



## Be bold to enforce health insurance, healthcare providers task Tinubu

- Say private providers must be involved in implementation

By Adebayo Oladejo

Despite their misgivings about the new National Health Insurance Act (NHIA), healthcare providers, under the aegis of the Healthcare Providers Association of Nigeria (HCPAN), Lagos State Chapter, have

tasked the new administration of President Bola Ahmed Tinubu to develop the political will to

*continued on page 16*



L-R: Dr Teresa I. Pounds, founder & convener, WASPEN; Pharm. Vern Ohaya, vice-president, Trustee Drug Inc.; and Dr Obi Adigwe, DG, NIPRD, at the WASPEN 2023 Clinical Nutrition Conference, held at the NECA House Event Centre, Lagos, recently.

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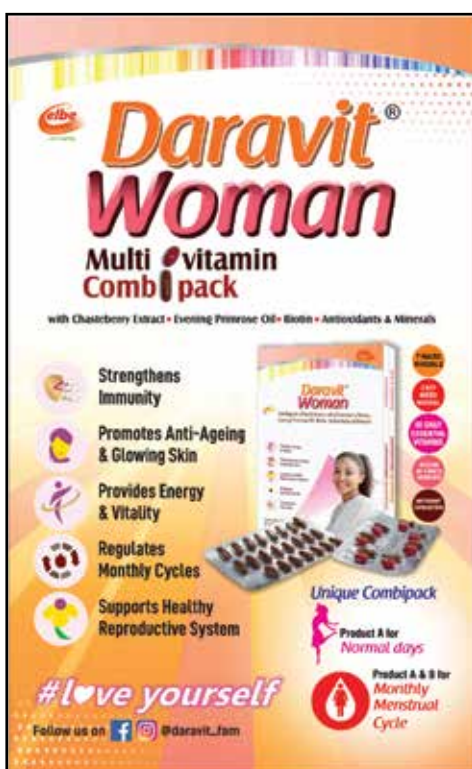
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### PHARM. (DR) DORCAS OMEIRE

Pharm. (Dr) Dorcas Nyalas-Omeire is the current head of Pharmacy Unit at the University of Lagos Medical Centre; and chairman, Nigerian Institute of Management (Chartered), UNILAG Chapter.

She graduated from Ahmadu Bello University (ABU) Zaria with a B.Pharm in 1990. Thereafter, she obtained the Fellowship of the West African Postgraduate College of Pharmacists (WAPCP), as well as MSc. in in Public Health Management, from the University of Lagos. She also obtained the Doctor of Pharmacy Degree (Pharm. D) from the University of Benin to hone her clinical skills.

Omeire epitomises the 10-star pharmacist model of care giver, communicator, teacher, decision maker, leader, manager, researcher, lifelong learner, entrepreneur, and agent of positive change. Her passion for excellence in healthcare management took her to Israel, where she obtained a postgraduate diploma in Health Systems Management, at the Galilee International Management Institute (GIMI).

A trained Substance Use Disorder (SUD) counsellor, Omeire bagged the 2022 Pfizer Award of Excellence. Her passion for best pharmacy practice made her prevail on the UNILAG management to build a state-of-the-art modern pharmacy unit that is now the pride of the medical centre and the University of Lagos.

Omeire has participated actively in organised pharmacy activities. She is the immediate past secretary of the Association of Lady Pharmacists (ALPs), Lagos State Chapter. Aside from being a Fellow of WAPCP and a member of the Galilee International Management Institute (GIMI), Israel, she has won other awards and recognitions. She bagged the 2022 Pfizer Award of Excellence.

Omeire's resilience and tenacity enabled her to turn around UNILAG Pharmacy from near bankruptcy to a profitable venture, an initiative that earned her the UNILAG Vice-Chancellor Award of Excellence in 2010. Additionally, the positive transformational reforms and pharmacy care she executed at the UNILAG Medical Centre earned her the nomination as the Best Staff of the Medical Centre in 2021.

Born to Christian Missionary parents - Rev. and Mrs Bartholomew Nyalas, from Adamawa State- Omeire has built a strong network of positive associates. She is blessed with highly supportive mentors (chief among whom is Professor Cecilia Igwilo), mentees, colleagues, friends, family, spouse and children.



## Inspiration

"When you give joy to other people, you get more joy in return. You should give a good thought to happiness that you can give out." - **Eleanor Roosevelt**

"Don't waste your time in anger, regrets, worries, and grudges. Life is too short to be unhappy." - **Roy T. Bennett**

"Don't judge each day by the harvest you reap but by the seeds that you plant." - **Robert Louis Stevenson**

"What you do makes a difference, and you have to decide what kind of difference you want to make." - **Jane Goodall**

"It is better to fail in originality than to succeed in imitation." - **Herman Melville**

"We are what we repeatedly do. Excellence, then is not an act, but a habit." - **Aristotle**

"When I stand before God at the end of my life, I would hope that I would not have a single bit of talent left, and could say 'I used

everything you gave me'." - **Erma Bombeck**

"Success is to be measured not so much by the position that one has reached in life as by the obstacles which he has overcome while trying to succeed." - **Booker T. Washington**

"Hold on to your dreams of a better life and stay committed to striving to realize it." - **Earl G. Graves, Sr.**

"A life is not important except in the impact it has on other lives." - **Jackie Robinson**

"He who is not courageous enough to take risks will accomplish nothing in life." - **Muhammad Ali**

"Do not pray for an easy life, pray for the strength to endure a difficult one." - **Bruce Lee**

"Life isn't perfect, any failures you have are actually learning moments. They teach us how to grow and evolve." - **Phillipa Soo**

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The recent decision by the Federal Government of Nigeria to reduce drug importation in the country from 60 to 40 per cent is a step in the right direction and a fulfilment of the yearning of stakeholders in the pharmaceutical industry. Unsurprisingly, many analysts have hailed the policy as one that will significantly improve the lot of local pharmaceutical manufacturers in the country, while also salvaging Nigeria from being a dumping ground for all sorts of imported pharmaceutical products.

Special Adviser to the President on Health, Salma Anas-Ibrahim, made the decision known at a workshop in Abuja, organised to strengthen the World Health Organisation (WHO) and Nigeria's cooperation strategy. She noted that the government of Bola Ahmed Tinubu is committed to bridging the gaps in the Nigerian health sector.

Should this new initiative be thoroughly implemented, it will reverse Nigeria's inglorious status as one of the top importers of medications and a perpetual dependant on countries like India and China for active pharmaceutical ingredients. It will also expedite the country's drive towards self-sufficiency in drug manufacturing, as well as attainment of universal health coverage.

However, to ensure that this policy does not become a pipe dream, as several other lofty ideas of government, concrete measures must be put in place towards its

## Drug import reduction: A welcome boost to local manufacturing

actualisation. Ideally, even prior to the declaration, the government should have dialogued with key stakeholders and players in the local pharma manufacturing industry to know their challenges and collaboratively proffer lasting solutions to them. From all indications, however, this never happened - portending a faulty and worrisome start that must be swiftly remedied by the government.

It must be emphasised that no government permutations can succeed in repositioning the local manufacturing industry, without actively engaging the key players and decisively tackling the multifarious challenges besetting it. Such encumbrances as inadequate infrastructure, scarce raw materials, unstable foreign exchange, stifling tariffs, insufficient manpower - due to brain drain - and many others must be holistically addressed before the announced reduction in importation can translate to positive changes in the industry.

Very pertinent in this regard are the views of Prof. Cyril Usifoh, president of the Pharmaceutical Society of Nigeria (PSN). Reacting to the new policy, he said: "Stakeholders should have been properly consulted before such pronouncements were made. The reason is that, if you reduce

importation from 60 to 40 per cent, we really don't have many industries producing what we need for medicines. I'm talking about the active pharmaceutical ingredients (APIs). We need to get the infrastructure and basic things necessary, so as to enable us produce these drugs. It is not just for the pharmaceutical industries to flourish, but will we be able to meet the medicines needs of the average Nigerian?" he said.

Moreover, major investment in technology and finance for local manufacturers are crucial for the realisation of the idea, as expressed by the National Chairman of the Association of Community Pharmacists of Nigeria (ACPN) Pharm. Adewale Oladigbolu. According to him, "We need a large pool of investments in the pharma sector. Government must ensure that local manufacturers have access to finance and technology. It must also ensure that all bureaucratic bottlenecks are reduced. If they do all these, then we will enjoy the policy, as stated. Walking the talk has always been the problem of Nigeria. We are not lacking in good ideas; it is the implementation that has been the problem. I pray that we do not fail this time around because a country that cannot provide medicine for its citizens is not secure."

We believe that if the government can heed such vital advice as above in implementing the laudable initiative, its success will serve as a means of medicine security and revenue generation for the nation. Nigerians will not only have their medicine needs supplied locally, but the industry will also supply other countries in the West African sub-region, which will boost foreign exchange for the country.

Government must also demonstrate total commitment towards the actualisation of this policy by ensuring that the energy sector is at its best, as the current electricity generation and distribution levels in the country remain absolutely abysmal and antithetical to the aspirations of local manufacturers. One way to solve the power problems in the country is to deregulate the sector, which has been largely monopolised by the Power Holding Company of Nigeria (PHCN). With more players, there would be strict competition in terms of quality service provision and pricing.

We call on the Federal Government to, as a matter of urgency, inaugurate a working committee that will drive the process of actualising this auspicious policy. Such committee, consisting of representatives of government and other key stakeholders and players in the pharmaceutical industry, must be equipped with the necessary, resources and conducive atmosphere it needs to brainstorm and take rightful decisions.

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## The spirit of helping people

By Sir Ifeanyi Atueyi

Although the Bible has a lot of doctrines on helping the poor, needy, and fatherless, widows and indeed all those who need help, an experience I had at JFK International Airport in September, 2022, on my way for NAPPSSA conference in Tampa, Florida, made me to appreciate this lesson more deeply.

Starting from MM International Airport to board Delta Airline at 11.00am, I was exposed to cold environment and subjected to walking for a long distance. Staying in the cold aircraft for about 11 hours was not pleasant to me. Although I wore a pullover and a jacket and walked about occasionally to exercise my body in the aircraft, the long exposure to cold did not make me comfortable.

On arrival at the JFK International airport, we had to walk a long distance for the protocols to transit to Washington DC (Dulles) airport in Maryland. By divine guidance, my wife asked a lady moving a wheel chair for direction to the gate for Washington DC. She told us that it was a very long distance from there and immediately offered the take my wife in the wheelchair. My wife thanked her but told her I needed it more than her. That lady was like an angel sent to us. She said that she was not assigned to us but she had to do it. She took us to collect the boarding pass and undergo the routine processes. At one entrance reserved for priority passengers, she asked the officer in charge for permission to use it. The officer looked at me, smiled and nodded his head in agreement. I thanked the lady for her help and she cheerfully replied me she receives the Lord's favour wherever she goes.

Eventually, we got to our gate in good time and with minimum stress and I signed off for the wheelchair service. Before this time, I never used a wheelchair. I used to pity such people in the wheelchair. But it now appears that I will be booking for it any time I travel. In the aircraft, one young couple sitting near us closely watched us. On arrival at the Washington DC airport, the young man stepped forward and offered to carry our two carry-on boxes out of the aircraft. They monitored our movements as we

entered the train to pick up our luggage. We went along with them to our conveyor belt and he helped us to bring out our boxes. Our challenge was reaching our relation to pick us up.

We could not easily access the free Wi-Fi. He immediately contacted our relation who was already on his way to the airport. This young couple took us to the waiting point and then informed our relation exactly where to pick us up.

I learnt a great lesson from this trip. Everyone has problems of one type or the other. No one

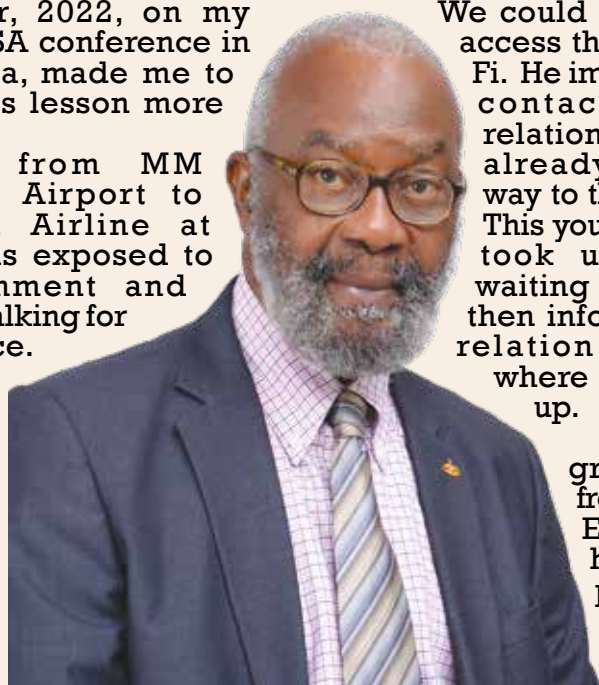
has immunity for problems. Everyone needs help from other people at one time or the other. You may have a lot of money but your need may be someone to put food into your mouth in your hospital bed. Sometimes your money can create some problems for you.

Sometimes help comes from unexpected quarters. One thing is certain. God is our Helper and His help is mediated through people. He uses people as vessels or channels to provide help for other people. That is why we give Him glory while appreciating the vessels He has used.

Everyone must cultivate the habit of helping other people so that when you are in need God will provide you help through someone. If you do not help people you may not receive help when you need it.

Proverbs 21:13 NKJV says, **"Whoever shuts his ears to the cry of the poor will also cry himself and not be heard."** The good we do for other people is like a deposit in a bank. Proverbs 19:17 NKJV says, **"He who has pity on the poor lends to the LORD, and He will pay back what he has given."**

I believe that the spirit of helping others is a grace from God. It does not depend upon how much you have. There are some people who are always ready to give and render help because they love to give and help. There are those who have plenty but are stingy. To them, giving is reducing one's resources. They don't know the physical and spiritual law of sowing and reaping.



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# Time to rethink your strategy

By George O. Emetuche

*"The essence of strategy is choosing what not to do."*  
– Michael Porter

There's no doubt that this season will be tough. There's no pretence in expressing this truth. The removal of fuel subsidy will come with inflation. Prices of goods and services will rise because petrol is a big factor in the economy. Businesses and individuals depend on petrol to generate electricity. Even alternative energy sources need petrol at one point or the other.

According to the National Centre for Energy Efficiency and Conservation, University of Lagos, Electricity consumes 50 per cent of the profits of MSMEs in Nigeria (as reported by Punch on 17 February, 2022). The situation will naturally present a tougher scenario when you consider the effect of inflation which stood at 22.22 per cent in April 2023, as reported by National Bureau of Statistics (NBS).

## The current reality

In the course of my research to ascertain the effect of the removal of fuel subsidy on transportation, I used public transport on 6 June, from Mangoro Bus Stop, Ikeja, Lagos, to Dopemu Bus Stop. It was a journey of just two bus stops and not up to a five-minute drive. According to my co-passengers, the fare used to be N100 or even N50 sometimes. I paid N200, which is 100 per cent increment. This rise in price is expected in other areas too.

## What do we do?

What is the solution? Do we surrender to tough situations? I believe the time is right to rethink strategies and processes. We need to start by asking the right questions and providing the right answers.

- What is your production process?
- What is your sales process?
- With is your business model?
- Do you want to continue the old way, or do you want to rethink your strategy?

This is the time to justify actions before embarking on them. This is the time to be strategic in business and personal life.

Let me invest a little time to discuss my recommendations for sales professionals at this time. Sales is my core area and the segment is vital because revenue is the lifeblood of business.

## My recommendations

### 1. Get the right team

People matter. Organisations need to assemble the right team. The right team will get things done. The wrong team will rock the boat. You need to recruit right. You need to train and retrain your team. Capability enhances capacity.

### 2. Pursue efficiency

Sales professionals should not just be effective, they should be efficient. Cost of sales in the field should be watched. Sales velocity should be positive. In achieving efficiency, speed of closing sales should be enhanced. This is where know-how and strategy come in.

### 3. Prioritise

This is the time for sales professionals to invest more time on repeat customers. I recommend the 90/10 rule; that is, invest 90 per cent attention on repeat customers, and 10 per cent on attracting new

customers. Invest more time on repeat customers, and the rest of the time on prospecting, presenting, and closing sales. This strategy will improve productivity because, in sales, precision reduces cost and increases sales.

### 4. Segment

Sales professionals should not just move without segmenting the market. Divide the market into groups of potential customers with similar needs and behaviours. This helps in targeting and positioning of your products and services. Don't sell without a plan.

