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DECEMBER 2020 Vol. 42 No.12

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## Oyetola, Ehanire, others task pharmacists on technology-driven practice

- As PSN holds 93<sup>rd</sup> national conference in Osogbo  
By Adebayo Oladejo

Science and technology are the key drivers of development in all facets of life, including the pharmacy profession; thus every aspect of the profession, from compounding and manufacturing to regulation and marketing, urgently requires technological re-engineering.

This was the thrust of the speech delivered by the Executive Governor of Osun State, Gboyega Oyetola, at the opening ceremony of the 93rd Annual National Conference of the Pharmaceutical Society of Nigeria (PSN), tagged

“Omoluabi 2020” and held at the De Distinguished Event Centre, Osogbo, Osun State, recently.

Oyetola, who was the guest of honour and chief host at the event, noted that, in view of the advancements in technology and its role and relevance in the 21<sup>st</sup> century, pharmacy practice and delivery of patient-centered pharmaceutical services will have to change to meet up with current demands of the society.

The governor, while noting the role of pharmacists as the experts in drug therapy management with

the intent of achieving safe and rational use of drugs in the society, stressed that their role in the 21<sup>st</sup> century has gone beyond interpretation of prescriptions and dispensing medicine to now involving patient care.

He said: “The contemporary pharmacy practice reflects an evolving paradigm shift to a clinical role of medication therapy management, health promotion and public health services. It is in this regard that the theme of this conference, “Technological Revolution: Adaptation in

Pharmaceutical Manufacturing, Pharmacy Practice and Regulation”, is very apt and relevant in this dispensation where there are wide gaps in pharmaceutical interventions required in the country.”

The governor added: “Going by your professional slogan “As men of honour, we join hands” and as reflected in the character of pharmacists who are members of my cabinet, I charge you to develop a workable strategy for the implementation of the outcomes of this engagement as the strength of any intellectual endeavours is in its implementation.”

Oyetola further **continued on page 23**

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Governor Gboyega Oyetola of Osun State (middle), accompanied by his deputy, Mr Benedict Olugboyega Alabi (right), receiving a commendation plaque from Pharm. Mazi Sam Ohuabunwa, president, Pharmaceutical Society of Nigeria, at the 93rd Annual PSN Conference, in Osogbo, Osun State.

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1. Subscription rate for 12 editions is N10,000 including postage within Nigeria.
2. Single copy costs =N=1,000.00 (without postage)
3. Payment to be made directly to **Zenith Bank Plc. A/c No: 1010701673**
4. You can also pay through portal, simply visit: <http://login.remita.net/remita/external/PHARMANEWS/collector/>
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ISSN 0331-815X

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**D**r Lolu Ojo is a technocrat, with extensive and meritorious public and private sector experience. Born in Gbongan, Osun State, he had his elementary education at St. Paul's Primary School, Oyo State. For his secondary education, he attended Ilora Baptist Grammar School and Ibadan Grammar School, respectively.

Thereafter, he proceeded to the prestigious University of Ife (Obafemi Awolowo University) in 1980, where he bagged his Bachelor of Pharmacy (BPharm) in 1984. He spent some time acquiring field experience, before returning to the academic world in 1989 for his Master of Business Administration (MBA) degree at the University of Benin. He subsequently obtained his Doctor of Pharmacy (PharmD) degree from the same institution in 2009.

An industrious Ojo served organisations like Roche Nigeria Limited and Coca-Cola Nigeria Limited as a top management expert, before setting up his own company, Merit Healthcare Limited in 2005.

He has also deployed his vast knowledge and experience to serve the Pharmaceutical Society of Nigeria (PSN) in various capacities. These include being two-term chairman, Conference Planning Committee (2008, 2017); national chairman, Association of Industrial Pharmacists of Nigeria (NAIP); chairman, National Drug Distribution Committee; founder and pioneer managing director of Ultra Logistics Company Limited; chairman, Drug & Substance Abuse Committee; chairman, Pharmacy Education Summit Committee; and chairman, Research, Documentation and Industry Liaison Committee, to mention a few.

Ojo was at the centre of the planning and execution of many epoch-making events and activities for the progress of the pharmacy profession in Nigeria. Accordingly, he has received many awards and recognitions for his contributions to the growth and development of the pharmaceutical industry and the pharmacy profession in Nigeria. He is a recipient of Merit Award from the Lagos, Bendel (now Edo and Delta), Ogun and Ekiti State branches of the PSN. He also won the Distinguished Service and Eminent Person's award of NAIP and many more.

Ojo is a Fellow of the Pharmaceutical Society of Nigeria (FPSN), Nigeria Academy of Pharmacy (FNAPharm), Distinguished Fellow of the Professional Excellence Foundation of Nigeria (DF-PEFON) and Courier and Logistics Management Institute (FCLMI). He is a member of the Presbytery of the Apostolic Church, Sunday School leader and Chairman of the building committee.

Dr Lolu Ojo is an avid reader and writer and has published many articles in national newspapers and pharmaceutical journals. He is married to Bridget Ojo, who is also a director at Merit Healthcare Limited, and their union is blessed with five children.



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## Inspiration

“Learn to adapt. Things change, circumstances change. Adjust yourself and your efforts to what it is presented to you so you can respond accordingly. Never see change as a threat, because it can be an opportunity to learn, to grow, evolve and become a better person.” — **Rodolfo Costa**

“What you perceive as a failure today may actually be a crucial step towards the success you seek. Never give up.” — **Richelle E. Goodrich**

“When you believe in yourself, you begin to use your energy to convert your time into concrete value chain” — **Sunday Adelaja**

“You may have a thousand potentials inside of you but you will hardly achieve greatness if you don't convert those potentials. Having potentials is cheap, the costly price of greatness is in the process of their conversion” — **Clement**

### Ogedegbe

“When you set your mind to achieve something, you must allow yourself the opportunity to get it done.” — **Tasha Hoggatt**

“Believe in yourself. You are braver than you think, more talented than you know, and capable of more than you imagine.” — **Roy T. Bennett**

“Small shifts in your thinking, and small changes in your energy, can lead to massive alterations of your end result.” — **Kevin Michel**

“You never change your life until you step out of your comfort zone; change begins at the end of your comfort zone.” — **Roy T. Bennett**

“When your desires are strong enough, you will appear to possess superhuman powers to achieve.” — **Napoleon Hill**

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6. PN has about 6 million monthly website hits.
7. PN is the journal of choice for advertisers.
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**Celebrating 41 Years of Uninterrupted Monthly Publication (1979-2020)**

The just-concluded 93<sup>rd</sup> national conference of the Pharmaceutical Society of Nigeria is a fitting proof of the truism expressed by the French statesman, Charles de Gaulle that "Nothing great will ever be achieved without great men, and men are great only if they are determined to be so." Indeed, to many pharmacists in Nigeria and beyond, the successful holding of the conference tagged "Omoluabi 2020" not only achieved the conventional purpose of helping to reposition them for better and more effective service delivery but also symbolises the proverbial "light" at the end of the tunnel of what has been a tumultuous year.

Against the odds of the COVID-19 pandemic and the EndSARS protests, the momentous gathering was held in Osogbo, the Osun State capital, from Monday 9 November to Friday, 13 November, 2020, after being postponed from the 2-7 November date previously planned. Incidentally, the annual conference of the PSN is adjudged to be the largest single gathering of pharmacists in the West African sub-region and this year's event, despite doubts and apprehensions caused by the global pandemic and security concerns in the country, measured up to this rating as it witnessed a large turnout of pharmacists from all parts of the country.

This is a testament to not just the exceptional sagacity of the national leadership of the PSN, led by Mazi Sam Oluabunwa; the Central Planning Committee (CPC), led by Pharm. Abass Sambo; as well as the Local Organising Committee, but also the indefatigable commitment of Nigerian pharmacists towards advancing their profession in the interest of the country's health

## 93rd PSN conference: The triumph of tenacity

sector and the entire populace.

The theme of this year's event, "Technological Revolution: Adaption to Pharmaceutical Manufacturing, Pharmacy Practice and Regulation", was particularly apt and commendably justified. Participants at the conference were enlightened on how to leverage the dynamics of technology to overcome the challenges of the global pandemic and ensure greater productivity and profitability in their practice in the face of the emerging era, rightly dubbed "the new normal". The choice of an erudite innovator, professor of pharmacy and vice-chancellor of Nnamdi Azikiwe University, Awka, Anambra State, Prof. Charles Esimone, as the keynote speaker could not have been better as he expertly dissected the subject, eliciting thunderous applause from delegates at the conference.

It is also important to note that this year's conference was particularly unique as it was the first hybrid conference of the PSN, allowing for both physical and virtual participation. This singular innovation made it possible for Nigerian pharmacists across the globe to follow live proceedings at the conference. We applaud the PSN leadership and the conference planning committees for making this novel initiative a success, and accordingly leading the way in inculcating and applying the theme of the conference.

Also noteworthy is that the annual gathering was held for the first time in Osun State, and

the state no doubt, gave a good account of itself as the Governor, Mr Gboyega Oyetola not only graced the event but had nearly all members of his cabinet - consisting of the deputy Governor, Secretary to the State Government and several commissioners - present. Kudos must be given to the LOC and others who made this possible.

We equally commend the peaceful conduct of the elections into some executive positions of the PSN, namely, the national secretary, the treasurer, and the editor-in-chief. The Young Pharmacists Group also had elections to constitute new members of the executive and must be commended for the seamless conduct of their exercise.

Generally, from all indications and sampled opinions of the participants, the conference is adjudged a resounding success, despite the limitations placed on it by the pandemic, which reduced physical attendance and thus diminished the carnival-like fanfare commonly associated with PSN national conferences.

Despite the success of the event, however, we observed that a few aspects of the organisation could have been done better. One of this was the pre-conference publicity. This was inadequately handled. The posters announcing the conference, which in previous conferences, were printed and pasted conspicuously at strategic places were nowhere to be found this year. This created a picture of uncertainty, especially in the minds of exhibitors, as many

thought the conference would not hold. We believe that if this had been properly handled, coupled with proper event marketing, the number of exhibitors at this year's conference would perhaps have been more.

Another noticeable lapse was also the late arrival or paucity of conference materials for participants and delegates. Many delegates spent time at the registration stands waiting to get conference materials. This can be improved on. While some delegates had tags which were hand written, there was also the absence of tags to identify pressmen and press coverage was noticeably poor. For an event such as the PSN conference, notable media houses should be invited and adequate provisions made to identify them. This way, good publicity will be given to the event.

Also to be noted for future conferences is the issue of time management. Many participants were not pleased that most of the scheduled activities at this year's conference either started or ended late. This gives the impression of inadequate organisation, especially to people who are connecting to the event from outside the venue.

Moreover, although the COVID-19 challenge limited physical attendance at the conference, we believe that the non-proximity of an airport to Osogbo affected attendance as many who would have loved to attend the conference could not do so by road especially given the security situation in the country. This, we note, was clearly beyond the control of the organisers. The PSN may consider the proximity of an airport when deciding on the venue of future conferences.

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# Alone with God

By Sir Ifeanyi Atueyi

The menace of fake drugs in Nigeria reached its zenith around the year 2000, when it was estimated that fake drugs constituted more than 70 per cent of the drugs in the country. Many pharmaceutical businesses closed down, while most of the foreign ones moved out of the country because they were being suffocated by fake drugs imported mainly from India and China.

Consequently, Pharmanews which depended on the patronage of the industry was very adversely affected. We started owing the printers and staff salaries and I was considering closing down the business to try another occupation. It was during this period of uncertainty and depression that I took a cheap night bus to Abuja on 22 October, 2000, to see the then Minister of Health, Dr Tim Menakaya.

On the morning of the next day, I went straight to the Ministry of Health Secretariat with a very heavily disturbed mind. While waiting to see the minister,

I sat alone, in God's presence, at the gardens outside, with some thoughts flooding my mind. Then I took my notebook and pen from my bag and started writing some prayer points, as they came to me. Below are some extracts:

"My Father, I put all my hope on you... Father, please send the people you have predestined to help me. I can no longer be in debt from today. On the Cross of Calvary, Jesus paid all my debts, took away my diseases, afflictions, poverty, lack, shame, and disgrace. I am set free from all these as a believer.

"Father, demonstrate your love, goodness and mercy on me now. Please answer my prayer. Let your purpose for my life be fulfilled. I surrender my thoughts, ambitions, plans and programmes to you... Your thoughts and plans for me are for good.

"Father, you have led me so far on this trip. Please crown it with glory. Make it a success... Holy Spirit, lead and direct me. Put words in my mouth to say the right things. Please go with me to see Dr Anabueze and the minister. Speak through me to get the desired result.

"I have taken a step of faith by coming here. I want my faith to work ... Today, something new will happen to me. I will go back to

Lagos glorifying You for your love, faithfulness, kindness and mercy.

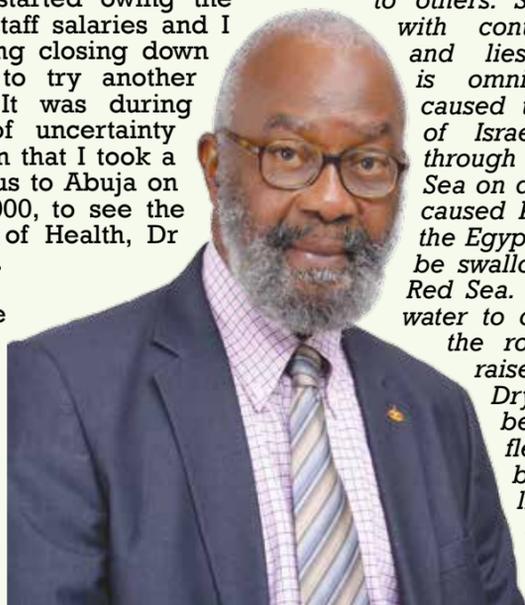
"I have put in 20 years into Pharmanews and You have blessed me. I have made a name and, in later years, my Reflections have made significant impact on people. I have used it to evangelise. It is not God's plan that I sink into debt and become a borrower instead of a lender. No! It is Satan's plan and not God's.

"The Word of God says that I will not borrow but instead lend to others. Satan comes with contrary ideas and lies... But God is omnipotent. He caused the children of Israel to pass through the Red Sea on dry land and caused Pharaoh and the Egyptian army to be swallowed by the Red Sea. God caused water to come out of the rock. He has raised the dead. Dry bones have been given flesh and the breath of life. God is the same yesterday, today and forever. He will perform His miracle in my life.

"I have put my life into Pharmanews and made significant contributions to the world of Pharmacy. I have become the best. Now, God, do you want me to try something else? You called out Abraham and asked him to go to a place you would show him. He obeyed. My Father, are you calling me out of Pharmanews? Is it your voice I am hearing?

"Holy Spirit, lead me to the right decision. Speak to me. I will listen attentively. Work out your programme for my life. Lift me out of this condition. Something is not going in the right direction and I reject this trend in Jesus' name. Do not leave me alone mid-way so that I do not get lost. I cannot depend upon myself to succeed. I cannot do it with my carnal mind or worldly wisdom. Please take control of my plans and actions."

Twenty years after the above supplications were made, I am glad to say that God graciously answered my prayers and arranged everything to work according to His own plans to fulfill His purpose for my life. The assumption of office by Prof. Dora Akunyili as the DG of NAFDAC in April, 2001, marked the beginning of some drastic steps to control the influx of fake drugs into the country.



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## Look inside more than you look outside

By George O. Emetuche

"Who looks outside, dreams; who looks inside, awakes."

– Carl Jung

On 24 January, 2018, Jack Ma, founder, Alibaba Group, that employs 65,000 staff, was hosted as guest during "Meet the Leader Session" at World Economic Forum held at Davos, Switzerland, from 23 to 26 January. I listened as the e-commerce business guru unleashed his thoughts on business from a position of authority. He told the story of how he started from humble beginnings and how he had to prepare himself to compete in future because he didn't have the resources to compete at that time.

During the thought-provoking interview, Ma admonished that people should look more inside than they look outside. The inside determines a lot about what will happen outside. I believe that once you conquer within, you will conquer your environment.

### The truth of the matter

I have not seen any real success story without hurdles, challenges or tough situations. The year 2020 has been an amazing year! It is a year filled with happenings that we hadn't planned for - from the COVID-19 pandemic, to the lockdown, to the EndSARS protest and the curfews that followed in some states. But in all this, we still have to be happy for the gift of life. We need to celebrate life and thank God for preserving us this year.

Don't count your losses. This is the time to look inwards and count your lessons. I tell my team that this amazing year is a year of soul searching. This is a time to "get into yourself" and think through from January to December. When you think through, you will see that life is a gift. We need to be alive first before talking about the targets we met or the ones we didn't.

### Staying alive is a big target met

As a training consultant who prepares a lot of salespeople and other professionals, I talk a lot about meeting or exceeding sales target. In fact, I have developed models that help sales professionals to exceed their targets. I motivate professionals to go the extra mile for top performance. We help professionals to build capabilities; this is our job.

However, in looking inside, more than we look outside, you will agree with me that there is a time to attack and a time to retreat. This is a smart military strategy. There's a time you stay in business to just maintain the *status quo*. At such a time, your target is to ensure you maintain normal business routines without necessarily thinking about growth or expansion. This year 2020 is one of such times in many businesses and families.

Look around you as you read this piece. I am being very intentional this moment. This is the last month of the year and we are taking personal stock; we are looking inwards. Have you looked around you? Okay, please go close to a mirror. Have you done that? Look at the mirror and see yourself; see how you are glowing! See that you are hale and hearty; see that you are alive and well, even in the midst of all the challenges. If you can see yourself in that mirror, it means you won. It means you have exceeded your target this year!

### A time to revisit the drawing board

Our businesses must move on profitably. We must think progressively in the midst of tough situations. It is a good strategy to retreat sometimes in order to attack strongly later. But you can't do a lot when you don't evaluate yourself periodically. You need to slow down sometimes to appraise your performance. This is why I recommend that we look inside this period; this is the time to get to the drawing board and think up smart strategies for next year.

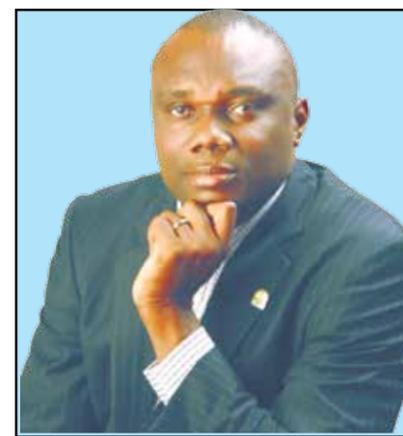
Look inwards to ascertain the best ways to achieve your goals next year. What is deposited within you is greater than the challenges in your environment. As a business-owner or professional, how are you planning for year 2021?

I believe that when disruption

becomes evident, disruptive innovation becomes inevitable. No amount of challenges can withstand consolidated assaults coming from the mind-power of a focused and determined individual. Wear your thinking cap and get to the drawing board. Look more inside in order to conquer the outside. This is the right time to build the right capabilities in your team by training and retaining them. This is the time to plan. This year presented a lot of challenges which must be surmounted by sustained assaults of competence and know how.

See you in Productive 2021!  
God bless.

George O. Emetuche is a Brian Tracy endorsed bestselling author, accredited training consultant, life coach, sales and marketing consultant. Please reach us today for cutting-edge training of your team. Order a set of our seven bestselling books and one audio book @ normal Total Price of N16,500 only



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# Inquest

with  
**Patrick Iwelunmor**

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## The psycho-therapeutic power of music

The biblical book of 1 Samuel 16:14-16 contains an interesting narration that vividly exemplifies the psycho-therapeutic power of music. From that account, it is very evident that King Saul was already paranoid with the presence of the evil spirit that was tormenting his soul. He was in dire need of help and his officials knew that the power of music could solve his problem.

The experience of King Saul lends credence to the fact that music plays a significant role in psycho-therapy; it has a way of affecting mood, cognition and behaviour. It can act as a healing tool when properly applied. This is the reason most religions, especially Christianity, is music-inclined. It is believed that affirmative and inspirational songs have the power to bring human dreams and aspirations to fruition.

Against all the odds and vicissitudes of an uncertain life, these religious devotees are often reassured of hope and victory through the songs they sing. As far as they are concerned, God, who typifies their greatest hope, will not allow them to be crushed by the problems of life and so, their faith and confidence is beyond destruction.

According to the Wikipedia, "Music therapy is an evidence-based

clinical use of musical interventions to improve clients' quality of life. Music therapists use music and its many facets— physical, cognitive, emotional/psychological, social, aesthetic, and spiritual— to help clients improve their health in cognitive, motor, emotional, communicative, social, sensory, and educational domains by using both active and receptive music experiences. These experiences include improvisation, re-creation, composition, receptive methods, and discussion of music."

Music transcends time and is present in all communities throughout the world. Given the universal nature of music, music therapy is uniquely able to reach individuals across all backgrounds and ages. It does not require any previous knowledge for individuals to meet their goals and be impacted. Music therapy provides individualised treatments to help treat individuals with disabilities, injuries, illnesses or to improve their well-being.

People suffering from emotional issues such as heartbreak, loss of a close relation, job or property have shown remarkable improvement using music therapy. Depression, which comes with all sorts of negative thoughts, can be adequately

managed through the application of music therapy. The popular Christian song, "It Is Well With My Soul", originally written by Horatio Spafford, has remained a reassuring source of hope, even in the face of the worst situations of life. Losing all his daughters in the famous wreck of the SS Ville du Havre, Spafford summoned the emotional fortitude as he sailed to England to meet up with his surviving wife. He wrote the song while on that trip.

Many people have overcome their depressive states listening to this particular hymn. The reasons are not far-fetched. Our subconscious minds usually gives way to affirmations that we repeatedly declare until they become a part of us. Thus, God and all the forces of the universe create the enabling opportunities for those affirmations or aspirations to come to fruition.

Healthline.com corroborates the psycho-therapeutic effect of music in balancing mood and boosting a positive mental outlook. According to the website, "New research shows that even sad music can lift your mood, while other studies suggest music can boost happiness and reduce anxiety. From the drumbeats of our ancient ancestors to today's unlimited streaming services, music is an integral part of the human experience. Researchers have pondered the possible therapeutic and mood boosting benefits of music for centuries. Even sad music

brings most listeners pleasure and comfort, according to recent research from Durham University in the United Kingdom and the University of Jyväskylä in Finland, published in PLOS ONE Trusted. Conversely, the study found that for some people, sad music can cause negative feelings of profound grief. The research involved three surveys of more than 2,400 people in the United Kingdom and Finland, focusing on the emotions and memorable experiences associated with listening to sad songs. The majority of experiences reported by participants were positive".

The famous Swedish group ABBA, in one of their international hits, shed more light on the power of music thus:

"... Thank you for the music, the songs I'm singing.

Thanks for all the joy they're bringing

Who can live without it, I ask in all honesty

What would life be?

Without a song or a dance or a dance, what are we?

So, I say, thank you for the music

For giving it to me..."

The psycho-therapeutic power of music cannot be overemphasised in a world constantly molested by troubles of all shades. So, whenever there is a tense, sad, unpleasant or frustrating situation, a song of hope or a chant of victory can turn the tides in our favour. Debasish Mridha has said it all – "Music can heal the wounds which medicine cannot touch."



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## Onyechi wins 2020 May & Baker Professional Service Award

By Adebayo Oladejo

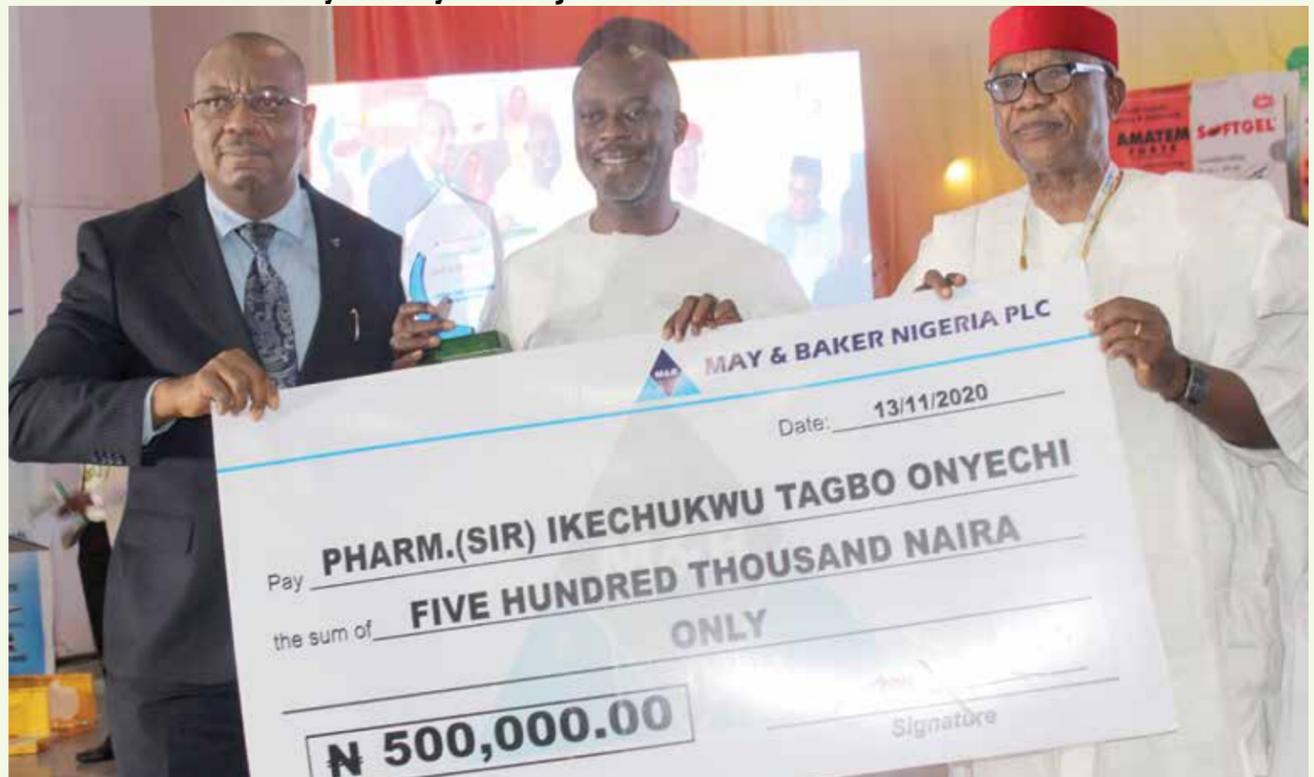
Rising to a thunderous applause, Pharm. (Sir) Ike Onyechi, managing director, Alpha Pharmacy & Stores, recently joined the league of pharmacy notables, such as Prof. H. B. Coker, Sir. Ifeanyi Atueyi, Prof. Mbang Femi Oyewo, and Prof. Cyril Osifo, as he clinched this year's edition of the prestigious May & Baker Professional Service Award.

Onyechi was announced winner of the 16<sup>th</sup> edition of the award at the closing banquet of the 93rd PSN Conference held at De Distinguished Event Centre, Osogbo, Osun State, on 13 November 2020. He was presented a plaque, a certificate of recognition, and a cheque of N500,000.

