

PAPA NEWSLETTER

E-Newsletter of the Pakistani American Pharmacist Association

NEWS & FEATURES

Oath Taking Ceremony
PAGE 2

E-cigarettes: Are they
really safer?
PAGE 3

Role of the Community
Pharmacist During COVID-19

Annual PAPA Scholarship
PAGE 4

Fast Tracked Vaccine -
Too Fast?
PAGE 5

Corona Virus Testing
Measures
PAGE 6

Games and Trivia
PAGE 7

CE Highlights
PAGE 8

About Us
PAGE 9



Welcome Back!

A MESSAGE FROM THE PAPA BOARD

We hope you've been well! The past year has been tumultuous as we transitioned to virtual meetings and events due to the ongoing pandemic. As this year begins, we look forward to the opportunity of seeing everyone in-person again. In the meantime, look through our latest updates and articles.

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PAPA OATH TAKING CEREMONY



Welcome Aboard!

The Oath Taking Ceremony is held by PAPA to initiate the upcoming board members and introduce them to the rest of the organization. We had a great turnout of PAPA members and students at our event. Thank you to all the liaisons who have helped contribute to PAPA and its growth. Let's continue to make it grow!



Meet the Executive Board of 2020-2021

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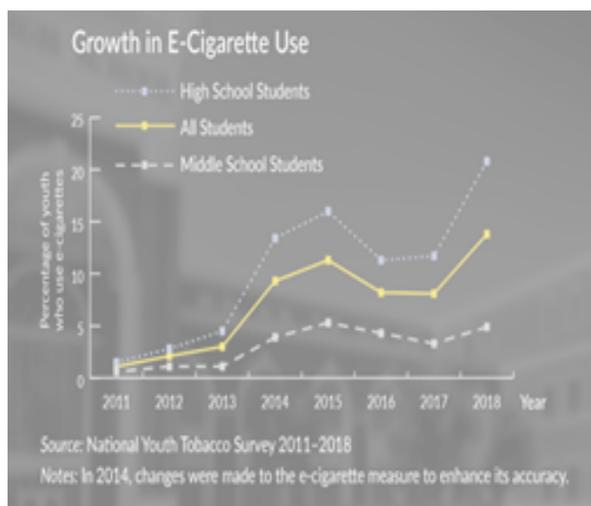
E-Cigarettes: As Innocuous As They Seem?

BY SANA NASEEM, PHARMD

From amongst the news bulletins regarding the growing complexities associated with the recent pandemic, comes a greater challenge with a solution that seems just as evasive – the general public's unease and anxiety. Inaccessible channels of coping through the recent, difficult times, have contributed to the rising unrest of quarantineers. One such channel that still remains, although not novel, is smoking. However, in recent times, e-cigarettes - which are battery-operated devices that deliver nicotine via inhaled vapor, have now substituted its former contender and have gained swift popularity among Millennials and Gen Z. With its growing à la mode appeal, it's "safer" approach- as it delivers nicotine without combustion, and its rampant use, questions of its safety and side effects have begun to ring in the ears of many healthcare practitioners.

The growing prevalence of self-reported e-cig use is high among the youth, with sales increasing 515% since 2013. The study attributed the increase in sales to discreet shapes, such as the one resembling a USB called JUUL, as well as an ease of accessibility to obtain the device in malls and other public outlets. [1] Although adults with an intent to quit conventional smoking may benefit from e-cig use[2], the high nicotine levels and rampant use among the youth proves to be problematic and forces scientists to speak on the harmful effects of the practice.

E-cigarettes were first created in China in the early 2000's and marketed to the US in 2007[1]. The use was widely accepted as a safe and suitable alternative to conventional smoking. However, soon after, the CDC reported a total of 2,807 hospitalizations relating to e-cigarettes with 68 confirmed deaths as of February 2020[2]. Although emergency department visits related to the device have declined, laboratory data suggests that vitamin E acetate, an additive in the aerosol, is the primary factor linked to the product use related injury.