### 5. Improve in the use of technology

Collate data. Work with data. Sales professionals mustn't be in the field daily. They can work strategically on chosen days, and use phone, emails, social media, and other platforms to keep in touch

with customers and prospects. Sell efficiently. Sell strategically.

### 6. Allow credit sales to credible customers

Credit sales can be an incentive but it should be given to only credible customers. People who are tested and trusted may be allowed credit sales if the organisation sells on credit.

### 7. Improve your process

Business processes should be smooth. Cumbersome processes should be eliminated. People want smart methods that save resources. Make processes easier and effective. Customers shouldn't waste time to receive goods.

### 8. Be innovative

Find new and creative ways of getting things done. Connect with the marketplace creatively. Don't be left behind.

### 9. Communicate effectively

Organisation should



communicate more to their teams and customers. Empathy is needed at this time. Effective communication skills help in showing empathy.

### 10. Be Positive

In all, be positive. Believe that this too shall pass. We survived Ebola. We survived COVID-19. We survived inflations and several challenges in the past. We will triumph over this tough situation too. Move from the good to the better, then to the best.

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# Inquest

with  
**Patrick Iwelunmor**

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**I**t is no longer news that the Federal Government of Nigeria has stopped the subsidisation of petrol. One of the direct and immediate implications of this development is the increase in the pump price of the product, which has also triggered increase in the prices of food and transportation.

For a country that has pegged minimum wage at 30,000 naira, it will be extremely difficult for citizens to cope financially. This is more so in the midst of raging inflation and the reckless fall of the nation's currency, the naira, in both the local and international markets.

The average Nigerian worker is already an endangered species, because going by his take-home pay, nothing honourable is expected to happen in his life. A salary that barely lasts one week is an economic time bomb that will surely lead to the demolition of wellbeing and self-esteem. Grappling with financial difficulty in austere times is one of the gateways to depression.

Many families have been destroyed by this very important survival factor. Marriages are crumbling due to the inability

of husbands to provide for their families. A vicious cycle of depression is gaining momentum in Nigeria because sufferers of the condition do not have the financial wherewithal to seek help from psychologists and psychiatrists.

Economic hardship has been linked with depressive thoughts and symptoms, as a direct reflection of stress through adverse material and health conditions (Lovallo, 2005; Pearlin, 1989). Pearlin goes further to argue that depression is one of the most obvious manifestations of stress.

Stress, in itself, could be a product of many factors, including but not limited to financial hardship, marital crisis, adverse health condition, loss of employment, debt and other forms of deprivation. Interestingly, all the aforementioned factors can be triggered by economic hardship created by government policies, such as the recent removal of subsidy on petroleum products by the Federal Government.

There are however strategies that can be put in place to dispel the dark and inclement financial and economic clouds hovering over the lives of Nigerian workers

## Managing subsidy-related depression

both in the public and private sectors. These strategies will go a long way in alleviating all forms of stress and psychological agonies linked to the effects of subsidy removal.

For those who are already battling depression, consulting a psychologist and/or a psychiatrist remains the best move. This is apparently because issues pertaining to mental health should not be toyed with; they are very delicate and must not be treated with home medication.

For our peculiar situation in Nigeria, one of the best strategies for tackling subsidy-related depression is for Nigerian workers to dialogue with their employers, just as the Nigeria Labour Congress (NLC) has recently done by engaging the Federal Government. During the roundtable, several propositions were made on the part of labour, while the government also made promises that heightened the hopes of civil servants.

Labour proposed a minimum wage of 200,000 naira monthly. Even though that demand may not be totally met, there are high hopes that the federal government is committed to bettering the lot of civil servants in terms of their wages.

Another strategy could be reducing official workdays as seen in some states like Edo.

Governor Godwin Obaseki took the step in order to reduce the additional financial burden the subsidy removal would place on workers in the state. By so doing, the governor has systematically killed many birds with one stone.

The lessons learnt from COVID 19 restrictions have shown that people can work from home these days and still deliver efficiently in their roles, especially with the innovations available in the digital space. Rather than towing the inglorious path of laying off staff, employers can reduce the number of workdays and still achieve their targets.

Employers can also either increase their staff's salaries or offer them special transportation allowances that will ease the financial stress they are grappling with. Such measures will no doubt have an effect on their mental wellbeing by removing all forms of agonising thoughts and lamentations, which are symptomatic of the onset of depression.

Most importantly, keeping a positive mental attitude and constantly reminding oneself that challenges are meant to be overcome through hopeful thinking and prayer can also go a long way in stabilising the mind and keeping it free from worries capable of dampening the human spirit.

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## Health awareness for men

By Mrs Chima Ejimofor

This piece was written in commemoration of this year's Fathers Day, marked on 18 June, 2023. Globally, certain health issues are more associated with Men than women. Our present focus is on cardiovascular health and stress.

Arteriosclerosis (calcium deposits) and atherosclerosis (cholesterol and /or fat deposits) are hardening of the arteries. This is caused by calcium and /or fat deposits on the interior walls of the arteries and also by cross-linking. This greatly reduces the blood flowing through the arteries and produces blockage in blood circulation caused by the molecular crossing, which is produced by the free radicals.

The most common symptoms are high blood pressure, angina pectoris, aneurysm and heart attack. Others include cerebral stroke, thrombosis, formation of blood clots, memory loss, lack of concentration, fatigue, weakness, muscular contractions and pain when walking.

An aneurysm is the dilation or enlarging of the arteries, caused by an increase in blood pressure when the artery is blocked. Aneurysms are very dangerous because they put pressure on the surrounding tissues, and can cause a bursting of the artery, leaking blood from same.

The location determines the problems caused. If in the brain, it can cause partial paralysis. It can happen anywhere in the body. Many of the stories we hear about death during long distance travel are examples.

Sclerosis on the other hand is caused by inadequate nutrition, consumption of foods high in cholesterol (which deposits in the arteries) such as animal fats in red meats, eggs (yolk), as well as stress, lack of exercise, nicotine addiction and arterial hypertension.

Many agents found in the body are cross-linkers. One of these called aldehyde is found in cigarette smoke and smog; it can also be formed in the liver by alcohol consumption. Free radicals and UV rays (ultraviolet light) are very potent cross-linkers.

### Suggested natural remedies

- Lower the consumption of foods that are high in cholesterol.
- Increase consumption of high density fats (HDL) and unsaturated fatty acids (EPA) and Omega 3. These are available in salmon, tuna and other cold, fresh and Arctic water fish.
- Use olive oil (oleic acid) and GLA (gamma-linoleic acid). These products help to eliminate the low density cholesterol (LDL) in the arteries (bad cholesterol) and triglycerides which are deposited in and clog the arteries

Note: Cholesterol is found only

in animal sources.

- To lower your cholesterol, do the following :
- Eliminate red meats (beef and pork) and meats high in fat
- Eggs, no more than three yolks a week
- Limit consumption of Shrimps and oysters
- Reduce fried foods, pork sausage, sugar and flour
- Avoid cigarettes, coffee and alcohol
- Limit your intake of butter, cream, cheese, vegetable and animal fats.
- Reduce salt
- Avoid artificial seasonings

Add the following to your diet :

- Fish, tuna, salmon, sardines,

- Atlantic mackerel
- Almonds, nuts.
- Wheat germ, soybeans, garbanzo.
- Skinless chicken, turkey
- Olive oil
- Lots of fibres
- Lots of fruits
- Garlic, onions
- Vegetables
- Arctic Sea Omega 3, garlic, thyme, aloe vera gel, Cardio-Health and Argi Plus.

We encourage our men to pay particular attention to their cholesterol and blood pressure levels.

Our discussion next month will continue with stress.

References :  
Google

Guide to Natural Remedies for



Health and Well-Being by Enrique Garza Gutierrez BSc, C. Ht.

### About the Author:

Mrs. Chima Ejimofor is the lead partner of Infinite Health Consult, and is available for the purchase of FLP high quality nutritional supplements, health talks and wellness Seminars. She is based in Lagos, Nigeria. Telephone/WhatsApp: 07033179632, email: infinitehealthconsult@gmail.com

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# Ben Nwosu: Celebrated lifesaver of children with diabetes

By Ola Aboderin

At the glitzy Research Dinner, organised by the American Diabetes Association (ADA) on 20 April to recognise the latest outstanding efforts to find a cure for diabetes, the name of Professor Benjamin Udoka Nwosu commanded special attention. He was honoured and presented with a prestigious award that had the inscription – “For all you do to help those living with diabetes”.

What particularly drew the attention of ADA and indeed the entire scientific world to celebrate Nwosu was the ground-breaking research he published earlier in November 2022. Findings of the research showed that giving children high doses of vitamin D (a relatively cheap and very accessible product), when they are first diagnosed, drastically slows the progression of type 1 diabetes (T1D) and consequently prevents potential complications.

Type 1 diabetes - a condition in which the pancreas produces little or no insulin - is one of the most common chronic diseases in children. Without timely treatment, it can cause serious long-term health damage, including blindness, kidney failure, heart attacks, stroke and lower limb amputation. This is particularly alarming as figures show a continued global increase in diabetes prevalence. In Nigeria alone, there are over 100,000 diagnosed cases of type 1 diabetes annually.

Currently, however, the medical world is heaving a sigh of relief – thanks to the landmark efforts of Nwosu. According to the medical scientist, the prolongation of the “honeymoon phase” of type 1 diabetes results in significant reductions in the degree and occurrence of long-term complications of type 1 diabetes. He showed that high-dose vitamin D could reduce inflammation at the level of the pancreatic beta-cells and lead to more prolonged survival of the remaining beta-cells.

Nwosu's work – the very first to demonstrate beta-cell protection by vitamin D in children - now guides early approaches to the management of children with newly diagnosed type 1 diabetes in many hospitals across the world.

## Renowned trailblazer

Prof. Nwosu is no neophyte to revolutionary methodologies in the treatment of diabetes and the health conditions of children. He previously did a study that was the first to characterise a predictive model for the lack of partial clinical remission in children with



Prof. Benjamin Udoka Nwosu

new-onset type 1 diabetes. The work, which was described as a milestone discovery, was featured in the ADA News Brief. He was the first to report a high prevalence of vitamin D deficiency in irritable bowel syndrome in children, which has led to routine screening for vitamin D deficiency in patients with irritable bowel syndrome.

Nwosu also previously announced that routine nutrition counselling can reverse elevated blood sugar and prevent the development of type 2 diabetes in children and adolescents with prediabetes. According to him, “All children with prediabetes should see a nutritionist. This has been part of the standard of care, but with no empirical, supporting data for its efficacy. Our study has provided the much-needed data to support medical nutrition therapy for children and adolescents with prediabetes.”

For that particular study, Nwosu and his team took a look back at 46 boys (mean age 12 years) and 62 girls (mean age 13 years) with prediabetes (HbA1c 5.7 per cent to 6.4 per cent) who were recommended to receive nutrition therapy every

three months. This consisted of a nutritionist or registered dietician meeting with families to educate them on reading food labels, making food choices and assessing their nutritional intake. Altogether, 44 youngsters (41.5 per cent) received two or more nutrition visits per year (adherent group) and 62 (58.5 per cent) received none or only one nutrition visit per year (non-adherent group). Two of the youngsters lacked nutrition visit information.

In a period of four years, 18 youth (17.0 per cent) progressed to type 2 diabetes, including 14 of the 62 non-adherent youth (22.6 per cent) and four of the 44 adherent youth (9.1 per cent). Adherence to nutrition visits was associated with a four-fold reduction in the likelihood of progressing from prediabetes to type 2 diabetes (hazard ratio 3.88; 95 per cent confidence interval 1.26 to 11.98, P=0.02).

Nwosu explained, “Interestingly, this positive effect can be seen without changes in body weight. Our data suggest that adherence to nutrition visits could reverse prediabetes by

decreasing insulin resistance. This new information should encourage parents of children with prediabetes to optimize their children's adherence to nutrition visits.”

Similarly, in 2019, the paediatric endocrinologist established the relationship between the phenomenon known as “partial clinical remission” in children newly diagnosed with type 1 diabetes and their cholesterol levels when they reach puberty. As published by the Journal of the Endocrine Society, the study found that children with type 1 diabetes who did not experience partial clinical remission following initiation of insulin treatment have higher cholesterol levels in puberty than those who did. Elevated cholesterol in non-remitters is an early indication that they are at higher risk for cardiovascular complications later in life.

Speaking on the crucial study, Nwosu said, “This is the first study to characterise the pattern of lipid profiles in children and adolescents with type 1 diabetes as they traverse through puberty based on stratification by remission status and compared to their healthy peers. A child with a history of partial clinical remission is going to have a better lipid profile during puberty, and that can extend throughout life.”

## Background and education

Prof. Nwosu is presently the chief of Endocrinology Department at the Cohen Children's Medical Centre of New York. He is also a professor of Paediatrics at the Zucker School of Medicine at Hofstra/Northwell, also in New York.

He attended University of Nigeria, Nsukka, where he obtained his medical degree in 1995. He had his residency training in Paediatrics at the Howard University Hospital, in Washington DC (1997-2000) and obtained his fellowship training in Paediatric Endocrinology at the National Institutes of Health, in Bethesda, Maryland, USA (2000-2003).

Nwosu is a review editor at Frontiers and sits on the Editorial Board of several scientific journals. He is also the director of Outreach Sub-Committee of the Communications Committee of the Society for Paediatric Research. He served as an invited author and editor at the PREP Endocrinology of the American Academy of Paediatrics from 2013-2016.

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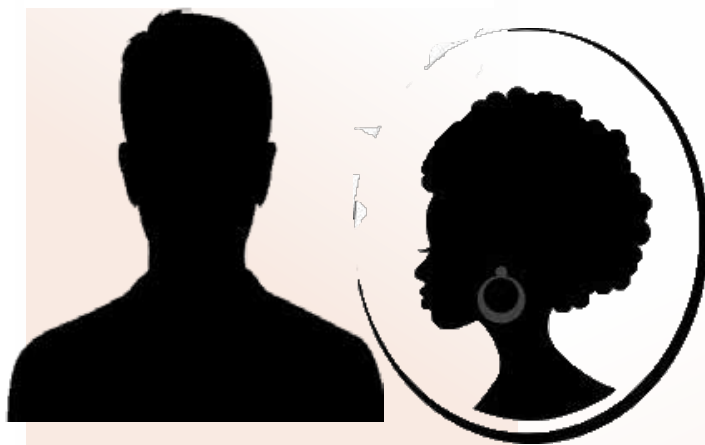
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## Selecting your spouse the “write way” (2)

Should these two get married?

By Dipo MacJob (Dr Write)



handwriting is big in size, you find them also extroverted. These people are the type advertisers look out for because many a time, their decisions are based on emotions rather than thorough rational thinking. They can get quite impulsive and impatient,

In the last edition, we began a conversation on how to leverage graphology as a profiling tool in selecting a spouse. It has been established already that humans are very complex beings, with millions of neurons in the body, each having its own complexities. Therefore, we would always be in need of tools and gadgets to help unravel the mystery beneath human behaviour at every point in time.

As promised the last time, we will be looking at the handwriting samples of these two prospective couple in the silhouette images, to see if they are compatible, graphologically speaking.

It is important for me to restate here that graphology is, in no way, trying to serve as a replacement for God's divine direction regarding the choice of a spouse or partner. However, being a knowledge niche rooted in psychological principles, with results of effectiveness to show over decades, it is wisdom for us to learn one or two insights to be gained from this skill set as it pertains to personality profiling.

Let us assume that the two handwriting samples we have are labelled sample 1 and the other sample 2, belonging to the male and female, respectively.

*Please let me hear  
from you and write  
me a friend.  
Sincerely  
Lillian A. Borden  
306 French St.*

*Let me hear from you  
and write me a friend.  
Sincerely  
Lillian A. Borden  
306 French St.*

From the two samples you will notice that the slants of these two writings are similar. They are both right slanted. As a rule, similarity in slants in a handwriting is one indicator of similarities in behavioural traits or personality characteristics.

It has been established already that anyone with a right-slanted handwriting is usually expressive, emotional and if the

talk, the slant is one of the ways to find that out. But you can have someone who is quite expressive yet not really the outgoing type. This is similar to what we have in the two samples above. Even though both are right-slanted, one of them is a bit reserved personality.

Whatever the case may be, you can know a bit about someone's relationship skills by looking out for certain parameters in their handwriting. This helps you to gauge the compatibility level between you and the other person.

One other parameter I would like to mention in this edition is the spaces between words. If the handwriting has considerable spaces between the words written, you are looking at someone who is rather introverted and isn't so much into having lots of friends. If its closely spaced, it has a different meaning.