Speaking after the award presentation, an elated Onyechi, who was represented by Pharm. Ignatius Anukwu, national chairman, Association of Industrial Pharmacists of Nigeria (NAIP) remarked that he was delighted to know that people still recognise hard work, professionalism and selfless service.

He said, "It feels good to be awarded for good work. I feel honoured and appreciated. However it calls for more energy and work."

Sir Onyechi who is also the national president, Christian



Pharm. Obi Emaibe, head of marketing, May&Baker Nigeria Plc, who represented the Managing Director, Mr. Nnamdi Okafor, by Pharm. Ignatius Anukwu, national chairman, Association of Industrial Pharmacists of Nigeria (NAIP), who represented Sir. Iyke Onyech, and Pharm. Mazi Sam Ohuabunwa, president, PSN, during the presentation of the award plaque to the winner, May&Baker Professional Service Award, Sir. Iyke Onyechi, managing director, Alpha Pharmacy and Stores.

Pharmacists Fellowship of Nigeria (CPFN), is a Fellow of both the Pharmaceutical Society of Nigeria (PSN) and the West African Postgraduate College of Pharmacists (WAPCP). He is an alumnus of the Lagos Business

School. Also speaking at the event, the Managing Director, May & Baker Nigeria Plc., Mr Nnamdi Okafor, represented by Pharm. Obi Emaibe, head of Marketing, described Onyechi as a great

blessing to the pharmacy profession and Nigeria, as a whole, stressing that the Alpha Pharmacy boss is a respected pharmacist with over 35 years of unique and innovative  
*continued on page 26*

# Temie Giwa-Tubosun – The healthpreneur and lifesaver

By Solomon Ojigbo



Temie Giwa-Tubosun

Throughout the history of mankind, healthcare delivery has witnessed the extraordinary contributions of women, whose passion to save lives has become an enviable legacy. From the contributions of Florence Nightingale to nursing to the heroic acts of Clara Barton which led to the establishment of the American Red Cross, the history of healthcare is indeed replete with women whose impact is unquantifiable.

In this regard, the immense impact of **Temie Giwa-Tubosun** in healthcare in Africa is a reminder that history has a way of repeating itself. What began as a yearning and passion to save lives for Temie has now evolved to a fully blown social enterprise affecting thousands of lives across Africa.

Temitope Giwa-Tubosun, popularly known as Temie, is a Nigerian-American health manager and founder of **LifeBank** (formerly called **One Percent Project**), a Nigerian-based social enterprise, working to improve access to safe blood transfusions and other essential medical products across Africa.

In Nigeria, blood shortages are responsible for innumerable complications for women immediately after childbirth

and contribute to the deaths of 152,000 anaemic children and 37,000 pregnant women each year. The World Health Organisation (WHO) has identified postpartum haemorrhage as a major cause of maternal mortality worldwide, with women in developing countries at a higher risk.

Temie started LifeBank in 2016 to bring vital medical supplies like emergency medical oxygen cannisters, platelets, plasma, vaccines and most especially blood, to people who need them, when they need them and in the right condition. Since its launch, the company has transported more than 20,000 units of blood and other medical products, served about 500 hospitals, engaged over 6000 donors, and saved about 8000 lives.

## Background and education

Temie was born on December 1985 in Ila Orangun, Osun State, Nigeria. The fourth of six children, Temie's father was a university professor and her mother was a secondary school teacher. She grew up in Ila, Ilesha, and in Ibadan until she was 15. Five years earlier, when she was ten, her parents won the US Diversity Immigrant Visa and left for the United States with

the three older siblings. In 2001, at 15, Temie left to join them with her two younger siblings.

Temie attended Osseo Senior High School, Minnesota, and graduated in 2003. That same year she gained admission to Minnesota State University, Moorhead, and graduated in 2007 with a B.A degree in Political Science. In 2008, she was admitted to the graduate school at Middlebury Institute of International Studies, at Monterey, from where she received her master's degree in Public Administration, Health Systems Management and International Management in July 2010.

## Journey to LifeBank

In 2009, after Temie's first year in graduate school, she returned to Nigeria for the first time since 2001 for her internship in Abuja. The internship programme lasted three months, during which she had an encounter with a poor mother, called Aisha, whose protracted labour convinced her of the problem of maternal mortality in Nigeria.

Inspired by this encounter, she went for a graduate fellowship at the World Health Organisation in Geneva, Switzerland, in January 2010 which lasted till July of that year when she graduated from Middlebury Institute of International Studies at Monterey. In August 2011, she began a fellowship with the Global Health Corps, and spent the next 12 months at Mbarara, Uganda, working with the Millennium Villages Project, a programme of the United Nations and Millennium Development Goals.

In May 2012, Temie founded a non-governmental organisation called One Percent Blood Donation Enlightenment Foundation or One Percent Project, with the aim of ending blood shortage, using an efficient distribution network of blood in blood banks in Nigeria. The initiative was involved in educating people on the importance of blood donation and to help them overcome fears, prejudice, myths and apathy in blood donation.

Temie's experience with WHO, UN and the One Percent Project was the harbinger to her establishment of LifeBank in January 2016, about two years after the complicated child delivery of her first child and seven years after her encounter with Aisha, the young mother she had met in Kano, who nearly died after three days of labour.

LifeBank, which started as a healthcare technology and logistics service company, has grown to become an important player in

Nigeria's healthcare industry. The company has currently scaled up its operations to other African countries, after receiving multiple awards, grants and funding.

In 2019, LifeBank started using drones to deliver emergency medical supplies in Ethiopia. The company also has built a system that uses block chain technology to record and preserve the integrity of information about the blood supply.

LifeBank's ambitious mission is to save a million lives across Africa in 10 years and to reach all of Africa, India, Southeast Asia, and South America, to deliver critical supplies around the clock.

## Awards and recognitions

In May 2017, Temie was selected as part of "six entrepreneurs who demonstrate the positive role women are playing in creating opportunities and preparing the region for the Fourth Industrial Revolution" by the World Economic Forum on Africa.

That same month, she was listed in the annual Quartz African Innovators List of "more than 30 Africans" who are "taking leadership and control in a wide range of fields", including finance, healthcare, education, agriculture, design and many other fields.

Mark Zuckerberg, founder of Facebook, on his first visit to Nigeria in 2016, acknowledged the work Temie is doing, saying: "If everyone had the opportunity to build something like this (LifeBank), then the world would be a better place... I've been to a lot of different cities, people around the world are trying to build stuff like that..."

On 16 November, 2019, Temie was named the winner of Jack Ma's Africa Netpreneur Prize worth \$250,000. The prize-giving ceremony, which held in Accra, Ghana got applications from more than 10,000 startups from 50 African countries.

In addition, Temie has been announced as the 2020 Laureate for Sub-Saharan Africa, winning the sum of US\$ 100,000 in grant at the 2020 edition of Cartier Women's Initiative. The Cartier Women's Initiative, which was founded in 2006, has helped women over the years to reach their full potential by highlighting their achievements, while providing them with the necessary financial, social and human capital support in growing their businesses and leadership skills.

Temie is happily married to Kola Tubosun who is a writer and linguist. They live in Lagos with their son, Eniafe.

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## COVID-19 IS HIGHLY CONTAGIOUS

# STAY SAFE TO STOP THE SPREAD

Celebrating 41 Years of Uninterrupted Monthly Publication (1979-2020)

# Deception detection

By Dipo MacJob (Dr Write)

I often say it, whenever I have the opportunity, that except there is vaccination or injection against deception, the only mitigation or one of the options we have is availing ourselves of nonverbal intelligence. Why? Because over 90 per cent of communication is done nonverbally, according to Albert Mehrabian a professor of psychology. Therefore, we need to go beyond verbals, if we must effectively decipher falsehood or deception or, to further stretch it, understand people at a deep level.

In this edition, we shall be looking at a body of knowledge under the canopy of nonverbal intelligence that seeks to prefer solution, especially to those who have been victims of deception in document-related matters. If you have ever been swindled by fraudsters through forgery, fake cheques, anonymous letters, disguise etc, then you need to pay attention to this column in the subsequent editions.

My discussion shall be on Forensic Document Examination (FDE) and the objective is not to make the readership forensic experts but to arm anyone with basic knowledge on how to guard against falling into the

trap of document fraudsters. This prevents loss of lives and properties.

## Definition

Forensic Document Examination, also known as Questioned Document Examination, "involves the evaluation and analysis of various types of documentation for the purpose of detecting forgery, identifying writers and proving or disproving document authenticity or origin", according to Reed Hayes.

The difference between a handwriting analyst and a forensic document expert is that the former evaluates handwriting for the purpose of determining personality, while the latter works with an unknown writing, with the intent of proving authorship or establishing identity. We cannot overemphasise the importance of this body of knowledge in organisations and as a salient tool in national development.

## Essential facts

For us to appreciate the value of document examination, there are a few cardinal concepts we need to understand as follows:

No two handwritings are the

same. Even if the writings were from the same individual in multiple times, none would be exactly the same as the other. There may be similarities, quite alright; but the moment you observe a writing or signature, for example, looking exactly alike with another from a known or unknown source, it's a clear sign of fakery.

Regardless of how an individual attempts to forge or doctor a letter or signature, the master pattern (the unique peculiarities in the individuals' writing or the writing habit) would eventually reveal the authorship of the questioned document. In other words, by the time a professional document examiner evaluates the questioned document and exemplars, the truth is eventually revealed.

The handwriting of an individual can be influenced by several factors such as writing instrument, writing position, age, drugs, injury, mental health status.

The writing of an individual always has some degree of natural variation which prevents writing from being mechanically exact.

When someone attempts



to imitate another's signature or writing, the imitator must eliminate many personal writing characteristics

When a writing has been imitated (simulated) it will bear similarities to the model that is being copied

To prove that two writings were not produced by the same person, fundamental disparities must exist between them which cannot be accounted for by coincidence, accident, disguise, psychological influence or physiological factors.



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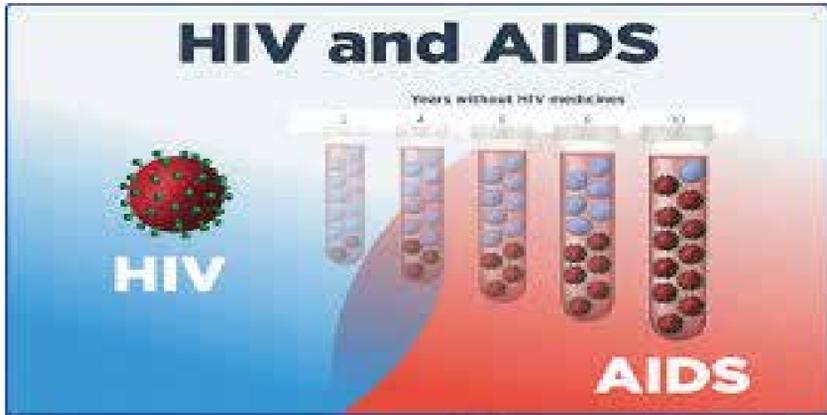
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# Advances in management of HIV/AIDS and STDs

The Human Immunodeficiency Virus (HIV) disease is an infection that attacks the body's immune system. Specifically, the virus attacks the white blood cells, called CD4 cells, which help the body to fight infection. When the virus destroys these CD4 cells, it weakens a person's immunity against infections.

A CD4 is typically reported as a count of cells (expressed as cells per cubic millimetre of blood). Sometimes CD4 results are expressed as a percent of total lymphocytes (CD4 percent) and a normal CD4 count in human body ranges from 500–1,200 cells/mm<sup>3</sup> in adults and teens. If the person's CD4 cell count falls below 200, their immunity is severely compromised, leaving them more susceptible to infections.

According to the World Health Organisation (WHO), about 38 million people in the world were living with HIV at the end of 2019. It added that 67 per cent of this number had had access to antiretroviral therapy at the end of 2019. WHO records has also shown that 7.1 million People living with HIV did not know that they have HIV at the end of 2019.

In Nigeria, as of March, 2019,

the national HIV prevalence is of 1.4 per cent among adults aged 15–49 years. Previous estimates had indicated a national HIV prevalence of 2.8 per cent. UNAIDS and the National Agency for the Control of AIDS estimate that there are 1.9 million people living with HIV in Nigeria. While Nigeria's national HIV prevalence is 1.4 per cent among adults aged 15–49 years, women aged 15–49 years are more than twice as likely to be living with HIV as men (1.9 per cent versus 0.9 per cent).

The difference in HIV prevalence between women and men is greatest among younger adults, with young women aged 20–24 years more than three times as likely to be living with HIV as young men in the same age group. Among children aged 0–14 years, HIV prevalence according to the new data is 0.2 per cent.

At the national level, viral suppression among people living with HIV aged 15–49 years stands at 42.3 per cent (45.3 per cent among women and 34.5 per cent among men). According to UNAIDS and the National Agency for the Control of AIDS, a total of 11.3 million adults were counselled and tested for HIV in 2016, four times as many as in

2012.

The WHO has also recommended that every person who may be at the risk of HIV should access testing and people diagnosed with HIV should be offered and linked to antiretroviral treatment as soon as possible following diagnosis. This is largely because if taken seriously, the treatment will prevent HIV transmission to others; whereas, untreated HIV will lead to Acquired Immunodeficiency Syndrome (AIDS).

According to WHO, AIDS may have occurred in the body usually when your CD4 T-cell number drops below 200 and the body's immune system is badly damaged; whereas, a normal CD4 count ranges in human body ranges from 500–1,200 cells/mm<sup>3</sup> in adults and teens. Hence, someone with a CD4 count below 200 is described as having AIDS and this is because, at that point, the immune system is too weak to fight off other diseases and infections.

HIV/AIDS is one of the deadly sexual transmitted diseases (STDs). STD is used to refer to a condition passed from one person to another through sexual contact. One can contract an STD by having unprotected vaginal, anal, or oral sex with someone who has the STD. An STD may also be called a sexually transmitted infection (STI)

or venereal disease (VD).

### Origin and causes of HIV

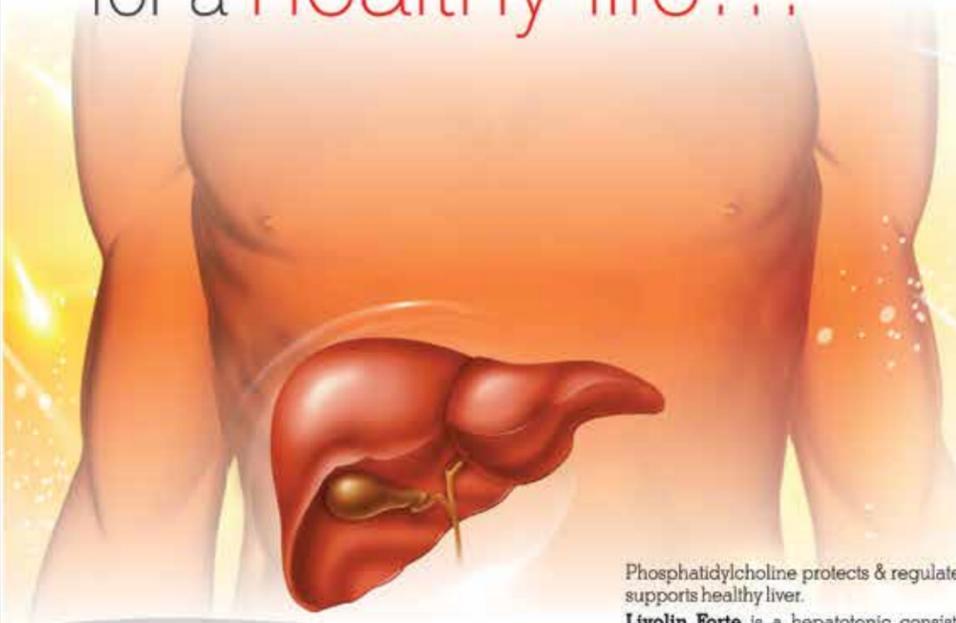
HIV is a variation of a virus that infects African chimpanzees. Scientists suspect the simian immunodeficiency virus (SIV) jumped from chimps to humans when people consumed infected chimpanzee meat. The same scientists then conducted more research into how SIV could have developed in the chimps. They discovered that the chimps had hunted and eaten two smaller species of monkeys (red-capped mangabeys and greater spotted-nosed monkeys). These smaller monkeys infected the chimps with two different strains of SIV.

Once inside the human population, the virus mutated into what we now know as HIV. This likely occurred as long ago as the 1920s. HIV spread from person to person throughout Africa over the course of several decades. Eventually, the virus migrated to other parts of the world.

Scientists first discovered HIV in a human blood sample in 1959. Studies of some of the earliest known samples of HIV provide clues about when it first appeared in humans and how it evolved. The first

continued on page 13

## Protect your Liver for a healthy life...



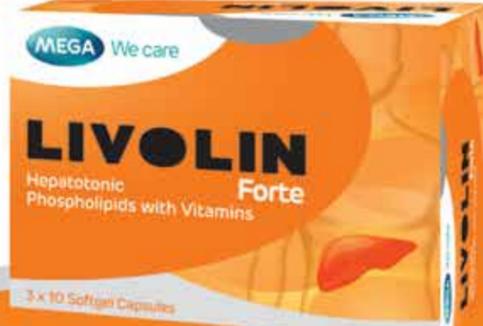
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**Abridged Prescribing Information**

**Description & Pharmacology:** Phosphatidylcholine (PC) is a phospholipid, one of a primal class of substances ubiquitous among life forms. Chemically, Phosphatidylcholine is a glycerophospholipid, built on glycerol (CH<sub>2</sub>OH-CHOH-CH<sub>2</sub>OH) and substituted at all three carbons. PC is the predominant phospholipid of all cell membranes and of the circulating blood lipoproteins. It is the main functional constituent of the natural surfactants, and the body's foremost reservoir of choline, an essential nutrient. PC is a normal constituent of the bile that facilitates fat emulsification, absorption, and transport, and is recycled via enterohepatic circulation. PC is freely compatible with other nutrients, and when co-administered may enhance their absorption. Standard toxicological assessments indicate no significant acute or chronic toxicity from PC, as well as no mutagenicity and no teratogenicity. PC is well tolerated at daily intakes up to 18 grams. **Drug Interactions:** There is no evidence that show it has drug interaction with other vitamins. **Rationale for combining Phosphatidylcholine with Vitamin B and Vitamin E:** Phosphatidylcholine (PC) with vitamins B complex and vitamin E is a therapeutic approach in controlling ethanol-induced oxidative stress and immunomodulatory activities involving liver damage, processes. Apart from acting as hepatotonic nutrients as methyl donors for detoxification, research has shown that water-soluble vitamins are destroyed by alcohol and cigarette smoking. For just one ounce of alcohol consumed one may lose precious reserves of these vitamins. In absence of these vitamins proper metabolism cannot take place. Liver is the site for metabolism of food and severely depleted resources of vitamins can lead to malfunction of liver which may result in to serious danger to overall health. **Indications:** Liver disease of any origin; acute, sub-acute, chronic hepatitis, cirrhosis, toxic metabolic liver diseases, intoxication (e.g. from drugs), alcoholic fatty liver, pre- and post-operative care and especially in liver / gall bladder surgery. **Side Effects:** None reported. **Contraindications / Precautions / Warning:** None reported.

For Full Prescribing Information, Please write to

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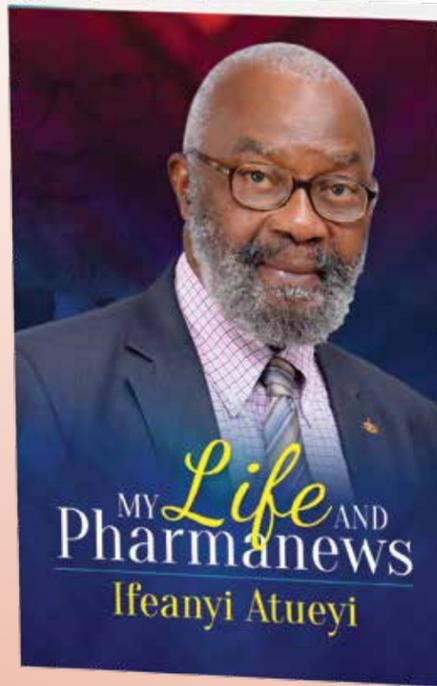
## MY EDUCATION AND THE ERINNE'S HOUSEHOLD

I started school in 1946 when our parents lived in Onitsha. I attended New Bethel Primary School for about a year before my father died. Thereafter, we returned to Okija. After the mourning period, I resumed schooling at St. Peter's Central School, Ubahu, Okija.

St. Peter's School was three compounds away from my family house. It was a church-owned school and both the church and the school were the first Anglican Church (CMS) and the first primary school in Okija, respectively. Consequently, students attended from different villages and even neighbouring towns like Lilu, Azia, Mbosi and Orsumoghu. It was the only school where pupils could sit for standard six examinations. Today, that church is known as the Basilica of St. Peter, which takes second position to the Cathedral of the Diocese of Nnewi.

My primary school days were memorable in many ways. Some of my were Reuben Emelone (my cousin), Christopher Ifebuzor, Emmanuel C Okeke (who later changed his name to Chukwuma Ezike), Alexander Muoka, Lawrence Anisiobi, Emmanuel Mmuomihe (who later changed his name to Emmanuel Malizu), Emmanuel Eloka Chukwudum, Fred Offor, Nathan Obiakor, Pius Ejedeghobi, Caleb Asomba, Nelson Uchendu, Joseph Oragwa, Caro Oraelosi, Obiwulu (from Mbosi), Miss Onyekonwu (from

(Excerpts from *MY LIFE AND PHARMANEWS* by Sir Ifeanyi Atueyi)



Azia), Bartholomew and his sister and others.

Like most of the other pupils, doing house chores – including going to the stream to fetch water – was a duty I had to perform before and/or after school. After school hours, pupils who were members of the choir were required to wait behind or come back for choir practice. Good singers were selected to sing during church services. I still clearly remember the choirmaster, Mr David Okongwu (who later became a priest). He always had his cane with

him and any slight mistake in singing attracted corporal punishment. Of course, it was not only Mr Okongwu who flogged us; all our teachers and headmasters took discipline and corporal punishment seriously.

The teachers in my school were greatly feared. Since they were committed to seeing us become successful in life and become good ambassadors of the school, they ensured that no stone was left unturned to nip any character flaw in us in the bud. Any part of the body could be flogged, depending on the mood of the teacher. However, pupils who were frequently flogged also devised a means of protecting their body. They padded their buttocks with thick clothing under their shorts or knickers before coming to school. We called this padding "awucha".

Moreover, the teachers gave quality attention to us in many other ways. In fact, some of us residing close to the school went to the teachers' quarters to study and spend the night and later return to our houses in the morning. On the whole, the structure of learning and nature of discipline during my primary school days considerably helped to mould my character, enabling me to shun certain untoward tendencies, while

cultivating traits and virtues that have remained with me.

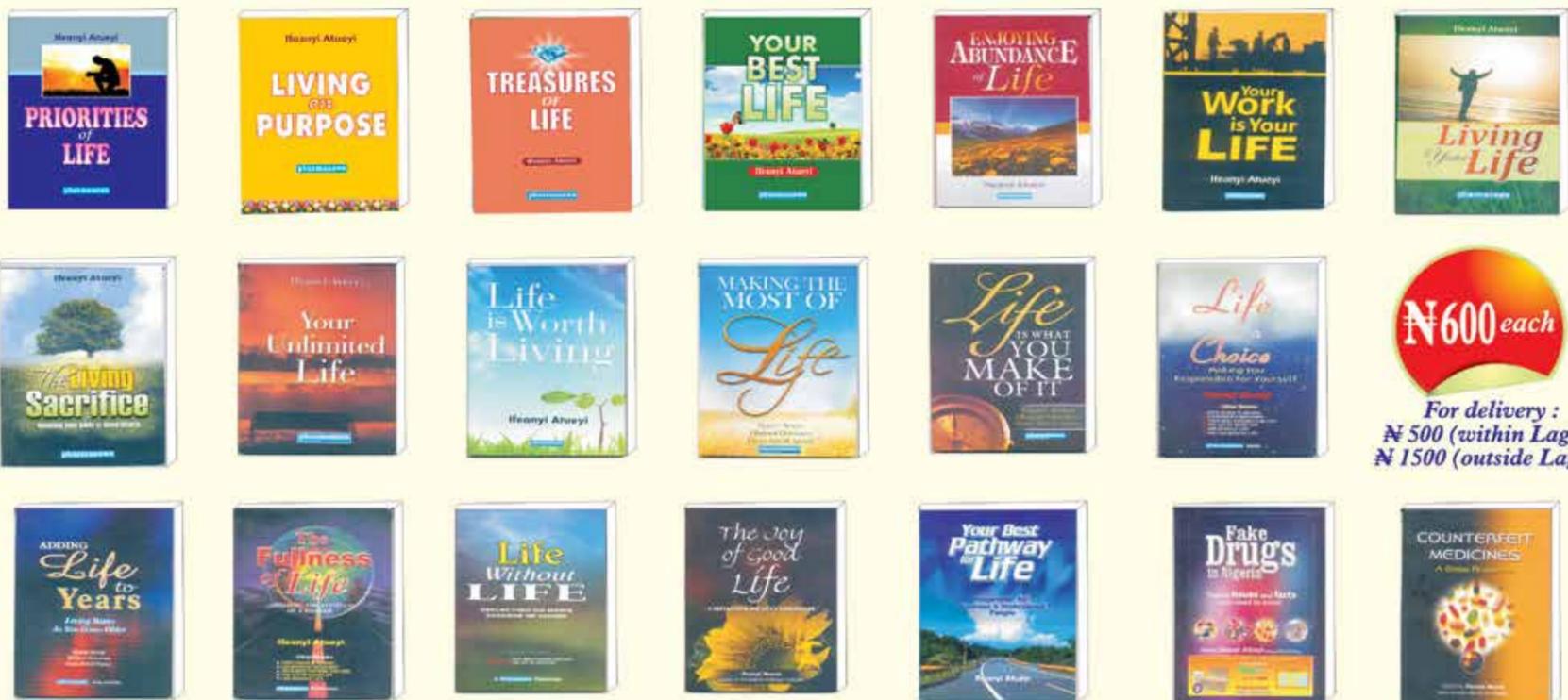
**Daniel Erinne: A Light in the Nick of Time**

In recollecting my primary school days, it is necessary that I make this observation. Over the course of my life, I have noticed a remarkable chain of events that runs all through and which I believe could have only been the handiwork of God Himself. That "chain" specifically refers to my different encounters with a set of people (I call them "life-lifters") whose timely interventions at critical moments in my life influenced my decisions and pathways. Some of these individuals initially appeared to be taking me away from my destiny, but God ultimately used all of them to direct me to my expected end.

The earliest and perhaps the most impactful of these life-lifters was my late uncle, Mr Daniel Erinne, whose timely entrance into my life not only helped to salvage and sustain my educational pursuit but also contributed in shaping my personality and paving way for me to study Pharmacy. Erinne was from my kindred, and a University of Birmingham, UK, graduate of Chemistry (1949). As the first university graduate of my town, Okija, he became a light and was determined to spread that light to others. As God would have it, I became a major beneficiary of this life-changing mission of his.