Implications of this additive have been attributed to respiratory issues and cardiovascular morbidity with at least 48 out of the 51 patients, who were hospitalized for a lung injury, contained the additive in their bronchoalveolar lavage as compared to the healthy comparator group[3].

Studies suggest the additive used in many THC concoctions for purposes of thickening or diluting, is potential culprit associated to the 29 patients – two of which have died - suffered from vape-related lung injuries. In the study that took cases across the United States, Dr. Anne Schuchat, principal deputy director of CDC, stated "For the first time, we have detected a potential toxin of concern, vitamin E acetate, from biological samples from patients... The analysis provided evidence of vitamin E acetate at the primary site of injury in the lungs".

In the recent few years, more e-cig related incidents, side effects and deaths have caused an investigation to debunk the previous perceived innocuous nature of e-cigs. Although there are still gaps to the knowledge of which component in e-cigarette cause lung injury, the American Lung Association has called for the FDA to remove diacetyl, vitamin e acetate and other hazardous chemical be removed from e-cigarette cartridges. It is now up to the American consumers to make more informed choices regarding the health and wellbeing of their respiratory and cardiovascular health.

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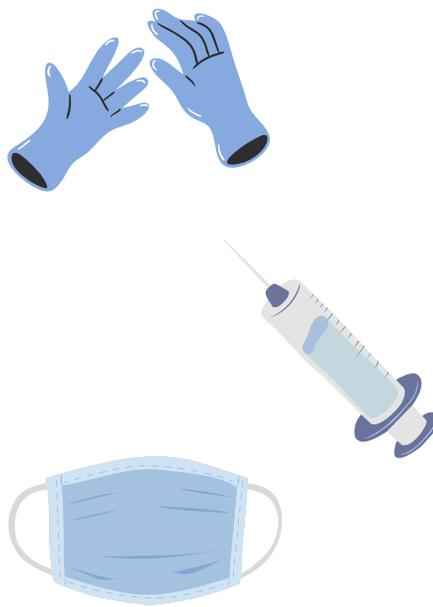
1. <https://jamanetwork.com/journals/jama/fullarticle/2705175>
2. <https://www.sciencedirect.com/science/article/abs/pii/S2213260015005214>
3. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6952050/>
4. https://www.cdc.gov/tobacco/basic_information/e-cigarettes/severe-lung-disease.html
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6. <https://www.nytimes.com/2019/11/08/health/vaping-illness-cdc.html>

Role of the Community Pharmacist in the COVID-19 Pandemic

By Taiba Siddiqui, PharmD

More than 90% of the U.S. population lives within 5 miles of a community pharmacy. Patients visit their pharmacist 12 times more often than their PCP. While many organizations restricted patient access to noncritical services in the early stages of the pandemic, patients with chronic conditions struggled to receive routine care. Most pharmacies however remained open and were in a position to support patients.

Located in the heart of the community, pharmacists are in a key position to delivery priority pandemic responses. Although the role of the pharmacist in chronic disease prevention and management is well established, the COVID-19 pandemic has accentuated the critical contributions community pharmacists make during an infectious disease outbreak.



Community pharmacists are in a key position to deliver priority pandemic responses, including chronic disease management, COVID-19 testing, and vaccinations.

As pharmacists, we can continue to educate patients on the importance of prevention, medication adherence, social protocols, and testing to further limit the spread of this devastating disease.

Being the most accessible health care professional, pharmacists can be a valuable source of reliable and trusted information. They can:

- Provide updated and evidence-based scientific advice on upcoming treatment/prevention
- Counsel on medications, over-the-counter-items, and drug supplements
- Administer the COVID-19 vaccine and advocate for routine vaccinations
- Advise the community against unregulated drugs and devices that promote false claims
- Participate in COVID-19 infection control initiatives
- Encourage patients to social distance, wear a mask, and proper hygiene habits
- Inform patients when self-care is appropriate and when to seek medical attention
- Facilitate COVID-19 testing, communicate results, and provide an action plan to patients

Annual PAPA Scholarship Recipients

Every year, PAPA awards the Annual Scholarship Award to current students who demonstrate academic excellence and diverse interests.