Don't miss the next edition for another exciting topic. Until then, always remember that **“if you must get it right, you must do it the “write” way.”**



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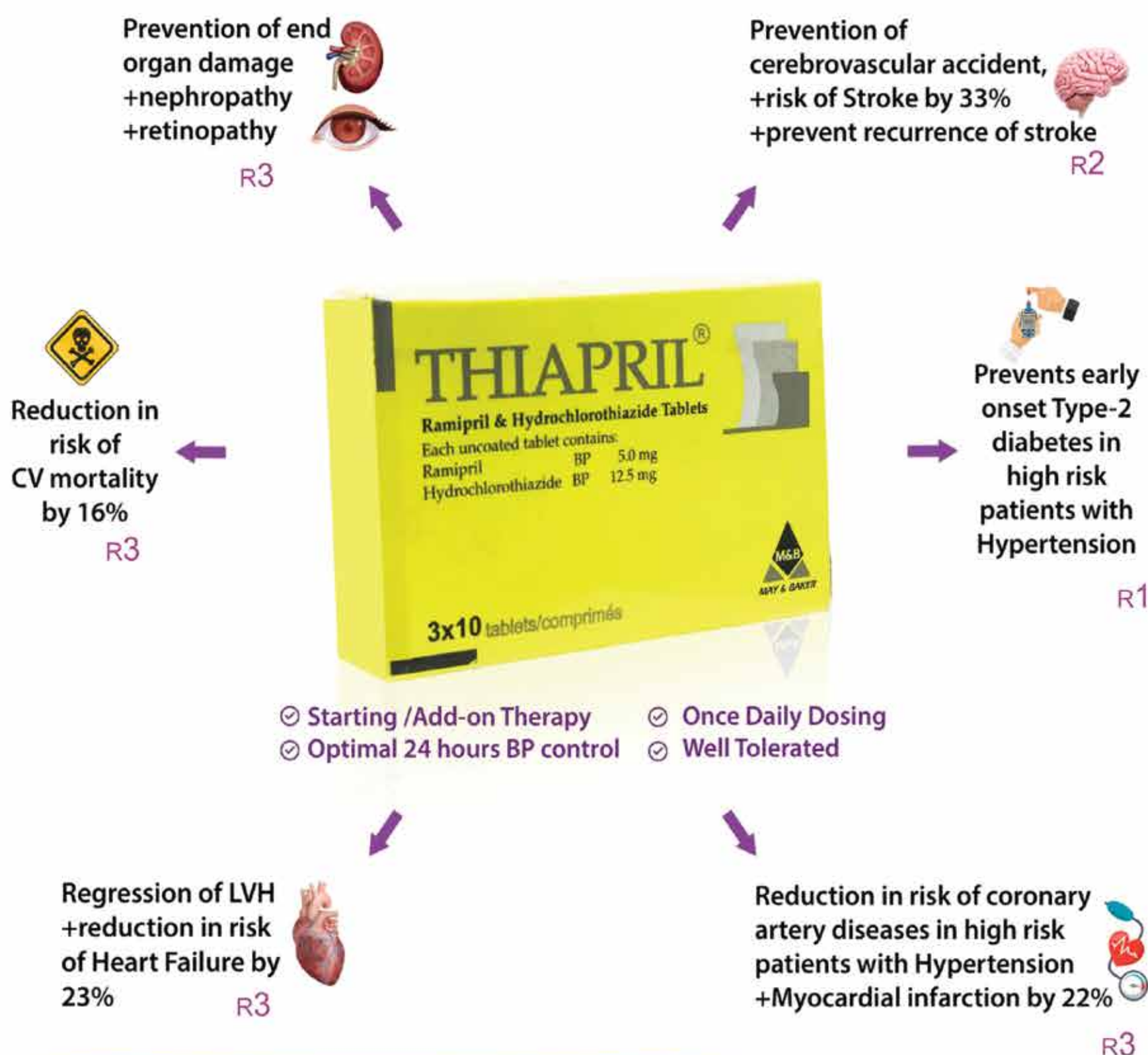
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**Celebrating 44 Years of Uninterrupted Monthly Publication (1979-2023)**



# New trends in the management of Heartburn and GERD

**I**n a report titled "Overcoming heartburn once and for all", by Nini Iyizoba, as published by the Guardian newspaper, it was reported that many adults experience symptoms of acid reflux or heartburn on a daily basis, adding that in Western countries, up to 30 per cent of adults experience symptoms on a weekly basis, while in Nigeria, there are more than 1.5 million cases each year.

Difference between Heartburn, Acid Reflux, and GERD

The terms heartburn, acid reflux, and GERD are often used interchangeably. They actually have very different meanings. Acid reflux is a common medical condition that can range in severity from mild to serious. Gastroesophageal reflux disease (GERD) is the chronic, more severe form of acid reflux. Heartburn is a symptom of acid reflux and GERD.

## What is heartburn?

The term "heartburn" is misleading. The heart actually has nothing to do with the pain. Heartburn occurs in the digestive system, specifically, in the

oesophagus. Heartburn involves mild to severe pain in the chest. It's sometimes mistaken for heart attack pain.

The lining of the oesophagus is more delicate than the lining of the stomach. So, the acid in the oesophagus causes a burning sensation in the chest. The pain can feel sharp, burning, or like a tightening sensation. Some people may describe heartburn as burning that moves up around the neck and throat or as discomfort that feels like it's located behind the breastbone.

Heartburn usually occurs after eating, and bending over or lying down can make it feel worse. Heartburn is quite common. It is estimated that more than 60 million Americans experience heartburn at least once a month. You may be able to manage heartburn by:

- losing weight
- stopping smoking
- eating fewer fatty foods
- avoiding spicy or acidic foods
- Mild, infrequent heartburn can also be treated with medications like antacids. If a patient takes

antacids more than several times a week, a doctor should evaluate such a person. Heartburn may be a symptom of a more severe problem like acid reflux or GERD.

## What is acid reflux?

A circular muscle called the lower oesophageal sphincter (LES) joins the oesophagus and stomach. This muscle is in charge of tightening the oesophagus after food passes to the stomach. If this muscle is weak or doesn't tighten properly, the acid from the stomach can move backwards into the oesophagus. This is known as acid reflux.

Acid reflux can cause heartburn and other symptoms that include:

- cough
- sore throat
- bitter taste in the back of the throat
- sour taste in the mouth
- burning and pressure that can extend up the breastbone

## What is GERD?

GERD is a chronic form of acid reflux. It's diagnosed when acid reflux occurs more than twice a week or causes inflammation in the oesophagus. Long-term damage to the oesophagus can lead to cancer. Pain from GERD may or may not be relieved with antacids or other over-the-counter (OTC) medication.

## Symptoms of GERD include:

- bad breath
- damage to tooth enamel due to excess acid
- heartburn
- feeling like stomach contents have come back up to the throat or mouth, or regurgitation
- chest pain

persistent dry cough

asthma

trouble swallowing

Most people can experience heartburn and acid reflux intermittently related to something they ate or habits like lying down immediately after eating. However, GERD is a chronic condition where doctors start to examine long-lasting habits and parts of a person's anatomy that could cause GERD. Examples of the causes of GERD include:

being overweight or obese, which puts extra pressure on the stomach hiatal hernia, which reduces pressure in the LES

smoking

consuming alcohol

pregnancy

taking medicines known to weaken the LES, such as antihistamines, calcium channel blockers, pain-relieving medicines, sedatives, and antidepressants

Symptoms of GERD may disrupt one's daily life. Fortunately, they can usually be controlled with treatment. Options include:

diet modification

weight loss

smoking cessation

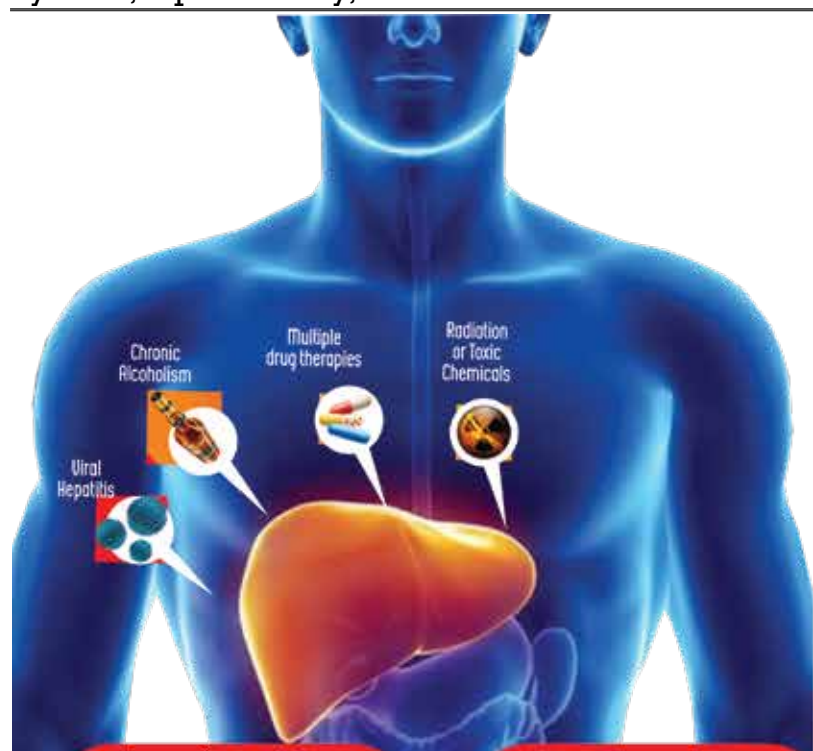
alcohol cessation

Medications for GERD work to reduce the amount of acid in the stomach. They may not be effective for everyone. Some people need surgery to help reinforce the LES.

## GERD in Children

From babies to teenagers, children of all ages can experience GERD, about one-fourth of all children and teenagers

*continued on page 13*



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## PHARMANEWS IS BORN

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

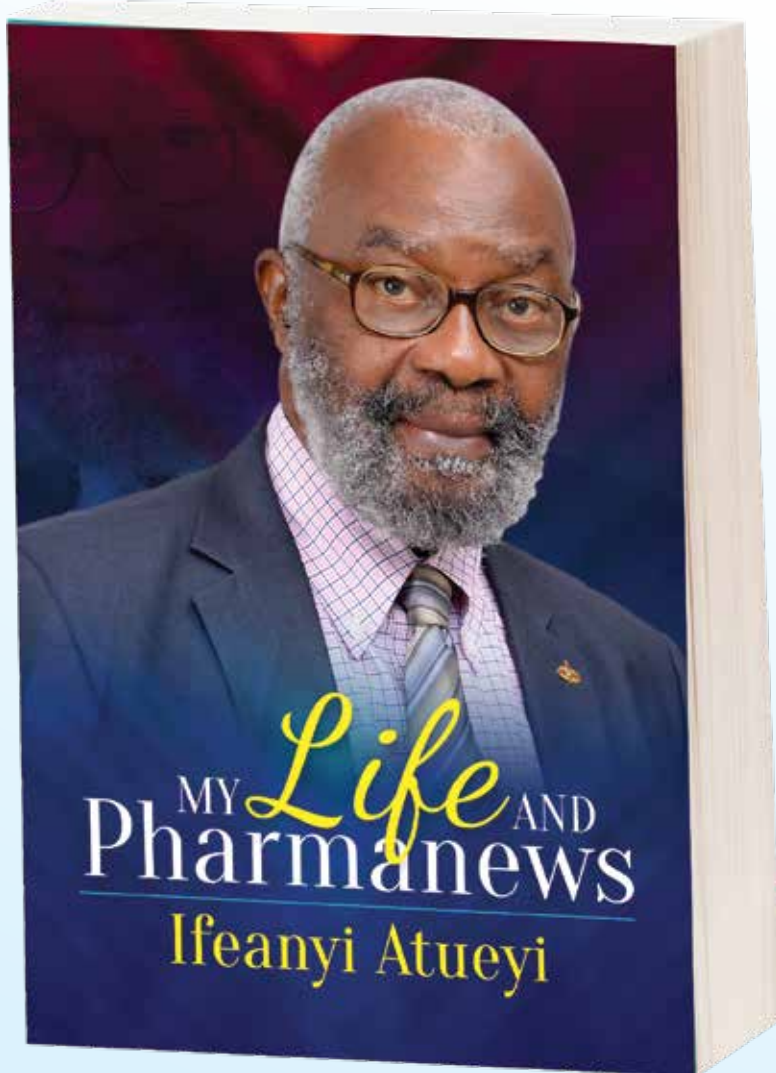
It was Victor Hugo, the iconic French writer, who once said, "All the armies of the world cannot resist an idea whose time has come." One immediately gets a good understanding and appreciation of Hugo's message here as one considers the chain of events leading to the birth of a child that has completed its period of gestation in the womb. From what I have read, two schools of thought exist among medical scientists and researchers as to who, between the mother and the child, triggers the onset of labour. There are those who believe that it is the mother's body that signals to the baby that its "residency" period is over, while others believe it is the baby that actually tells the mother that it is mature enough to face the outside world.

Regardless of anyone's position on the matter, however, one of two questions must arise: What makes the same body of the mother that had patiently harboured and cared for a baby throughout the gestation period to suddenly decide that it no longer wants to continue

housing it? Or, on the other hand, we may ask, what makes a baby that has comfortably stayed in the womb for nine months to suddenly decide that it desperately wants

to be out of it? The answer we will get to both questions is the same. The appointed time has come – and nothing on earth can stop it. And so it was with

astonishment will be sufficiently tempered by the preamble I already provided at the beginning of this chapter, as to the wonders



**Pharmanews.** The sequence of events that led to its birth was so sudden and so extraordinary that, till today, there are still questions surrounding it that even I cannot answer. The only conclusion I can satisfy myself with is that God must have purposed that it was time for it and, thus, everything else must begin to work towards its actualisation without delay.

The "labour contractions" for the birth of **Pharmanews**, as I termed it in the previous chapter, actually began in 1978, when I decided to resign as the editor-in-chief of the PSN journal. Well, as much as one may be astonished by this decision of mine – considering how passionate I had been for the publication – I believe that this

preceding the birth of an idea or of a child.

Sincerely, I cannot pinpoint any cogent reason for taking the decision to resign as the editor-in-chief of the Nigerian Pharmacy Journal. To start with, there was no limit to my tenure, unlike the positions of the President and National Secretary that spanned three years. Therefore, after having served under Pharm. Chris Efobi, as president, from 1974 to 1977, I continued under Chief Ayo Fasanmi.

Secondly, and more importantly, this was an engagement that had given me joy and satisfaction since I took it up. In fact, as I have said earlier, it had become such a pivotal part of me that I took the journal practically everywhere. But then, out of the blues, I took the decision to quit – much to the consternation of the entire PSN leadership. No one thought I could do without editing the journal, since I appeared to be addicted to it.

Chief Fasanmi was, expectedly, the most rattled by my unexpected decision. Indeed, so flabbergasted was he that he initially took it as a practical joke or more precisely a whimsical urge that would soon fade away as mysteriously as it had come. When he saw that I was serious, however, he tried to persuade me to reconsider the decision but I couldn't be persuaded. The Deputy President, Lawrence Anyafulu, also pleaded with me, but I remained unmoved – something quite unusual of me.

Continues next edition

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# New trends in the management of Heartburn and GERD

*continued from page 11*

experience symptoms of GERD.

The condition is especially common in infants because their stomachs are much smaller and less able to tolerate being full. As a result, stomach contents can easily come back up.

Symptoms associated with GERD in infants include:

- being especially irritable or inconsolable after a feeding
- choking
- forceful regurgitation, especially after burping
- fussing, especially after a feeding

not gaining weight at a normal rate

- refusing to eat
- spitting up
- vomiting
- wheezing
- breathing difficulties

About 70 to 85 per cent of infants have regurgitation in the first two months of life. Typically, 95 per cent will outgrow the symptoms by the time they reach 1 year of age. Children with developmental and neurological conditions, such as cerebral palsy, may experience reflux and GERD for longer time periods.

It is important doctors diagnose GERD in children early to lessen the likelihood they'll have complications. As a child ages, they can still experience symptoms of GERD. The symptoms include:

- bad breath
- chest discomfort
- frequent respiratory infections
- heartburn
- hoarse voice
- abdominal discomfort

## Heartburn and GERD in pregnant women

Heartburn and GERD are commonly associated with pregnancy and can occur in women who may never have had GERD symptoms before. Pregnant women usually experience GERD symptoms around the first trimester. It then worsens in the last trimester. The good news is that when a baby is born, the symptoms usually go away.