**continues next edition**

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**Celebrating 41 Years of Uninterrupted Monthly Publication (1979-2020)**

## Advances in management of HIV/AIDS and STDs

continued from page 11

verified case of HIV is from a blood sample taken in 1959 from a man living in Kinshasa in the Democratic Republic of Congo. The sample was retrospectively analysed and HIV detected. Today, the same area is known for having the most genetic diversity in HIV strains in the world, reflecting the number of different times SIV was passed to humans. Many of the first cases of AIDS were recorded there too.

### How HIV is spread

HIV is mostly contracted through unprotected sex or needle sharing. It is transmitted through bodily fluids that include blood, semen, vaginal and rectal fluids, and breast milk. Some of the ways HIV is spread from person to person include: through vaginal or anal sex which is considered the most common route of transmission, especially among men who have sex with men; by sharing needles, syringes, and other items for injection drug use; by sharing tattoo equipment without sterilizing it between uses; during pregnancy, labour, or delivery from a woman to her baby; during breastfeeding; through "pre-mastication," or chewing a baby's food before feeding it to them; through exposure to the blood of someone living with HIV, such as through a needle stick.

It is however pertinent to note that, according to experts, HIV does not spread through skin-to-skin contact, hugging, shaking hands, kissing, air or water, sharing food or drinks, drinking from fountains, tears, or sweat (unless mixed with the blood of a person with HIV), sharing a toilet, towels, or bedding, mosquitoes or other insects.

HIV is a lifelong condition and currently there is no cure, although many scientists are working to find one. However, with medical care, including treatment called antiretroviral therapy, it is possible to manage HIV and live with the virus for many years.

### Stages and symptoms of HIV

HIV infection happens in three stages and without treatment, it gets worse over time and eventually overpowers the body's immune system.

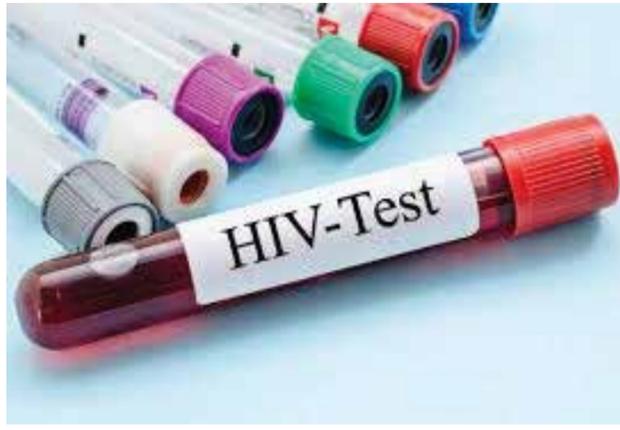
#### First Stage: Acute HIV infection symptoms

Most people do not know right away when they have been infected with HIV but they may have symptoms within two to six weeks after they have contracted the virus. This is when the body's immune system puts up a fight. This stage is called acute retroviral syndrome or primary HIV infection. The symptoms are similar to those of other viral illnesses, and they are often compared to flu. The symptoms typically last a week or two and then go away. Early signs of HIV include headache, fatigue, aching muscles, sore throat, swollen lymph nodes, red rash that does not itch, usually on your torso, and fever.

#### Second stage: Clinical latency symptoms

After the body's immune system loses the battle to HIV, the flu-like symptoms will go away but there is a lot going on inside your body. Doctors call this the asymptomatic period or chronic HIV infection. In human body cells called CD4 T cells coordinate immune system's response. During this stage, untreated HIV will kill CD4 cells and destroy the body's immune system.

If you did not know earlier that you were infected with HIV, you may realise it after you have some symptoms such as being tired all the time, swollen lymph nodes in your neck or groin, fever that lasts more than 10 days, night sweats, weight loss with no obvious reason,



purplish spots on your skin that do not go away, shortness of breath, severe long-lasting diarrhoea, yeast infections in your mouth, throat or vagina, bruises or bleeding that you cannot explain among others. However, HIV can still be treated at this stage but if not treated, it will give way for other diseases.

Many people do not feel symptoms of HIV in the first few months after infection and may

not know that they are infected. Symptoms also depend on your stage. In some people, signs may include influenza-like symptoms, including fever, headache, rash and sore throat, and swollen lymph nodes among others but an HIV test will confirm diagnosis. Medications on the other hand suppress the virus to help one stay healthy, and

prevent the spread. Whereas, with treatment, HIV-positive persons can live normal, healthy lives. However, these first few months are when the virus is most infectious.

As the disease progresses, symptoms will be expanded and more pronounced. These can include swollen lymph nodes, weight loss, fever, diarrhoea and cough. HIV weakens the body's ability to fight other infections,

and without treatment people will become more susceptible to other severe illnesses such as tuberculosis, cryptococcal meningitis, bacterial infections and some cancers including lymphomas and Kaposi's sarcoma.

Diagnosis of HIV uses rapid tests that provide same-day results and can be done at home, although a laboratory test is required to confirm the infection. This early identification greatly improves treatment options and reduces the risk of transmission to other people including sexual or drug-sharing partners. HIV can be diagnosed using simple and affordable rapid diagnostic tests, as well as self-tests. It is important that HIV testing services follow the 5Cs: consent, confidentiality, counselling, correct results and connection with treatment and other services.

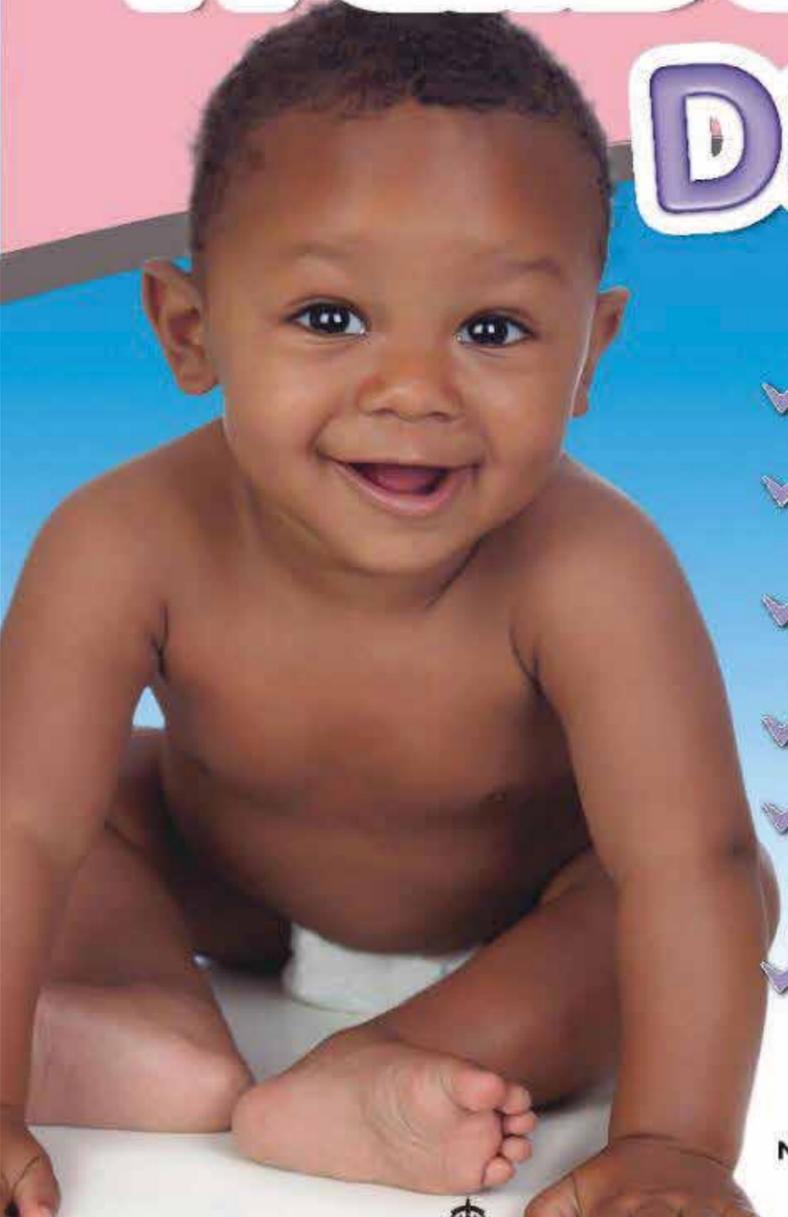
### HIV testing services

The first of the United Nations' 90-90-90 targets to end the HIV epidemic is for 90 per cent of people living with HIV to learn their HIV status. HIV testing is therefore essential to achieving "the first 90".

continued on page 15

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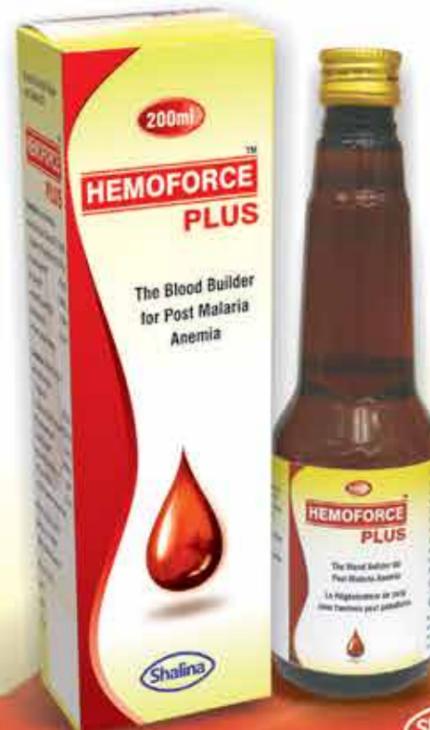
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## Advances in management of HIV/AIDS and STDs

continued from page 13

According to WHO, around 21 per cent of people with HIV are unaware of their infection. The only way to determine a person's HIV status is for them to have an HIV test.

In many countries, critical gaps exist in HIV services, including prevention, testing and treatment. These efforts often fail to reach the people at greatest risk. However, WHO is supporting countries to address gaps in the cascade of prevention, testing and treatment services. Renewed efforts to improve prevention and testing services and high-quality, well-adhered-to treatment and care for all are needed to reach the "fast-track" goals by end of 2020.

The past decade has seen a rapid expansion of HIV testing and treatment services. Innovative approaches have been developed and introduced to expand HIV testing services: low-cost rapid diagnostic tests have enabled testing at clinics, in communities and in homes. Additionally, more lay testers have been trained to help expand access to HIV testing in community settings.

### What are HIV testing services?

HIV testing services include the full range of services that should be provided together with HIV testing and these include: counselling (pre-test information and post-test counselling); linkage to appropriate HIV prevention, treatment and care services, and other clinical and support services; and then coordination with laboratory services to support quality assurance and the delivery of correct results.

All HIV testing services are expected to be provided in line with WHO's essential 5 Cs, which



are: Consent, Confidentiality, Counselling, Correct test results, and Connection/linkage to prevention, care and treatment. Meanwhile, WHO has said it will continue to intensify its support to countries to achieve the 90-90-90 targets for testing, treatment and viral suppression by end of 2020, and to move towards ending AIDS by 2030.

### Tests for HIV

Several different tests can be used to diagnose HIV but healthcare providers determine which test is best for each person. Blood tests are the most common way to diagnose HIV. These tests look for antibodies to the virus that are present in the blood of infected individuals. People exposed to the virus should get tested immediately. If you test positive for the virus, you and your doctor can develop a treatment plan to help fight HIV and ward off complications. Early testing also can alert you to avoid high-risk behaviour that could spread the virus to others. Since it can take from six weeks to six months to develop antibodies to the virus, follow-up tests may be needed.

### Primary tests for diagnosing HIV and AIDS

**ELISA test:** This stands for Enzyme-Linked Immunosorbent Assay that is used to detect HIV infection. If an ELISA test is positive, the Western blot test is usually administered to confirm the diagnosis. If an ELISA test is

negative, but you think you may have HIV, you should be tested again in one to three months. ELISA is quite sensitive in chronic HIV infection, but because antibodies are not produced immediately upon infection, you may test negative during a window of a few weeks to a few months after being infected. Even though your test result may be negative during this window, you may have a high level of the virus and be at risk of transmitting infection.

**Self-testing:** In 2016, WHO launched new guidelines on HIV self-testing and assisted partner notification to reinvigorate the global HIV response. The new guidelines focus on HIV self-testing, where people use oral fluid or blood-based finger-prick self-tests to discover their status in a private and convenient setting. Results are typically ready within 10-20 minutes. Those with reactive self-test results are advised to seek confirmatory tests at health clinics. WHO recommends that these people receive pre-test information and links to post-test counselling, as well as rapid referral to prevention, treatment and care services.

**Saliva tests:** Here, a cotton pad is used to obtain saliva from the inside of your cheek. The pad is placed in a vial and submitted to a laboratory for testing. Results are available in three days. Positive results should be confirmed with a blood test.

**Viral load test:** This test measures the amount of HIV in your blood. Generally, it is used to monitor treatment progress or detect early HIV infection. Three technologies measure HIV viral load in the blood — reverse transcription polymerase chain reaction (RT-PCR), branched DNA (bDNA) and nucleic acid sequence-based amplification (NASBA). The basic principles of these tests are similar. HIV is detected using DNA sequences that bind specifically to those in the virus. It is important to note that results may vary between tests.

**Western blot:** This is a very sensitive blood test used to confirm a positive ELISA test result. Today, it is easier than ever to get tested for HIV

### What's the HIV window period?

As soon as someone contracts HIV, it starts to reproduce in their body. The person's immune system reacts to the antigens (parts of the virus) by producing antibodies (cells that fight the virus). The time between exposure to HIV and when it becomes detectable in the blood is called the HIV window period. Most people develop detectable HIV antibodies within 23 to 90 days after infection.

If a person takes an HIV test during the window period, it's likely they'll receive a negative result. However, they can still transmit the virus to others during this time. If someone thinks they may have been exposed to HIV but tested negative

continued on page 17

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## Advances in management of HIV/AIDS and STDs

continued from page 15

during this time, they should repeat the test in a few months to confirm (the timing depends on the test used). And during that time, they need to use condoms to prevent possibly spreading HIV.

Someone who tests negative during the window might benefit from post-exposure prophylaxis (PEP). This is medication taken after an exposure to prevent getting HIV. PEP needs to be taken as soon as possible after the exposure; it should be taken no later than 72 hours after exposure, but ideally before then. Timing is important when testing for HIV.

### HIV prevention

HIV is fully preventable. For instance, effective antiretroviral treatment (ART) prevents HIV transmission from mother to child during pregnancy, delivery and breastfeeding. Someone who is on antiretroviral therapy and virally suppressed will not pass HIV to their sexual partners. Condoms prevent HIV and other sexually transmitted infections, and prophylaxis use antiretroviral medicines to prevent HIV. Harm reduction (needle syringe programmes and opioid substitution therapy) prevents HIV and other blood-borne infections for people who inject drugs.

Another way to prevent getting HIV is pre-exposure prophylaxis (PrEP). A combination of HIV drugs taken before potential exposure to HIV, PrEP can lower the risk of contracting or spreading HIV when taken consistently.

### HIV treatment

HIV is treated with antiretroviral therapy consisting of one or more medicines. ART does not cure HIV but reduces its replication in the blood, thereby reducing the viral load to an undetectable level. ART enables people living with HIV to lead healthy, productive lives. It also works as an effective prevention, reducing the risk of onward transmission by 96 per cent.

ART should be taken every day throughout the person's life. People can continue with safe and effective ART if they adhere to their treatment. In cases when ART becomes ineffective due to reasons such as lost contact with health care providers and drug stockouts, people will need to switch to other medicines to protect their health.

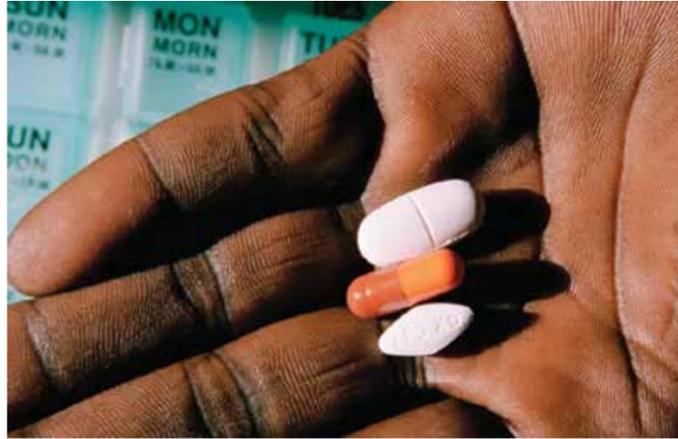
Your doctor can check how many of these cells you have with blood tests. Without treatment, the number of CD4 cells will drop, and you will be more likely to get other infections. Most people don't have symptoms they can see or feel. You may not realize that you're infected and can pass HIV on to others. Someone taking ART might stay in this phase for decades. One can pass the virus on to other people, but it is extremely rare if you take your medicines.

### HIV medications

More than 25 antiretroviral therapy medications are approved to treat HIV. They work to prevent HIV from reproducing and destroying CD4 cells, which help the immune system fight infection. This helps to reduce the risk of developing complications related to HIV, as well as transmitting the virus to others. Antiretroviral medications are grouped into six classes: these are nucleoside reverse transcriptase inhibitors (NRTIs); non-nucleoside reverse transcriptase inhibitors (NNRTIs); protease inhibitors; fusion inhibitors; CCR5 antagonists, also known as entry inhibitors and integrase strand transfer inhibitors.

### Treatment regimens

A healthcare provider will help a person with HIV choose a regimen based on their overall health and personal circumstances. The U.S.



Department of Health and Human Services (HHS), for instance, generally recommends a starting regimen of three HIV medications from at least two of the drug classes. This combination helps prevent HIV from forming resistance to medications. (Resistance means the drug no longer works to treat the virus.)

Many of the antiretroviral medications are combined with others so that a person with HIV typically takes only one or two pills a day. These medications must be taken every day, exactly as prescribed. If they are not taken appropriately, viral resistance can develop, and a new regimen may be needed. Blood testing will help determine if the regimen is working to keep the viral load down and the CD4 count up. If an antiretroviral therapy regimen is not working, the person's healthcare provider will switch them to a different regimen that's more effective.

### Side effects and costs

Side effects of antiretroviral therapy vary and may include nausea, headache, and dizziness. These symptoms are often temporary and disappear with time. Serious side effects can include swelling of the mouth and tongue and liver or kidney damage. If side effects are severe, the medications can be adjusted. Costs for antiretroviral therapy vary according to geographic location. Some pharmaceutical companies have assistance programs to help lower the cost.

### Living with HIV: tips for coping

Several millions of people all over the world are living with HIV. Although it is different for everybody, but with treatment, many can expect to live a long and productive life. The most important thing is to start antiretroviral treatment as soon as possible. By taking medications exactly as prescribed, people living with HIV can keep their viral load low and their immune system strong. It is also important to follow up with a healthcare provider regularly.

Other ways people living with HIV can improve their health include making their health their top priority, fueling their body with a well-balanced diet, exercising regularly, getting plenty of rest, avoiding tobacco and other drugs, reporting any new symptoms to their healthcare provider right away, focusing on their emotional health. They could consider seeing a licensed therapist who is experienced in treating people with HIV, using safer sex practices, talking to their sexual partner(s), and use of condoms every time they have vaginal or anal sex.

### Other Sexually Transmitted Disease (STDs)

HIV/AIDS is not the only sexually transmitted disease. In fact, according to the World Health Organisation, more than 1 million sexually transmitted infections (STIs) are acquired every day

worldwide. In 2016 alone, WHO estimated 376 million new infections. From WHO reports, in that year, about 127 million people contacted an STD called chlamydia, 87 million contracted gonorrhoea, 6.3 million people contracted syphilis and

156 million people contracted trichomoniasis.

Also, studies show that more than 500 million people are living with another form of STD called genital HSV (herpes) and an estimated 300 million women have an HPV infection which is the primary cause of cervical cancer. Similarly, an estimated 240 million people are found to be living with chronic hepatitis B globally, though both HPV and hepatitis B infections are preventable with vaccination.

### Symptoms of STDs in men

It is possible to contract an STD without developing symptoms but some STDs cause obvious symptoms. In men, common symptoms include pain or discomfort during sex or urination; sores, bumps, or rashes on or around the penis, testicles, anus, buttocks, thighs, or mouth; unusual discharge or bleeding from the penis and painful or swollen testicles, among others. However, specific symptoms can vary, depending on the type of STD.

### Symptoms of STDs in women

In many cases, STDs don't cause noticeable symptoms in women. When they do, common STD symptoms in women include pain or discomfort during sex or urination; sores, bumps, or rashes on or around the vagina, anus, buttocks, thighs, or mouth; unusual discharge or bleeding from the vagina; itchiness in or around the vagina. The specific symptoms can vary from one STD to another.

### Chlamydia

This is caused by a certain type of bacteria called chlamydia. Many people with chlamydia have no noticeable or outward symptoms in the early stages. It has also been established that about 90 per cent of women and 70 per cent of men with chlamydia have no symptoms, though it can still cause health problems later. Untreated chlamydia can cause serious complications, so it is important to get regular screenings and talk with your doctor or healthcare provider if you have any concerns.

When symptoms develop, they often include pain or discomfort during sex or urination; green or yellow discharge from the penis or vagina, pain in the lower abdomen. If left untreated, chlamydia can lead to infections of the urethra, prostate gland, or testicles, pelvic inflammatory disease and infertility. Also, if a pregnant woman has untreated chlamydia, she can pass it to her baby during birth and the baby may develop pneumonia, eye infections and blindness.

In some women, the infection can spread to the fallopian tubes, which may cause a condition called pelvic inflammatory disease (PID), a medical emergency associated with fever, severe pelvic pain, nausea and abnormal vaginal bleeding between periods among others. Chlamydia can also infect the rectum. Women may not experience symptoms if they have a chlamydia infection in the rectum. If symptoms of a rectal infection do occur, however, they

may include rectal pain, discharge, or bleeding. Additionally, women can develop a throat infection if they perform oral sex on someone with the infection. Though it's possible to contract it without knowing it, symptoms of a chlamydia infection in your throat include cough, fever, and sore throat.

### Treatment and prevention of chlamydia

Antibiotics can easily treat chlamydia. The surest way for a sexually active person to avoid contracting chlamydia is to use a condom during sexual intercourse. To practise safe sex, it is recommended to use protection with each new partner, get tested regularly for STIs with new partners, avoid having oral sex, or use protection during oral sex, until a partner has been screened for STIs.

### HPV (human papillomavirus)

Human papillomavirus (HPV) is a virus that can be passed from one person to another through intimate skin-to-skin or sexual contact. It is a viral infection that commonly causes skin or mucous membrane growths (warts). There are more than 100 varieties of human papillomavirus (HPV). There are many different strains of the virus. Some are more dangerous than others.

### Symptoms

In most cases, your body's immune system defeats an HPV infection before it creates warts. When warts do appear, they vary in appearance, depending on which kind of HPV is involved, which may include:

**Genital warts:** These appear as flat lesions, small cauliflower-like bumps or tiny stemlike protrusions. In women, genital warts appear mostly on the vulva but can also occur near the anus, on the cervix or in the vagina. In men, genital warts appear on the penis and scrotum or around the anus. Genital warts rarely cause discomfort or pain, though they may itch or feel tender.

**Common warts.** Common warts appear as rough, raised bumps and usually occur on the hands and fingers. In most cases, common warts are simply unsightly, but they can also be painful or susceptible to injury or bleeding.

**Plantar warts.** Plantar warts are hard, grainy growths that usually appear on the heels or balls of your feet. These warts might cause discomfort.

**Flat warts.** Flat warts are flat-topped, slightly raised lesions. They can appear anywhere, but children usually get them on the face and men tend to get them in the beard area. Women tend to get them on the legs.

**Cervical cancer:** Nearly all cervical cancers are caused by HPV infections, but cervical cancer may take 20 years or longer to develop after an HPV infection. The HPV infection and early cervical cancer typically do not cause noticeable symptoms. Getting vaccinated against HPV infection is your best protection from cervical cancer. Because early cervical cancer does not cause symptoms, it is vital that women have regular screening tests to detect any precancerous changes in the cervix that might lead to cancer. Current guidelines recommend that women ages 21 to 29 have a Pap test every three years. Women ages 30 to 65 are advised to continue having a Pap test every three years, or every five years if they also get the HPV DNA test at the same time. Women over 65 can stop testing if they have had three normal Pap tests in a row, or two HPV DNA and Pap tests with no abnormal results.

### Treatment

There is no treatment for HPV. However, HPV infections often clear

continued on page 19

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- Mucosal candidiasis
- Systemic candidiasis
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- Prophylaxis of cryptococcal infection
- Prevention of fungal infection in the immuno compromised (especially, AIDS patients)
- Genital candidial infection
- Fungal Skin infection

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FEVER  
DENTAL PAIN  
POST OPERATIVE PAIN STATES

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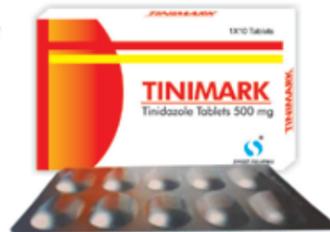
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## Advances in management of HIV/AIDS and STDs

continued from page 17

up on their own. There is also a vaccine available to protect against some of the most dangerous strains, including HPV 16 and HPV 18. If you contract HPV, proper testing and screenings can help your doctor assess and manage your risk of complications.

### Syphilis

Syphilis is another bacterial infection. It often goes unnoticed in its early stages.

### Symptoms

The first symptom to appear is a small round sore, known as a chancre. It can develop on your genitals, anus, or mouth. It is painless but very infectious. Later symptoms of syphilis can include rash, fatigue, fever, headaches, joint pain, weight loss, hair loss. If left untreated, late-stage syphilis can lead to loss of vision, loss of hearing, loss of memory, mental illness, infections of the brain or spinal cord, heart disease and death.

### Treatment

Fortunately, if caught early enough, syphilis is easily treated with antibiotics. However, syphilis infection in a newborn can be fatal. This is why it is important for all pregnant women to be screened for syphilis. The earlier syphilis is diagnosed and treated, the less damage it does.

### Gonorrhoea

Gonorrhoea is another common bacterial STD. It is also known as "the clap."

### Symptoms

Many people with gonorrhoea develop no symptoms. But when present, symptoms may include a white, yellow, beige, or green-coloured discharge from the penis or vagina, pain or discomfort during sex or urination, more frequent urination than usual, itching around the genitals, sore throat. If left untreated, gonorrhoea can lead to infections of the urethra, prostate gland, or testicles, pelvic inflammatory disease and infertility.

It's possible for a mother to pass gonorrhoea onto a newborn during childbirth. When that happens, gonorrhoea can cause serious health problems in the baby. That's why many doctors encourage pregnant women to get tested and treated for potential STDs. Gonorrhoea can usually be treated with antibiotics.