This year we dedicate the PAPA Scholarship Award to our dear members who have passed away earlier last year, may Allah grant them Paradise.

The scholarship award for Long Island University is dedicated to

Maqsood Khan

The scholarship award for St. John's University is dedicated to

Ali Asghar Yasin

We are pleased to announce the
2021 Annual PAPA Scholarship Award to

Ifrah Ansari
Long Island University
PharmD Candidate 2022

Ifra Rehman
Touro College of Pharmacy
PharmD Candidate 2024

Almas Hussain
St. John's University
PharmD Candidate 2021

Fast Tracked Vaccine – Too Fast?

BY SANA NASEEM, PHARMD

Let's cut to the chase and address the topic that seems to or rather should plague everyone's minds today: Should I get the vaccine? The question holds gravity and seems appropriate given the fast tracked nature of the Food and Drug Administration approval process of the vaccine, but should it warrant such extreme concerns of refusing the vaccine completely?

The Food and Drug Administration has held scrupulous standards of approving new drugs into the American market for use with the average drug approval of 7.9 to 8.2 years. Since the Trump Administration, trends for shorter time for drug approval has been seen with the FDA granting fast track approval to at least 60% of the new drugs that were approved in the past 5 years as opposed to the 38% approved a decade ago. This pattern now umbrellas the new Pfizer-BioNtech vaccine approved December 11, 2020 for the prevention of COVID-19 caused by SARS-CoV-2 in individuals 16 years of age and older .

Speculations on the effectiveness of the vaccine hinge upon the daily developments of the spread of the virus in real-time – and when there can be foreboding, and often times contradictory daily developments, it is no wonder there is a cause of concern for so many. However, is the expedition of a drug or in this case a vaccine, really a disclaimer for its ineffectiveness?

According to a retrospective study, drugs approved by the FDA in at least one expedited review program had greater health gains than drugs in approved through conventional processes. The priority review for Novartis' Gleevec approved in 2001 is an example of such a case, which, among the many also expedited, indicated significant health, and long-term survival in patients. Additionally, according to *The Journal*, an analysis done on the fast track FDA approved drugs, of the 42 cancer drugs approved from 2015-2018, 19-26% showed to significantly extended patient lives.

Although very hopeful data, the FDA has also found the expedition of a drug to fall short of it's effectiveness as well as its safety. Consequentially, the drugs are removed and withdrawn from the market (see table below)

Drug/biologics	Category	Reason for withdraw
Valdecoxib, rofecoxib	Selective cox-2 inhibitor	Increased cardiovascular events
Rapacuronium	Skeletal muscle relaxant	Bronchospasm and death
Troglitazone	Oral hypoglycemic	Hepatotoxicity
Cerivastatin	Hypolipidemic	Hepatotoxicity
Drotrecogin alfa	Anti-inflammatory	Lack of efficacy
Mibefradil	Anti-anginal drug	Lack of efficacy
Cefonicid, Moxalactam	Cephalosporins	Lack of efficacy

The argument that the fast track process may hinder safety and efficacious studies holds veracity, which was illustrated when non-inferior drugs that were expedited from the pool of drugs approved, proved to be less efficacious and costlier. Additionally, there have been fast track drugs that have received potential adverse effects alerts. There were some instances of when drugs were approved and exhibited side effects that completely nullified the drugs' use. One such example was with Dabigatran. Dabigatran was approved within 6 months by the FDA as a superior alternative to warfarin. Four years later, post marketing surveillance revealed GI bleeding associated with Dabigatran and announced a safety warning. The following year, an antidote was introduced. However, both Dabigatran and its antidote were neither cost effective nor safer than warfarin. Within four years, the drug and its antidote were approved and failed due to inadequate review time by the FDA