Pregnancy can increase levels of the hormone progesterone, which can cause the muscles of the lower oesophagus to relax. This makes it more likely that acid will reflux. Increased pressure on the stomach from a growing uterus can also increase a woman's likelihood for having GERD.

Symptoms include pain that gets worse after a meal and acid regurgitation. Because the symptoms tend to be temporary, a woman usually doesn't experience the long-term complications associated with GERD, like ongoing inflammation.

Doctors usually avoid prescribing too many medications while a woman is pregnant because the medicine can be passed along to the fetus. Instead, doctors usually recommend making lifestyle changes, such as avoiding foods known to cause acid reflux and sleeping with the head slightly elevated. Taking antacids that contain magnesium, aluminium, and calcium may be permitted. However, antacids with sodium bicarbonate should be avoided in pregnant women because they can



affect a woman's fluid volume.

## How is GERD diagnosed?

The typical tests that doctor uses to help diagnose GERD include:

**24-hour impedance-probe**

**study:** This study involves inserting a flexible tube into the nose and advancing it into the oesophagus. The tube has sensors that can detect if acid is refluxing past the oesophagus.

**Upper endoscopy:** This test involves using a special tube with a

camera on its end. When the patient is sedated, the tube can be passed from the mouth into the stomach and part of the small intestine. The upper endoscopy test can help a doctor identify any signs of damage, tumours, inflammation, or ulcers in these areas. The doctor will usually take a tissue sample known as a biopsy.

## Complications of GERD

Acid from the stomach can damage the lining of the oesophagus if GERD is left untreated. This can cause:

- bleeding
- ulcers
- scarring

The acid can also cause a change in the cells in the oesophagus over time. This is called Barrett's oesophagus. About 10 to 15 per cent of people with GERD will develop this condition. Barrett's oesophagus increases your risk for a type of oesophageal cancer known as adenocarcinoma. Experts believe that most cases of this type

*continued on page 15*

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## New trends in the management of Heartburn and GERD

*continued from page 13*

of oesophageal cancer start from cells within Barrett's tissue.

### Home treatments for GERD

Eating certain foods is known to increase the amount of acid in the stomach, which can lead to symptoms of acid reflux and heartburn. Avoiding these foods may help to reduce symptoms without taking medications. Examples include:

- alcoholic beverages
- chocolate
- coffee
- greasy and salty foods
- high-fat foods
- peppermint
- spicy foods
- tomatoes and tomato products

Making lifestyle changes such

as:

- avoiding smoking
- not wearing tight-fitting clothing
- eating small meals instead of large ones

sitting upright for at least three hours after eating

Also, for those that are overweight, taking steps to reduce weight can help. This includes healthy eating and exercising whenever possible. If one is exercising regularly, a good goal is to strive for 30 minutes of exercise five times a week.

For babies with GERD, a doctor might recommend diet changes, such as adding a small amount of rice cereal to breast



milk or formula to thicken it to make reflux less likely. Holding a baby upright during feeding, and at least 30 minutes after, may also reduce symptoms. Avoiding overfeeding can help as well.

In older children, a doctor may recommend an elimination diet of foods known to aggravate acid reflux (these foods tend to be the same for children and adults). Raising the head of a child's bed may also help avoid acid reflux symptoms.

If these measures don't relieve a child's symptoms, a doctor may prescribe medications that are similar to an adult's but in smaller doses. It is important to see your doctor when changes are not helping or when symptoms occur twice a week or more.

### Medical treatments for

### GERD

Medications are available with and without a prescription for GERD.

**Antacids:** First-line treatments for acid reflux are usually antacids. These medicines act quickly to reduce the effect of stomach acid, which can relieve symptoms.

If these medicines don't relieve acid reflux or a person has GERD, other treatments can include:

**H2 blockers:** H2 blockers are designed to reduce the amount of acid a person's stomach produces. Sometimes taking these medicines with antacids can help.

**Proton pump inhibitors:** These medications work longer than H2 blockers to reduce acid in the stomach. They can also help heal the stomach lining.

**Prokinetics:** There is controversy as to whether these medications

benefit people with GERD. Many new prokinetics have been removed from the market due to serious side effects.

If medications don't reduce a person's acid reflux symptoms, a doctor may recommend surgery to avoid further damage to the oesophagus and stomach. One surgical approach is known as Nissen fundoplication. This involves wrapping a portion of the stomach around the oesophagus to strengthen the LES.

### When to call a doctor

**The Nigeria Situation**  
Symptoms of heartburn are often mistaken for heart attack, but the two conditions are unrelated. It is good to call a doctor if the heartburn discomfort and chest pain change or gets worse and are accompanied by:

- difficulty breathing
- sweating
- dizziness
- pain in your arm or jaw

These symptoms can be symptoms of a heart attack.

Sometimes GERD symptoms can indicate the need for emergency medical treatment. These include:

- experiencing regular, forceful (projectile) vomiting
- having difficulty breathing
- having difficulty swallowing
- vomiting fluid with bright red blood or coffee-ground-like contents

Not all heartburn requires medical care. Infrequent and mild heartburn can be treated with antacids and lifestyle changes, like avoiding spicy foods. Occasional reflux is not a cause for concern. You should consult a doctor if you have heartburn two or more times

*continued on page 17*



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# Be bold to enforce health insurance, healthcare providers task Tinubu

continued from page 1



**L-R: Dr Aipoh Austin, president, HCPAN; Pharm. (Mrs) Abiola Paul-Ozieh, chairman, HCPAN, Lagos State Chapter; Dr Umar Oluwole Sanda, chairman of the occasion; and Dr Raymond Abiodun Kuti, at the Midyear Meeting and Capacity Building organised by HCPAN, Lagos State Chapter, at the LCCI, Alausa, Ikeja.**

effectively implement the scheme and ensure Universal Health Coverage in the country.

The professionals gave the charge at the recent HCPAN's Mid-Year Meeting and Capacity Building, held at the Lagos Chamber of Commerce and Industry (LCCI), Alausa, Lagos, with the theme, "Operationalising the NHIA Act 2022: The Actuaries Viewpoint".

Chairman of the association, Pharm. Abiola Paul-Ozieh, noted that the goal of Universal Health Coverage in Nigeria, through the window of health insurance as the financing option, is feasible, if well-coordinated.

Stressing that everything falls and rises on the table of leadership, Paul-Ozieh stated that the new government must demonstrate a strong commitment to the NHIA, by ensuring transparency, keeping the public abreast of its progress and bringing all concerned stakeholders on board.

She added that those sitting in the driver's seat of NHIA at the national and state levels must be on the same page, so as to ensure that the populace gets adequately enrolled in the scheme and receives optimal service delivery.

While calling for the separation of professional roles among healthcare providers, the HCPAN leader asserted that for optimal healthcare service delivery, there must be strict adherence to stratification as primary, secondary and tertiary healthcare facilities. She reiterated that basic healthcare provision should be done by primary care providers, which comprise public primary healthcare centres and numerous independent standalone clinics

and hospitals spread across the states.

"An effective referral system must be put in place. Under no circumstances, must teaching hospitals, specialist hospitals and general hospitals be providing primary care services," she averred.

Paul-Ozieh also maintained that healthcare providers must be adequately and promptly remunerated according to their services, adding that the two payment mechanisms of capitation for primary care providers and fee-for-service for secondary care providers should be upheld.

"Under no circumstances should a primary care provider warehouse the funds for secondary care providers. Block capitation to primary care providers, as practised under NHIS should be unbundled, such that the fee-for-service components can be paid directly to the secondary care providers, namely, specialist centres, laboratories, radiographic centres, pharmacies, physiotherapy, optometric centres, as this will assure a sense of inclusiveness and efficiency in the system," she advised.

Paul-Ozieh added: "Healthcare providers in the private sector provide over 60 per cent of healthcare in Nigeria, especially in Lagos State. So, we must be carried along in whatsoever policy the government is making. Without private healthcare providers, public providers can go fast but, they are not likely to go far. For them to go far, regarding the implementation of the NHIA 2022, we must carry the private healthcare providers along, and those terrible healthcare indices

we see would change."

Also speaking at the event, Dr Austin Aipoh, national president, HCPAN, stressed that the new government must put the required structures and funding in place, as obtained in other countries, for Nigerians to enjoy UHC.

"For us to enjoy the new Act, the government will have to show political will to be able to implement the new act to the fullest. The new government should be able to release the fund when due, the budgetary allocation for health that we see on paper should be released truly, and once there is budgetary allocation, there should be budgetary implementation. They should even increase the allocation," he said.

In his remarks, the chairman of the occasion, Dr Umar Oluwole Sanda, observed the need for the providers to come together under a common interest.

Sanda, a former president of HCPAN, noted that health insurance is the future of healthcare in the country, adding that a workable, affordable health insurance scheme that will be inclusive and lucrative to all healthcare providers is achievable.

His words, "We need a robust debate to move the scheme forward, and we must be ready to engage the government on this. I however want to appeal to fellow providers not to be deterred by the rough terrain we are passing through, as our journey to our destiny and destination has started well and should be sustained by all."

In her speech, titled "Overview of the Lagos State Health Scheme (LSHS): The LASHMA Update and Providers", Dr Emmanuella

Zamba, general manager, LASHMA, explained that the Lagos State Health Scheme is mandatory for all residents of the State, and all employees in the public and private sectors, including the self-employed and the unemployed.

She added that the overall goal of the LSHS is to ensure that all residents of Lagos have unhindered access to quality healthcare services in an efficient, sustainable, and equitable manner.

"Providers are identified as a key structure in community dynamics. In ideal community settings, the hospital is a symbol of hope and care; the community members also trust the healthcare leadership.

"Also, the providers have a key role in achieving UHC, not only by providing quality care but also service to enlighten, educate and inform people in the community about the scheme and follow-up on premium payments," she said.

The highlight of the event was the panel discussion on health insurance scheme implementation, regulatory framework and collaboration, which had Dr Austin Aipoh, Dr Leke Oshunniyi, Mr Emeka Okoji and Mr Abiola Oshunniyi, as panellists; as well as Dr Raymond Abiodun Kuti, as moderator.

During the discussion, stakeholders present at the programme, including operators of health maintenance organisations (HMOs), medical practitioners, pharmacists, and laboratory scientists, called on the Federal Government to address the bottlenecks that prevented the success of NHIS, so that the NHIA would not end up same way.



## New trends in the management of Heartburn and GERD

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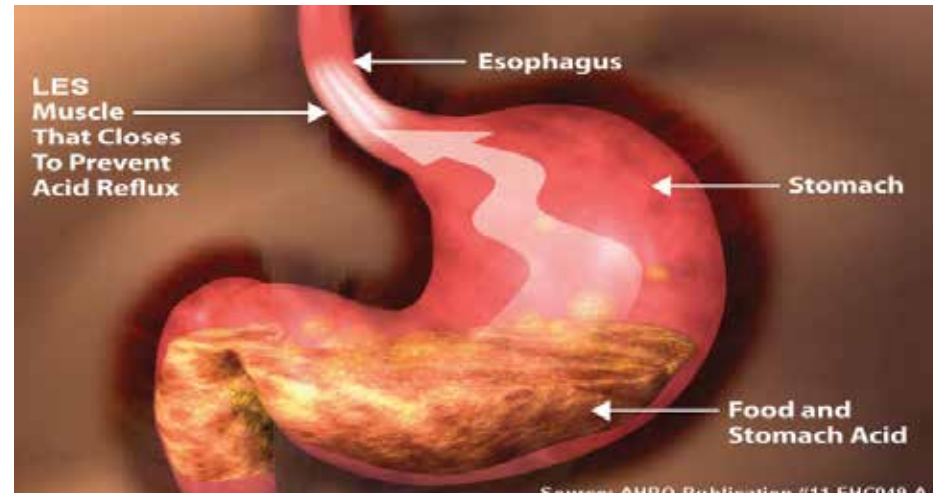
a week or if over-the-counter medications don't relieve your discomfort.

The Nigeria Situation

A Research Study titled "Gastroesophageal reflux disease in a typical African population: a symptom-based multicenter study, as published by BMC Gastroenterology was done to determine the prevalence and risk factors of GERD, and its degree of overlap with dyspepsia and irritable bowel syndrome (IBS) in Nigeria, it was reported that out of 3520 subjects who participated in the study across the country, 269, 7.6 per cent satisfied the diagnostic criteria for GERD, while 107, 3.0 per cent had GERD associated with significant impairment of quality of life.

It further noted that the prevalence of GERD in the study is 7.6 per cent, adding that Age, use of analgesics and use of herbs increase the risk, albeit minimally. A high degree of overlap between dyspepsia and IBS exists in Nigerian patients with GERD

Also in a report titled "Signs,



Causes of heartburn", by Job Osazuwa, as published by Sun Newspaper, Heartburn, also referred to as acid indigestion, begins when stomach acid splashes up into your oesophagus – a tube that connects the back of your throat and stomach. Occasional heartburn is common and no cause for alarm. Most people can manage the discomfort of heartburn on their own with lifestyle changes and over-the-counter medications, but

the remedy is proper medical attention.

On what heartburn feels like, a family physician, who practises at a private hospital in Lagos, Funmilayo Fapohunda, said: "If you have got a burning feeling in your chest just behind your breastbone, that starts after you have eaten, that is likely to be heartburn. However, it might not be all burning feelings that should be concluded to be heartburn. The disease symptoms could last from a few minutes to several

hours.

"Heartburn begins when stomach acid splashes up into your oesophagus. Oesophagus is a tube that connects the back of your throat and stomach. Besides the burning feeling in your chest, you may also get chest pain, especially after you bend over, lie down, or eat; burning at the back of your throat and fluid at the back of your throat that tastes hot, sour, acidic, or salty. Another thing that might suggest that one is suffering from the ailment is long-term cough, sore throat, or hoarseness."

In order to avoid misdiagnosis, the physician advised Nigerians to consult a doctor and run appropriate tests on any of the symptoms.

Report compiled by **Adebayo Oladejo** with additional information from Science Direct, NIH MedizinePlus Magazine, National Library of Medicine, National Centre for Biotechnology Information, America College of Gastrointestinal Endoscopy, Nigeria Galleria, IFFGD, World Health Organisation, Pharmanews, and Guardian.

## Tackle medicine insecurity, close open drug markets, ACPN charges FG

- Says association's labelling machine to be launched at forthcoming conference

By Adebayo Oladejo

**W**orried by the challenge of medicine insecurity in the country, which it says is being driven by such factors as poor local production capacity, inefficient distribution network, regulatory issues and financial constraints, the Association of Community Pharmacists of Nigeria (ACPN) has made a renewed call on the Federal Government of Nigeria to shut down all open drug markets in the country.

The call was made at a press conference to herald the 42nd Annual Scientific Conference of the association, tagged "The Big Heart Conference" and scheduled to hold from 31 July to 4 August 2023, in Asaba, Delta State.

Speaking at the event, ACPN National Chairman, Pharm. Adewale Oladigbolu, described medicine insecurity as the inadequate availability, accessibility and affordability of essential medications to the population, adding that it is a matter of serious concern that affects the well-being and security of Nigerians.

Speaking further, Oladigbolu lamented that while Nigeria boasts of vast resources, it is disheartening to witness the detrimental effects of medicine insecurity on the country. He stressed that medicine insecurity, as well as compromised public health, directly impacts the health of the citizens, particularly those with chronic illnesses and vulnerable populations.

"The unavailability of essential medications can lead to worsening health conditions, prolonged suffering and, in severe cases, irreversible damage or even loss of life. It also hampers disease prevention efforts, causing the spread of communicable diseases and exacerbating public health crises," he said.

Oladigbolu, who noted the importance of community pharmacists' services to universal health coverage, remarked that the continued existence of open drug markets across the country is



**Pharm. Wale Oladigbolu, national chairman, ACPN, (middle), flanked by Pharm. Bayo Ajiboye, member, CPC; Pharm. Rev Daniel Ajayi, chairman, CPC; Pharm. Ezech Igwekanma, national secretary, ACPN, and Pharm. Mrs Grace Ikani, vice chairman, CPC, at the press briefing.**

an obstacle to achieving UHC. He averred that the markets are not giving any value to the citizens, as their products are neither regulated nor stored under the recommended temperature.

According to him, "If a country does not like us as a nation, all they need to do is to dump one widely used product that is tainted into the open drug markets. Once it is distributed nationwide, the result would be needless deaths across the country. In fact, many are dying of liver disease, kidney failure and many others today from consumption of products that do not pass through regulatory scrutiny before getting to the market.

"Also, so many expired products are being revalidated, with dangerous impact on the healthcare

of the patients. It is the political will to do the right thing that we had been lacking; but now that we have a new government in place, we do hope that the courage they are showing towards repositioning the economy would be extended to healthcare by closing down all the open drug markets once and for all."