### Treatment

Anyone with gonorrhoea needs treatment to stop the infection from progressing. The treatment typically involves antibiotics. It cannot repair any problems that the infection has already caused, so it is important to receive treatment as soon as possible. If gonorrhoea occurs during pregnancy, it is essential to let the healthcare team know. The infection can pass on to the baby during delivery, so the new-born will usually need antibiotics right away. Some new-borns develop conjunctivitis, and gonorrhoea is one possible cause. The symptoms usually appear 2-4 days after birth and include red eyes, thick pus in the eyes, and swollen eyelids.

### Pubic lice ('crabs')

"Crabs" is another name for pubic lice. They are tiny insects that can take up residence on your pubic hair. Like head lice and body lice, they feed on human blood.

### Symptoms

Common symptoms of pubic lice include itching around the genitals or anus, small pink or red bumps around the genitals or anus, low-grade fever, lack of energy, irritability. You might also be able to see the lice or their tiny white eggs

around the roots of pubic hair. A magnifying glass can help you spot them.

If left untreated, pubic lice can spread to other people through skin-to-skin contact or shared clothing, bedding, or towels. Scratched bites can also become infected. It's best to treat pubic lice infestations immediately.

### Treatment

If you have pubic lice, you can use over-the-counter topical treatments and tweezers to remove them from your body. It's also important to clean your clothes, bedding, towels, and home. Here's more on how to get rid of pubic lice and prevent reinfection.

### Trichomoniasis

Trichomoniasis is also known as "trich." It's caused by a tiny protozoan organism that can be passed from one person to another through genital contact.

### Symptom and treatment

According to the American Centre for Disease Control, less than one-third of people with

trich develop symptoms. When symptoms do develop, they may include discharge from the vagina or penis, burning or itching around the vagina or penis, pain or discomfort during urination or sex, frequent urination. In women, trich-related discharge often has an unpleasant or "fishy" smell. If left untreated, trich can lead to infections of the urethra, pelvic inflammatory disease, infertility among others. Trich can be treated with antibiotics.

### Herpes

Herpes is the shortened name for the herpes simplex virus (HSV). There are two main strains of the virus, HSV-1 and HSV-2. Both can be transmitted sexually. It's a very common STD. HSV-1 primarily causes oral herpes, which is responsible for cold sores. However, HSV-1 can also be passed from one person's mouth to another person's genitals during oral sex. When this happens, HSV-1 can cause genital herpes.

HSV-2 primarily causes genital herpes-The most common symptom of herpes is blistery sores. In the case of genital herpes,

these sores develop on or around the genitals. In oral herpes, they develop on or around the mouth. Herpes sores generally crust over and heal within a few weeks. The first outbreak is usually the most painful. Outbreaks typically become less painful and frequent over time.

If a pregnant woman has herpes, she can potentially pass it to her foetus in the womb or to her new-born infant during childbirth. This so-called congenital herpes can be very dangerous to new-borns. That's why it's beneficial for pregnant women to become aware of their HSV status.

### Treatment

There's no cure for herpes yet. But medications are available to help control outbreaks and alleviate the pain of herpes sores.

**Report compiled by Ranmilowo Ojalumo with additional report from UCSF Health, WHO, Webdr, Health Line, Avert, Mayo Clinic, Medical News Today, American Centers for Disease Control and Prevention and Everyday Health, UNAIDS, National Agency for the Control of AIDS.**

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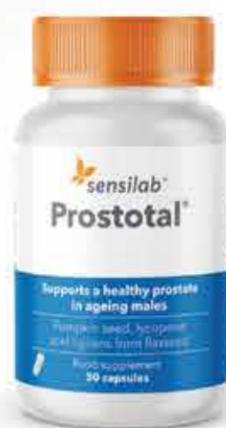
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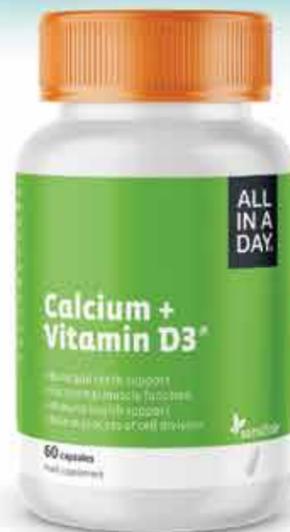
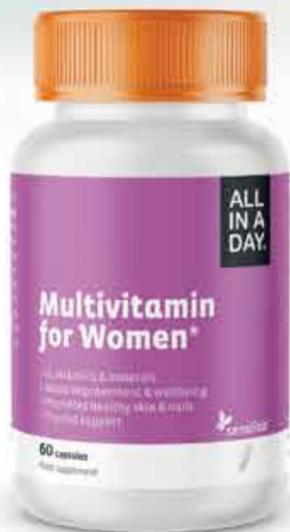
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# UNI JOS faculty of pharmacy reiterates commitment to quality research, drug production

By Ranmilowo Ojalumo

The Dean, Faculty of Pharmaceutical Sciences, University of Jos, Pharm. (Professor) Ikoni Joshua Ogaji, has applauded the efforts of the resource persons in the faculty, saying the faculty is committed to quality research activities that will lead to local production of drugs that will benefit Nigerians.

Ogaji told *Pharmanews* in a recent interview that the faculty's research efforts on snake antivenoms have been on-going, adding that there are several other research efforts going on in the faculty that have attained different levels of success, based on the set objectives.

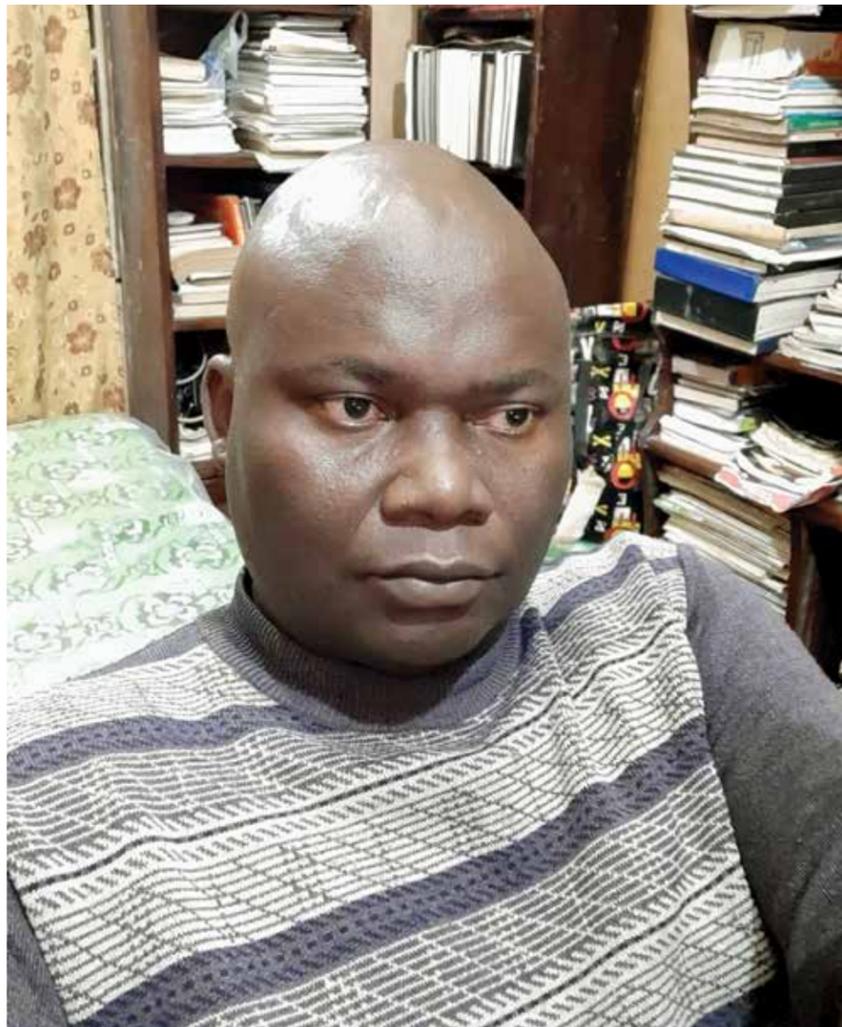
He therefore called on the Nigerian government to make funding of research work in the pharmaceutical sector a top priority, to enhance the development of the sector.

While briefing *Pharmanews* about developments in the faculty, Ogaji said: "In 2018, the University of Jos Faculty of Pharmaceutical Sciences received the approval of the university senate to have two new departments: Department of Pharmaceutics, and Department of Pharmaceutical Microbiology and Biotechnology.

"The faculty currently has seven departments which are the Department of Pharmaceutical Technology and Industrial Pharmacy, Department of Pharmaceutics, Department of Pharmaceutical Microbiology and Biotechnology, Department of Pharmacognosy and Traditional Medicine, Department of Pharmacology, Department of Clinical Pharmacy and Pharmacy Practice, Department of Pharmaceutical Chemistry.

He added that: "All these departments are running postgraduate programmes at master's and PhD levels. The Faculty runs M.Sc and MPhil/PhD in Biotechnology. Our postgraduate programmes have both national (NUC) and international accreditation (HCERES, France). In collaboration with African Resource Center (ARC), the faculty has developed a curriculum for M.Sc. Supply Chain Management and Logistics and is being processed for approval and take-off in 2021.

"The faculty is the first of the faculties of pharmacy that have been graduating pharmacists to get the approval of the National Universities



Pharm. (Prof) Ikoni Joshua Ogaji

Commission (NUC) to run the Doctor of Pharmacy programme (PharmD) in Nigeria. We recognise that Bayero University, Kano, was the first to receive NUC approval to run the PharmD programme in Nigeria and University of Benin, though the pioneer university to run PharmD, attained that status much later.

"The PharmD students of the University of Jos are now in their 300 level. The PharmD conversion programme of the university has been approved by the University Senate and will be advertised in the coming weeks."

While expatiating on the determination of the faculty to conduct quality researches, that will lead to the production of effective locally made drugs capable of boosting the nation's pharmaceutical industry, Ogaji said: "The faculty has not relented in its efforts in teaching and research and we have made modest progress in our various research efforts. Research on anti-fertility agent from local source that gives a cover for about 12 months has been under investigations in the last 20 years or so, and more than ever before, the efforts are rewarding, judging by the data and information gathered

on the drug.

"Research on anti-snake venom and mushroom have been on-going. There are several other research efforts going on in the faculty that have reached different levels of successes, based on the set objectives. Efforts to use locally sourced excipients in our pharmaceuticals are at different levels of success. Several individuals in the faculty have won research grants and obtained patents."

Moreover, as nations of the world continue to make effort to come up with drugs that will effectively combat the COVID-19 pandemic, which has killed over a million people since February, 2020, Ogaji stated that members of the faculty are currently working relentlessly to find a drug candidate for the deadly virus.

According to him: "COVID-19 pandemic is real. It has brought the world and its economy to its knees. Jos is part of the places that were worst hit in Nigeria. Initially we were very comfortable, until the test centres came close to us and the number of positives began to rise. We lost a pharmacist, and his death was said to be due to the infection.

"The Plateau State Governor, Barrister

Simon Lalong needs to be commended for setting up COVID-19 and other infectious diseases committee that is headed by one of our own, Prof. Noel N. Wannang and a team of other pharmacists from the Faculty of Pharmaceutical Sciences, University of Jos.

"This singular effort is in response to and in recognition of the responsibility of the government for the healthcare of its people. The good work coming from the Faculty of Pharmaceutical Sciences, and the unavoidable and undeniable role of herbal medicines in our healthcare system.

"Notwithstanding the existing strike, the faculty has since risen to the occasion and provided quality hand sanitizers for the communities and members of the public to safeguard them against spurious and dangerous articles in the name of hand sanitizers.

"Currently, faculty members are in different research teams trying to find solution from the existing herbal remedies for COVID-19. In addition, molecular docking and other efforts are on-going to rapidly find a drug candidate."

The dean also noted that a team of researchers, drawn largely from the faculty are currently working with the Plateau State Government to address the disease from the drug point of view.

"We are also exploring other areas that can benefit the society with regard to COVID-19. The Faculty of Pharmaceutical Sciences has dedicated, talented and focused scientists that are working hard in teams to use our locally available herbal materials for this and other conditions. The teams are currently working on a number of materials," Ogaji noted.

He therefore called on the Nigerian government to as a matter of urgency begin to vigorously pursue a new strategy that can ensure adequate supply of the nation's healthcare needs locally.

"Nigeria has the requisite human resources that can favourably compete with the best in the world under an enabling environment. The research and working environments of our pharmacists and other scientists should therefore be improved for maximum output," Ogaji said.

# Oyetola, Ehanire, others task pharmacists on technology-driven practice

*continued from front page*

revealed that the conference was being held at a time when the state government was intensifying efforts to, in line with the maxim, "health is wealth", place more priority on the health of the people of the state.

He said the strategy of his administration is to provide adequate, equitable and affordable healthcare as a way of achieving the economic transformation of the state.

"A few months after assuming office, we flagged off the revitalisation of nine general hospitals in the state and 332 Primary Health Centres across the state. More than 280 of these facilities have been commissioned and are in use, while the remaining ones are at various stages of completion," Oyetola disclosed.

In his goodwill message at the conference, the Honourable Minister of Health, Dr Osagie Ehanire, noted that pharmacists have built a reputation of professionalism over the past nine decades, while positively impacting the lives of the Nigerians.

He added that the PSN and its entire members should be commended for their patriotism and commitment in providing Nigerians access to safe and efficacious medicines that are of high quality despite the difficult terrain in which they operate.

Speaking further, the minister, who was represented by the Chief Medical Director, University Teaching Hospital (UCH), Ibadan, Oyo State, Prof. Jesse Abiodun Otegbayo, noted that new technologies such as big data and Artificial Intelligence (AI) are revolutionising the pharmaceutical industry and creating a paradigm shift in pharmaceutical management of clients, ranging from improving patients' interaction with the health system to how they are treated, saying it has been a major challenge for pharmaceutical companies in the country to keep pace.

According to him, for pharmacists, deployment of technology can enable the storage of structured patient records; facilitate electronic prescription, dispensing and administration of medicines; automate the handling of medicines in the supply chain; as well as provide tools for monitoring the efficacy and safety of medicines in use.

"It can therefore improve patients' safety, enable professionals to provide high quality care and help patients make the most of their medicines. From automation that can fill prescriptions to apps that provide drug information, many pharmacists are beginning to embrace technology because of the benefits," he said.

Speaking on the government's effort to improve the healthcare sector, Ehanire noted that in order to achieve its goals, government has pioneered a Strategic Pharmaceutical Sector Development Plan and has been collaborating with the manufacturers group (PMG - MAN) in this regard.

He noted that efforts have also been made to ensure medicine and food security by the present administration in order to protect the nation from threats, such as shortage of essential medicines arising from global crises.

He added: "The society needs to more than ever support the government to come up with and implement realistic ways of



**Mr Benedict Olugboyega Alabi, deputy governor; Mr Gboyega Oyetola, Osun State Governor; Pharm. Mazi Sam Oluabunwa, president, PSN; and Prof. Mbang Femi-Oyewo, chairman, BOF-PSN, at the opening ceremony of the 93rd Annual PSN Conference, held in Osogbo Osun State.**



**A cross-section of the members of the Board of Fellows of the Pharmaceutical Society of Nigeria (PSN), at the conference.**

strengthening the over 120 local industries. This should obviously include the implementation of existing policies on patronage and financing, which will create an enabling environment for the thriving and sustenance of indigenous medicine manufacture."

Speaking in the same vein, the President of the Pharmaceutical Society of Nigeria (PSN), Pharm. (Mazi) Sam Oluabunwa, urged pharmacists in the country to continue to leverage the use of modern technology in delivering excellent pharmaceutical services, adding that the economic challenges brought about by the COVID-19 pandemic would have been worse but for the help of technological innovations.

"COVID-19 was bad news, but as Shakespeare said, "There is something good in everything bad, if only men will be patient to distill it." COVID-19 brought to the centre-stage, the pre-eminent impact and utility of technology. Perhaps the global economic contraction, dislocation and isolation would have been far worse were it not for technology, especially Information

and Communication Technology (ICT)", he said.

In his own contribution, Registrar of the Pharmacists Council of Nigeria (PCN), Pharm. NAE Mohammed, who was represented by Pharm. Peter Iliya, director, Abuja Zonal Office, equally commended the theme of the conference, noting that the conference was strategic as it came at a time the country needed it the most.

The highpoint of the event was the declaration of the official opening of the conference by the executive governor of the state, Mr Gboyega Oyetola, as well as the presentation of awards of excellence to the governor; his deputy, Mr Benedict Olugboyega Alabi; the Ooni of Ile-Ife, Oba Adeyeye Ogunwusi, who was represented by the Sooko Omoniye of Ile-Ife; and the keynote speaker, Prof. Charles Okechukwu Esimone, the vice-chancellor, Nnamdi Azikiwe University, Awka, Anambra State.

The conference had in attendance several other personages from the health care

sector and other walks of life, including: Prof. Mbang Femi-Oyewo, chairman, BOF-PSN; HRM, Oba Olatunde Falabi, the Akire of Ikire; the Ataoja of Osogbo land, Oba Jimoh Oyetunji, who was represented by Chief. Mrs Naimot Ejide Olatimeji, Iyalode of Osogbo; Secretary to Osun State Government, Prince Oluwole Oyebamiji; Dr. Obawale Adebisi, commissioner for culture and tourism; Hon Oluremi Omowaye,

Comm, Works and Transport; Hon. Tajudeen Lawal, Comm, Home Affairs; Hon Yemi Azees Lawal, Comm, Youth and Sports; Dr Rafiu Isamotu, Comm for Health; Mr Akin Oyebola, president, Association of Professional Bodies of Nigeria; Prof. Noel Wannang, the secretary general of the West African Postgraduate College of Pharmacists (WAPCP); Pharm. Yaro Buda, former president, PSN; Pharm. Azubuike Okwor, former president, PSN; Dr O C Ogbonna, president, Nigeria Union of Allied Health Professionals; Pharm. Farouk Saliu, DG, SON; Prof. Rasaq Ayodele Adebayo, vice-president, NMA; Hon. Leke Ogununwa, chairman, Osun Primary Healthcare Board; Pharm. Obi Adigwe, DG, NIPRD; Dr Samuel Adekola, national chairman, ACPN; Dr Kingsley Amibor, national chairman, AHAPN, Pharm. Deji Osinoiki, former national chairman, ACPN; Pharm. Olumide Akintayo, former president, PSN; and Pharm. (Alh.) Olufemi Ismail Adebayo, former national chairman, ACPN, among many others.

# Honey, the liquid gold

By Pharm. Ngozika Okoye  
MSc, MPH, FPCPharm  
(Nigeria Natural Medicine Development Agency)

**H**oney is a sweet liquid made by bees, using the nectar from flowers. According to modern scientific view, the best bee's honey is made by *Apis mellifera* (Family: Apidae). Honey is called *zuma* in Hausa, *mmanu anu* in Igbo and *oyin* in Yoruba.

## Constituents

Honey has a very complex chemical composition that varies according to the botanical source. Honey comes packed with vitamins (such as pyridoxine, riboflavin and niacin), amino acids, trace enzymes, and many important minerals, such as calcium, iron, magnesium, potassium, sodium, chlorine, copper, zinc, iodine and phosphate. Due to its pH ranging from 3.2 and 4.5, it is acidic in nature.

Flavonoids and polyphenols, which act as antioxidants, are two main bioactive molecules present in honey. Honey has high levels of monosaccharides, fructose and glucose, and it contains about 70 to 80 percent sugar, which provides its sweetness. It has been valued as a natural sweetener, long before sugar became widely available in the 16th century.

## Preparations

Honey can be added to tea, coffee, milk, breakfast cereal, snacks or various dessert recipes, as a sweetener or topping.

## Pharmacological actions and medicinal uses

Honey has a long history as a natural medicine. It is used to treat ailments of the internal organs and the skin. The ingredients of honey have been reported to exert antioxidant, antimicrobial, anti-inflammatory, antiproliferative, anticancer, and antimetastatic effects; thus its potential therapeutic role in the treatment of diseases.

Many evidences, according to modern literature, suggest the use of honey in the control and treatment of wounds, diabetes mellitus, cancer, asthma, and also cardiovascular, neurological, and gastrointestinal diseases, like ulcers, constipation and nausea. It is known for its effectiveness in instantly boosting the performance and endurance of athletes, as well reducing muscle fatigue. Honey releases the sleep-promoting chemicals in the body, thereby relieving insomnia.

Honey's wound-healing properties are among its most impressive medicinal qualities. Honey heals superficial burns. Honey helps to heal wounds by providing a protective barrier against germs, naturally absorbing fluids in wounds, helping to prevent the growth of bacteria and fungi. The enzyme in raw honey, glucose oxidase, reacts with body fluids to produce hydrogen peroxide, which acts as a mild antiseptic.

Also, the presence of a bacteria-killing agent, called inhibine, helps to keep open wounds sterile and prevents further infections, gangrene and other complications.



Some studies have revealed that Manuka honey may even be effective in the treatment of MRSA infections.

Honey acts as a demulcent and soothes the throat, relieving it from pain and irritation and

suppressing cough in less time than other cough syrups. As honey is rich in anti-oxidants, it gives proper nutrition to brain cells and keeps it in an optimal state, keeping the memory sharper as one ages.

Honey helps to relieve

hangover by speeding up the liver for the faster oxidation of alcohol. The *International Journal of Food Sciences and Nutrition*, in an edition, stated that honey promotes healthy heart by improving blood circulation and preventing clogging of the arteries.

## Adverse effects

Honey may contain botulinum endospores that cause infant botulism in very young children, a rare but serious type of food poisoning that can result in paralysis.

## Economic uses and potentials

A Nigerian study indicated that honey production is very profitable with a gross income of ₦890 per litre (US \$7) and ₦4888 per man-day (US \$41) on average. Econometric analysis shows that number of hives, labour and fixed assets have significant impact on honey output. Opportunities abound for unemployed graduates and people in rural areas in beekeeping as a source of livelihood.

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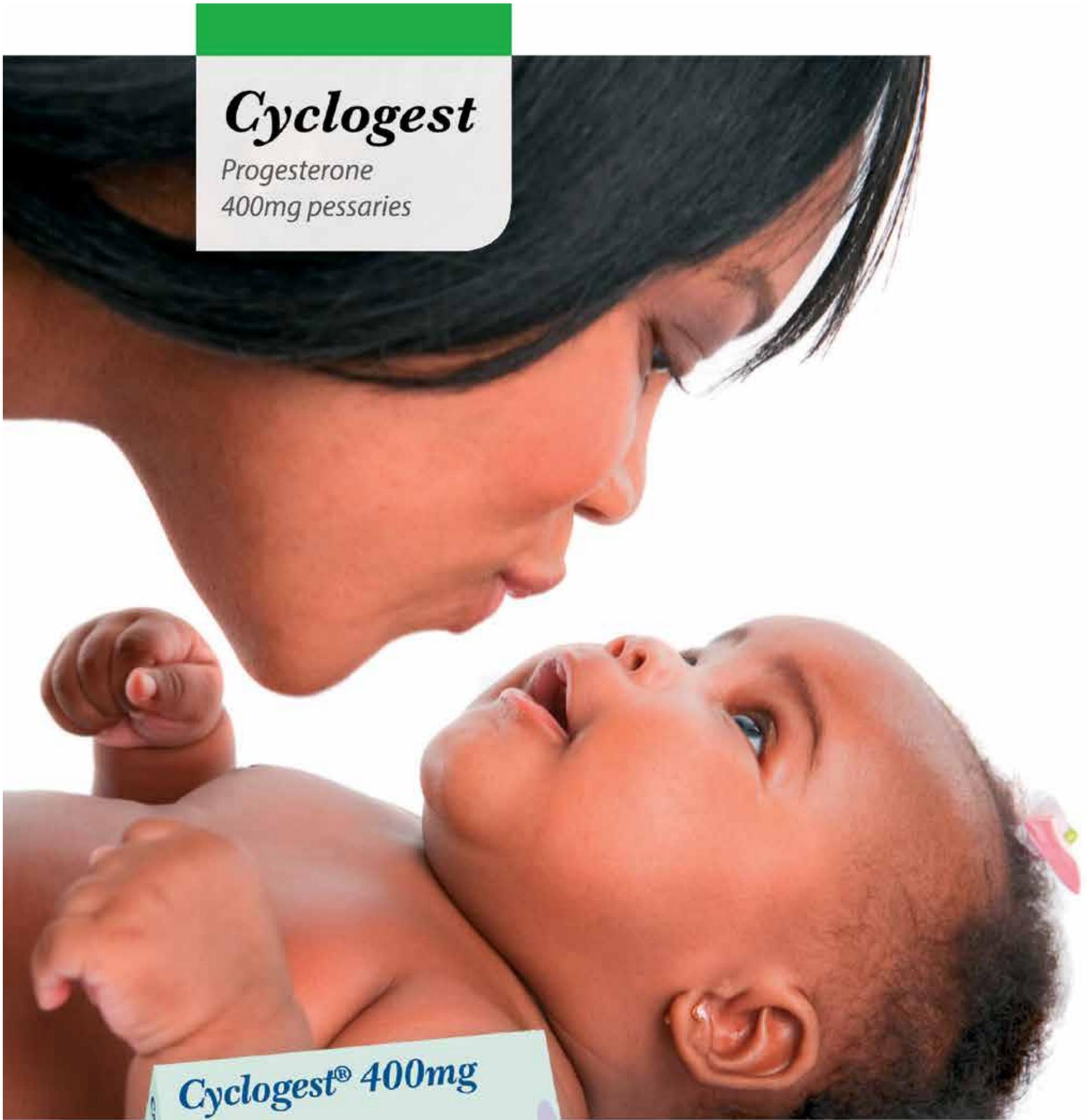
- Low back & joint pain
- Sprain & strain
- Muscular pain
- Myositis, Fibrositis & Sciatica

Pray For Nigeria  
Pray For Nigeria

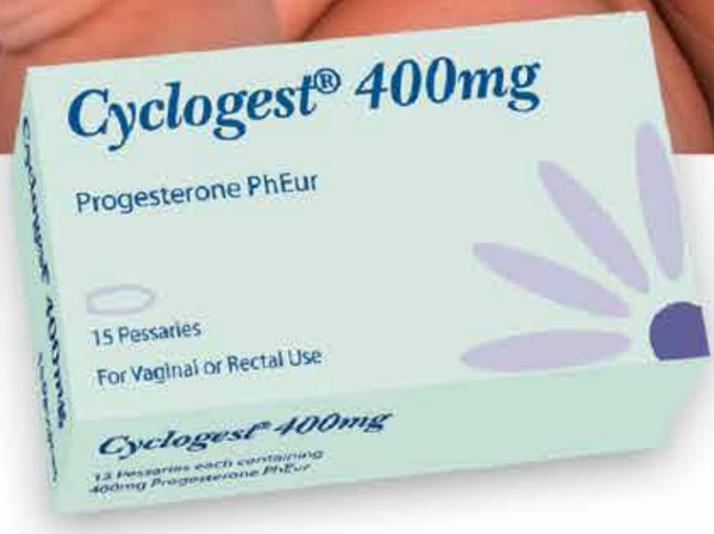


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## Miraflash introduces Miraxim, Fladinir, others - Canvasses consumption of locally manufactured products

As part of efforts to provide quality pharmaceuticals to meet the health needs of Nigerians, Miraflash Nigeria Limited, an indigenous pharmaceutical company, has added four new products to its products portfolio.

