandemic situation.

More than 300 pharmacists participated in the webinar. Pharmacists provided an excellent feedback on this webinar and they were happy with the content delivered through this webinar. Webinar participants were thankful to Dept. Pharmacy Practice, JSSCP, JSS AHER, Mysuru for having organised the webinar on such a need-based topic.



Speakers and Participants of the Webinar

Dissecting Pharm.D Internship During COVID-19 Pandemic

A Webinar on 'Dissecting PharmD Internship During COVID-19 Pandemic' was organized by the JSS Academy of Higher Education & Research (JSS AHER), Mysuru in collaboration with Pharmacy Council of India (PCI), New Delhi on 30th May 2020 between 10:00 AM and 3:00 PM. Following were the objectives of the webinar:

- To pave the path for conducting PharmD internship during this COVID-19 pandemic
- To facilitate the faculty in engaging PharmD interns in experiential learning
- To create a ray of hope among PharmD internship students in India
- To bring out the PharmD graduates on time to support the healthcare system in India

The webinar was started with the welcome & briefing on objectives of the webinar by **Dr M Ramesh**, Head, Dept. Pharmacy Practice, JSS College of Pharmacy (JSSCP), JSS AHER, Mysuru. Opening remarks was given by **Dr T M Pramod Kumar**, Dean, Faculty of Pharmacy, JSS AHER. **Dr Surinder Singh**, Vice-Chancellor, JSS AHER delivered the welcome address and highlighted the need of this webinar in the current situation of COVID-19 pandemic. **Dr B Suresh**, President, PCI & Pro-Chancellor, JSS AHER explained the 'PCI guidance on PharmD internship during COVID-19 pandemic'. During his address, Dr B Suresh highlighted various aspects of the guidelines that are to be followed by the Colleges, Staff and Students to complete the PharmD internship on-time.

As part of the scientific session, faculty of Department of Pharmacy Practice, JSSCP, Mysuru & Ooty campuses namely **Dr S Ponnusankar**, **Dr C Keerthana**, **Mrs Shilpa Palaksha**, **Dr K P Arun**, **Dr Krishna Undela**, **Dr G K Sadagoban** and **Dr Juny Sebastian** delivered lectures on various activities that are being carried out by the JSS AHER for PharmD interns during the COVID-19 pandemic. The topics that were covered during the webinar include Case Discussion, Clinical Accuracy Checking, Simulated Patient Counseling, Video Reflection, Journal Club Discussion, Use of Technology for Internship Activities and Assessment of Internship Activities. **Dr S Sriram**, Head, Dept. Pharmacy Practice, Sri Ramakrishna Institute of Paramedical Sciences, Coimbatore explained how to make a Case Presentation. **Dr Chris Alderman**, Adjunct Associate Professor, University of South Australia, Adelaide spoke on 'Psychological Aspects of Intern Preceptorship in Challenging Circumstances'. During his talk, Dr Chris highlighted how to tackle the situation without effecting the internship of the students. **Dr Jisha M Lucca**, Assistant Professor, Imam Abdulrahman Bin Faisal University, KSA detailed on 'Experiential Education in Saudi Arabia in the Current Situation' and highlighted the various technologies used to reach and teach the internship students. As a last session of the webinar, **Dr Priya K**, Head, Clinical Pharmacy, Aster Medcity, Kochi gave the 'Perspective from an Indian Corporate Hospital' on how they are providing the clinical pharmacy services during COVID-19 pandemic. **Dr Shailendra Saraf**, Vice-President, PCI moderated the scientific session and gave his valuable inputs at the end of every talk.

With more than 5000 registrations, this webinar grabbed very good response from the academicians and students from Pharmacy Institutions across India. A total of 1000 participants joined the webinar directly through Zoom and

Experiences of Practicing Pharmacists During COVID-19: Global Scenario

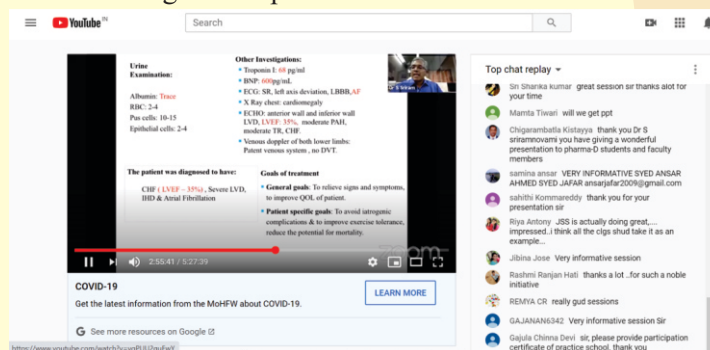
A Webinar on "Experiences of Practicing Pharmacists during COVID 19 : Global Scenario" was organized by Department of Pharmacy Practice, JSS College of Pharmacy (JSSCP), JSS Academy of Higher Education & Research (JSS AHER), Mysuru on 16th June 2020 between 4.00 PM and 5:00 PM. The webinar was conducted with an objective to understand the practice adaptation of the pharmacist in the pandemic situation and also to discuss the different strategies that can help pharmacist provide a better service in the pandemic situation.