The ACPN head further stated that if the open drug markets are closed today, there are credible alternatives, especially with the availability of technology tools to distribute to the nooks and crannies of the country. He added that the closure would set the pharmaceutical sector in the right direction, as the monopoly which the open drug market is enjoying will be broken, making drugs cheaper, with a better assurance of quality.

While speaking on the upcoming

ACPN conference, Oladigbolu disclosed that this year's theme "Building Effective Community Pharmacy Services For Universal

Health Coverage" is apt, saying community pharmacists play a vital role in promoting public health and well-being. He added that their services go beyond dispensing medications as they serve as trusted healthcare providers within communities, offering valuable advice, counselling, and preventive care.

The number one community pharmacist observed that with Universal Health Coverage becoming a global priority, it is essential to recognise the significant contributions of community pharmacists and explore ways to

enhance their services.

He also stated that the conference will bring together renowned experts, policymakers, and community pharmacy representatives to discuss so many key areas in the health sector.

"We also hope to highlight the significance of digital health in the practice of community pharmacy and how it can revolutionise the way we deliver healthcare services to our community, and we are hoping to launch the labelling machine at this conference," he said.

Other personalities at the press briefing included Pharm. Ambrose Ezech Igwekanma, national secretary, ACPN; Pharm. (Rev.) Daniel Ajayi, chairman, Conference Planning Committee; Pharm. Grace Ikani, vice-chairman, CPC, and Pharm. Bayo Ajiboye, member, CPC.



## Anthrax: History and important facts

By Patrick Iwelunmor

Primarily an animal disease, humans have also been infected with anthrax through contact with infected animals. Anthrax is a very fatal and highly contagious disease. Descriptions of the disease are embedded in antiquity. History is replete with generous exemplifications of diseases that share striking resemblance with anthrax. For instance, many plagues described in the Bible resemble anthrax. Despite the speculative nature of these historical accounts, many researchers strongly believe it was indeed anthrax.

The best ancient account of the disease was by the Roman Virgil. Many scholars believe that the disease was depicted in The Iliad by Homer, written around 700 B.C. In the course of the 19<sup>th</sup> century, the disease gave rise to many medical developments and served as the prototype for Robert Koch's postulates concerning the causation of infectious disease.

Maret gave the first clinical description of the disease in 1752, followed by Fournier, in 1769. Before then, most of what was known about the disease was through historical accounts.

In 1877, scientist, Robert Koch, studied *Bacillus anthracis*, the bacterium that causes anthrax, and discovered that besides forming spores, the bacteria were able to survive for long periods of time and in many different environments.

Using the bacteria in one of his most important experiments, Koch isolated *Bacillus anthracis* and grew them in pure culture after which he injected them into animals. His observations from the way the bacteria caused disease in those animals informed his understanding of the bacteria's life cycle, and he was able to demonstrate what became known as "Koch's postulates".

In 1881, French Chemist, Louis Pasteur, another prominent scientist, took Koch's work a step further, by trying to prove how anthrax was spread and how it made animals and people sick. In his experiment, two shots of an anthrax vaccine he had created with weakened anthrax bacteria was given to 25 animals.

After giving the animals both rounds of the vaccine, he then injected them with live anthrax bacteria. He also injected the same live bacteria into 25 other animals that had not been vaccinated. While each of the vaccinated animals survived, the 25 that were not vaccinated all died.

The first anthrax vaccine for humans was developed in the 1950s. This anthrax vaccine was tested in a group of goat hair mill workers.

Volunteers were given either the vaccine or a placebo. The volunteers were then followed over a two-year period. This study determined that the vaccine was 92.5 percent effective in preventing cutaneous anthrax. After the study, the vaccine was made available to people working in goat hair processing mills in the United States.

An outbreak of inhalation anthrax occurred in Sverdlovsk, near a Soviet military microbiology facility in 1979. This epidemic represented the largest documented outbreak of human inhalation of anthrax in history.

In June 2023, the Nigerian government alerted the public to the outbreak of the zoonotic disease in the West African sub-region.

A statement by the Federal Ministry of Agriculture and Rural Development (FMARD) listed Northern Ghana, bordering Burkina Faso and Togo as the red zone. As part of precautionary measures, the public has been warned against the consumption of cowhide (ponmo), smoked meat and bush meat, in order to avoid possible spread.

Since 1914, anthrax has been used in biowarfare and bioterrorism. Anthrax spores are easily found in nature. They can also be produced in a lab and can last for a long time in the environment. Anthrax can be released silently and without anyone knowing. The microscopic spores can be put into powders, sprays, food and water.

The first time anthrax was deliberately used for an act of aggression was in the early decades of the 1900s, during World War I. There is strong and incontrovertible evidence that the German army used anthrax to secretly infect livestock and animal feed traded to the Allied Nations by neutral partners.

In 2001, powdered anthrax spores were deliberately put into letters that were mailed through the U.S. postal system. Twenty-two people, including 12 mail handlers, got anthrax and five of them died.

There is a class of agents and toxins that have been categorised as Tier 1 because they present the greatest risk of deliberate misapplication with substantial propensity to cause monumental damage and lead to mass casualties or have catastrophic impact on the economy, critical infrastructure, or public confidence and pose a severe threat to public health and safety. *Bacillus anthracis* is a prominent member of this class.



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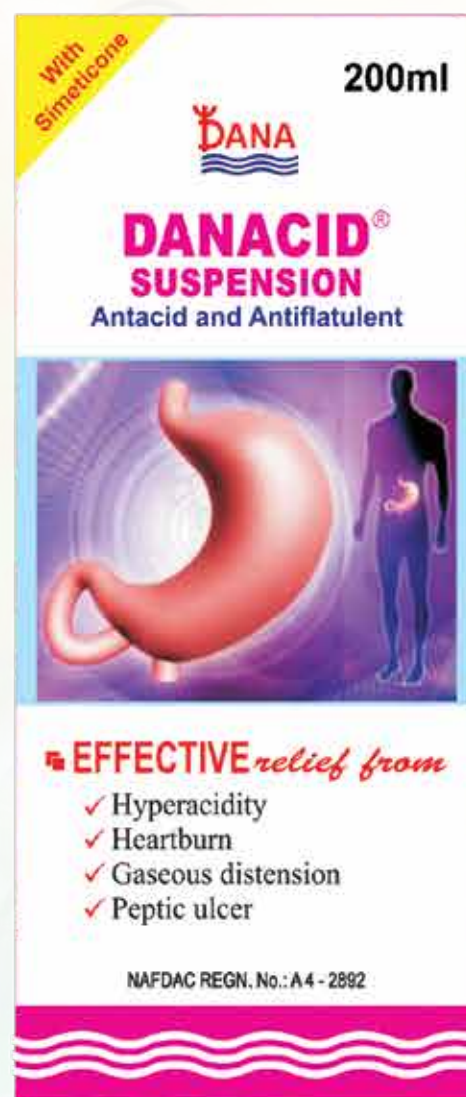


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# Walk longer, live longer

By Ranmilowo Ojalumo



**D**o you know that your seemingly routine walking activity is a sport that comes with immense health benefits? Researchers have found that walking increases cardiovascular and pulmonary (heart and lung) fitness, which reduces the risk of heart disease and stroke. It has also been confirmed to improve the management such conditions as hypertension, high cholesterol, joint and muscular pain or stiffness, and diabetes.

As for the description of walking as a sport, credible authorities, such as the Global Association of International Sports Federations (GAISF) and the Australian Sports Commission (ASC) have since settled the argument with their definition of "sport". The Australian Sports Commission specifically defines a sport as "a human activity capable of achieving a result requiring physical exertion and/or physical skill, which, by its nature and organisation, is competitive and is generally accepted as being a sport."

Walking sport is defined as any sport where the main form of physical exertion is through the act of walking. There are different types of walking sports. Race walking, for example, is a competition in which contestants attempt to outrace one another without running. Race walking is the simplest, easiest and commonest of all walking sports. It is also one of the recognised sports in the Olympics.

Race walking made its debut at the Olympics in 1904 in St Louis, USA. A 10km short-distance walk was introduced at the 1912 Summer Olympics in Stockholm and the 50km long-distance event made its first appearance at the 1932 Games in Los Angeles. Moreover, race walking was part of the Olympic Games held in Tokyo, Japan in 2020. The World Athletics Federation has also confirmed, since April 2023, that a marathon race walk will be part of the next Olympic Games that will hold in 2024 in Paris.

## Rules of race walking

At competitive levels, such as the Olympics, race walking differs from running, where an athlete often has both feet off the ground during their strides in a sprint. In race walking, an athlete must always have one foot in contact with the ground at all times, as

visible to the human eye. Judges are present at events to ensure the rule is enforced. If there is no visible contact, it is deemed as "lifting" and attracts a penalty.

If a race walker is shown three warnings (paddles) from different judges, including the chief judge, it leads to the disqualification of the athlete. A red paddle is shown to the disqualified athlete.

## Health benefits of walking

Researchers have established that walking provides immense benefits that no individual can afford to ignore, especially considering the fact that walking is the simplest form of exercise that anyone can embark on. According to a study conducted by researchers at the University Of Sydney, Australia, and the University of Southern Denmark, race walking, with up to 10,000 steps per day, lowers the risk of dementia, heart disease, and cancer. The study found further that race walking lowers the risk of dying.

The study, titled, "Prospective Associations of Daily Step Counts and Intensity With Cancer and Cardiovascular Disease Incidence and Mortality and All-Cause Mortality", drew data from UK Biobank to link up step count data from 78,500 UK adults, aged 40 to 79 years with health outcomes for a seven-year duration. Participants wore a wrist accelerometer to measure physical activity over a period of seven days (minimum three days, including a weekend day and monitoring during sleep periods).

The study which was published in the Journal of American Medical Association, otherwise known as JAMA Internal Medicine, JAMA Network, and JAMA Neurology, also found that a faster stepping pace (faster walking pace) like a power walk, showed benefits above and beyond the number of steps achieved.

"The findings of the study of 78,500 individuals suggest that up to 10,000 steps (10,000 walking steps) per day may be associated with a lower risk of mortality and cancer and cardiovascular disease (CVD) incidence. Steps performed at a higher cadence may be associated with additional risk reduction, particularly for incident disease", the study said.

While commenting on the study and its findings, the study co-lead author, who is also a

Research Fellow at the University of Sydney's Charles Perkins Centre and Faculty of Medicine and Health, Dr Matthew Ahmadi, said: "The take-home message here is that for protective health benefits, people should not only ideally aim for 10,000 steps a day but also aim to walk faster."

Also speaking on the outcome of the study, another co-lead author at the University of Southern Denmark and senior researcher in the health department at the University of Cadiz, Associate Professor Borja del Pozo Cruz, said: "For less active individuals, our study also demonstrates that as low as 3,800 steps a day can cut the risk of dementia by 25 per

cent".

## Wellness and longevity

The study also discovered that every 2,000 steps lowered the risk of premature death incrementally by 8 to 11 per cent. Also, 9,800 steps were regarded as the optimal dose linked to a lower risk of dementia by 50 per cent; however, the risk was reduced by 25 percent at as low as 3,800 steps a day. Stepping intensity or a faster pace showed beneficial associations for all outcomes (dementia, heart disease, cancer, and death) over and above total daily steps.

According to the study's senior author, a professor of Physical Activity, Lifestyle, and Population Health at the University of Sydney's Charles Perkins Centre and Faculty of Medicine and Health, Prof. Emmanuel Stamatakis, "Step count is easily understood and widely used by the public to track activity levels, thanks to the growing popularity of fitness trackers and apps, but rarely do people think about the pace of their steps. Findings from these studies could inform the first formal step-based physical activity guidelines and help develop effective public health programs aimed at preventing chronic disease."

On the credibility of the study, one of the researchers, Dr Ahmadi said: "The size and scope of these studies, using wrist-worn trackers, makes it the most robust evidence to date suggesting that 10,000 steps a day is the sweet spot for health benefits and walking faster is associated with additional benefits".

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# Impact project will boost quality in local manufacturing, says Anyakora

- As Bloom commences capacity building for manufacturers

By Patrick Iwelunmor

In furtherance of its commitment to repositioning the Nigerian pharma industry as an independent and significant player in the global space, Bloom Public Health, in conjunction with the Federal Government of Nigeria, the National Institute for Pharmaceutical Research and Development (NIPRD) and the World Bank, recently held a three-day training workshop, tagged Nigerian Pharmaceutical Manufacturers' Improvement and Capacity Building.

The event, which was one in a series of programmes termed the "Impact Project", held from 20 to 22 June, 2023 at The Colossus Hotel, Lagos, and featured lectures and presentations from experts in the relevant aspects of pharmaceutical manufacturing such as regulation, production and quality assurance and control.

In his presentation, titled "Trends in Global GMP Compliance", Bloom Public Health's Technical Director, Mr Hakeem Oshiyemi, enlightened participants on the core and cardinal components that ensure good manufacturing practice in the local manufacturing landscape. He enumerated strategies that minimise risks involved in pharmaceutical



Prof. Chimezie Anyakora

production and urged pharmaceutical manufacturers to embrace best practices in order to compete globally.

During his presentation, titled "Building Quality Culture in the Pharmaceutical Industry", Dr Onyenoha Chukwumerije, an international GMP/GDP/QA/QC consultant, highlighted the connection between quality culture and optimum performance in the pharmaceutical industry.

He emphasised the significance of a pharmaceutical company's corporate culture to its image and level of success. He enumerated factors such as

employee-employer relations, ergonomics and succession plan as some of the basics that can swing the pendulum of a pharmaceutical company's growth either forward or backwards.

Chukwumerije called on chief executives of pharmaceutical companies to imbibe such core values that inspire the pursuit of excellence and quality assurance, if they really want to remain relevant and competitive in the international marketplace.

Speaking earlier during his welcome address, CEO of Bloom Public Health, Prof. Chimezie Anyakora, said the workshop is aimed at supporting pharmaceutical manufacturing companies in Nigeria to improve their standards and quality control systems. Anyakora bemoaned the beggarly disposition of Nigeria in terms of the type of aid it gets from the international community.

According to him, instead of supporting with funds, most of the aids come in the form of medicines which may not have the desired impact, hence the need for the country to chart a new and nobler course towards its own independence in terms of manufacturing capacity. To this

end, he said, relevant players in the Nigerian pharma space, including the Pharmacy Council of Nigeria (PCN), NPRD, PMG-MAN and others are collaborating to make the attainment of this independence a reality.

"In summary, Impact Project is here to help Nigeria attain quality and start competing globally. Year in, year out, a lot of funding that gets to the country come as medicine aid not as monetary funding to Nigerian manufacturers. One way to discontinue this ugly trend is to build our people and change the beggarly narrative", he said.

On how this project affects Nigeria's global rating in terms of medicines regulation, Anyakora said: "Once the regulator ups his game, it then means that the regulated must also push their game up. Right now, our regulator is at maturity level 3 (ML3). This means that what they would demand from manufacturers would be much more than what they used to demand. So, the manufacturer has to wake up. And I strongly believe that the Impact Project, beginning with this capacity building workshop, will be the stinging fly that would wake the slumbering giant of Africa from sleep unto continental and perhaps, global glory in pharma manufacturing."

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# Wellness

with

**Dr Patrick Ijewere**

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**T**his image of the wellness tree is very instructive. Please, pause; take a picture of it, laminate it, put it in your home and office. Look at it often and meditate on it. This image was given through divine inspiration over many years.

And here is the story of the wellness tree. As I journeyed through academia, from my undergraduate years in pharmacy school and then medical school, I experienced a little voice. Each time we were in a clinical setting, something within me just kept nudging, "There has got to be a better way; there has got to be a better way."

Many times, I would have this instinctive disagreement with my attending physicians, my senior resident doctors. And often, when I would share my concerns, I got a lot of rationalisation as to why the Western medical approach was appropriate and scientifically sound. But, deep within, I just thought something was off.

Too often, in conventional medicine, we blame genetics. "Oh, it's family history. Oh, you got the short end of the genetic card shuffle." Or we say, "It's germ-related; it's a bug that caused that." We love to blame H. Pylori for stomach ulcers. Or, we use terms, like "idiopathic" -



we don't know what caused it. And this happened a lot in the chronic, degenerative and inflammatory medical conditions. It always baffled me - the huge gaps within Western, modern medicine. I concluded that

who was a nurse, and then a nutritionist. I recall the one definite day that I think God said, "It's time to get off your ego, you Western-trained doctor and listen to your wife. That day, as I was heading back from work,

conventional or Western medicine is woefully incomplete.