The new products are Miraxim 500mg capsule, a brand of Cefuroxime; Mirafix 400mg capsule, a brand of Cefixime; Fladinir 300mg capsule, a brand of Cefdinir; and Miradoxil 500mg capsule, a brand of Cefadroxil. The products came in Alu-Alu perforated packs.

According to the Managing Director and Chief Executive Officer of the company, Pharmacist Moses Oluwalade, the new products were manufactured in Miraflash factory at Magboro, Ogun State Nigeria and introduced in October, 2020.

Speaking with *Pharmanews* on the new products, recently, Oluwalade said Miraflash got approval for the four new products a few months ago, adding that other quality products from the company are also going through registration process and will also be introduced soon.

He said: "Two of the new products have been part of our products, but they now come in new presentations. Before, we used to produce Cefixime dry powder for suspension, which is in 50mg per 5ml by 100ml. We produced Cefixime 100ml. Also, we had 200mg capsule by 10 capsule, but now we are adding the 400mg capsule strength of Cefixime brand.

"As you know, Cefixime is a third generation Cephalosporin and it belongs to Beta-lactam antibiotics. Miraflash specialises in manufacturing of Beta-lactam products. There are first generation, second generation and third generation of Cephalosporin but Mirafix belongs to the third generation; and one unique characteristics of third generation is that they are very active against grand negative microorganisms. Gram-negative microorganisms are the difficult microorganisms that are difficult to treat with common antibiotics; but Cefixime and Fladinir can easily treat those Gram-negative organisms.

Speaking further on the new products, Pharm. Oluwalade noted that Fladinir, a brand of Cefdinir, is a relatively new molecule in the Nigerian market, stressing that there are hardly up to three brands of Cefdinir in Nigeria, making it invulnerable to resistance.

He explained: "Our brand is called Fladinir and it comes in 300mg. The capsule is out but the suspension is still under registration.

"Another new product from Miraflash is Miraxim. It is our brand of Cefuroxime and the new one is in 500mg. Before, we had 250mg capsule and 125mg dry powder and 250mg suspension. But with the introduction of the 500mg, we now have all ranges of Cefuroxime. We now have four presentations of the same molecule.

"Cefuroxime is a unique molecule that has been tested with wide spectrum of activity; it can be used by both children and adults. Cefuroxime belongs to the second generation of cephalosporin and they are very active against a wide range of microorganisms and can be used for empirical treatment of infection."

According to the Miraflash boss, the company's fourth new product, Miradoxil, is an old molecule but relatively uncommon in Nigeria, adding that its uncommonness will make resistance to it will be very rare.

Ranmilowo Ojalumo

Oluwalade further said: "The four new products came in Alu-Alu form; whereas, the previous products were in Alu-PVC. Alu-Alu is an advanced technology over Alu-PVC. Alu-Alu is also perforated to make dosage simpler. For instance, if you are to take a product twice a day and you will be going out, Alu-Alu is perforated in a way that will enable you to easily cut the dosage you need and keep in your pocket rather than taking out the whole packet or sachet, which you may end up misplacing. Alu-Alu perforation simplifies compliance to the dosage."

He reiterated that the Nigerian pharmaceutical industry is poised to record greater achievements if the government can provide the needed support, stressing that there is a lot of potentials in the industry.

He said: "For example, we import the raw materials that we are using to produce drugs in Nigeria at 5 per cent duty; whereas, some finished pharmaceutical products are being imported into Nigeria at zero duty, which is not encouraging to manufacturers. This development makes it cheaper and easier to import finished products rather than bringing the raw materials that will be used to produce here in Nigeria. This alone will make the price of the drugs manufactured in Nigeria to be higher than the imported ones simply because there is already an extra cost on it.

"Mind you, those countries where the finished imported drugs are produced have stable

power. They don't spend money on diesel; whereas, here in Nigeria, we spend huge amount of money on generator and fuelling. In those countries, there are good roads; unlike Nigeria where the roads are bad. Cost of capital in those countries is very low; unlike Nigeria where cost of capital is very high.

"Despite all the challenges we are facing, I still want to encourage my colleagues that are into pharmaceutical manufacturing to be optimistic for a better tomorrow. I believe with more efforts, we can make Nigeria great again. There is no other way to go than to embrace locally manufactured products.

"I want to urge

pharmacists and medical practitioners to please encourage patronage of locally manufactured products. Let us believe in locally manufactured products. Let us look inwards, and that will save us a lot of foreign exchange. By encouraging local manufacturing, we are also creating more employment. COVID-19 has taught us lessons, with a signal that we need to improve our manufacturing ability, so that we can be self-sufficient. Nigerians should also change their consuming behaviour. Let's patronise locally-made products", the Miraflash boss said.

The Miraflash MD also refuted



Pharm. Moses Oluwalade MD and ECO Miraflash Nigeria Ltd

the notion that imported products are better than locally-made ones, noting that all products that are imported into the country are registered by the National Agency for Food and Drug Administration and Control (NAFDAC), just as all products that are manufactured locally are being registered by the agency.

He added that both locally made drugs and the imported ones are subjected to the same standard before final registration at NAFDAC, stressing that as long as a drug is registered by NAFDAC, such a drug is of high potency.

## Onyechi wins 2020 May & Baker Professional Service Award

continued from page 7

community pharmacy practice.

Regarding the annual award, Okafor said: "This award remains one of the good legacies which I inherited, and hope to bequeath to my successor. It is a major social responsibility initiative that has come to stay and that we are proud of as an organisation, as its quality has continued to rise as great men and women in the profession continue to identify with it."

In his address at the award presentation, the President, PSN, Pharm. Mazi Sam Oluabunwa, appreciated May & Baker for sustaining the professional service award for 16 years, adding that the award has continued to advance in popularity.

Over the years, the May & Baker Professional Service Award in Pharmacy has become a flagship professional award in the pharmaceutical landscape in Nigeria, as it rewards excellence



Pharm. Obi Emaibe, head of marketing, May & Baker Nigeria Plc, who represented the Managing Director, Mr Nnamdi Okafor, by Pharm. Ignatius Anukwu, national chairman, Association of Industrial Pharmacists of Nigeria (NAIP), who represented Sir Iyke Onyechi, and Pharm. Mazi Sam Oluabunwa, president, PSN, during the presentation of a Cheque to the winner, May & Baker Professional Service Award, Sir Iyke Onyechi, managing director, Alpha Pharmacy and Stores.

and innovation in the practice of pharmacy in Nigeria.

The award, which started in 2004, has produced 16 winners, which include: Pharm. (Prof.) Augustine Okhamafe, faculty of pharmacy, UNIBEN; Pharm. (Prof.) H. B. Coker, UNILAG; Pharm. (Dr) Abiodun Falodun, UNIBEN; Pharm. (Sir) Ifeanyi Atueyi, publisher, Pharmanews; Pharm. (Prof.) Michael Umale Adiukwu, UNN; Pharm. (Prof.) K T Jaiyeoba, Ajayi Crowther University; Pharm. (Dr) Nkechi

Anyanwu, FMC, Owerri; Pharm. Adaeze Omaliko, PSN, Onitsha; Pharm. (Prof.) Mbang Femi-Oyewo, Chairman, BOF; Pharm. (Mrs) Margaret Obono, National Orthopaedic Hospital, Igbobi, Pharm. (Mrs) Folashade Lawal, Victory Drug Pharmacy, Lagos; Pharm. (Prof.) Abiodun Odukoya, UNILAG; Pharm. (Prof.) Cyril Osifo, UNIBEN; Pharm. (Prof.) Peace Chinedum Babalola, Chrisland University; Prof. Wilson Oyekigho Erhun, OAU, and Sir. Ike Onyechi, Alpha Pharmacy.

Celebrating 41 Years of Uninterrupted Monthly Publication (1979-2020)

## Developing resilience in difficult times

By Pharm. Sesan Kareem

Year 2020 has been an unprecedented year for a myriad of individuals and organisations. The COVID-19 pandemic has severely affected the socio-economic landscape of the world in general and Nigeria in particular. However, despite the negative impacts of the pandemic on the wellbeing of people and businesses, we are still provided with the rare opportunity to develop a resilient mindset in order to tackle the big and small challenges we are going to face in our personal and professional lives.

By the way, the essence of life itself is to overcome challenges and solve problems. In view of this, below are three strategies you can adopt to develop a resilient mindset:

### 1. Develop a positive perspective

Perspective matters. The way you see things shape your state of mind. Your mindset is your habitual way of thinking that influences your emotion, which determines your behaviour. To overcome difficult times, setbacks or life's challenges, you must strive to see the cup half-full instead of half-empty.

Three factors shape your perspective: **meaning, mindset and motivation.** The meaning you give to life's events or experiences determines your state of mind. Are your current challenges the beginning of your business or the end? Is God punishing you or preparing you for greater things in the future? Your answers to the above questions determine your meaning.

Your **mindset** determines your

motivation. **Motivation** is simply the motive to take action, the reason to believe more in yourself. For clarity purpose, if you see the current challenges you are facing as a learning opportunity to re-strategise, develop your leadership acumen and create a better culture in your life or business, you will develop a positive mindset, which in turn will determine the actions you will take and not take for you to survive this period and thrive moving forward.

Let me ask you these questions: What is your attitude towards your current challenges in your business or career? What meaning do you attach to your current experience? What are your habitual thoughts about what is happening in our world? What reasons will inspire you to keep on keeping on and finding a way to turn your setback to a comeback?

### 2. Develop a positive attitude

Attitude is everything. To turn things around in difficult times, you must do things differently in your life and business. To do things differently, you must develop a positive attitude. Attitude can be defined as the way people think and feel that determines their behaviour.

Behaviour is just a reflection of a belief system. How people act is a reflection of how what they think and how they think. To grow, thrive and succeed, despite turbulences, as an individual or organisation, requires new ways of thinking about problems, value creation, customer service, marketing, operations, structures and innovation.

It is also important to work on your emotions to feel good,

inspired, motivated, energised and empowered, regardless of the challenges you are facing right now in your finance, career, health, relationship or business. More often than not, when things are tough, people feel bad, frustrated, overwhelmed, disempowered and lost. We all have a choice, and it is a mental choice to be in charge of our emotions, or allow events, circumstances or situations to control our thoughts, feelings and actions.

### 3. Develop positive habits

Habits form results. It is a truism that if you can change your habits, you can transform your results. Human beings are habitual in nature. We are what we do on a daily basis. Habits are daily routine you consciously or unconsciously engage in.

We all have habits; these habits determine the quality of our health, relationship, happiness, career and finances. It is easy to form negative habits in thinking, feeling and behaviour. However, it is difficult to stop negative habits, especially when they have become a second nature.

On the flip side, it is quite difficult to form positive habits of thoughts, emotions and character because it requires discipline to keep them. Below are some habits you must develop in order to experience peace, joy, love and abundance, regardless of what life throws at you.

\* **Meditation:** It calms your body, mind and soul, so that you can perform life functions optimally.

\* **Visualisation:** It helps you to have a clear vision of who you want to be, what you want to do and have.



For questions or comments, mail or text sesankareem2@gmail.com/08072983163

\* **Affirmation:** it strengthens your belief systems.

\* **Gratitude:** It focuses your attention on the beautiful things in your life.

\* **Exercise:** It helps you to develop a healthy body and a beautiful mind.

\* **Goal setting:** it gives you direction on where you are going and what to focus on.

\* **Learning:** It enables you to develop the skills and know-how you need to excel in life.

**ACTION PLAN:** How can you inculcate these habits into your daily routine? What ways can you improve on these habits if you have already developed them? Which of these habits have you mastered? How can you develop the right perspective and attitude towards life?

**AFFIRMATION:** I am resilient. I am a problem solver. I am blessed and highly favoured.

*As a coach, trainer, strategist, speaker and management consultant, Sesan Kareem helps individuals and business entities to develop the belief system and motivation they need in order to succeed, excel and thrive in our ever-changing world.*

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**CONTRAINDICATIONS:**  
Hypersensitivity to paracetamol or any of the other ingredients/components of the product. Severe and acute hepatic impairment.

**SPECIAL WARNING:**  
This preparation contains paracetamol. Do not take any other paracetamol-containing medicines at the same time.

**USE IN PREGNANCY/ LACTATION:**  
Considered to be the analgesic of choice in pregnant patients. Although it crosses placenta, Acetaminophen is considered to be safe in normal therapeutic doses for short-term use as a minor analgesic/antipyretic in pregnancy.

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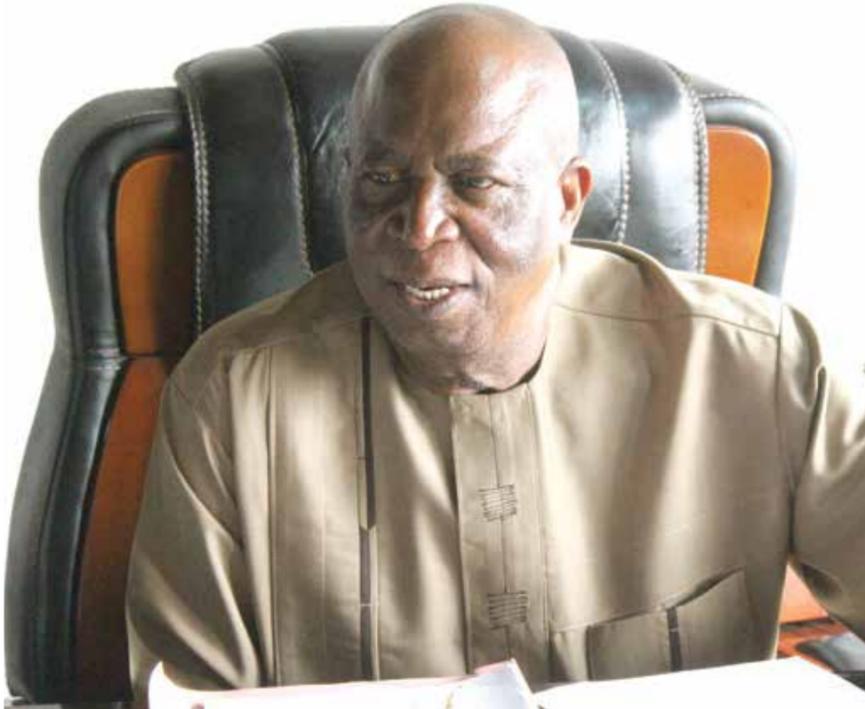
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Affordable pharmaceuticals

# Chairing Pharmacy Tower committee my most challenging PSN task – Nwaiwu

By Moses Dike



Pharm. (Dr) John Nwaiwu

**A**t 71, Pharm. (Dr) John Nwaiwu sits at the helm of affairs of Lagos-based JB Pharmaceuticals Limited, a fast-growing pharmaceutical company he founded after a very successful career at the Nigerian Customs Service, where he retired as an assistant comptroller-general of customs. In this exclusive interview, Nwaiwu, who was also a former pharmacy lecturer at the University of Nigeria, Nsukka (UNN), recounts his early years, his professional exploits in public and private spheres, and his views about the COVID-19 pandemic. Excerpts:

**It is our pleasure to feature you in this edition of our "Senior Citizen of the Month" interview series. Kindly tell us about your background and early life.**

I am from Onichi in Ikeduru Local Government Area of Imo State. I started my elementary school at Christ the King School, Aba, Abia State. So I am an Aba man. From there, I went to Trinity High School, Oguta, for my secondary education. I did my A levels at St Patrick's College, Calabar - although the war disrupted our studies. I travelled abroad after the war because the conditions in the then Biafra were not conducive enough for anyone to study, as the universities had been destroyed. So I left the country and went to the Philippines where I studied at the University of Philippines and obtained my first degree in Pharmacy.

After this, I proceeded to London, and soon obtained my doctorate degree in Pharmacognosy at the University of London. On coming back, I was employed at the University of Nigeria (UNN), Nsukka, in the Faculty of Pharmaceutical Sciences. I rose from the position of lecturer 2 to senior lecturer. From there, I found myself at the Nigerian Customs Service.

**What factors or personalities would you say helped to shape your values and principles in life?**

In our early days, around the early 1960s, our parents were strict disciplinarians. They were so strict. Aba in those days used to be a closed society and parents used to compete among themselves trying to see whose child was doing better and all that. This helped to influence us as children those days and educational competition was healthy. There was no rancour at

all. That made all of us come close together and we knew ourselves. We shared a lot together and each person influenced the other. There was competition in the areas of mathematics, sciences and in fact, football. The peer group had a great influence on us.

**How did you come about the choice of Pharmacy as a profession and how has this choice affected your personality? Did you have role models who influenced your choice?**

As I said before, Aba was a closed society in those days and there was healthy academic rivalry among young chaps. There was one Rufus Obi Pharmacy in Aba in those days. He was the only pharmacist around, apart from Klinkland Chemist in Aba, and we admired him a lot. This shaped our thinking towards Medicine and healthcare delivery.

If you were playing football for example and sustained injury, the person would be taken to the local pharmacy shop or medicine shop to be attended to. They were the doctors we knew those days. So those things made us to aspire towards healthcare delivery. This motivated some of us to study Pharmacy, some Medicine, and some other medical sciences. We still relate even till today.

**You had a very successful career at the Nigerian Customs Service. At what point did you veer from mainstream pharmacy practice and did your training as a pharmacist contribute to this enviable career in the customs service?**

I was a senior lecturer at the Faculty of Pharmaceutical Sciences, University of Nigeria, Nsukka (UNN). Then, I used to move around and one day, I ran into

a group of people and they were messing with this idea of drugs. At that time, the Nigerian Customs Service was in charge of drug interdiction. I fell into an argument with them about what hard drugs were. They didn't know which one was which. I did Pharmacognosy and I was really pained that some people were just mixing up things.

To cut the long story short, somebody came and challenged me to join the Customs Service if I felt I knew better about drugs. I resisted the idea because, to me, joining the Customs Service was not part of my plans; but my in-law persisted that I should give it a trial. So, I took transfer of service to the Nigerian Customs Service on experimental basis. I came to the Ikeja training school after which I was sent to Defence College, Jaji, on leadership training.

At Jaji, the issue of discipline came up again. I didn't know that the army was a highly disciplined unit, such that if you were just walking across the road close to the parade ground, you must march or get punished. That inculcated some extra discipline in us and it was very good. After my training, I came to join my colleagues in the customs service and because of my training as a pharmacist, I was in the department of drug interdiction.

Being in the department of drug interdiction at that time at the Nigerian Custom Service, took us to almost all parts of the world, discussing drug interdiction and the knowledge of drugs. At one of the conferences for heads of national drug agencies in Vienna, Austria, when the issue of Nigeria came up, Americans were disturbed and wanted to give some help to Nigeria in the fight against illicit drugs but they had issues with the Nigerian government's agency to liaise with. They didn't know whether to relate with the Ministry of Health or the Customs Service and so on. I was there representing Customs Service.

When I came back to Nigeria, the then head of state decided that Nigeria should have a drug enforcement agency. Eventually, the then Attorney General of the Federation was asked to put it down in a legal framework. He now drafted it as the National Drug Law Enforcement Agency (NDLEA) and it was created under the Ministry of Justice. That was how NDLEA ended up in the Ministry of Justice. The Nigerian Police was there asking for it, the Nigerian Customs Service was there asking for it, the Ministry of Health was also asking for it. But the Attorney General was a legal man and was very influential those days.

That was how the NDLEA was created under the Ministry of Justice. It was justified and they have been doing very well since that time because whatever offence you commit, you still have to go through the law. However, when the agency was moved to the Ministry of Justice, I found out that my potentials and training as a pharmacist were no more fully utilised, so I got engaged in other areas.

What guided me while I was there is that discipline that the pharmacy profession inculcates in you. Every pharmacist is a disciplined person; and I need to make this point, if you are not disciplined, you cannot be a pharmacist. For example, if they ask you to add 30 grams of a particular molecule in drug formulation, if you add 35 grams, somebody is dead. It takes a lot of discipline to be a pharmacist and it is very important.

Pharmacists are supposed to be highly disciplined people.

**Not many pharmacists who rose to such an outstanding height in public service are able to also achieve giant strides in core pharmacy business like you have done. How were you able to manage these two rungs of the ladder?**

When I retired from Nigerian Customs Service, I told myself that I couldn't do any other thing apart from Pharmacy. That is my profession. A lot of people wanted me to go into politics. So I stayed focused on what I wanted to do and stayed away from politics. So, when I started pharmaceutical business, I brought that same discipline to bear on our operations. That is responsible for the modest achievements we have recorded so far in our business

**With your experience at JB Pharmaceuticals Limited, what would you say are the core issues affecting the pharmaceutical industry in Nigeria and how can these issues be sorted out?**

Thank you for this question. Pharmacy practice, whether you are into manufacturing, importation or wholesale, has something to do with importation. If you are manufacturing, you will have to import the machineries, the raw materials and so on. If you are into wholesale, you still have to import the finished products and when the exchange rate continues to dance like a yoyo, you are finished as a businessman.

That is the problem we have in Pharmacy today. Here, the exchange rate is constantly changing, without reasons. It is difficult to practise effectively as a result of these fluctuations. It's difficult to make business decisions and projections. So, irrespective of whether you are importing or manufacturing, the exchange rate is a very important thing. The inconsistency in government fiscal policy is a problem. Today, they tell you this product has a 10 per cent waiver, tomorrow they tell you it's now 20 per cent and so on.

An entrepreneur must have, at least, a five-year development plan and when government policy is not steady, it's difficult to make business decisions and plans. Some people believe that this era of COVID-19 is really favouring the pharmaceutical industry, but it's not true. This is because seaports are closed at this time. Although, the curfew is relaxed now and people are being allowed to move around, the seaports are closed. Meanwhile people's goods are there accumulating demurrage. There are lot of inconsistencies in such things as import adjustment tax, import duty and other import related policies.

Again, we must speak with one voice in our profession, whether you are an importer, manufacturer, academic pharmacist, community pharmacist and so on. All of us must be together, if we must forge ahead. Once we begin to have disparity and misunderstanding, problems will come in.

We are able to achieve the much we are achieving now because we have a united front and we speak to government with one voice.

**Kindly tell us about some of your positions of service to the pharmacy profession and which of these do you consider most**

*continued on page 42*

# Season's Greetings

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# Nigerian pharma industry too porous, fragmented – MD, Reals Pharmaceuticals

By Patrick Iwelunmor



**Pharm. Ade Popoola**

**P**harm. Ade Popoola, managing director of Reals Pharmaceuticals, is a Fellow of the Pharmaceutical Society of Nigeria. A 1983 graduate of Pharmacy, he was formerly an area manager at Roche (Nigeria) Limited (1990-1992) before becoming sales and marketing manager at Jagal Pharma Limited (1992-1994) and then operations manager, also at Jagal Pharma (1994-1995), from where he resigned to set up Reals Pharmaceuticals.

In this exclusive interview with **Pharmanews**, Popoola reckons that the Pharmacy Tower project remains one of the best efforts to have ever come from the pharmacy family in Nigeria, adding that it would benefit the industry in no small measure. He also speaks on sundry issues relating to the pharmaceutical industry in Nigeria and advises young pharmacists to delay gratification while focusing on actualising their lofty dreams of excelling in their chosen paths. Excerpts:

## What is the vision driving Reals Pharmaceuticals?

Our vision is to be a foremost pharmaceutical company with the most satisfied stakeholders, while not forgetting the fact that we want to make affordable products available to the populace.

## Talking about the pharmacy industry in Nigeria, what would you say is the greatest challenge facing the industry?

Number one is low barrier to entry. Anyone that has five million plus can say he wants to start a pharmaceutical business. It has now become a decimated industry; we are fragmented and this has made products not to be profitable. It has resulted in low profitability.

There are so many people doing the same thing, and so, we are all trying to come out from the same door. When so many people are trying to come out from the same door, what you will get is chaos, leading to crash in prices.

Once you have too many registered brands of the same chemical entity, they will only compete on price and not on

quality. They will all claim to have NAFDAC number. And so, most times, the profit that comes to us becomes very low because the low barrier to entry has caused everybody to be a player to the point that everyone that has a shop is both a player and an importer.

The issue of our porous ports is another challenge, as anybody can bring in anything. Retailers are importers; wholesalers are importers; distributors are importers. So, the trend has made the market to be unduly crowded. In the prevailing circumstance, it is only those who can distinguish themselves through marketing that can be outstanding.

## Many pharmacists have bemoaned the unstable exchange rate in Nigeria as one of the factors militating against the pharmaceutical industry. Do you share such sentiment?

I share their pain. In fact, I will start with the non-availability of forex. It has to be available before we can even talk of exchange rate. It is not even available. Instability means that everyone is buying at fluctuating rates. But

in my own case, it is non-availability.

Government is trying to do something to make forex available to those in the production of essential commodities, just like those of us in the pharmaceutical industry. Instability is a major challenge but non-availability is worse by my own reckoning.

## What would you say is the experience of Reals Pharmaceuticals regarding the COVID-19 pandemic?

COVID-19 has had a positive impact on the pharmaceutical industry because, without drugs, we are all dead on arrival. It gave us the opportunity to bring our products to the forefront.

During that period, most hospitals closed down and could not operate. But for the pharmaceutical industry which made drugs available, the situation could have been more catastrophic.

COVID-19 helped our business to scale up a bit. However, we need to up our game and thank God that the Federal Government is making funds available to the industry through the health intervention fund under the auspices of the Central Bank of Nigeria.

High cost of funding (loan) is another huge challenge at up to 25 per cent interest. We must be able to sort this out. Thank God, the federal government has given us a single digit interest rate that would enable

us improve our operations and make drugs available to the populace.

## Do you manufacture your products locally or import them?

We are running a hybrid company. About 35 per cent of our products are locally manufactured while 65 per cent are imported. We manufacture through a third party and we are doing very well in that regard.

## To what extent do you think the Pharmacy Tower project will benefit the pharmacy family in Nigeria?

Number one, it would benefit the pharmacy family financially because it will generate enough funds to enable us do the things we are supposed to do. Number two, the image of pharmacy will be enhanced. That land has been there for close to 40 years. For the project to be brought up, it is just like removing a reproach from the pharmacy family in Nigeria. Simply put, it will benefit us commercially and image-wise.

If other professions can have their own houses, Pharmacy, the oldest profession in Nigeria, should have its own. The tenure of Mazi Sam Oluwabunwa will be continually applauded and remembered because the response of people to the project has been awesome and very encouraging. As a member of the fundraising committee, I am highly impressed.

## What is your candid advice for young and upcoming pharmacists?

They must understand that everything in life has time. They should also apply the principle of deferred gratification in whatsoever they are doing. This means that, if they can be patient and work hard, they will surely get to whatever height they are willing to get to in life.

It also implies that there is no short-cut to success in life. It is only God that can open a door, which no man can shut. When it is your time, God will open that door. You don't need to struggle.