The webinar was started with the welcome & briefing on objectives of the webinar by **Dr M Ramesh**, Professor & Head, Dept. of Pharmacy Practice, JSSCP, JSS AHER, Mysuru. Following that **Dr T M Pramod Kumar**, Principal, JSSCP, JSS AHER, Mysuru delivered his opening remarks. As the webinar was focused on sharing the experiences of pharmacist across the world, the speakers of the webinar represented different global locations. The first speaker was, **Mr Raj Vaidya**, Chief Pharmacist, Hindu Pharmacy, Panaji, Goa. He shared the outcomings of COVID-19 situation and also the changes brought about in their pharmacy to provide better and safe service to the patients. The second speaker was **Mrs Rinkle Thomas**, who is retail pharmacist, working

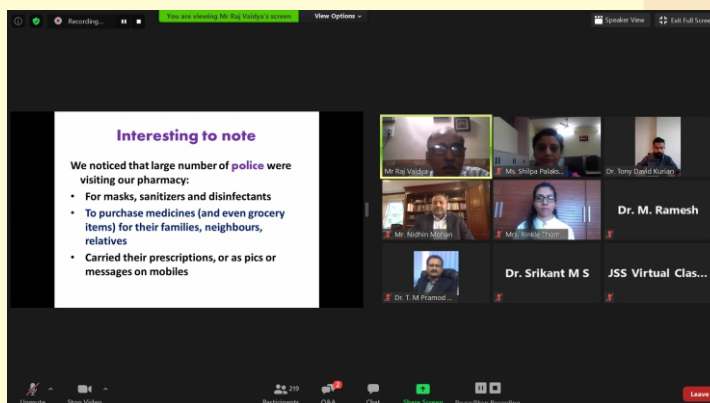


Speakers and Moderators of the Webinar

more than 7,300 members followed this webinar through YouTube Live (<https://www.youtube.com/watch?v=yLg958qLZV8>). There was an excellent feedback from the participants on this webinar and many requested to conduct these kind of need of the hour webinars by JSS AHER. Audience were thankful to JSS AHER, Mysuru for organising the webinar on such a need based topic and thanked Dr B Suresh for answering all of their questions raised during the session through Zoom platform.



YouTube Live and Participants Feedback



Speakers and Moderators of the Webinar

at Aster Pharmacy, Abu Dhabi. She emphasised the situation in Abu Dhabi, also explained the flow of changes brought in their pharmacy, especially the home delivery service that they had adapted. Later, **Dr Tony David**, working at Stacks Pharmacy, Ireland is a young pharmacist who cleared his licensure recently. He focused on difficulties that are being faced by the pharmacists and the measures taken while practicing during COVID situation. He emphasised that although the scenario was same as other part of the world, but experiences were different. **Mr Nidhin Mohan**, President, New Island

Pharmacy, Vice President West Islip Pharmacy at New York was another speaker. He explained the situation of the pandemic at his service area and also briefed on the different changes that took place during this pandemic. In his talk he explained how they have adopted different methods to ensure that all their patients are safe while providing the service to them. He mentioned about the Curbside strategy, which they have adopted, also mentioned about the extended services they are providing apart from dispensing the medications. The complete session was moderated by

Mrs Shilpa Palaksha, Assistant Professor, JSSCP, JSS AHER, Mysuru. The webinar ended with the question and answer session, some important questions posted by the viewers to different speakers was discussed.

More than 250 pharmacists participated in the webinar. Pharmacist provided an excellent feedback on this webinar and they were happy with the content delivered through this webinar. Participants were thankful to Dept. Pharmacy Practice, JSSCP, JSS AHER, Mysuru for organising the webinar on such a need-based topic.

The staff of Dept. Clinical Pharmacy rendered their Clinical Pharmacy services at JSS Hospital, Mysuru even during the COVID-19 lockdown. The authorities of JSS Hospital and JSS AHER appreciated the services provided by the Dept. Clinical Pharmacy.



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E-mail: dic.jsscp@jssuni.edu.in; pic.jsscp@jssuni.edu.in;

Website: www.picjsscpm.jssuni.edu.in

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