## Lifestyle and environment

As I journeyed through residency training, and then, into practice, it became clearer and clearer that people's lifestyles played a huge role. From their fitness to quality of sleep and more. The personal chemicals are very troublesome and I learnt very quickly and personally as I suffered from allergies and asthma. I knew a lot of environmental factors could be triggers. So, the fourth and the fifth roots of this tree - lifestyle and environment were quite clear.

## Nutrition

I knew there were factors beyond genetics. Both from personal experience and from the clients I took care of clinically. Then as I worked in Florida with a group of 50 physicians, I began to experience, first-hand, the impact of nutrition.

I began dating a lady whom I eventually married,

about a two-hour drive, I was very thirsty. We had an office in a town called the Fort Myers. And we lived in Tampa, Florida, a two-hour drive. On the way home, I stopped at 7-11, and got myself a super big gulp of Sprite (72oz) and began gulping it as I drove home.

By the time I got home, I had finished this super big gulp, which is about three times the normal size of drinks. I reached home, and did not feel so well. The next morning, I felt it even worse.

And, as God would have it, in the morning newspaper, there was a one-page article, analysing the amount of sugar in many of the fast foods and soft drinks and other drinks that we consume. My wife showed it to me. I was flabbergasted. Absolutely, flabbergasted. The average soft drink has about 12 to 18 cubes of sugar. So, what I drank had about 32 cubes of sugar. I almost fainted. I didn't believe it. In my right mind, would I sit down at the table and eat even two cubes of sugar? Unlikely. But in that sort of drink, mixed up nicely, I had consumed 32 cubes of sugar.

Suddenly, I heard the battle cry, I could hear the woes of people. The major cause of disease is nutrition, and that was my wake up call to the third pillar of wellness. I had an able companion to travel this journey, my wife, Sherese. And I joined her in reading avidly everything I could about nutrition - including reading labels and analysing labels. I was on fire. I began giving health talks about sugar in our foods, and how we are eating ourselves into ailments. So now we had three pillars, nutrition, lifestyle and environment.

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# Pharmacy schools need curriculum that reflects current trends, emerging technologies - President, PANS-GSU

By Adebayo Oladejo

**I**n this exclusive interview, Aminu Muhammad Bello, a final year student of the Faculty of Pharmacy, Gombe State University (GSU) and president of the Pharmaceutical Association of Nigeria Students (PANS), examines some key issues facing pharmacy education in Nigeria. The young scholar, who is also the Speaker of the Students Representative Assembly (SRA) of the Students Representative Council (SRC), Gombe State University, also speaks on his journey into Pharmacy and PANS politics, as well as the vision and achievements of his administration. Excerpts:

## Why did you choose Pharmacy over other health-related courses at the university?

I chose to study Pharmacy because I believe it provides a unique opportunity to directly impact people's lives through essential healthcare services. I am fascinated by the intricate workings of the human body and the potential of medications to improve health outcomes. Pharmacists play a crucial role in the healthcare system by ensuring the safe and effective use of medications, counselling patients on medication use and side-effects, and collaborating with other healthcare professionals. I wanted to be a part of this profession that combines scientific knowledge with patient care.

## How did you become the president of PANS at Gombe State University?

My journey to becoming the president of PANS at Gombe State University began with active involvement in various pharmaceutical students associations and organisations. I took part in leadership roles and initiatives within PANS, which provided me with the necessary experience and exposure.

I became the President of PANS-Gombe State University through a democratic process. I contested for the position during the PANS elections, where I presented my vision and plans for the association. I received overwhelming support from my fellow pharmacy students, who believed in my capabilities and leadership qualities. After a rigorous campaign and election process, I was inaugurated as president of PANS-Gombe State University one month ago.

## Balancing studies with active involvement in other activities can be tough. How have you been coping?

I have developed effective time management and organisational skills to cope with these demands. I prioritise my academic commitments, while allocating dedicated time to my responsibilities as PANS president. It requires discipline, proper planning, and the ability to delegate tasks to a capable team. Additionally, having a supportive team of dedicated executives, colleagues, and faculty members, who provide guidance and assistance when needed, has been instrumental in managing the workload effectively.

## What achievements have you recorded, and what challenges have you encountered so far?

Since assuming the role of PANS president, we have achieved significant milestones. We organised a successful six-week-long academic marathon tutorial for our first-year and second-year pharmacy students for the 2022/2023 academic session. We conducted selected health promotion campaigns and are planning a 2023 World Hepatitis Day free testing and reporting outreach, in collaboration with the Zinom Foundation, focusing on underserved areas.

We also established

partnerships with corporate and healthcare organisations, such as the Pharmaceutical Society of Nigeria (PSN), Gombe State Chapter, and the PSN-YPG, creating internships and other valuable opportunities for our members.

Moreover, we have several projects and initiatives in the pipeline, including launching new football jerseys, a monthly "Keep the Faculty Clean" campaign, PANS-GSU website development, a scintillating PANS Week, (featuring additions like the Health Tech Summit and Career

Fair), a students' area/lounge, mega medical outreaches, an SL research symposium for final year students, career and professional development programmes, capacity building training, spotlight publications, a faculty town hall meeting, as well as social events, such as PANS karaoke, hike against drug abuse, picnics, IQ games, and educational focus groups.

However, like any leadership position, we have encountered challenges, such as limited funding for projects and administrative constraints. Nevertheless, we remain resilient, and proactive, and continue to explore innovative ways to overcome these obstacles.

## Are there challenges associated with studying Pharmacy in the north?

Studying Pharmacy in the north does come with its unique set of challenges. One of these is the limited availability of resources and infrastructure, compared to



Aminu Muhammad Bello

more developed regions. Access to cutting-edge research facilities and specialised training programmes can also be limited. Furthermore, insufficient exposure to diverse pharmacy practice settings is a challenge that students face.

*continued on page 34*

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# Dean's Corner

## PROF. IGHODARO IGBE

**A** Professor of Pharmacology and Toxicology in the Faculty of Pharmacy, University of Benin (UNIBEN), Prof. Ighodaro Igbe is the current dean of the Faculty of Pharmacy, Igbinedion University, Okada, Edo State, where he is currently observing his sabbatical leave.

Born in Benin City, Edo State, Igbe obtained a Bachelor of Pharmacy (B.Pharm), with distinction, in 2000, from the University of Benin. He obtained MSc in Pharmacology in 2007, also from the University of Benin, and later bagged his PhD in Pharmacology in 2010, also from the University of Benin.

Igbe was a visiting research scholar at the Centre for Cardiovascular Diseases, Texas Southern University, Houston, Texas, USA, between 2008 and 2010. He completed his postdoctoral research fellowship at the Chengdu Institute of Biology, in Sichuan Province, China, in 2016, under the Chinese Academy of Sciences PIFI Fellowship. He was appointed a full professor at the University of Benin in 2019.

Igbe has published over 60 publications in peer-reviewed and high-impact indexed journals, as well as contributing chapters to several books. He is currently the assistant editor of the Journal of African Association of Physiological Sciences (JAAPS)

and a member of the Editorial Board of the Tropical Journal of Natural Product Research (TJNPR). He is also a reviewer of numerous national and international journals, notably for the British Pharmacological Society (BPS).

So far, Igbe has supervised eight MSc. students and six PhD students. His research focuses on investigating the safety and efficacy of medicines of natural origin, (ethnopharmacology), cardiovascular pharmacology, molecular pharmacology, and neuropharmacology.

He has held several key university positions, including, head, Department of Pharmacology and Toxicology, UNIBEN; postgraduate seminar coordinator, Faculty of Pharmacy, UNIBEN; pioneer chairman, UNIBEN Central Biomedical Research Laboratory; member, UNIBEN Biomedical Research Committee; faculty examination officer; and member, UNIBEN Research and Publication Committee (F/URPC), amongst others.

Igbe has served as an external examiner at the undergraduate and postgraduate level, including for the Pharmacy Council of Nigeria (PCN); Niger Delta University, Bayelsa; Delta State University, Abraka; University of Nigeria, Nsukka (UNN); and Ahmadu Bello University (ABU),

Zaria. He has also served as a member of the accreditation panel of the Pharmacy Council of Nigeria (PCN) to several universities.

The erudite don is a member of several professional bodies, which include the Pharmaceutical Society of Nigeria (PSN), the American Society for Pharmacology and Experimental Therapeutics (ASPET), the British Pharmacological Society (BPS), the West African Society for Pharmacology (WASP), as well as the National Association of Pharmacists in Academia (NAPA), amongst others.

Prof. Igbe has attended several local and international conferences, including the PSN annual conferences; the annual regional conference of the West African Society for Pharmacology (WASP), University of Port Harcourt, Nigeria (October 2019), Kumasi, Ghana (2011); the IUPHAR World Congress of Basic and Clinical Pharmacology 2014 (WCP, 2014) Cape, Town, South Africa (2014,) as well as the Experimental Biology International Conference, 2010 (EB 2010), Anaheim, California, USA.



Igbe is a recipient of numerous awards and recognitions, including the best graduating student in the final degree exam in the faculty of pharmacy (2000); Stephen Oluwole Awokoya Foundation for Science Education Scholar (2006); best lecturer, Department of Pharmacology and Toxicology, University of Benin (2007), and Graduate Student Travel Award, by the American Society for Pharmacology & Experimental Therapeutics (2010).

Prof. Igbe is happily married and blessed with three wonderful children.

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# Lessons entrepreneurs can learn from children

By Pharm. Sesan Kareem

When it comes to the world of entrepreneurship, there are valuable lessons that can be learnt from unexpected sources. Children, with their boundless curiosity, infectious excitement, unwavering faith, and innate trust, possess qualities that can inspire and teach entrepreneurs valuable life and business lessons. In this column, we will explore the four key attributes that entrepreneurs can learn from children and how incorporating them into your entrepreneurial journey can lead to success, impact, and profit.

## Curiosity: Embrace the wonder of exploration

Children have an insatiable thirst for knowledge. They approach the world with wide-eyed wonder and an eagerness to explore. Their genuine curiosity fuels their learning experiences, enabling them to discover new things every day. Entrepreneurs can benefit greatly from cultivating a similar sense of curiosity. By embracing an inquisitive mindset, entrepreneurs can unlock new opportunities, challenge assumptions, and uncover innovative solutions to problems.

Entrepreneurs should never be afraid to ask questions and venture into uncharted territories. Curiosity encourages the pursuit of knowledge, the discovery of untapped markets, and the creation of ground-breaking products or services. By adopting a childlike curiosity, entrepreneurs

can maintain a fresh perspective, adapt to change, and stay ahead in a dynamic business landscape.

## Excitement: Fuel your passion and energy

Children are masters of living in the present moment. They find joy in the simplest things and radiate unfiltered excitement. Children exude boundless excitement in almost everything they do. Their enthusiasm is contagious and can inspire those around them. As entrepreneurs, it is vital to harness this child-like excitement and infuse it into your work.

Passion is a driving force for entrepreneurs. By aligning your work with your passion, you can tap into an endless reservoir of energy and enthusiasm. This excitement can fuel determination, creativity, and resilience, enabling you to overcome obstacles and persevere during challenging times.

## Faith: Believe in yourself and your vision

Children possess an unwavering faith that defies logic and scepticism. They believe in magic, fairy tales and the extraordinary. Their faith allows them to dream big and see endless possibilities in the world. Children possess an unwavering faith in their abilities and the world around them. They wholeheartedly believe that they can achieve anything they set their minds to.

Entrepreneurs can learn from this unwavering self-belief and apply it to their own entrepreneurial journey. Having faith in yourself and

in the vision you are pursuing is crucial for success. It allows you to remain confident and determined, even in the face of setbacks or failures. Embracing a "can-do" attitude and cultivating self-belief can propel you forward, helping you take risks, make bold decisions, and persist until you achieve your goals.

## Trust: Build strong relationships and collaboration

Children possess a natural inclination to trust others. They form connections and build friendships easily, without scepticism or prejudice. Entrepreneurs can learn from this inherent trust and apply it to their professional lives.

Trust is the foundation of a strong relationship with customers, employees, partners, and investors. By fostering an environment of trust, you can establish credibility, inspire loyalty, and encourage collaboration. Trust enables you to delegate effectively, leverage the expertise of others, and create a supportive network that propels your ventures forward.

## Conclusion

Children possess remarkable qualities that can serve as invaluable lessons for entrepreneurs. By embracing curiosity, excitement, faith, and trust, entrepreneurs can infuse their entrepreneurial journey with a sense of wonder, passion, self-belief,



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and collaboration. These attributes allow entrepreneurs to approach challenges with fresh perspectives, overcome obstacles with resilience, and forge strong relationships. So, take a cue from the innocence and wisdom of children and apply these qualities to your entrepreneurial endeavours. It will pave the way for success, growth, and innovation.

**ACTION PLAN:** Have a childlike curiosity to keep learning as an entrepreneur. Have faith in your ability to succeed. Trust the process. Be excited about small progress and what the future holds for you.

**AFFIRMATION:** Every day in every way I am getting better and better. I am blessed and highly favored.

Sesan Kareem is the founder of HubCare Health, a healthcare company leveraging technology and innovative business model to democratise access to affordable healthcare for underserved patient population, [www.hubcarehealth.com](http://www.hubcarehealth.com), and the principal consultant of SK Institute, a training, publishing and consulting company, [www.sesankareem.com.ng](http://www.sesankareem.com.ng)

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Half-life	>6 or <8	4 hours
Mode of Elimination	50%-60% Kidney and 40%-50% Liver	50% Kidney and 50% Liver
Dosing	Once Daily	Once Daily
Protein Binding	86%	65%
Spectrum of Activity	Gram +ve, Gram -ve & Anaerobes	Gram +ve, Gram -ve & Anaerobes
Beta-Lactamase Stability	Unaffected by Beta-Lactamases	Unaffected by Beta-Lactamases

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**swipha**

Reference:  
1. FAU Amin, J et al. Comparative Evaluation of Cefixime Versus Amoxicillin-clavulanate Following Ceftriaxone Therapy of Pneumonia - Department of Pediatrics, Hasharon Hospital, Israel, 1996 Dec.

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# Ending period poverty among Nigerian women and girls

By Temitope Obayendo

Prior to attaining puberty, 15-year-old Tolani had heard much about menstruation and eagerly looked forward to the experience. Unknown to her, the commencement of her menses would drastically mess with her dignity and confidence through period poverty.

"My menstrual cycle began at the age of 13, and being a child from a very humble background, my widow mother could hardly afford our daily meals, not to talk of purchasing sanitary products for me. She introduced the use of rags to me, as the way to go, because that had been her way of managing it-

"This comes with lots of stigma and discomfort, as the rags do not fit in properly, which often leads to staining my uniform and other dresses. So, I've stopped attending schools on the first and second days of my period to avoid the embarrassment from my male classmates," she narrated.

Period poverty is a lack of access to menstrual products, education, hygiene facilities, waste management, or a combination of these. While it is a global experience, with about 500 million women and girls worldwide affected, those in the low-income countries are more affected. This reality contributes to why millions of women and girls around the world are stigmatised, excluded and discriminated against simply because they menstruate.

Unsurprisingly, the Partnership for Maternal, Newborn, and Child Health (PMNCH) has raised the alarm over discrimination against women and girls because of their natural bodily function of menstruation. Many are prevented from getting an education, earning an income and fully and equally participating in everyday life.

To stem such abuse, the World Health Organisation (WHO), in its statement on menstrual health and rights, upholds menstrual health as a health and human rights issue and not a hygiene issue. Moreover, in its commitment to breaking the silence and stigma associated with menstruation and to make schools, health facilities and other workplaces menstruation-responsive, the apex health body has charged health policymakers and programme managers to engage with all sectors to promote the rights of women and girls who menstruate and meet their comprehensive menstrual health needs.

## Lingering challenge

In spite of this global move to end period poverty, a recent ActionAid report indicates that one in 10 girls in Africa miss school because they don't have access to menstrual products, or because there aren't safe, private toilets to use at school.

In her remarks at the last Menstrual Hygiene Day, commemorated on 28 May, former Minister of Women Affairs Pauline Tallen, disclosed how more than 37 million girls and women in Nigeria were struggling to access menstrual hygiene products. This means that, every month, more than 37 million girls and women are unable to safely manage their periods, limiting their ability to study, work and live their lives.

Mrs Godwin, a petty trader at the Mushin Market, Lagos, attested



to this grim reality on menstrual poverty as she revealed that it is always a challenge for her to sell in the shop on the first two days of her period. According to her, she usually experiences a heavy flow that comes with vomiting; yet there is no clean toilet or changing room close by.