You must have heard about the story of the two Nigerian young men who created Paystack. Their initiative has been bought to the tune of 200 million dollars. It is only God that can open such a door. As it stands now, they are financially bigger than three Nigerian banks. It can only be God.

When you do what you know how best consistently, continuously and without cutting corners, you will surely get there. How many pharmaceutical companies in Nigeria are worth 200 million dollars? Once you are close to God, all things are possible. Don't allow peer pressure to push you into things you should not do. And remember not to compare yourself with others.

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## Innovations in cleanroom equipment

By Fozi Alkailani

Over the last few years, several small and big advancements and innovations have taken place in cleanroom technology that pharmaceutical and biotech companies can take advantage of to get the most out of their cleanroom equipment. While Fabtech offers all these innovations as standard execution, their benefits are not commonly known. Here is a list of crucial innovations every pharmaceutical and biotech company should know about.

### Energy efficient fans and motors

The definitive advantages of fans and motors with EC technology, as compared to conventional

asynchronous motors, lies in their significantly higher efficiency of up to 90 per cent, as opposed to 20-70 per cent with AC motors. This ensures a better use of primary energy, less heat and a longer service life.

With EC technology you can

save up to 30 per cent energy on average. EC technology is a unique, future proof technology that can be monitored centrally via a building management system, ensuring no outside manipulations and errors. It has minimal noise emissions and can be used anywhere in the world, due to wide voltage input range. It

is designed for velocities between 0 - 1600 cfm, but usage scales up or down depending on the requirement. This is particularly relevant when filters get old and more velocity is needed to increase the lifespan of the HEPA filter.

### PLCs and HMIs used in custom cleanroom equipment

Integrating a human machine interface (HMI) and programmable logic controller (PLC) provides a lean automation solution for cleanroom equipment. A proven, powerful method to boost efficiencies in production processes, it increases productivity, reliability, and efficiency. Combining visualisation and

control means reduces machine electrical construction costs by eliminating components and wiring. It also minimises after sales support costs and improves operations by centralising remote access and administration.

### Gel sealed HEPA/ULPA filters

The use of gel to seal HEPA filters to housings holding frames and grids is an increasingly popular option. Gel materials are soft, and making them the optimal choice to seal filter installations easily. They require lower clamping pressure as compared to typical foam gasket systems.



Pharma  
Engineering

with Fozi Alkailani

fozi.alkailani@fabtechnologies.com  
Tel: 09077753625



**Mist showers**  
These contamination control systems are for the protection of the operator's respiratory system from inhalation hazards during de-gowning. They can be used at de-gowning/exit points in facilities where highly potent molecules are manufactured or used as raw materials. When the operator removes their protective clothing (PPE) they also take off the primary personal protection (respirator) at the same time.

The mist shower reduces possible re-suspension of hazardous particulates in the operator's breathing zone and contamination into the de-gowning area. It works by gently wetting the surface of the operator's protective gown with a fine water mist, causing the powder to stick to the surface instead of becoming airborne. For the equipment to be effective, the operator must follow correct misting procedures and the facility's de-gowning procedure. The mist shower's effectiveness at wetting particulates is dependent upon misting cycle duration time, the physical and chemical properties of the particulates, operator technique while misting, as well as the material and design on the protective garments.

**Online sampling booth**  
This game-changing application involves material being

weighed and loaded directly onto the de-dusting tunnel from where it is passed online directly into the sampling booth. Materials are sampled and sent onward into the production area. Online sampling is one of the most preferred next-gen methodologies in parental and solid oral manufacturing. Sampling systems are designed to provide Class 100 working environment at rest with a built-in scavenging system to ensure protection to the product, operator, and the immediate environment. Centralised control operations ensure all material passing through the system can be weighed, and precise readings of sample and material data documented and available as needed.

### Custom built cleanroom equipment

Given the evolving challenges that pharma companies are faced with and new challenges in terms of product and person handling, Fabtech carefully studies the applications and develops customised solutions that are best suited for the requirement.

*Fozi Al Kailani is the Regional Manager of Fabtech Technologies Africa Limited. He can be reached on 09077753625 or email: fozi@fabtechnologies.com*

## H. PYLORI IS A RISING CONCERN IN NIGERIA AND IT NEEDS A DIFFERENT APPROACH

### International Treatment Guidelines

(According to the American College of Gastroenterology)

According to European<sup>13</sup> and North American<sup>21</sup> guidelines, there is a first-line therapy for treating H. pylori infection. It consists of a standard triple therapy including a proton pump inhibitor (PPI) with any two antibiotics among amoxicillin, clarithromycin given for 7-14 days to adults.

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# DSCHC partners Sanofi to fight diabetes, hypertension

## - Commissions four diabetes and hypertension clinics

By Temitope Obayendo

**P**oised to bridge the gaps in the management of diabetes and hypertension in the country, as well as enhance patients' access to medical care, the Delta State Contributory Health Commission (DSCHC) recently commissioned four Diabetes and Hypertension Clinics (DHCs) across the state.

The flag-off ceremony, which held at the Obior Health Facility, Obior, in Aniocha North Local Government Area of Delta State, also featured free public screening for diabetes and hypertension.

The event saw a large turnout of prominent personalities and other members of the public, including the former Deputy Governor of the State, Chief Benjamin Elue; Board Chairman of DSCHC, Olorogun (Dr) Isaac Akpoveta; Chairman of Aniocha North LGA, Uche Oseme; and the Obi of Obior kingdom, HRM Kingsley Ugochukwu Ofuokwi JP.

The DHC initiative is a public-private partnership (PPP) initiative between DSCHC and Sanofi, a global healthcare and biotechnology company.

A DHC is a health facility and centre of excellence equipped to effectively manage cases of diabetes and hypertension at the primary level of care and to refer patients when necessary.

In Nigeria, gaps within the health systems affect people's health-seeking behaviours. Many people in underserved and hard-to-reach communities often have to travel long distances to attend health facilities in nearest towns and cities. The associated costs and inconvenience at times deter them from accessing healthcare early, resulting in their conditions getting worse with complications of disease. The goal of the DHC initiative is to bridge the gaps by bringing healthcare closer to these communities.

While explaining the rationale for the PPP, Dr Ben Nkechika, the DG/CEO of DSCHC, said that the establishment of the clinics was in line with the state government's resolve to provide quality healthcare to all Deltans.

He noted that cost of treatment poses a huge burden on patients, adding that government decided to explore PPP options so that patients who require care are supported free of charge through the state's contributory health scheme.

"All you need to do is get enrolled in the state's health insurance scheme and you will be treated free," he said.



L-R: DG/CEO, Delta State Contributory Health Commission, Dr Ben Nkechika; Board Chairman, Olorogun Isaac Akpoveta; the Obi of Obior Kingdom, HRM Kingsley Ugochukwu Ofuokwi JP; Former Deputy Governor, Chief Benjamin Elue; General Manager (General Medicine) Sanofi Nigeria and Ghana, Folake Odediran; Medical Director Sanofi, Dr Philip Ikeme and Sanofi External Affairs Director, Mr Oladimeji Agbolade at the commissioning.



External Affairs Director, Sanofi, Mr Oladimeji Agbolade; DG/CEO Delta State Contributory Health Commission, Dr Ben Nkechika; Board Chairman, Olorogun Isaac Akpoveta; the Obi of Obior Kingdom, HRM Kingsley Ugochukwu Ofuokwi JP; and General Manager (General Medicine) Sanofi Nigeria and Ghana, Folake Odediran, inspecting facilities at the clinic

Earlier, while welcoming guests to the event, the Board Chairman, Olorogun (Dr) Isaac Akpoveta called on residents to patronise the centres in order to reduce the burden of hypertension and diabetes in the state.

He disclosed that the state government, through the commission, is determined to provide quality healthcare to the people in the state, especially those in the rural communities.

He further said that he was delighted that the goal was being fulfilled through the public private partnership with Sanofi on diabetes and hypertension.

The General Manager of Sanofi in Nigeria and Ghana, Pharm. Folake Odediran, disclosed that the company's partnership with the Commission in establishing the centres of excellence was in line with its purpose

to understand the healthcare needs of people in places it serves and to help in solving those needs.

Meanwhile, DSCHC and Sanofi have formally signed the contract for the implementation of the project. The General Manager, Sanofi Nigeria-Ghana, Folake Odediran, signed on behalf of the company while the Board Chairman, Olorogun Isaac Akpoveta signed on behalf of the commission.

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# Nurses roles in diabetes management (2)

By Comrade (Nurse) Abdrafu Alani Adeniji, mni.  
President National Association of Nigeria Nurses and Midwives.

On 14 November 2009, the Regional Director of WHO's message to celebrate World Diabetes Day for the year said the campaign slogan was "Understand Diabetes and Take Control". The WHO engages people in a worldwide campaign, focusing on diabetes advocacy, awareness and effective prevention and control. The preventive measures dwell much on proper knowledge of the disease and its management and control. This emphasises the importance of having adequate knowledge to be able to control the disease.

Based on the fact that diabetes is a serious chronic disease that imposes life-long demands on people living with it and their families - as well as the clinical team, of which nurses serve as fulcrum - the whole world is focusing on the role of nurses in the control of diabetes.

In December 2006, the United Nations General Assembly in a landmark resolution recognised diabetes as a chronic, debilitating and costly disease. This confirms the depth of disease burden of diabetes mellitus. This chronic disease impacts greatly on the individual, family and the government. The world at large is confronted with the challenges of the diseases burden costing great in terms of financial and infrastructure to combat the scourge of DM worldwide.

According to the WHO, within the past decades, the number of diabetics has been on the increase. The cases were estimated to be 30 million in 1985 and 150 million in 1995 had risen to about 250 million in 2009. It is estimated that currently, over 300 million people worldwide are at risk for type 2 diabetes as the most prevalent type of diabetes, whereas it is a preventable.

This call for a collaborative and concerted effort to create and raise awareness on effective prevention and control measures. There is the danger of the number of diabetics rising up to 360 million by 2025. However, the greatest concern is the number of the diabetics that will be pregnant women, adolescents and children.

In the WHO African Regional report, the number of cases is expected to double over the same period from 10.2 million in 2005 to more than 20 million by 2025. This projected explosion in the incidence of diabetes has the propensity to overwhelm healthcare systems universally and most especially the developing countries of Africa and Asia. The impact is capable of undermining the gains of economic development.

In some communities there is a dangerous trend of underrating the burden of diabetes and it is in turn devastating the populace by reducing their healthiness and undermining their productivities, thereby causing economic downtrend.

## Preventive measures

Most type 2 diabetes cases can be prevented by educating and encouraging the vulnerable group who are at risk of contracting the disease to maintain a healthy lifestyle in diet, physical exercises, as well as avoidance of self-medication, alcohol, cigarettes and imported canned foods. Incidentally, there are locally available food items that can sustain a health-promoting life.

Moreover, there is the need to do regular medical check-up, monitor weight, and adopt a healthy diet rich in fruits and vegetables and with low sugar, fats and salt contents. All these require that diabetic patients and those at risk to be prepared to make informed decisions, adopt behavioural changes, and address the related psychosocial issues and challenges associated with diabetes.

The majority of cases of diabetes are community-based and thus the care required is individual and family centred. Also, adequate knowledge of the disease is very important to enhance an efficient self-care. In any case of self-care deficit, hospitalisation and eventual rehabilitation can pose an insurmountable task for a poverty ridden society like ours.

## The nurse and diabetes

The theme of this year's World Diabetes Day is "The Nurse and Diabetes". The campaign aims to raise awareness around the crucial role that nurses play in supporting people living with diabetes.

According to the WHO:

Nurses accounts for 59 per cent of health professionals

The global nursing workforce is 27.9 million, of which only 19.3 million are professional nurses

The global shortage of nurses in 2018 was 5.9 million. 89 per cent of that shortage is concentrated in low- and middle-income countries

The number of nurses trained and employed needs

to grow by 8 per cent a year to overcome alarming shortfalls in the profession by 2030. There must also be strategic planning and purposeful policies to empower and motivate nurses, as well as provision of improved condition of service to enhance retention and reduce attrition rate in the nursing workforce.

WHO estimates that the total investment required to achieve the targets outlined in the Sustainable Development Goals (SDGs) by 2030 stand at 3.9 trillion USD - 40 per cent of which should be dedicated to remunerating the health workforce. This will be an uphill task for countries where there is no particular human resources development for health programmes.

Investing in the health workforce, especially nursing and midwifery, will impact positively on universal health care coverage and also has the capacity to impact other SDGs on eradicating poverty, ensuring inclusive, adequate and equitable education, achieving gender equity through the employment and empowerment of women, promoting decent work and ensuring sustainable and inclusive economic growth.

## Nurses make the difference for diabetics

As highly valued members of the community, nurses do outstanding work to support people living with a wide range of health concerns. People who either live with diabetes or are at risk of developing the condition need the support of nurses. People living with diabetes face a number of challenges; and education and creation of awareness about diabetes is a very vital responsibility of nurses with the skills to support the clients.

Therefore, the International Diabetic Foundation has discovered the need to facilitate opportunities for nurses to learn more about the condition and receive training so that they can make a difference for people with diabetes.

Nurses play a key role in: Diagnosing diabetes early to ensure prompt treatment.



Participating in training and education of various healthcare professionals in Medicine, Nursing, Nutrition and other supportive health workers in giving holistic care to diabetic patients and their families.

Providing self-management training and psychological support for people with diabetes to help prevent complications. The use of community mobilisation, especially with the involvement of nurses in public health specialisation will be of great advantage to the health workforce. It will also help to rebuild the strength of the healthcare system.

Tackling the risk factors for type 2 diabetes to help prevent the condition.

Collaborating with other professional colleagues in the field of Medicine, Pharmacy, and Laboratory Sciences in conducting research towards combatting the menace of diabetes. This collaborative effort is to include mentoring of younger professionals and supervision of nurse assistants on the field of clinical practices.

There is a very significant need for more empowerment, motivation, and scaling up of the nursing workforce. This will help in having effective education and funding to equip nurses around the world with the skills to support people living with diabetes and those at risk of developing type 2 diabetes.

The government, healthcare organisations, policy formulators and healthcare funding agencies must therefore recognise the importance of investing in the education and training of nurses and other frontline healthcare professionals.

With the right expertise, nurses can make the difference for people affected by or are prone to be affected by diabetes.

**There is a very significant need for more empowerment, motivation, and scaling up of the nursing workforce. This will help in having effective education and funding to equip nurses around the world with the skills to support people living with diabetes and those at risk of developing type 2 diabetes.**

# Why Nigeria needs consultant pharmacists - Pounds

By Temitope Obayendo



**Professor Teresa Pounds**

**P**rofessor Teresa Pounds is the programme director, Pharmacy Residency Postgraduate Programme, at WellStar Atlanta Medical Centre (WAMC) in Atlanta, Georgia, USA. In this exclusive chat with **Pharmanews**, she speaks on how to advance different aspects of pharmacy practice, with special emphasis on the roles of consultant pharmacists in healthcare delivery, as the global community battles circulation of counterfeit medical and pharmaceutical supplies in hospitals. She also highlights the place of passion in successful pharmacy practice. Excerpts:

## Can you tell us briefly about yourself?

I started my pharmacy career as an outstanding student on a four-year academic scholarship at Spelman College, an Ivy League institution in Atlanta, Georgia. I graduated with the highest academic honours (cum laude); and continued my excellent academic career at Mercer University in Atlanta, Georgia, as a dean's scholar.

On the completion of my first year postgraduate residency training, I forged ahead to complete my second year postgraduate residency training in Nutritional Support at the Georgia Baptist Hospital.

WAMC is a part of the WellStar Health System, which is one of the largest health systems in Georgia. WellStar Health System is a non-profit Level 1 trauma centre and teaching hospital that is well known for its commitment to the community and innovative patient care. It comprises 11 hospitals, hundreds of healthcare sites, and tens of thousands of healthcare staff.

The WellStar Health system continues to be known for providing care to our patients, regardless of their financial wellbeing, and

is dedicated to delivering world-class healthcare. I have been a crucial facet in helping to deliver this institution's vision on a national level, because I have played an integral role in collaborating with principal stakeholders to bring the PharmD programme to Nigeria.

This was largely due to my enduring prowess in many pharmacy schools' programmes across the United States universities, such as the Mercer University, Philadelphia College of Osteopathic Medicine, South University, and many more. Through my expertise, I have managed to not only practise clinical pharmacy, but also instruct thousands of pharmacy residents and students over the years.

I am very passionate about pharmacy professionals' standards and educational excellence in the United States and my home country, Nigeria. In my home country, I have collaborated with the Association of Nigerian Physicians in the Americas (ANPA) and a group of Nigerian and US pharmacists for a medical mission to provide medical care for Abuja residents. I supervised the medication arm of the medical mission, organisation of the donation, transportation of medical supplies, and managing

the financial support from private individuals, pharmacies, and hospitals in Abuja.

The WAMC residency programme has the pleasure of being a part of the Accreditation Council for Graduate Medical Education (ACGME) programme. This collaboration has allowed me the opportunity to minimise the gap between physicians and pharmacists. Pharmacists and physicians are working together to enhance the management of patient medication and ultimately improve patient outcomes. Consequently, this would provide my residents with the platform to work together with other medical residents.

Furthermore, I have been fortunate to hold several academic appointments in the US and beyond, as I actively work with different national and multinational organisations that manage the advancement and development of pharmacy practice and education, pharmaceutical care initiatives, implementation and development of collaborative frameworks within interdisciplinary organisations to underpin the advancement of pharmacy practice in Nigeria through medical missions, educational workshops, curriculum development and preceptorship.

Additionally, due to my experience with medical nutrition, I have gradually developed the passion to advance my medical nutritional skills in the United States and beyond.

I am very passionate about pharmacy education, standardisation protocols, curricula development, appraisal, and accreditation processes and procedures. I am honoured to be able to help my home country, Nigeria in the journey towards the evolution of pharmaceutical care standardisation and better healthcare for all.

## Being an experienced practitioner of clinical pharmacy, would you say the consultant title for pharmacists is out of place, as being claimed by Nigerian medics?

I would say the consultant title for pharmacists is not out of place since this title supports patient care through the safe, evidence-based, cost-effective use of medicines and, most of all, it is very important. Precisely, individuals holding this role lead interdisciplinary development of medicine use policies and procedures. These policies and procedures help to set a plan of action for using a particular drug for the desired clinical outcomes. In other words, the policies and procedures help to formulate guidelines for using a particular drug. They also ensure that drugs used in the medical facilities are acquired from renown and quality suppliers.

Today, the world is filled with counterfeit products and hospitals should not make the mistake of buying nonstandard drugs or hospital equipment. However, due to the expertise of consultant pharmacists, they can help to identify drugs that meet the standards of preparation and whose use has been found to be effective. These consultants can also be involved in drug preparation for patient administration.

Additionally, they oversee the role of drug distribution in their respective hospitals. In this case, they ensure that all hospital departments are supplied with the right amount and types of drugs, depending on the cases and the dosages required.

Nevertheless, they are

expected to evaluate the documentation of adverse effects and behaviour of the medication for patient or drug review. It is worth understanding that some drugs cause adverse effects than others, due to their variability in the pharmacodynamics and pharmacokinetics. Besides, genetic, pharmacological, and immunological factors have been known to contribute to the adverse effects.

At times, patients may fail to respond to their treatment regime and these consultants have a role in facilitating the transition of regimes with little or minimal adverse effects

## A critical review of pharmacy practice shows there are differences in practice across the globe. As a professor of pharmacy, how can this gap be bridged?

By uniting pharmacists with pharmaceutical scientists, to build on the importance of healthcare knowledge using evidence-based medicine. Also, introducing community pharmacists to different pharmacy disciplines that can be career transition options. Examples include clinical pharmacy, entrepreneurship, medical science liaison, and others.

Additionally, other strategies that can be put in place include the implementation of legislation or policies on clinical pharmaceutical requirements for accreditation or hospital licensing, implementation of policies that support the increment of pharmacy training and educational reforms, integrating clinical pharmacists to diverse care teams, developing and integrating clinical documents tools in healthcare facilities, ensuring that practice sites have qualified clinical preceptors and strengthening regional and national pharmacy and clinical associations.

## As an expert in nutritional support and from your experience with COVID-19 patients, what would you say is the place of nutrition in patients' outcome?

Good nutrition is important in a patient's response to the infection. A patient needs to eat and drink so that he or she can support the body's ability to fight the virus and support the body's immune function. Eating of high calorie and high protein foods enhances the body to maintain its metabolic functions and body weight during the critical time. Depending on the patient's specifics, a nutritional support regime that is tailored specifically to each individual patient can help to replace nutritional deficiencies and speed up the recovery process.

Hospitalised patients who contract the virus are at a heightened risk for malnutrition. The novel COVID-19 has shown to cause loss of taste, smell, and appetite, which can lead to weight loss and muscle wasting. Nutrition regimens can be formulated using the patient's specific nutritional needs to help with weight gain and muscle loss. Patients who receive proper nutritional support while being treated for COVID-19 have a decreased risk for further complications and show faster times to recovery.

My passion for medical nutrition can be traced back to the interest I had in the nutrition aspect of food while I grew up. Precisely, my family was strict on the nutritional value of food that was consumed

*continued on page 44*

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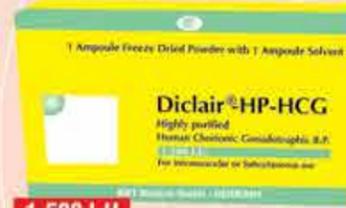
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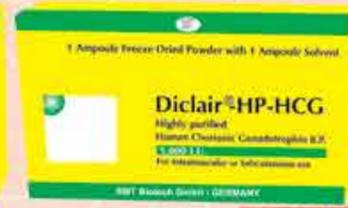
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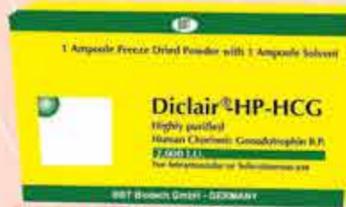
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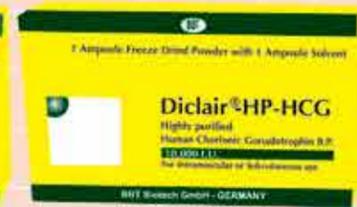
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# We are in business to develop the Nigerian community pharmacist – MegaMedx MD

By Patrick Iwelunmor



**Pharm. Adekola Wojuola**

**M**ega Healthcare Distribution Centres Plc (MegaMedx), an indigenous pharma healthcare distribution and supply-chain platform, recently announced and flagged off a wealth creation and financing platform for community pharmacists in Nigeria. The first phase, otherwise known as the pilot, is providing a wallet credit of one million naira each to 40 community pharmacists to enable them make purchases of pharmaceutical products and expand their businesses.

In this exclusive interview with *Pharmanews*, the Managing Director of MegaMedx, Pharm. Adekola Wojuola, explains the vision of the company. He also sheds more light on the Mega Wallet Credit Scheme as well as the 'Just In time' concept. Excerpts:

## Can you tell us about the vision of MegaMedx and how it plans to impact the Nigerian pharmaceutical space?

The passion of the Mega Healthcare Distribution Centres Plc. is the development of the pharmacy profession in Nigeria. Our vision is very straightforward - we want to enable and enhance the genuine stakeholders in the pharma distribution chain. We want to add value to them. We will enhance them with wealth, trainings and everything that will make the genuine stakeholders to be able to own that sector effectively. That is our vision.

## How have you deployed your resources in carrying along the community pharmacists in Nigeria, especially to make them buy into your vision?

As I said, the vision is very big. We have a pan-Nigeria vision and we have started this journey from Lagos. Last year, we had hundreds of interactions - I mean face-to-face, mails, Facebook, webinars and so on.

We have had a lot of interactions with community pharmacists. Every single month, we sponsor a webinar that is run all the way from the University of South Florida to train community pharmacists and I must say that just recently we got a commendation letter from the PSN chairman, Lagos State. He

commended us for the sizeable portion of the investment we have made to make sure that pharmacists are being trained on disease management, vaccines, formula development, inventory management and so on. We have been on this for five consecutive months now.

We have also invested a whole lot of money into developing a platform whereby community pharmacists can go in, place their orders and get them just in time. It took a whole lot of resources to get that done. We have also launched the Mega Wallet Credit Scheme where the community pharmacist can get up to a million naira to trade and then return just a small amount of interest.

## Tell us more about the Mega Wallet Credit Scheme

We know that credit, when given under the right conditions and to credit-worthy individuals, is actually an agent of economic development. You are aware that the Central Bank of Nigeria is giving loans to the health sector but pharmacists have not been able to access it and so, what we have done as a company is to make sure that, with all these monies running around, we are able to pull some money together and make sure that the community pharmacist is enabled to buy his products in a just - in -time manner. And

right there on the platform, he is able to pay for the purchase.

Instead of out of pocket, it is now out of wallet. That wallet has been credited and it is gradually debited as the card is being used. Every first day of the next month, it is topped up and the cycle just continues, as long as these monies are returned in compliance with the conditions.

Eventually, our goal is that a community pharmacist that has just one outlet today could earn a profit of 3.5 million naira by the end of the

year. We have demonstrated this financial model and in two years, the pharmacist was able to save up enough money to open another outlet.

The more pharmacies that belong to pharmacists, the more we are able to protect that space and ensure that the drug industry in Nigeria is being run by professionals.

## Are there any constraints you are facing as a group in actualising your vision?

You know that everything new has its own challenges. This is an online platform and the average medical practitioner might not be too comfortable using the online platform for ordering products. Some of us are already using Jumia and some other Apps but some have serious reservations about the use of online platforms.

However, what we have been able to see in the last one month is that this inertia of people adopting a new way of doing things can be overcome. If you cannot get online, you can send your orders through emails or call our representatives and business development managers or our customer service representatives. We are all here to help you. We run monthly webinars where we do demonstrate how you can use the platform.

## Your company keeps talking about universal best practice. How do you intend to apply this principle in rewriting the story of the Nigerian pharmaceutical space?

Anything that is not global best practice can only run for a short while. The reason is that the world has become a global village. Nothing is done in isolation. For example, the United States election is so popular in Nigeria because everybody is

following global trends with the help of technology.

International best practice implies that a pharmacist does not have to order cartons and cartons of drugs because a pharmacy is not a warehouse. There is a concept we call "Just In Time". This concept is used in eateries where they have estimates of foods they are supposed to sell in a day. This is a way to avoid wastage. Order what you need today, today and leave tomorrow's needs for tomorrow. What we are trying to do is to improve the practice of community pharmacy in Nigeria.

## What areas in the Nigerian health sector do you think government needs to fix for better service delivery?

I would say that there are many weak points but I would like to focus on pharma distribution. It is one of the weakest points. Sustainable development goals 2030 has seen the whole world coming to agree on a 17-point agenda which is supposed to touch every of the 7 billion people living on this earth.

There is a plan to make sure that the world is a better place by 2030. The number 3 of these goals is "health for all". Under this goal, one of the themes is "Developing more partnerships and accountable institutions". We have to institutionalise the distribution of drugs in Nigeria. I appreciate the fact that the government is doing a lot in that regard. The national drug distribution guideline is already making efforts to take away the scourge of markets everywhere and entrench an orderly way of allowing products come into Nigeria. As they come into Nigeria, we know where they are going and at the end of the day, we can track every single pack of drug being distributed in the country.