Other examples are of Ezogabine which was expedited for partial seizures was shown to have severe retinal damage and loss of vision. In addition, Ponatinib which was expedited for chronic myeloid leukemia, was shown to cause fatal veno-occlusive disease within 11 months of its approval. In 2014, most of the drugs approved for Hepatitis C also produced severe liver injury. These examples all indicate the expedited process did not allow for enough time to interpret a single phase II trial for these drugs. If the same has happened for this vaccine, it might not be difficult to assume the consequences may be similar.

When it comes to the COVID vaccine, the effectiveness of the vaccine is illustrated in one clinical trial comprised of 43,000 participants with a 95% effective rate in preventing symptomatic laboratory confirmed COVID-19 in people without evidence of previous SARS-CoV-2. From this, ultimately, the choice to receive the COVID-19 vaccine resides with each patient. Each case is unique and an informed decision based on the conditions and circumstances for each patient can truly dictate if vaccinating is what is in the best interest of the patient.

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CORONA VIRUS TESTING MEASURES

by Sana Naseem, PharmD

As the year trends onward, hopeful news of record low COVID related hospitalizations lends itself to a possibility of a world rid of the pandemic. Sadly, these facts only reflect a portion of the Northeast’s current battle with the virus and do not however, represent the entire country’s struggle. Still, the average American citizen is advised to continue to social distance and limit it’s day-to-day excursions. Currently, testing is now broadened to retail pharmacies. Question of accuracy of the test as well as access to viable, safe and effective treatments, once patients test positive, arise even more fervently.

Despite the bona fide measure of providing citizens with access to more COVID testing, the accuracy of the tests, themselves, is still in question. Some symptoms patients experience are fever, cough, fatigue, and trouble breathing along with many other symptoms listed in the Figure 1. The diagnostic tests that are available both to healthcare professionals as well as citizens range from nasopharyngeal swabs to antibody assays to assess the immune systems exposure to the virus. The types of tests and their properties are examined in Figure 2.

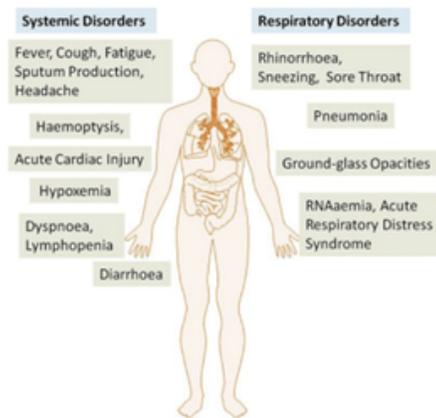


Figure 1

	Molecular Test	Antigen Test	Antibody Test
Also known as	Diagnostic test, viral test, molecular test, PCR test	Rapid diagnostic test	Serological test, blood test
Sample	Nasal or throat swab, saliva	Nasal or throat swab	Finger stick or blood draw
Time for results	Same day, up to a week	One hour or less	Same day, 1-3 days
Accuracy	Highly accurate No need to repeat test	+ results highly accurate - results may need to be confirmed with molecular test	Sometimes 2 nd antibody test is needed for accurate results
What it shows	Active infection	Active infection	Past infection
What it can't do	Past infections	More likely to miss an active infection	Rule out active infection

Figure 2

The clinical evaluation of the patients’ specimen depends on the specific manufacturer of the clinical test. Historically, clinical accuracy of the tests underwent an index test and a “reference standard” test. This was used as a proportion to test those asymptomatic and in question versus those who really were sick - the higher the value the more sensitive the test. However, it is unclear whether SARS-CoV-2 tests have been assessed in the same way due to the unpredictable nature of the symptoms in those infectious and those who are not. So far, only use of a reverse-transcriptase-polymerase-chain-reaction {RT-PCR} is known to test symptomatic patients but samples may lead to overestimates of test sensitivity as false negatives can be produced due to inadequate swabbing for sample collection. As a result, a study conducted in Wuhan, China concluded that if the test sensitivity were 95% the probability of a false negative would be 1%. However, the study suggested during real world application, the test sensitivity was far lower with a sensitivity of around 50%, which would mean the possibility of a false negative could be as high as 23% - high enough to assume someone is infected.