She further disclosed that the market environment usually aggravates her nausea, due to the lack of hygiene facilities. "For the two days I miss market in a month, I lose about N60,000, and other opportunities. This is usually a painful loss to me, but I have no choice than to stay back," she said.

The ActionAid report further corroborates Tolani's and Godwin's experiences, as it states that one in four women in their menstruating years' experience "period poverty," from their inability to purchase the products they need, as well as inability to be at work or school because of it. "More than 90,000 girls stay away from school because they cannot afford pads or tampons," it states.

## Health implications of period poverty

Medical experts affirm that period poverty causes physical, mental, and emotional challenges. It can make people feel ashamed for menstruating, and the stigma surrounding periods prevents individuals from talking about it.

Like Tolani, the reality is that people rely on "sanitary products stand-ins", such as toilet paper, paper towelling, rags, and cardboard, to manage blood flow. Rationing or using products longer than recommended also happens. The result? Physically, these unsanitary conditions can lead to gynaecological conditions that include toxic shock syndrome, bacterial vaginosis, urinary tract infections, as well as skin infections, among other concerns. This ordeal can be incredibly stressful and can cause people to miss school, work, and generally, life.

A 2018 study conducted in India established a correlation between inadequate menstrual hygiene practices and a higher prevalence of yeast infections, urinary tract infections, bacterial vaginosis, and trichomoniasis. Additionally, leaving a tampon in for an extended period can lead to the rare but severe condition known as toxic shock syndrome, the experts found.

Another empirical research published in BMC Women's Health found an increased risk of urogenital infections, such as yeast infection, vaginosis or urinary tract infections, when women and girls are not able to bathe and/or change or clean their menstrual supplies regularly.

For Chichi, a JSS 3 student, she

uses tissue paper for her period due to the inability of her pensioner father to purchase sanitary pads for her. She revealed that, while she had managed to cope, she also observed different infections around her genitals, which require prolonged treatment.

"My approaching period has become a nightmare for me, because I know the use of tissue paper will definitely attract an infection, whether minor or major, to my private part, but I'm helpless because I can't afford the exorbitant sanitary towels. An alternative for me is to use rags and wash thereafter, but the lack of soap and water at every point in the day always frustrates this.

"It will be a welcome idea if government can assist in reducing prices of these sanitary products for school-age girls like me to relieve us of this burden at the stage of life," she pleaded.

## Socio-economic impacts of period poverty

In an exclusive interview with Chaste Inegbedion, founder of the End Period Poverty initiative, he lamented the inadequate sanitation facilities in schools and communities, which continue to compound the problem.

"As a result, girls might miss school during their periods, hindering their education and

opportunities for advancement." He also condemned cultural taboos and stigmas surrounding menstruation, saying such often leads to social exclusion and discrimination.

According to him, tackling period poverty requires comprehensive efforts that encompass affordable access to menstrual products, education about menstrual health and hygiene, as well as destigmatisation of menstruation. "Initiatives, organisations and advocates are working towards those goals to ensure menstrual equity, and improve the overall wellbeing of individuals affected by period poverty," he said.

## Multidimensional approach

Ending menstrual poverty requires a multisectoral approach, as menstruating people work in all sectors of the economy. Thus, WHO's directive to all governments is to formulate policies that will mandate schools, workplaces and public institutions to be supportive of managing menstruation with comfort and dignity.

More importantly, developing nations are charged to normalise menstruation, by breaking the silence around it, as well as removing tariffs from sanitary materials to make them affordable to the less-privileged in the society.

In a chat with **Pharmanews**, a seasoned psychologist at the Lagos State Ministry of Education, Dr Olubukola Rosanwo, harped on the need for NGOs and other philanthropists to alleviate the period poverty of secondary girls through regular supply of sanitary materials and refurbishment of dilapidated facilities to enhance menstrual health and dignity among girls.

Rosanwo, who is an assistant director of education said, "For girls within secondary school age, some of them don't even understand what they are going through, while the situations around them are not encouraging. Some of them don't have money to buy sanitary pads, and knowing the implications of that on their health, we are appealing to NGOs and other organisations to come to the aid of these children, because they are the future of the country."

## Pharmacy schools need curriculum that reflects current trends, emerging technologies - President, PANS-GSU

continued from page 26

However, we strive to address these issues by advocating for improved infrastructure, leveraging technology, facilitating student exchange programmes, and collaborating with healthcare professionals and regulatory bodies to enhance the overall quality of pharmacy education in the region.

## If you have the honour of changing some things about pharmacy education in your school, what would they be?

I would focus on enhancing practical training and experiential learning opportunities. Practical skills are essential for pharmacists to excel in their profession. I would work towards establishing valuable collaborations with hospitals, community pharmacies, and pharmaceutical industries, to provide students with hands-on experience.

Additionally, I would advocate for increased collaboration between universities and healthcare institutions, to facilitate internships, research opportunities,

and networking for students. Furthermore, I would advocate for an updated curriculum that reflects current healthcare trends and emerging technologies. Integration of entrepreneurship and leadership skills would also be a priority, to ensure that our graduates are well-prepared for the dynamic pharmacy landscape.

## When you finish pharmacy school, which area of pharmacy practice would you consider and why?

Upon finishing pharmacy school, I am considering specialising in clinical pharmacy. I am fascinated by the direct patient care aspect of pharmacy practice and the opportunity to work closely with healthcare teams to optimise patient outcomes.

Clinical pharmacy allows me to apply my knowledge and skills in medication therapy management, drug information, and patient counselling to make a positive impact on patients' lives. However, I am also open to exploring other areas of pharmacy practice and keeping myself updated with the evolving opportunities within the profession.



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# How civil war hindered me from studying Pharmacy in Russia - Ifebigh

**I**n this exclusive interview with MOSES DIKE, eminent community pharmacist and managing director of Ladith Pharmaceutical Limited, Pharm. (Dr) Lawrence Ifebigh, speaks about his childhood, education, career and other factors that have contributed to his success in life and business. Below is the full interview.



**Pharm. (Dr) Lawrence Ifebigh**

**Kindly tell us about yourself, your early childhood experiences, education and the events that have helped to shape your adult personality.**

As you already know, my name is Pharm. (Dr) Lawrence Nnaemeka Ifebigh. I am a Fellow of the Pharmaceutical Society of Nigeria (PSN). I was born on 9 September 1947; so, by 9 September, this year, I will be 76. I belong to the Anglican Church and I was made a Knight of St. Christopher in year 2000.

I was born in Onitsha to a fairly wealthy family. I started my primary education in 1952 and did very well. I came out with distinction. I started secondary school in 1961 and graduated in 1965. I had A's in all my subjects.

**How did you come about Pharmacy as your course of study? Did you have any role models in your younger days who guided you to make the choice? If you were not a pharmacist, what else would you have loved to become?**

Somehow, I believe it is my destiny to be a pharmacist because soon after I received my WAEC result, I got a scholarship to study Pharmacy at Patrice Lumumba Friendship University, in Moscow, Russia. But before we could leave the country in August 1967, the Nigerian civil war had started. The Biafran troops were reported to be

at Ore, in the western region; so it was impossible to join Aeroflot, the Russian plane that came to collect the prospective students.

We all know that the civil war went off full blast in 1967 and that put a temporary stop to my quest for education. After the civil war, we had to organise ourselves to start again.

Actually, I made up my mind to study Pharmacy while in secondary school. I was always coming first in my class, from class 2 to class 5. Coming first in class means that you were very good at both science and arts subjects. Therefore my secondary school teachers took special interest in my education. They were all coming to my family house in Onitsha to tell my mother that I should study Medicine for my degree programme.

Because of my nature, I could never have studied Medicine. I was frightened by surgery. I could not cut a human being, with blood coming out; so the alternative was Pharmacy. I could have become a pharmacy student in Russia in 1967 but I later became a pharmacy student at University of Nigeria, Nsukka, in 1972. Five years were wasted because of the Nigerian civil war. I graduated in June 1977.

While in secondary school, my major hobbies were going to the cinema and listening to music. This shaped my life because today I still watch films in my house and I play music every morning when

I wake up.

As I advance in age my priority has been to advance the cause of community pharmacy. I started my pharmacy practice in January 1982 and decided that my priority would be rare ethical pharmaceutical products used in tertiary hospitals. So, I concentrated my business in University of Benin Teaching Hospital (UBTH), SPDC (Shell, Warri), University of Nigeria Teaching Hospital, Enugu (UNTH), and National Hospital, Abuja. In fact, in Benin City, from those early days, my pharmacy - Ladith Pharmaceutical Company Limited - was well known for ethical products.

I live in Benin City. What actually brought me to Benin City was my NYSC. I found Benin City a conducive environment to practise pharmacy the way I wanted to do it. I came to Benin City for my NYSC in 1978 and finished in 1979. I became a medical representative for Wellcome Nigeria Limited in 1979. I worked in Wellcome till December 1981. I started my company, Ladith Pharmaceutical Company Limited, in January 1982. I became a Fellow of the Pharmaceutical Society of Nigeria in 2016.

**Why did you settle for community pharmacy practice and how satisfying do you find your career?**

You asked me why I chose community practice instead of any other aspect of pharmacy practice. It was a simple choice to make, as I did my internship in a teaching hospital. I realised that some women who worked in the pharmacy played a lot of truancy. For example, very often they got excuse duty from the doctors to travel on a Monday to resume the next Monday. At the end of the month when salary vouchers were presented, you would find that everybody earned a full salary.

I told myself that I would not work in a government establishment where people earned their full monthly wages, whether they worked for the full month or not. I would rather work for myself where my income is directly proportional to the amount of work I put in.

**As a senior pharmacist, which of the issues affecting Pharmacy and healthcare in general would you like the government and stakeholders to address more frontally, especially as we usher in a new government in Nigeria?**

From the line of practice that I followed, I was importing rare ethical drugs from London almost every three months, but today it is not so. The foreign exchange you need to make the importation is no longer available. If you have to bring in the rare ethical drugs into the country, you must source for foreign exchange from the black market. This has skyrocketed the

price of pharmaceutical products almost beyond the reach of the ordinary Nigerian.

I think it is wrong for Nigeria to have two or more exchange rates for her currency. This has been a terrible experience for those of us in private practice. The government has to tackle this urgently.

From my experience, rare ethical products are a major issue in the success of pharmacy practice in Nigeria. The Pharmacy Council of Nigeria and the Pharmaceutical Society of Nigeria should, at the highest level, work with the incoming government and insist that the right things should be done.

**How do you relax? Tell us about some of the pastime activities and lifestyle modifications you have adopted to stay fit and active.**

While as a medical representative, I joined the Benin Club in 1979. From those early days, I played table tennis and squash. But, today, I no longer play squash because of my age. About 10 years ago, I joined the golf section of the Benin Club. I also joined the billiards and snookers sections in same Benin Club.

But I must emphasise that my major pastime is listening to music. It helps me to relax. It makes me happy. I don't even feel my age. In fact, I feel younger every day, to the glory of the Almighty God.

**Tell us about your family. Did any of your children take after you to study Pharmacy or other health-related professions?**

About my family, I have seven children. One of them, a lady, married and living in Lagos, is a pharmacist. She is also into community pharmacy practice. My last child, a boy, is currently studying Pharmacy at Madonna University. By God's grace, he will graduate this year.

My wife, Dr (Mrs) Edith Ifebigh, studied Chemistry as first and second degree. Some 20 years ago, when my practice became a little vast, I encouraged my wife to study Pharmacy. She obtained Pharm.D and joined me in the practice.

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

I have been a patron of PANS-UNIBEN since 1985 and with my wealth of experience, I will advise the young and upcoming pharmacists to give their best shot to whatever aspect of pharmacy practice they choose. Pharmacy profession is a major aspect of the healthcare sector. They should not be in a hurry but keep pushing without ceasing in the positive direction because we have a great profession called Pharmacy.





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## Ukwa, a popular delight

By Pharm. Ngozika Okoye MSc, MPH, FPCPharm  
(Nigeria Natural Medicine Development Agency)  
Email: ngozikaokoye@yahoo.com



**Treculia africana**

The African breadfruit, botanically known as *Treculia africana* (Fam. Moraceae), is commonly eaten by the Igbo people in southeastern Nigeria. Ukwa is commonly called *asa dagaa*, *gayo* or *kawoo* in Hausa; *afon* by the Yoruba; *ize* in Benin; *jekri* and *sobo* in Ijaw; and *ediang* in Efik.

### Constituents

Studies have shown that the seed of *ukwa* contains protein, fat, ash, fibre, carbohydrate and moisture. It also contains minerals like phosphorus, potassium, calcium, magnesium, sodium, iron, zinc, as well as vitamins C, A, B1 and B2, niacin, Lutein ( $\mu\text{g}$ ) and B-Carotene.

### Preparations

*Ukwa* could either be roasted, boiled, made into a porridge or added to drinks, cakes, snacks and cookies. *Ukwa* could be cooked with potash and just eaten like that, or it could be separated from the water, for just the seeds to be mashed with some ingredients and thereafter served with the extract (water). The seeds of *Treculia africana* can be ground to flour, pressed for oil and used as flavouring in alcoholic drinks

### Pharmacological actions and medicinal uses

Breadfruit is said to be heart-friendly because of its potassium content and other nutrients which help in reducing blood pressure and regulating the heart rate, by minimising the effects of sodium. The dietary fibres present help to reduce cholesterol by preventing its absorption in the gut. Breadfruit contains high amounts of omega 3 and omega 6 fatty acids, which are vital for brain development and function, among many other things.

The African breadfruit is rich in Vitamin C which helps in the production of collagen, a protein which provides elasticity to the skin. The omega 3 and 6 fatty acids in *ukwa* help to regulate sebum production in the scalp, reducing dandruff and itchiness, inhibiting scalp inflammation.

Breadfruit porridge is one of the diabetic healthy foods

out toxins from the intestine and helps in proper functioning of the bowels and intestines. It also helps in preventing other disease associated

with digestion, such as gastritis and ulcer. The presence of fibres helps to stop food cravings thereby aiding weight loss.

The fruit, as well as the leaves and latex of *ukwa* tree work as a natural medicine for curing diseases like diarrhoea, asthma, and sciatica. Breadfruit leaves are used to relieve inflammation and other related health issues, such as hepatitis, enlarged spleen, liver disease, kidney, and heart-related illnesses. This anti-inflammatory property may be attributed to the rich flavonoid content, which is a vital compound that helps to reduce the cholesterol in the blood and treats related illnesses.

### Adverse effects

Breadfruit should not be eaten in excess, as it may cause certain allergies and bleeding disorders in pregnant women when eaten excessively.

### Economic uses and potentials

Dried *ukwa* fruits cost as much as 15,000 per paint bucket. It is a source of income for many homes in the southeast. There are prospects in the harvesting, processing, distribution and sales of *ukwa*. *Ukwa* is also beneficial in the food, pharmaceutical and cosmetics industries.

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# SPSMN will drive positive change, says Oyeniran

## - As Society inducts Fellows

By Patrick Iwelunmor

The challenges besetting the pharma sales and marketing sector in Nigeria will soon be overcome through knowledge sharing, innovation and commitment to professionalism. These were the words of the President of the Society for Pharmaceutical Sales and Marketing of Nigeria (SPSMN), Pharm. Tunde Oyeniran, during the group's induction ceremony and investiture of Fellows, held at the Lagos Chamber of Commerce and Industry, on 15 June 2023.

While reiterating SPSMN's commitment to providing a unified platform for all sales and marketing practitioners in Nigeria's pharmaceutical sector, Oyeniran harped on the mission of the Society to be a trailblazer for positive change.

"In the face of the challenges that the pharmaceutical sector encounters, SPSMN aims to be at the forefront of driving positive change. We recognise the importance of knowledge and training, ethics and integrity and collaboration with stakeholders to ensure the ethical use, sales, and promotion of drugs and medicines in Nigeria," he said.

According to Oyeniran, in order to sustain the value which SPSMN would be adding to the Nigerian pharma sector, plans have been concluded for the commencement of activities, such as monthly roundtable discussion, national conference, pharma marketing awards, and annual business review. Others are quarterly professional development training and quarterly breakfast meetings.

The event, which witnessed the presence of some of the best



L-R: Pharm. Moses Oluwalade, MD, Miraflash Nig. Ltd; Mr Femi Soremekun, MD, Biofem Group, and special guest of honour; Pharm. John Nwaiwu, MD, JB pharmaceuticals Ltd, and chairman of the occasion; and Pharm. Tunde Oyeniran, president, Society for Pharmaceutical Sales and Marketing of Nigeria (SPSMN), at the event.

brains in the Nigerian pharmaceutical industry, was chaired by distinguished pharmacist and Managing Director of JB Pharmaceuticals Limited, Pharm. John Nwaiwu, while the Managing Director of Biofem Pharmaceuticals Limited, Mr Femi Soremekun, was the special guest of honour.