## In a nutshell, what culture is Mega Healthcare Distribution Centres Plc trying to entrench in the Nigerian pharmaceutical industry?

The culture we are trying to entrench is the culture of excellence; the culture of doing things with the right intent and the right approach. We are in business to develop the Nigerian community pharmacist and that has been our goal right from day one.

If the pharmacist is not developed, some other people who are not trained to do this job would hijack the space and it would be very sad if we are not able to get a regulated practice. The more we entrench excellent ways of doing things, the more we employ and develop our people and the more we use technology, which is the process to drive what we want to achieve.



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# Optimisation of young pharmacists' potentials

By Pharm. (Dr) Lolu Ojo, BPharm, MBA, PharmD, FPCPharm, FPSN, FNAPharm

We will define potentials as the "latent qualities or abilities that may be developed and lead to future success or usefulness." In the same vein, optimisation refers to the "action of making the best or most effective use of a situation or resource"; or "to make as effective, perfect, or useful as possible". Consequently, the title of this piece can be elaborated as "How to Make the Best or Most Effective Use of the Latent Qualities or Abilities Inherent in the Training of a Young Pharmacist". In reality, the theme will be expanded in coverage to include all pharmacists, but with emphasis on young pharmacists.

We are living in a country whose potentials had been largely sub-optimised over the years and the major factor of success for individuals, groups or profession is to live above this environment. From the social science realm, individuals are driven towards self-actualisation, a term described by Abraham Maslow as "the desire for self-fulfilment, namely the tendency for him (the individual) to become actualised in what he is potentially - to become everything one is capable of becoming." It is this drive that I want to commend to the young pharmacists; to have this self-propelled mechanism to get to the top, the very top of the ladder.

According to Maslow, "What a man can be, he must be." Simply put, if you are capable of scoring 90 per cent in an examination, you should not be satisfied with a 70 per cent score! Education is best defined as "the training of mind and character". As a pharmacist, your mind and character have been trained and prepared to take on the world before you and be the best you can be. You are expected to make the full use (exploitation) of your talents, capacities and potentialities; your environment of operation notwithstanding.

## Self-actualisers wanted

Maslow also told us that "the story of the human race is the story of men and women selling themselves short". With experience, we are almost giving credence to this assertion such that it can be said that the story of pharmacists in Nigeria is the story of men and women selling themselves short! We are challenged in all the areas of practice and we are desperately in need of self-actualisers to serve as role models.

A self-actualiser is a person living creatively and fully using his or her potentials. I will urge all to read more about the 13 characteristics of self-actualisers as written down by Abraham Maslow. This knowledge will help you to stay above your environment. The time has come for us to stop talking and complaining about the limitation of our environment. Our attention should now be focused on the individual and his or her desire to be self-actualised.

According to Maslow, "what is necessary to change a person is to change his awareness of himself". So, let me ask you, since you left school, have you taken a self-examination about who you are and what you have achieved so far? What is stopping you from getting to the

highest point of the "life ladder", that is, a higher purpose of human existence? We complain about lack of employment opportunities or low remuneration package or poor treatment by employers, senior colleagues, and so on; but have we ever bothered ourselves about our collective employability?

The job market is shrinking and getting saturated in a situation that can be called "career climate change". There are more schools of pharmacy and therefore, more graduates. The oversea option is getting restricted, due to what I will call the "Trump phenomenon" and the COVID-19 pandemic. Our job, as it is constituted now, is more product-centric and this product is treated as a mere commodity in this environment and that will explain why everybody is in it. It is the knowledge and skills of a pharmacist that are not commodities and this is what must be leveraged for competitive advantage.

## Attitudinal shift

There is a need for a shift in attitudes, behaviours and pursuit. Our agitation, expectations or drive should no longer be about money at the onset of career development. The emphasis at the beginning should be focused on adding value to the job position or duty to gain recognition and respect in the workplace. The focus should be on how to leverage the knowledge of Pharmacy to create

programmes that people want or that employers desire. The future of the profession will not be that of dispensing, distribution or legal restrictions (for example: only pharmacists can open retail pharmacies); rather it will be about deployment of knowledge and skills.

With Pharmacy education, you already have the knowledge as a scientist; but practising the "art" of Pharmacy is what is required in the marketplace. Since you are not well groomed for the practice while in school, you must use your knowledge to acquire the skills and competencies required for success. This acquisition will require patience, determination, humility, sacrifice and more knowledge acquisition. In the process, you must drop the entitlement culture and bloated ego.

The skills required include knowledge of facts and theories relating to the design and manufacture of medicines, ability to communicate effectively, production of pharmacy specific documentation, operation of pharmaceutical instrumentation, knowledge of law and ethics relating to supply of medicines, analysis of medicines, interpersonal skills, ability to work well in a team, problem solving skills, thinking clearly and methodically (creative



or strategic thinking), organization and management, commercial awareness among others.

The good news is that the "land is green". There are so many problems requiring solutions. There are opportunities in commercial, technical, administrative and executive management segments of the practice. The field is open for budding entrepreneurship. Let us think and work more on VALUE ADDITION

## Senior Citizen Chairing Pharmacy Tower committee my most challenging PSN task – Nwaiwu

continued from page 30  
challenging?

You got me there (laughs). Let me go through. I was chairman, Board of Fellows of PSN. Currently I am chairman of the Pharmacy Tower Committee, responsible for the mobilisation of funds for the construction of the PSN Pharmacy Tower.

I was chairman of Lagos Property Committee. I was also chairman of the Election Committee. That was the committee that organised the election of the last PSN government. I was also chairman of the Privileges Committee. That is the committee that elects members of the PSN Board of Fellows. I was also a member of the disciplinary committee. I was at some point chairman of the Research Grant Committee and the Endowment Committee.

Out of all these, the most challenging one is being chairman of the Pharmacy Tower Committee. I was asked to build a house that will cost N1.89 billion and you know we don't have money. So it's most challenging trying to mobilise people to bring money. Unfortunately for us, it now came also up during the period of COVID-19. Some of those who had promised to give us money are now struggling through the challenges or burden that COVID-19 has placed on businesses worldwide. But we are not relenting. My team and I are poised to deliver on that assignment. The assignment is causing me sleepless nights.

I am always thinking of who to meet for funds. But luckily for us, we have been getting positive responses. Luckily also, the PSN

president is a very God-fearing and prayerful person and he will never let you go unless you deliver. He also encourages you and gives you advice at every point in time. Above all, he is also a very experienced man. Unless that structure comes up to an appreciable level in at least the next two years, I will not have rest of mind.

We are also very grateful to *Pharmanews* for helping us to publicise this information. Some people have read it up from *Pharmanews* and have called us to request for the form. We thank *Pharmanews* for that.

**What are your thoughts about COVID-19 and the various efforts aimed at finding a solution to the pandemic? How can government encourage research institutions and pharmaceutical companies towards finding a locally-driven cure?**

The emergence of COVID-19 confused the whole world. It's only about three or four months ago that people started having an idea of what the pandemic is all about. These days, more awareness and information have come out about COVID-19. Even though I studied Pharmacognosy and I know what drug information is all about, I am one of those people who will ask you questions about active ingredients if you claim a plant does this or that cure. If you don't tell me the active ingredient, it means you are guessing. If it is not an active ingredient, it means it is a crude extract.

Crude is crude. Although some crude extracts are very active but you can't pinpoint what exactly

is responsible for what. Is it water or is it the alcohol that is used in extracting it? So you will need to do more analysis to know this. You also will need to carry out toxicity tests. Some of us actually doubt the use of medicines to cure COVID-19. People are laying claims to various discoveries of cure for COVID-19 but I have a feeling that COVID-19 is a viral disease and being a viral disease, it requires the antibodies to cure the disease and eventually that is what is going on now.

People are looking for vaccines. Anybody claiming to have a cure is merely curing the symptoms. The virologists will tell us that a virus is not something that you kill or kill its cell. Where do you see it in the first place? For me COVID-19 is real and if the vaccines come out, it will phase out like other viral diseases. It requires an anti-body to take care of it.

Government should encourage the production of vaccines. Government needs to support the pharmaceutical industry and fund researches. Research is not cheap. I can attest to this fact as a former university lecturer

**Finally, what advice would you give to the younger generation of pharmacists on how to make the best use of their calling as healthcare professionals to impact humanity positively?**

They should be disciplined. If you have self-discipline, you will not venture into what you cannot afford because that is what brings about greed. Young pharmacists should be patient and work diligently towards attaining their goals and aspirations which must add value to society and humanity in general.

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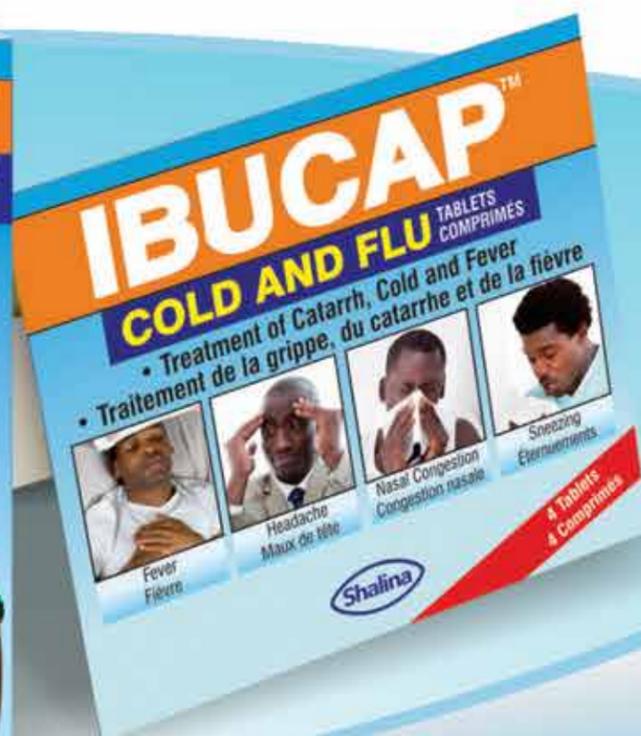


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## Expert cautions women on unplanned pregnancies

By Temitope Obayendo

**T**owards reducing maternal mortality ratio and ensuring optimum health for women of reproductive age in the country, family health expert, Dr Folasade Oludara, has warned women against having unplanned pregnancies.

Oludara, who is the director of Family Health and Nutrition, Lagos State Ministry of Health, stressed the need for women to avail themselves of family planning options to manage their fertility to forestall the occurrence of unintended pregnancies.

In the same vein, the World Health Organisation, (WHO) has asserted that about 214 million women of reproductive age in developing regions who want to avoid pregnancy are not using a modern contraceptive method.

The apex health institution, through its recent Fact Sheet on family planning disclosed that of the 1.9 billion women of reproductive age group (15-49 years) worldwide in 2019, 1.1 billion had a need for family planning. It added that while 842 million are using contraceptive methods, 270 million have an unmet need for contraception.

Speaking on the Post Pregnancy Family Planning Project (PPFP) platform recently, Oludara said "Women of reproductive age should realise that they are fertile and can prevent themselves from having unplanned pregnancies.

"We should not have babies



Dr Folasade Oludara

by chance; rather consider the health of the mother and economic implications. You must have an intention to have a baby before you get pregnant.

"With life and family planning, people have time to focus on their health and wellbeing because they are not overwhelmed by unplanned pregnancies".

She explained the essence of the PPFP project, saying it is to provide an opportunity to access

family planning immediately after delivery, to avoid any worries about having unintended pregnancies that can endanger the health of the mother.

The family planning expert hinted on the different methods available for women at either public or private facilities, by trained providers. She listed these to include oral contraceptive pills, implants, injectables, patches, vaginal rings, intra uterine

devices, condoms, male and female sterilisation, lactational amenorrhoea methods, withdrawal and fertility awareness based methods.

Oludara also noted that the public sector in Nigeria plays a more prominent role than the private sector in the provision of modern contraceptive methods (54 per cent to 41 per cent), adding, however, that this role varies by method type.

"The public sector is the predominant source for IUDs (79 per cent), implants (93 per cent), and injectables (74 per cent). The private sector is the main source for male condoms (81 per cent), emergency contraception (80 per cent), and pills (67 per cent)", she explained.

As a means of encouraging women to seek for the best method of family planning, Esther Adeola, a businesswoman, and a satisfied family user, said: "I was on family planning for four years. I got pregnant two weeks after removing the family planning method. And I have a friend also, she is on family planning, the same method. She didn't add weight. She is still herself and she is doing good.

"If you plan your family, you will enjoy yourself, you will enjoy your family and you will be able to take care of yourself and your children."

## ▶ Diaspora News ▶

### Why Nigeria needs consultant pharmacists - Pounds

*continued from page 38*

in the household. Throughout my profession, I have come to learn the true essence of nutrition for in-patients. Primarily, good nutrition is essential for preventing malnutrition, degenerative illnesses, and promoting the general well-being of patients. As such, it has been proven time after time that nutrition plays a big part in patients' outcomes through nutrition programmes that shorten the duration of stay at the hospital.

**Having made valuable contributions in the areas of pharmacotherapy and the pharmaceutical sciences, what would you describe as the challenges impeding best practices in these areas?**

As technology and research advance in the pharmaceutical sciences and pharmacotherapy, many other pharmacological methodologies within precision medicine are being developed with great promise for clinical application and therapeutic outcomes. One of the challenges is the ability to determine which biomarkers and technologies are most informative or applicable to the patient's care. Also, it has become relatively challenging to develop new drugs that provide cure to today's most prevalent and incurable illnesses. As a result, this has called for continued investments from governments and stakeholders to carry out extensive research that will provide long-term solutions or cure for these diseases.

On the other hand, the expectations of pharma customers are quickly rising as the commercial atmosphere continues to be ruthless and harder because patients expect the treatment and therapies to be effective and extremely reliable. On this note, these patients have continued to

demand evidence of clinical results associated with drugs to ascertain the claims made by pharmaceutical companies. Nevertheless, scientific productivity has become stagnant and lacklustre over time holding new drugs at a constant level.

**Still on COVID-19, how would you assess the global management of the infection?**

On testing of COVID-19, there are still inadequate testing kits in some countries, making the testing capacity too low; yet there might be more patients that have acquired the diseases, and they are spreading it.

Contact tracing of COVID-19 patients is being done. Still, countries with a larger population are experiencing challenges with this mechanism as not all of the people who came in contact with the patient are able to be traced. Some of them may decide not to report, making the exercise harder.

Wearing masks has been termed as one of the best methods of minimising the disease's spread, but some countries haven't made this guideline compulsory for each citizen. It is worth understanding that facemasks help to prevent the passage or spread of the virus from one individual to another. Precisely, when someone sneezes, coughs, or talks, facemasks act as a control strategy that prevents the virus from spreading to other people.

**In what ways can pharmacists upgrade their roles in the critical care of patients?**

For pharmacists to upgrade their role, the curriculum courses must provide them with full knowledge of addressing the patient's problems and develop a plan for him or her.

Pharmacists need to contribute to rounds, managing medication therapies for their patients, and participating in codes and medical emergencies. Also, they should collaborate with senior pharmacists

and mentors to address the patients' needs, redefine their roles, and the scope of their activities, and identify areas in practice that need further training or insights from knowledgeable individuals.

**As an accomplished pharmacist, what is your advice to young pharmacists aspiring to be like you?**

Not only is the pharmacy profession growing relatively fast, it is gradually becoming very competitive because the drug market is continually seeking cost-effective and effectual drugs that meet medical needs of the patients. As such, obtaining the PharmD is now one of the key requirements for obtaining a job and meeting the requirements needed to execute these tasks. Many universities offer the PharmD degree programme to pharmacists who are still practising in their own countries to keep them up to date with the current pharmaceutical trends.

However, young pharmacists must be very passionate about pharmacy education because it takes effort to blend different aspects of learning and understand the logic behind the magic in pharmacology. Thus, they must be mindful of what they do each moment because it adds up to who they become. Learning should never stop even after graduating because new and scholarly knowledge is put to the world every day.

Therefore, young pharmacists should take the initiative of reading new research studies and keeping up with information about new drugs in the market. They should also consider other ways to make themselves more marketable in this increasingly saturated market. Pharmacists should consider additional degrees like a Master of Business Administration or



Professor Teresa Pounds

Engineering.

President John F Kennedy once said, "Ask not what your country can do for you, but what you can do for your country." Hence one must have goals on what you need to do and accomplish as a pharmacist. With such convictions, one is likely to put more effort in their profession and carry out researches that help to solve different issues in society.

Finally, mentorship is very important because it provides one the stage to learn their mentor's skills and further share their knowledge. Therefore, finding the right mentor can be a powerful tool for professional growth because it provides the road map to success and a feeling of togetherness.

When choosing an effective mentor, one should consider people who have made significant change in society or seek guidance from people we perceive successful in what we desire the most. An effective mentor should be someone who has enough time to dedicate to develop a positive mentorship relationship and follow up with those who look up to him. As a result, one should avoid choosing mentors solely on popularity or monetary success.

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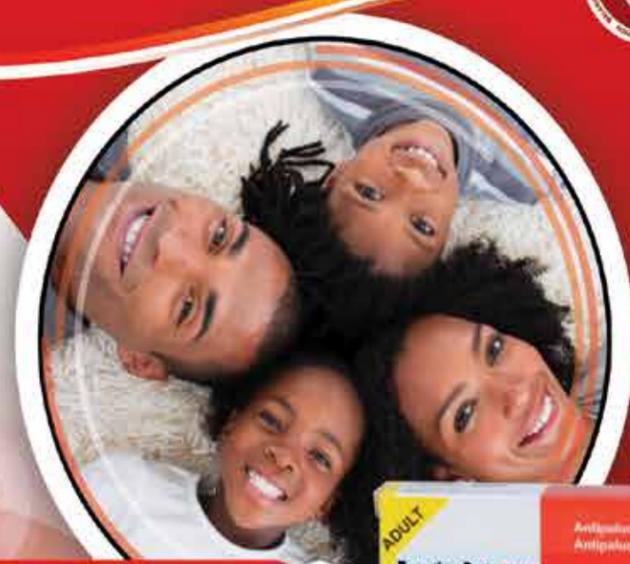


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## LEADERSHIP INITIATIVES FOR EXCELLENCE (LIFE) SERIES

## Great leaders leave a genuine leadership legacy (2)

"There is no success without a successor."  
- Peter Drucker

By Prof. 'Lere Baale

The second standard for leaving a legitimate leadership legacy is **CHOICES** - thinking clearly and making wise decisions. One way to define choices is "care in selecting." Careful decision-making requires a sense of right and wrong, rooted in character. That's why I love this quote from Theodore Hesburgh, a former president at Notre Dame University in USA: "My basic principle is that you don't make decisions because they are easy; you don't make decisions because they are cheap; you don't make decisions because they're popular; you make them because they're right."

#### Learning right from wrong

To make the right decisions consistently, we can't let external influences or peer pressure cause us to do something wrong when our internal conscience is telling us to do what is right. Basically, we develop our sense of right and wrong from three major institutions in society—the home, the community, and the religious environment.

The family, society's basic unit, should feature parents as the first and foremost teachers of character. Children should be given a set of moral absolutes; warned about the consequences of violating these principles; taught to be accountable for their actions; and encouraged to stand up for their rights, without falling down on their responsibilities.

Dr Laura Schlessinger put it this way: "The foundation of civilisation and human relationships is the family." When families break down through divorce, absenteeism, dysfunction, violence, abuse, alcoholism, drugs, lack of discipline or love, and a host of other shortcomings, society breaks down.

The community includes everything from our schools, Little League, Boy Scouts and Girl Scouts, to civic clubs, businesses, the government, the military, and so on. Schools have rules of behaviour. Sports and Scouts teach principles such as teamwork and respect for the individual. Civic clubs have pledges of commitment. Businesses have codes of ethics. Governments have laws and regulations. The military has a code of conduct.

These community organisations either build character or destroy the mores of the people they influence. This is especially important for people who didn't receive character training in the home or at places of worship. James Autry, a successful magazine publisher, said it well in *Love & Profit*: "We must stop thinking of work as something imposed upon us by the need to make money, and think of its value in our lives and in the community."

In 21st century America, some organisations are doing everything in their power to undermine the influence of religious training on the character of citizens. You'd think The Ten Commandments were The Ten Offenses! Does anyone in any society want to be murdered, stolen from, or lied to regardless, of one's religious persuasion or lack thereof? It's a fact that America was founded upon Judeo-Christian principles. Modern society can try to distort the history books, but nearly all of USA founding fathers were godly men. If you want to learn more about USA spiritual heritage, we recommend you read David Barton's *Original Intent: The Courts, The Constitution & Religion*.

The USA Constitution guarantees freedom of religion, not freedom from religion. George Washington, the first USA president, said: "It is impossible to govern without God and the Bible." The reason for separation of church and state isn't to keep God out of government, but to ensure that church and state don't become one and the same.

#### Pleasure vs. pain

We must also understand how pleasure and pain impact our choices. In short, if we enjoy a short-term pleasure that's harmful to us and other people, we're probably going to suffer some long-term pain. For example, smoking is a short-term pleasure that's harmful to the body, but it can also lead to the long-term pain of lung cancer, emphysema, heart disease or premature death.

An extramarital affair may provide some short-term pleasure, but it often produces the long-term pain of divorce, financial hardship, emotional stress on children, and much more. Stealing from an employer can provide some short-term pleasure, but the long-term pain can include loss of job, difficulty in finding another employer, a tainted reputation and, well, you get the idea.

Are you making decisions based on the "greatest good for the greatest number" over the long haul? Or are you thinking only about your own concerns and what feels good now? Put another way, are you choosing wisely?

Opting for short-term pleasure when we know it can cause long-term pain is not choosing wisely. Wise decision-making means it's often necessary to suffer some short-term pain in order to enjoy some long-term pleasure. For instance, most smokers want to quit this pleasurable bad habit, but they'd like to do so without the pain of withdrawal. If they'd learn to focus on the long-term pleasure of living a full, healthy life for their family and friends, the short-term pain would be bearable and worthwhile. That's what Bentham meant when he said that "a person should always do what will produce the greatest good for the greatest number." It's often referred to as servant leadership.

#### What is the wise thing to do?

Now, back to the question asked earlier: Are you choosing wisely? Better yet, would you like to fool proof your life by making consistently wise decisions? During a six-part series entitled *Fool Proof*, Andy suggested we ask this question when choices have to be made: "What is the wise thing to do?" He didn't say, "What is the ethical, moral, legal, biblical, Christian or even the godly thing to do?" He also framed this critical question as follows:

In light of my past experiences, what is the wise thing to do?

In light of my current circumstances, what is the wise thing to do?

In light of my future hopes and dreams, what is the wise thing to do?

Can you imagine what society would be like if we made choices each day with such wisdom over our lifetimes? Alas, the reality is that we don't live in a perfect world. People without character and conscience do exist, and they tend to do what's best for them in the short-term without regard for the long-term harm imposed on others. These

irresponsible deeds are often rationalised by the "everybody else is doing it" mind-set. They live selfishly and for the moment. Fortunately, we can choose a different way of life. We can be people of noble character. We can make wise decisions. We can do things that make a meaningful difference in the lives of others. Best of all, we can reap the consequences of living for something greater than self-centeredness and instant gratification. Maturity is the ability to postpone personal instant gratification.

#### Decision-making model

Let me wrap up this section on choices by providing a decision-making model that's been helpful to me over the years. Perhaps you'll find it useful:

**First, give careful consideration to all the facts and options.** This is the logical part of any decision. Gather all the pertinent information and weigh your choices. When you face complex decisions, seek out the advice of more experienced people. Do your homework, and don't be overcome by fear.

**Second, pay attention to your heart, intuition, and gut feeling.** This is the emotional part of any decision. If something makes sense but doesn't feel right, beware. If you know in your heart that something seems too good to be true, it probably is.

**Third, don't second-guess yourself once you make a decision.** You make too many important decisions in life to waste valuable time ruing past choices. Do your research, listen to your heart, and then have the courage to act based on your character and conscience.

**Fourth, believe you'll probably make more good choices than bad ones in a lifetime.** As we age, we should get wiser. Learn from your poor decisions in the early years. Celebrate your good choices as you mature. When your life is at an end, the odds are in your favour that you will have made more good choices than bad ones if you're a person of character.

**Fifth, anticipate success, but don't be afraid to fail.** When making difficult decisions, ask: What will happen if I don't act? What are the possibilities if I do act? And if for some reason I don't succeed, what's the worst thing that can happen, and can I deal with the consequences?

#### Power of good conduct

The third standard for leaving a legitimate leadership legacy is **conduct** - doing the right things consistently well. Conduct is defined as "a mode of personal behaviour." It is not a mode of behaviour, but rather a mode of personal behaviour. Conduct isn't an organisational, group or team thing because organisations, groups or teams can't behave. Only individuals can behave.

The personal conduct of each person is a reflection of the culture of a company, government agency, trade association, sports team,



civic club, charity, or religious organisation. If you don't believe that, look at how much damage was done to Enron due to the unethical conduct of a few executives. Consider the harm done to the reputation of the Catholic Church because of the lustful behaviour of certain priests and the subsequent cover-up by their leadership.

Clearly, conduct matters. It is essential for our words and ways to be congruent or we send a confusing message. We should do what we say we will do—daily and consistently. Regrettably, there are thousands of people whose lack of character and poor choices have led them to do things that have resulted in severe consequences. As Michael Guido likes to say: "The world pays more attention to your conduct than it does to your creed."

If we don't take personal responsibility for our conduct, we force our employers to discipline us; our trade associations to censure us; our schools to expel us; our media to expose us; our law enforcement agencies to arrest us; our courtrooms to convict us; or our prisons to incarcerate us.

#### Aloofness or accountability?

Could it be that we've become more concerned with civic rights than personal responsibilities? Have we allowed aloofness to get in the way of accountability to ourselves, others and God?

Author Chuck Swindoll defines accountability as "a willingness to explain your actions." How are you doing when it comes to explaining your actions? So often, leaders want to hold everyone else accountable, but they don't want to be held accountable. "You'd better conduct yourself morally and professionally, but don't even think about questioning my behaviour because, after all, I'm the boss!"

A great example of a leader wanting to hold others accountable is this letter from a young Bill Clinton when the Watergate scandal was threatening to oust Richard Nixon from the White House in 1974:

*Yes, the president should resign. He has lied to the American people time and time again, and has betrayed their trust. He is no longer an effective leader. Since he's admitted guilt, there's no reason to put the American people through an impeachment. He will serve absolutely no purpose in finishing out his term. The only possible solution is for the president to save some dignity and resign.*

Clinton was right when he said that a person can no longer be an effective leader once he or she has betrayed the trust of their followers.

# Wannang, Lawal, others task ACPN, AHAPN on specialist approach to practice

## - Say pharmacists should start embracing capacity building

By Adebayo Oladejo

Stakeholders in community pharmacy practice, including the Secretary General of the West African Postgraduate College of Pharmacists (WAPCP), Prof. Noel Wannang, the National Chairman, Association of Community Pharmacists of Nigeria (ACPN), Dr Samuel Adekola; and Managing Director, Victory Drugs Limited, Pharm. (Mrs) Folasade Lawal, have urged pharmacists in the country to seek more knowledge, especially in specialised areas where their expertise can be better harnessed and optimised.