Properly diagnosing a COVID-19 test is key in fighting off any potential infections as well as preventing the spread to others. Along with following social protocols and practicing proper hygiene, a diagnosis test done in a timely fashion can prevent further complications and reduce the growing load on our healthcare system.

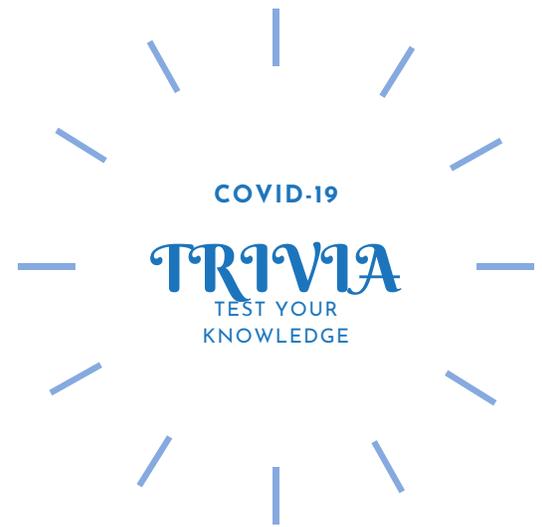
COVID-19 SYMPTOMS WORD SEARCH

H E A D A C H E Q U K U E R R
A K S E X U M K V S F S A Q B
N O I T S E G N O C O D U U O
J E L V A U N H Z N F I W S P
T V I L E O B J Y B R A K V G
N G O N E W R N A X N R H U S
T N G M G M N H V A E R H Z E
I E N O I U S W T W U H H J Z
D M I K R T N Z H E X E H X E
P O H E I A I G Q L R A Y Z T
W M T P U K U N W N R O M X R
Z X A S A O A Y G D T A S T E
R F E X C I S U S L L I H C V
O A R A H R N R X I U R S R E
V S B P D H S L K I I U E Y F

FILL IN THE BLANKS

1. One of the early and more common symptoms of COVID-19: _ _ _ _ _
2. You have to wait _ _ _ weeks to get the 2nd dose of the Moderna Covid-19 vaccine
3. Brand name of the only FDA-approved medication for the treatment of COVID-19:
 _ _ _ _ _ _
4. _ _ _ _ _ _ is the term referring to loss of smell
5. The _ _ _ _ _ swab is done for molecular and antigen tests
6. _ _ _ _ _ is smartphone tool that provides personalized health check-ins and reminders after you receive the COVID-19 vaccine

Bonus word: _ _ _ _ _



1. What is the only FDA-approved drug (as of Jan. 2021) approved for the treatment of COVID-19?
2. What are the 2 current leading COVID-19 vaccine manufacturers in the U.S.?
3. What type of vaccine is it?

Answers to
puzzles on
last page!

CE HIGHLIGHTS

Looking Back at Our Virtual Events of 2020



Continuing Education Seminars

JUNE 2020

Regulating Non-Prescription Drugs
by Ahsaan Qadir, PharmD

Compounding Non-Sterile Preparations
by Faisal Sultan, PharmD

Smoking Cessation
by Samar Shamsi-Rehman, PharmD

Bone & Joint Diseases - A Review of Osteoarthritis, Gout, Osteoporosis, and Rheumatoid Treatments
by Antony Q Pham, PharmD

NOVEMBER 2020

Implementation of Medication Therapy Management (MTM) in Community Pharmacy
by Sahar Mazhar, Rph