Speaking at the just concluded 93rd Annual Conference of the Pharmaceutical Society of Nigeria (PSN), tagged "Omoluabi 2020", Prof. Wannang, said pharmacists must adopt specialist approach in service delivery, noting that behavioural changes as well as professional reorientation are needed to scale up in the practice.

He disclosed that while the introduction of the PharmD programme is a great development, pharmacists must go steps further by acquiring further trainings that will spur them to upgrade from the generalist approach to pharmacy practice.

Wannang said this has become necessary so that pharmacists will not be seen as people who simply receive instructions from doctors in hospitals or as mere shop owners and medicine sellers at the community pharmacy level.

He counselled hospital pharmacists, especially, to look beyond drug dispensing roles and offer more specialised roles in patient care and counselling, stressing that such would help to differentiate them from pharmacy technicians.

He maintained that they must demonstrate good knowledge and expertise in pharmaceutical care, health counselling, drug information and patient care.

The WAPCP registrar further hinted that the college had lined up series of special programmes and trainings in areas that would help the pharmacist improve his practice for the benefit of patients and the healthcare system as a whole.

Also speaking at the gathering, Pharm. Folasade Lawal, emphasised that the fuel for the future of community pharmacy practice consists of collaboration and specialisation, adding that pharmacists must begin to see the numerous opportunities presented by the different forms of disruption going on in the Nigerian society and beyond.

Lawal, who was one of the lead speakers during the joint session of the ACPN and the Association of the Hospital and Administrative Pharmacists of Nigeria (AHAPN), said it is expedient for pharmacists to reposition themselves to remain effective and relevant in the new normal.

According to her, there has been a global paradigm shift in

pharmacy practice, which has not left community pharmacists behind, adding that pharmacy practice has moved from product focused to patient focused, especially with the advances in clinical pharmacy.

In his address at the event, Pharm. Adekola emphasised the need for collaboration among community pharmacists, noting that collaboration determines the future of every business.

Adekola further revealed that the ACPN strongly desires that community pharmacies transgenerate their initial owners.

He said: "It is worrisome that it is difficult to see many community pharmacies celebrating 20th or 30th anniversary in the country or even existing for 10 years after

the death of the original owner. This is not ideal, it is not normal and there should be a solution to it; hence our vision for transgenerational community pharmacy."

Other speakers at the joint technical session included the National Chairman of AHAPN, Dr Kingsley Amibor; and Dr Daniel Orunwese, former president, PSN.



Prof. Noel Wannang  
Secretary General, WAPCP



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# Private medical practitioners also need government's assistance – Dr Ntuk

By Patrick Iwelunmor



**Dr Monday Robert Ntuk**

**T**he Medical Director of Bethphage Hospital, in Maryland, Lagos, Dr Monday Robert Ntuk, has called on government to consider making funds available to private medical practitioners to enable them improve their services. In this exclusive interview with *Pharmanews*, Ntuk who also doubles as a clergyman, believes that improving the working conditions of Nigerian doctors will reduce brain drain in the profession. Excerpts:

## What has kept you motivated in Nigeria when many doctors are running abroad in search of greener pastures?

Yes, it is true that many doctors are running abroad in search of greener pastures but I believe Nigeria will be better. If all of us run away, who will take care of our relations here? I have decided to stay back and do my practice and I believe that medical practice in Nigeria will one day get better than what we have today and doctors will get the appropriate treatment.

## Do you think the primary healthcare system in Nigeria is working well?

The primary healthcare system is working. If I am to rate it, I would score it 85 percent. Right from the days of Professor Olikoye Ransome-Kuti, a lot has been done; a lot of things were initiated in our primary healthcare system and that has continued.

Just last year, Nigeria was declared polio-free. So, the primary healthcare system is working and the government is really trying.

## What would you say is the biggest challenge facing the health sector in Nigeria?

We have a lot of challenges in the Nigerian health sector. Number one is out-of-pocket expenses. It is tough for people to do. Our health insurance system is also not working well at all and that is why we have people dying of things that ordinarily can be taken care of. If we had a good health insurance system that covers everybody, the health of citizens will be better.

Number two is the problem of quacks. Quacks in the profession are making things very difficult. Before the patients come to us sometimes,

they would have patronised these quacks who would have messed them up and by the time they come to us, they are already dead on arrival or almost dying. At that point, they expect you to perform a miracle.

Also, the cost of running a private healthcare facility in Nigeria is very high and, most times, patients cannot afford the cost of treatment. Most times, we do more of humanitarian service because some of us are more interested in saving lives first.

## In the face of these challenges, what do you think government should do better?

Even with the plethora of teaching hospitals and other public health facilities, the private practitioner sees more than 70 per cent of patients. The health intervention fund that government recently made available has been difficult to access. The government should help private practitioners in accessing funds with one digit interest and ensure that all the bureaucracies involved are taken off.

If private hospitals can access funds from government, things would be much better. What obtains in private practice most times is that we go to the banks to collect loans and those who cannot repay land themselves in trouble. It is purely a case of self-help. Private practitioners really need the help of government financially to enable them equip their hospitals.

## How do you think the COVID-19 experience has impacted the medical world generally?

It has exposed our lapses. If big countries like the United

States are crying with all their expertise in medical practice, then we in this part of the world must accept that God is just on our side. If the kind of devastation we witnessed in the United States had happened here, it would have been disastrous.

By and large, our government has tried in curtailing the virus, though it is not over yet. COVID-19 has made those of us in medical practice to sit up and adopt some strict precautionary measures that ordinarily would have been overlooked. It has made us to be more cautious and more protective in handling patients. Every patient right now is a suspect.

There was also the financial aspect where we had to struggle to maintain overhead, even when the patients were not forthcoming during the lockdown. Some of us could not even meet up with that obligation. It has been tough because government did not give any form of financial intervention to the private hospitals, not even equipment. All we did was from within – what we could muster by ourselves. Gloves and facemasks which were very affordable became very expensive.

If government can help private practitioners, things would be better. We must also remember that

COVID-19 is still around. We are praying that the so-called second wave should not happen.

## How have you been able to successfully combine your religious obligations with medical practice?

Both of them involve the saving of lives. Even in medical practice, it is universally accepted that we treat while God heals. We cannot take God out of anything we do. Also, planning has helped me a lot. I have my own plan and strategy that has ensured a smooth running of both my hospital and the church. I know when I am supposed to be in the hospital and when to be in the church. God has been helping me to manage my time properly.

## What's your advice to young and upcoming medical doctors?

Most young and upcoming medical doctors believe that the country has nothing good to offer them and that is why they are running out. I used to have two young doctors working for me. They have since travelled out of the country in search of greener pastures.

My advice to them is that, there is no place like home; anywhere you go to, there can never be a better place like home where you have your freedom. Though it is good to travel, they should not abandon home and when they are coming back they should make sure they are coming to improve the medical sector here.

Government should also improve the working conditions of doctors as it is done abroad.

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## Selling pharmaceutical products in a difficult environment

The COVID-19 crisis is creating an extraordinary strain on society. This is caused by the infection in itself, as well as the fear of infection, and the physical, emotional, and financial implications of physical distancing. In Nigeria, healthcare professionals (HCPs) are facing unprecedented challenges and the health system in general faces unprecedented financial issues.

Across medical specialties and therapeutic areas, the treatment of patients has fundamentally changed. HCPs are rapidly adjusting how they deliver care (such as through increased use of telemedicine). As a result, the support they need from pharma companies, payers, and other stakeholders is also changing. The realistic view is that the effects of COVID-19 are not disappearing soon.

Beyond that, however, pharma corporate leaders and industry leaders have to deal with the fact that the COVID-19 crisis will have knock-on effects for the broader pharma environment. This will happen in the following ways:

The underlying economic crisis triggered by the COVID-19 pandemic will have a significant ripple effect on state and national budgets. Urgent and costly measures to shore up businesses and support individuals will force governments to contain outlays in every category, including healthcare.

The incremental innovation required for premium-priced drugs will continue to rise, as will pricing pressure on commodity products such as generics and biosimilars. Unfortunately, patients cannot absorb all of the increase in cost, thus squeezing profit, especially for the generic-drug marketers.

Pharma companies will delay some product launches, and those that go ahead may fall short of expectations. Leadership teams may face disrupted supply chains, delayed clinical trials and lack of access to physicians and other medical forums.

More significantly, pharma executives will need to adjust go-to-market strategies for previously planned product launches.

The COVID-19 crisis has been a massive shock to the healthcare system in each of these areas — utilisation, adoption of new behaviours, and pharma engagement. A range of changes can be seen across specialties and geography. This variation is critical for pharma leaders in crafting effective strategies for crisis recovery.

For marketing and demand-generation teams, our initial observations and conclusions are:

Fewer patients seeing physicians and fewer

prescriptions for most disease areas. Sales will struggle as a consequence of this.

Rising use of telemedicine, online CMEs and other remote tools does not offset the loss of in-person interactions. It only complements it and improves reach.

The decline in pharmaceutical professionals interaction is significant and will not return to normal levels anytime soon.

There is a need to revamp how to engage with healthcare practitioners and patients.

It is absolutely necessary to reimagine what the commercial mix should be to accommodate new needs and preferences.

The above points are general, but the following are direct, practical recommendations that can be used immediately:

**Manage your outstanding.** Cash is the blood of any business, far more important than profitability for the short-term survival of the enterprise. It will be important that your sales force brings back money as quickly as possible. Sales managers and CEOs will need to enforce and encourage them to do this by putting up necessary policies, incentives, strategies, etc.

**Demand-generation should never cease.** Whatever happens, you cannot take a pause from the actions and activities to generate demand. You only need to ensure the field force does the needful in this regard. Ramp up motivation, sanctions, incentives and the necessary supervision to get this going. However this does not mean that you should take risks with the workers' health, especially with respect to COVID-19.

**Relationship building and marketing all the way.** In times like this, strong relationship built over time with customers and HCPs comes handy to overcome the challenges of selling in a tough economic environment. If your team/company hasn't built strong relationships yet, now is the time to focus on strengthening relationships and growing your market share. This can be taken a notch higher by institutionalising it and providing direct support for this effort.

**Do more with technology and social media.** In these days of social-distancing and other COVID-19 preventive protocols, leveraging technology to keep going while keeping safe has become imperative. Perhaps the only positive outcome of the pandemic has been greater acceptance of online interactions, meetings and trainings, with more personal investment in hardware, knowledge base and change of attitude than ever. All of these made it easier to use technology to reach, meet and interact with HCPs, customers

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and field staff. What is more, it is more flexible and cheaper than face-to-face meeting in most situations. Pharma company must maximize this opportunity by taking as much as possible their meetings, reporting, CMEs, customer interactions, etc. to the cyberspace.

**Retailers' influence is growing,** and you need to latch on. Community pharmacists erect relatively little or no barrier against medical sales representatives and are therefore more available for them. Concomitantly, patients feel more secure from the risk of COVID-10 infection in pharmacies, and are taking their health challenges to them. I believe this trend will continue and most likely remain permanent. Traditionally, they represent the final leg of the route-to-the-market. They are therefore important to improve access to your drugs and shelf-presence. Pharmaceutical marketing companies need to shepherd their reps in this direction, in addition to developing long term relationship with them.

**Succeed through follow-up**

**and persistence.** Successful companies know that follow-up and persistence win new business. When your clients/prospects are cash-strapped and stressed in their own ways, they may not respond to your calls and emails immediately. Remember, they have other priorities on their mind—don't take it personally. Prioritise sustaining your connection with clients and prospects, trusting in the eventual gains. The biggest failings of companies are poor follow-up, no follow up, and giving up. As we all know, the work does not end with the sale.

**People are assets,** but that is only if they are disciplined, well-supervised and productive. In all of this, sales leaders know that people are central to success. So, do your best to take care of your people and be open about challenges and expectations. Take into considerations their challenges in the current environment. But it is important to provide adequate supervision and maintain discipline to keep productivity at the highest level possible.

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## Establish yourselves as solution providers, experts challenge young pharmacists

continued from back page

innovation to deliver value to their communities.

Sharing some of their founding stories and challenges, the speakers challenged participants to look within the box to find local solutions to problems in their communities.

They added that the pharmacy profession is full of opportunities, which should make young pharmacists not to be discouraged by the seemingly hard situation in the country.

The panelists focused on different areas in their discussion, such as providing inventory solutions to pharmacies, increased access to funding, solving logistics and supply chain problems, and providing health information to members of the community.

Speaking on how high the barrier of entry could be in some of these areas, the panelists harped on the importance of volunteering and internships in gathering the needed experience to launch into the desired fields by young pharmacists.

The experts further charged pharmacists to focus more on gaining relevant experience and playing the long game when chasing their dreams.

The panelists, who are top decision-makers in their organisations, reiterated their commitment to PSN-YPG and assured the association of their continued support especially with providing opportunities for the members.

On her part, the Executive Director of Emzor Pharmaceutical, urged the youngsters to take volunteering jobs more seriously, saying it is time for young pharmacists to begin to see reasons why they should render



**L-R: Pharm. Adepoju Kehinde, publicity secretary, PSN Lagos; Pharm. Deji Ogunye, MD, mPharma Nig Ltd; Mr Andrew Garza, co-founder/COO, LifeStores; Pharm. Abimbola Adebakin, CEO Advantage Health Africa; Pharm. Yimika Oguns, coordinator, PSN-YPG Lagos; Pharm. Suleman Sule, director, Pharmaceutical Services, Field Intelligence; Pharm. Uzoma Ezeoke, executive director, Emzor; and Pharm. Hassan Taiwo, moderator of the Panel session, at the event.**

service without expectation of compensation and without coercion, adding that volunteering is about freely giving their time to help an organisation, a community, or an individual.

According to her, pharmacists nowadays have more important roles to play in the advancement of public health in the country than in the past and this is done by proper volunteering.

She said: "When it comes to volunteering, vision is very important. You must not see it as just volunteering. When you downgrade volunteering as something of lower dignity of value than a high pay job, then it simply means you are beginning to miss it."

"Volunteering simply means paying a service back. If you do it properly, it is a wonderful opportunity to get free education. It is not enough to get a degree or set of training, that is just the beginning of education."

"When you go to school or you

undertake former course of study, you learn skills and you learn a body of information and how to manage certain data but the true gift of that is wisdom. When you want to volunteer you have to be clear on your vision and you can't be counting how much you are being paid."

"Emzor takes a lot of interns/volunteers who are still in the university and they are being paid a nominal amount but Emzor is doing a lot of investment in them. Yes, you are coming in but this is the era you can learn the culture of work, learn specific skills, you will be given assignments and projects where you will be forced to take deeper thoughts and then apply the skills you have in a functional working environment."

Yimika Oguns, the coordinator of PSN-YPG Lagos State Chapter also explained what informed the choice of the theme of the programme, saying, most times, when patients are not feeling well and they need attention, they

go to the pharmacist first before they think of going to the hospital, stressing that this is because pharmacists are always the most accessible to patients.

"The problem is how we are leveraging this. Most times there are chronic conditions that community pharmacists could have managed well but they are not doing it. Services like family planning services, vaccination services are basics and yet pharmacists are not doing it," Oguns remarked.

The Lagos PSN-YPG coordinator further noted that being the first port of call, pharmacists should not lose the chance to provide

the best opportunity they can and also to improve overall perception of the profession.

Oguns also highlighted the advantages of volunteering, saying volunteering helps in improving one's prospects.

"Most fields, when you go in search for jobs, they ask you for experience. But, when you volunteer with some specific organisations, you are able to acquire certain skills that you need to advance yourself professionally and helps with your CV," she said.

She also encouraged young pharmacists to be versatile and not allow anyone to box them into a corner, adding that there are pharmacists who are thriving in other important fields, such as brands and communications, data science and the rest.

"These are not just the regular pharmacists that we know. Even if you are a community pharmacist, you can still provide more value in that space," she further added.

## Be magnanimous in victory, Akintayo charges new PSN executives

continued from back page

be magnanimous in victory.

The trio of Pharm. Olugbenga Falabi, a contestant for the office of national secretary; Pharm. Olanrewaju Gafar Madehin, a contestant for the post of the treasurer; and Pharm. (Dr) Margaret Ilomuanya, a contestant for the post of editor-in-chief emerged winners of the keenly contested 2020 PSN elections and were returned elected.

Speaking further, Akintayo, who conducted the oath of office on the constituted members of the national executive council, further urged them to hit the ground running, adding that there were no winners, nor losers in the election.

Declaring the results, the electoral committee chairman, Pharm. Peter Iliya, a director at the Pharmacists Council of Nigeria (PCN) declared the trio returned and elected, having garnered the maximum number of valid votes in the elections.

According to the election umpire, Falabi polled 490 votes to defeat his opponent, Pharm. Livinus Emeronye, who had 117 votes.

He added that Madehin who contested for the position of treasurer also polled 430 votes, to defeat his opponent, Pharm. Emeka Adimoha, who had 173 votes; while Ilomuanya had 372 votes to defeat her opponent, Pharm. Dauda Dangiwa, who had 242 votes.

In their reactions, the newly



**A cross-section of the constituted members of the executive of PSN, led by the President, Pharm. Mazi Sam Ohuabunwa, being sworn into the office by the former president, PSN, Pharm. Olumide Akintayo, at the Closing Banquet of the 93rd Annual PSN Conference, held in Osogbo, Osun State recently.**

elected officers who were beaming with smiles promised to serve diligently, adding that they were grateful to the electorates for having trust in them, as well as the leadership of the PSN for creating an enabling environment to conduct a free and fair election.

According to Falabi, the newly

elected secretary, "The opportunity to work has presented itself again, and we are ready to bring the PSN now closer to the people. We will improve on the communication between the society and the pharmacists and we will ensure that people know what PSN is doing at every point in time."

Also speaking, the duo of Madehin, the newly elected treasurer and Ilomuanya, editor-in-chief, promised to bring their experiences to bear in discharging their duties, saying they both dedicate their victories to their primary constituencies, the ACPN and NAPA, respectively.

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**INDICATIONS:**  
Albendazole is an anthelmintic drug prescribed for treating a variety of parasitic worm infestations such as ascariasis, trichuriasis, pinworm disease, giardiasis, trichuriasis, pinworm disease, neurocysticercosis, and hydatid disease. It is also used to treat strongyloidiasis, trichinosis, trichostrongylidiasis, capillariasis, cutaneous larva migrans, and microsporidiosis including Septata intestinalis infection.

**CONTRA-INDICATIONS & CAUTION:**  
Albendazole has been shown to be Embryotoxic and Teratogenic in Animal Testing. Its Use is Therefore Contra-Indicated in Pregnant Women Or in Women Of Child Bearing Age. Wormzap Suspension Should Only Be Administered Within The First Seven (7) Days Of Normal Menstruation.

In Iron deficiency Anaemia

# Haemaron

• BLOOD TONIC • CAPSULES

Iron + Vitamins + Mineral

**INDICATION:**  
Haemaron is indicated in the treatment of iron-deficiency anaemia and also, as dietary supplement.

**CONTRA-INDICATIONS:**  
Hypersensitivity to any of the constituents, patients receiving repeated blood transfusion, or currently on parenteral iron therapy.

REFER TO THE PRODUCT INSERT FOR MORE INFORMATION

...for a strong and healthy family

...where only the best is good enough

## Uniprof

### IBUPROFEN

Pedaiatric Suspension

*Pleasantly Flavoured for Babies and Children*

**Indications:**  
For the relief of pains, feverish condition, teething pains, cold symptoms, headache, minor injuries such as sprain and strain.

**Contra-Indications:**  
Peptic Ulceration or history of Peptic Ulcer in Asthmatic patients in whom attacks of Asthma, Urticaria or Acute Rhinitis is precipitated by Aspirin and other non-steroidal anti-inflammatory drugs or by other Drugs with Prostaglandin Synthetase inhibiting activity.

## LOTEMP PLUS

### TABLETS

Ibuprofen 200mg  
Paracetamol 325mg

**INDICATIONS:**  
Rheumatoid arthritis, osteoarthritis, ankylosing spondylitis, cervical spondylosis, intervertebral disc syndrome and sciatica. Soft tissue injuries such as sprain, strains and sports injuries. Painful inflammatory conditions in gynaecology. Post-operative and post-traumatic inflammation and swelling. Pain and inflammation following surgery. Acute attack of gout, severe headache.

**CONTRA-INDICATIONS:**  
Hypersensitivity to Ibuprofen or Paracetamol. Peptic Ulceration or History of Peptic Ulcers in Asthmatic Patients in whom attacks of Asthma, Urticaria, or Acute Rhinitis are precipitated by Acetyl Salicylic Acid or by other drugs with Prostaglandin Synthetase inhibiting activity.

# Nutriyin

## Multivitamin Syrup

• Multivitamin Deficiencies,  
• Convalescence &  
• Malnutrition.

**CONTRA-INDICATION:**  
Hypersensitivity to the vitamins

REFER TO THE PRODUCT INSERT FOR MORE INFORMATION

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## RELIABLE ANTIFUNGAL



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- \* ESTABLISHED EFFICACY AND SAFETY
- \* EFFECTIVE IN THE TREATMENT OF DERMATOPHYTOSIS
- \* JOCK ITCH
- \* ITCHING AND RASHES
- \* ECZEMA



Tinea pedis



Tinea cruris



Pityriasis versicolor

### YTACAN PLUS

#### TRIPPLE ACTION CREAM



- CLOTRIMAZOLE**  
Time tested and trusted anti-fungal
- NEOMYCIN**  
Wide-spectrum antibacterial for preventing / treating infections
- BETAMETHASONE**  
Relives inflammation, itching and redness



Tinea Corporis



Ring worm



Tinea Pedis

### KETACON

#### TIME-TESTED ANTIFUNGAL



- \* Exhibits anti-inflammatory, anti-seborrheic and anti-proliferative properties
- \* Ketacon (Ketoconazole 2% cream O.D. for 2 weeks) is effective against Pityriasis versicolor
- \* Decreases erythema and scaling



Ring worm



Tinea Corporis



Tinea Pedis

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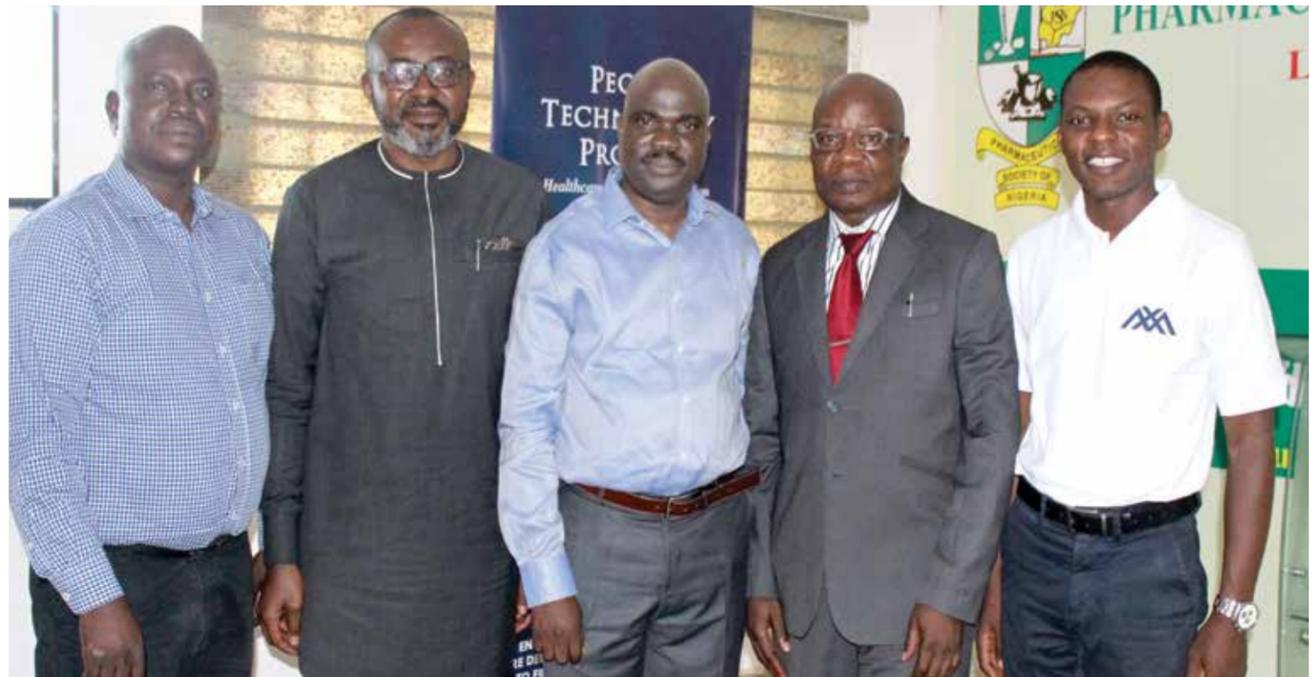
## Establish yourselves as solution providers, experts challenge young pharmacists

By Omolola Famodun

Experts in retail pharmacy within and outside Nigeria have come together to challenge young pharmacists on how to establish themselves as solution providers in their communities.

The experts who had a first-of-its-kind panel session during the second edition of the Pharmaceutical Society of Nigeria-Young Pharmacists Group (PSN-YPG) Lagos Chapter Week, held recently at the Welcome Centre Hotel, Airport Road, Lagos, included: Pharm. Deji Ogunye, MD, mPharma Nig. Ltd; Mr Andrew Garza, co-founder/COO, LifeStores; Pharm. Abimbola Adebakin, CEO Advantage Health Africa; Pharm. Suleiman Sule, director, Pharmaceutical Services, Field Intelligence; and Pharm. Uzoma Ezeoke, executive director, Emzor Pharmaceutical

Speaking on the theme: "Leveraging Pharmacies as the First Port of Call," they stressed the importance of community pharmacists' roles in the provision of quality healthcare and how young pharmacists can leverage their knowledge of technology and



L-R: Pharm. Gbolagade Iyiola, chairman, Lagos State PSN; Pharm. Chigozie Oguine, CEO MegaMedx; Pharm. (Dr) Samuel Adekola, national chairman, ACPN; Mr Leo Okwu, managing director, State Side Microfinance Bank Nig. Ltd and Pharm. Adekola Wojuola, managing director, MegaMedx, during the flag-off of the Mega Credit Wallet Scheme for community pharmacists at the Lagos PSN Secretariat, Ojodu.

## Be magnanimous in victory, Akintayo charges new PSN executives

- As Falabi, Madehin, Ilomuanya win PSN 2020 elections

By Adebayo Oladejo

As the race to fill the vacant offices of the national secretary, national treasurer, and national editor-in-chief of the Pharmaceutical Society of Nigeria (PSN), ended during the Annual General Meeting of the Society, which took place at the

De Distinguished Event Centre, Osogbo, Osun, during the just concluded "Omoluabi 2020" conference, Pharm. Olumide Akintayo, former president, PSN, has urged winners of the election to make good use of their offices and

continued on page 52

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