Be a STAR - Using the Behavioral Interviewing Technique in Pharmacy
by Maheen Khan, PharmD

Insomnia, Disorder to Lose Sleep
by Samar Shamsi-Rehman, PharmD

Pharmacists Responsibility for Patient Safety and Proper Medication Distribution
by Karl D. Fiebelkorn, Rph
MBA

JANUARY 2021

The Role of the Community Pharmacist During the COVID-19 Pandemic
by Taiba Siddiqui, PharmD

Psychological Insulin Resistance (PIR) in Type 2 Diabetes?
Communication Tools for Healthcare Providers to Help Improve Glycemic Outcomes
by Ali Jilani, PharmD

Interested in presenting a CE?
Contact M. Saleem at info@papausa.com for more info

About Us

Pakistani American Pharmacist Association (PAPA) is a professional organization involved in promoting practice of pharmacy, education and research for the pharmacists of Pakistani heritage.

PAPA was formed in 1980 in New York City to help pharmacists of Pakistani heritage in professional and social matters. Over the years it has grown in membership and events. We hope to continue our spread to foster a sense of professional as well as personal growth for all our members

Our Objectives

- Encourage and advance Pharmacist education
- Disseminate Pharmacist knowledge by providing interchange of information among Pharmacists and members of the association
- Assure a high quality of professional practice by establishing and maintaining a high standard of professional ethics, education and promotion of economic welfare
- Promote friendship, goodwill and communication among the members of the association
- Provide a united platform to the Pharmacists of Pakistani origin in the United States
- Perform health related assistance to the underdeveloped parts of the world including Pakistan
- Establish and co-operate with other Pharmacist organizations in the United States
- Foster trade, commerce and interest
- Guide and help new Pharmacists

Membership

Not a member yet? What are you waiting for?

Stay engaged! Being a member of PAPA has many perks:

- Annual cruise, barbecue, and many other family events
- Networking opportunities for career advancement
- Continuing Education seminars throughout the year
- Fostering a sense of community with fellow professionals
- Affiliation with other professional organizations and universities

Contact us at info@papausa.com for more details!

A Salute to Our Liaisons

St. John's University

Hamza Akram
Zainab Javed
Seher Hussain

Long Island University

Ifrah Ansari
Aroosa Sarwar
Haseeb Shah

Answers to Puzzles

Wordsearch

breathing, chills, congestion,
cough, diarrhea, fever, headache,
nausea, pain, runny nose, smell,
sore throat, taste, vomiting

Trivia

1. Remdesivir
2. Pfizer and Moderna
3. mRNA

Fill in the blanks

1. Cough
2. Four
3. Veklury
4. Anosmia
5. Nasal
6. V-safe

Bonus word: CORONA

UPCOMING EVENTS

Announcements to come...

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1 Tg

Rx To-Go

Tasks

- Prepare for insurance audit
- File quarterly tax returns
- ✓ Process expired returns

Priorities

- Complete insurance billings
- Schedule and fund payroll
- ✓ Process expired returns

2 Ss

Rx Site Sweep

SITE SWEEP 365

Site Sweep 365 is our new on-site subscription program that allows pharmacies to lock in low expired returns service rates and automate their site sweeps for an entire year.

ALL ABOUT CONVENIENCE

We currently offer multiple expired returns services to suit your needs, multiple ways to access your account information and we are always in search of ways to remove even more friction from the expired returns process for our clients.

ZERO GUESS WORK

We have an entire department dedicated to researching policies to ensure accurate processing of manufacturer credits. It is why our clients receive credits in less than 30 days, under 5 day if enrolled in our SmartPay+ Program.



Ark Rx Returns Solutions (Ark Rx) is a pharmaceutical services company that specializes in pharmaceutical waste disposal and returns management. Our reputation for accurate, compliant pharmaceutical returns and waste disposal have made us a preferred service provider in NY, NJ, CT, DE and D.C.

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