In his capacity as chairman of the event, Nwaiwu extolled the efforts of Oyeniran and his national executive council in putting together a professional body of pharma sales and marketing people. He urged them to make it professional in all ramifications while working to sustain its relevance and overall impact on the Nigerian pharmaceutical landscape.

Speaking as the special guest of honour, Soremekun expressed delight

that SPSMN had been established to foster trainings and engagements that would move the pharmaceutical industry forward, far as sales and marketing are concerned.

On his part, the Managing Director of Miraflash Nigeria Limited, Pharm. Moses Oluwalade, added that the pharmaceutical industry in Nigeria had come of age with the establishment of the SPSMN. He said the Society is a timely and laudable addition to the pharma space.

"The SPSMN will definitely add value to the industry by elevating the level of thinking, innovation and expertise in the industry", he said.

Oluwalade also enjoined the Society to promote the availability of quality pharmaceutical products in Nigeria. He also called for discipline

in the members' conduct and mode of practice.

The highpoint of the event was the award of fellowship and honorary fellowship to deserving persons. The following were inducted as Fellows of the SPSMN: Pharm. Tolufase Olufunke Yewande, John Godwin, Oyeniran Olutunde, Oyetunji, Pharm. Bowoto Abimbola Owolabi, Ishael Tunde Bolaji, Pharm. Afunwa Emmanuel Chijindu, Ajala Babafemi Olusola, Pharm. David Haruna Ayele, Dr David Ehikhuemen, Pharm. Bakau Oyinloye Alli, Pharm. Olusola Akande, Pharm. Gbenga Falabi, Afolabi Olufemi Adeola, Omojola Temitope Oluwatosin, Dada Olukayode Olatunde and Pharm. Adebayo Adedayo.

Others were Olaogun James Olusanjo, Mustua Ali Ariwala, Pharm. Bantale Olakunle, Pharm. Ochai Adejoh, Pharm. Alawode Olaolu Olusegun, Pharm. Michael Odediran and Pharm. Ajagunna Ayodeji Olubunmi.

Those awarded honorary fellowship were Mr Sammy Ogunjimi, MD, Codix Healthcare, Pharm. Lekan Asuni, MD, Lefas Pharmaceutical Limited, Dr Lolu Ojo, MD, Merit Healthcare Limited, Mr Femi Soremekun, MD, Biofem Group, Mr Ade Adebola, MD, Leo Tetra Pharmaceuticals and Pharm. Ike Okele, MD, Superior Pharmaceuticals Limited.

Others are Bayo Adepoju, GM, Sterling Biopharma Limited, Pharm. Moses Oluwalade, MD, Miraflash Nigeria Limited and Professor Thoepphine Akunne, Dean, Faculty of Pharmacy, Chukwuemeka Odumegwu University, Igbaram, Anambra State.

Two associates and 17 members were also inducted.

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## Events in Pictures



Prince Julius Adelusi-Adeluyi, cutting the commissioning tape, flanked by Prof. Olukemi Odukoya (left); Prof. Igwilo (right) and other executives at the commissioning of Nigeria Academy of Pharmacy (NAPharm) secretariat, at the Faculty of Pharmacy, Lagos University Teaching Hospital, (LUTH), Idi Araba, recently.



Former PSN President, Pharm. Ahmed I. Yakasai, at his turbanning ceremony as Kachalla of Kano, by the Emir of Kano, His Highness, Alhaji Aminu Ado Bayero.



Pharm. (Dr) Michael Oyeбанjo Paul, chairman, Mopson Pharmaceutical Limited (Middle), displaying his award plaque and certificate at the Nigerian Healthcare Excellence Award (NHEA) 2023, held at Eko Hotel and Suites, Victoria Island, Lagos.



Pharm. I G Anukwu, erstwhile national chairman of NAIP (Middle), and other Alpha Pharmacy staff displaying their award plaques and certificate after receiving it from Mrs Chinyere Okorochoa, treasurer, HFN, at the Nigerian Healthcare Excellence Award (NHEA) 2023, held at Eko Hotel and Suites, Victoria Island, Lagos.

## Coming Events

### PSN-BOF 2023 Mid-Year Event

Date: 11th to 13th July 2023 Sheraton Hotel and Towers, Ikeja, Lagos  
Phone No: 08021327047

### University of Lagos, Faculty of Pharmacy 2nd Scientific Conference

Date: 19th July, 2023  
Venue: Faculty of Pharmacy, Unilag  
Phone No. 08033356197, 08185964021  
Email: unilagpharmconf@unilag.edu.g, unilagpharmcof@gmail.com

### 42nd ACPN Scientific Conference

Date: 31st July to 3rd August 2023  
Venue: The Dome Event Centre, Okpanam Road, GRA Phase 1, Asaba, Delta State.  
Phone No: 08037788345  
Email: acpndic@gmail.com

### 2023 Lagos AfriHealth Expo

Date: 27th July to 29th July 2023  
Venue: Airport Hotel Ikeja, Lagos  
Phone No: 08033392202

### NAPPSA API-Excipients Scientific Workshop

Date: 1st -3rd August, 2023  
Venue: Jelili Omotola Hall C, University of Lagos, UNILAG, Yaba.  
Registration website: [www.api-exipients.org](http://www.api-exipients.org)

### NAPA 21st Annual Scientific Conference

Date: 14th -18th August, 2023  
Venue: University of Ilorin, Kwara State  
Phone No: 08036548975

### 24th AHAPN Annual Scientific Conference

Date: 21st -25th August  
Venue: Welcome Centre Hotel, Ikeja, Lagos  
Phone: 08053031627

### West African Healthcare Expo 2023

Date: 23rd - 27th August, 2023  
Venue: Academy Guest House Event Hall, Agidingbin Ikeja, Lagos.  
Phone No. 08023899759, 08073859479

### 17th NAPPSA Scientific Conference

Date: 21st - 24th September, 2023  
Venue: Hilton Columbus Polaris, USA  
Phone No. 1-614-885-1600

### 96th Annual National Conference of PSN

Date: 30th Oct -4th November, 2023  
Venue: Gombe Intel Conference Centre, Bauchi Road, Gombe  
Phone: 08034000841



The MD of May & Baker Plc, Patrick Ajah (4th left), his management team and the awardees honoured at the 2022 business year, held at Providence Hotel, GRA, Ikeja, Lagos, recently.

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## THE JOURNEY OF AGILE ORGANISATION

### Leadership: Yesterday, today and the future (4)

By Prof. 'Lere Baale, FPSN, FPCPharm, FNAPharm, FNIM

#### The growing importance of technology to leadership success

Technology is integral to our daily lives in today's fast-paced world. Technology has transformed our lives and work, from smartphones to artificial intelligence. Let us explore the growing importance of technology to leadership success.

Firstly, technology has enabled leaders to access more data and insights. With the advent of big data and analytics tools, leaders can now collect, process, and analyse vast amounts of data from various sources. This enables them to make more informed decisions, identify emerging trends, and create effective strategies for better outcomes.

For example, a business leader can use data analytics tools to gain insights into customer preferences and behaviours. They can then use this information to tailor their marketing campaigns and product development strategies to meet customer needs better, resulting in increased sales and improved customer satisfaction.

Secondly, technology has transformed communication, making it faster and more efficient. Regardless of location, leaders can communicate with their teams, stakeholders, and customers in real-time. This has enabled more effective collaboration, better decision-making, and improved customer service.

For instance, remote work has become increasingly popular, and technology has enabled leaders to manage remote teams effectively. They can use video conferencing and other collaboration tools to stay connected with their teams, provide guidance and support, and ensure everyone works towards shared goals.

Thirdly, technology has made it easier for leaders to automate routine tasks and streamline business processes. This saves time and resources and enables leaders to focus on more strategic tasks and make more informed decisions.

For example, a business leader can use workflow automation tools to streamline the order fulfilment process. This enables them to process orders quickly, reduce errors, and improve customer satisfaction.

Finally, technology has made it easier for leaders to stay updated with industry trends and developments. With access to online resources, social media, and other digital channels, leaders can stay informed about emerging technologies, changing customer preferences, and regulatory changes.

In essence, technology is playing an increasingly critical role in leadership success. It has enabled leaders to access more data and insights, communicate more effectively, automate routine tasks, and stay updated with the latest trends and developments. Leaders who embrace technology and use it to their advantage are better equipped to make informed decisions, collaborate effectively, and drive their organisations towards success in today's digital age.

#### The growing importance of diversity and inclusion in leadership

In today's world, diversity and inclusion have become increasingly important, not just as social and

moral imperatives but also as essential components of effective leadership. Let us explore the growing importance of diversity and inclusion in leadership.

Firstly, diversity and inclusion foster innovation and creativity. When leaders embrace diversity and create an inclusive environment, they invite different perspectives, experiences, and ideas. This leads to more innovative and creative solutions to complex problems, thereby improving outcomes and competitive advantage.

For example, a diverse team can bring various experiences, backgrounds, and perspectives to a project, enabling them to consider and incorporate multiple viewpoints in their decision-making process. This can lead to a more comprehensive understanding of the problem, resulting in better solutions.

Secondly, diversity and inclusion can improve employee engagement and job satisfaction. When employees feel valued, respected, and included, they are more likely to be engaged and committed to their work, resulting in increased productivity and reduced turnover.

For instance, a leader who fosters a culture of inclusion and embraces diversity can create a sense of belonging for all employees. This can lead to increased job satisfaction, higher morale, and improved retention rates.

Thirdly, diversity and inclusion can enhance a company's reputation and appeal to a broader customer base. Companies embracing diversity and inclusion are committed to fairness, respect, and social responsibility. This can enhance their reputation and make them more attractive to a broader customer base.

For example, a company known for its diverse and inclusive culture can attract and retain customers who value those same principles. This can increase customer loyalty and a competitive advantage in the marketplace.

Finally, diversity and inclusion are becoming more critical from a legal and regulatory perspective. Governments worldwide are implementing regulations and policies to ensure that organisations promote diversity and inclusion. Leaders who fail to comply with these regulations risk penalties and reputational damage.

#### The growing importance of social responsibility and sustainability to leadership

Over the last few decades, the importance of social responsibility and sustainability has been multiplying. As society becomes more aware of individuals' and organisations' impact on the environment and communities, there has been a shift towards more responsible and sustainable practices. This has led to the growing importance of social responsibility and sustainability to leadership, as it becomes increasingly clear that these principles are essential for long-term success.

Social responsibility and sustainability are closely related concepts, as both involve considering the impact of actions on stakeholders and the environment. Social responsibility consists in making decisions that are in the best interests of all stakeholders, including employees, customers, suppliers, and the community. Sustainability, on the other hand, involves using

resources to meet the needs of the present without compromising the ability of future generations to meet their own needs.

Leadership is crucial in promoting social responsibility and sustainability, as leaders often set the tone for an organisation's culture and values. By fostering social responsibility and sustainability, leaders can help positively impact the environment and society, while improving their organisation's bottom line.

One of the key benefits of social responsibility and sustainability to leadership is improved reputation and brand image. Customers and stakeholders increasingly seek organisations that align with their values and are committed to positively impacting the world. By promoting social responsibility and sustainability, leaders can enhance their reputation and build trust with customers and stakeholders.

In addition to reputation benefits, social responsibility and sustainability can lead to improved financial performance. Organisations that adopt sustainable practices often see reduced costs, increased efficiency, and increased innovation and access to new markets. By promoting social responsibility and sustainability, leaders can help to create a more resilient and successful organisation.

Finally, social responsibility

and sustainability are essential for long-term success. In today's world, businesses and organisations face increasing pressure to be accountable for their actions and positively impact the environment and society. Leaders who ignore these trends and fail to promote social responsibility and sustainability may be disadvantaged in the long run.

In conclusion, social responsibility and sustainability are becoming increasingly crucial to leadership. As society becomes more aware of the impact of actions on the environment and communities, there is a growing expectation that leaders will promote responsible and sustainable practices. By doing so, leaders can improve their organisation's reputation, financial performance, and long-term success while positively impacting the world.

Continues next edition



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# Initiate policies to prevent dispensing of ethical drugs in pharmacies, psychiatrist urges ALPs

By Temitope Obayendo

**A** consultant psychiatrist, Dr Vincent Udenze, has charged members of the Association of Lady Pharmacists (ALPs) to drive the formulation of policies to regulate the dispensing of ethical drugs to youths at the community level.

Udenze, who is the MD/CEO of Intersect Consortium, gave the charge at the International Day against Drug Abuse and Illicit Trafficking 2023, a virtual programme organised by the ALPs leadership.

The webinar featured other discussants like Pharm. (Dr) Scholastica Lan, ALPs national chairman; Dr Monica Eimunjeze, technical adviser, ALPs; Pharm. (Mrs) Victoria Ukwu, immediate past chairman, ALPs; and Pharm. Chinwe Effiong, mental health pharmacist, and moderator of the programme.

Speaking on the theme of the programme, "People first: Stop stigma, and discrimination, strengthen prevention", the psychiatrist emphasised the importance of regulation in the drug abuse scourge in the country, averring that if lady pharmacists could control the sales of prescription drugs to youths in their pharmacies, it will assist in curbing the menace.

He also warned mothers to desist from being enablers of wrong behaviours in children, while admitting that it is possible to get addicts back on track after treatment.

"We must understand that when people have treatment, they get better, while some relapse. However, several factors can lead to relapse, depending on what led to the addiction, for instance, rape. Again, when it comes to treatment and relapse, it is an individualistic thing," he explained.

The International Day against Drug Abuse and Illicit Trafficking, or World Drug Day, is marked on 26 June every year, to strengthen action and cooperation in achieving a world free of drug abuse.

The aim of this year's campaign, according to the United Nations Office on Drug and Crime, is to raise awareness about the importance of treating people who use drugs with respect and empathy; providing evidence-based, voluntary services for all; offering alternatives to punishment; prioritising prevention; and leading with compassion.

The campaign also aims to combat stigma and discrimination against people who use drugs by promoting language and attitudes that are respectful and non-judgmental.

The UN Secretary-General, António Guterres, in his message on this year's celebration, decried the prevalence of drug abuse and its impacts on peoples' health, saying tens of millions of people suffer from drug-use disorders, with less than one-fifth having access to treatment. Drug users are doubly victimised, he said, first by the harmful effects of the drugs themselves, and second by the stigma and discrimination they



Dr Vincent Udenze



Pharm. (Mrs) Scholastica Lan  
ALPs National Chairman

face.

He thus called for the implementation of drug abuse policies in order to crack down on traffickers and re-allocating resources to prevention, treatment and harm-reduction measures.

The panellists also admonished parents on the need to spend quality time with their children, saying this will aid early detection of drug and substance abuse symptoms in the youngsters.

They also warned parents to desist from having excessive trust in their wards, without spending time to be familiar with their daily routines. This is in correlation with a report by the United Nations Office on Drug and Crime in Nigeria, which indicates that 14.4 per cent (14.3 million) of people aged between 15 and 64 years abuse drugs.

Speaking on strengthening prevention strategies on drug abuse during the webinar, ALPs national chairman, Pharm. (Dr) Scholastica Lan, stressed the importance of the home front for early detection of drug abuse symptoms, which requires parents' deliberate engagement with their youths at home.

She said, "Strengthening prevention of drug abuse has a lot of strategies, as it starts from the home, then schools and the larger society. It also demands parents to stop living in denial of their children's activities, as this emboldens the children in the act.

"Parents should spend time with their children, because this will enhance easy identification of the child whether he or she is an addict or not. Parents can also search their children's personal effects as security checks to keep them on their toes."

Lan, who asserted that it is easy to identify an addict, mentioned some of the signs of drug abuse in children to include bulging eye balls, bullying of siblings, flagrant disregard

for parents, late night keeping, among others.

Other members of the panel, who spoke at the webinar were Dr Vincent Udenze, a consultant psychiatrist and MD/CEO of Intersect Consortium; Dr Monica Eimunjeze, technical adviser, ALPs; Pharm. (Mrs) Victoria Ukwu, immediate past chairman, ALPs;

and Pharm. Chinwe Effiong, mental health pharmacist, and moderator of the programme.

The discussants reiterated their commitment to continue with the various campaigns to create awareness and also demand that pharmacists practice within regulations.

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\*Ajuwon et al. BMC Infectious Diseases (2021) 21:1120

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# Why pharmacy faculties need more business management courses- Anyika

By Ranmilowo Ojalumo

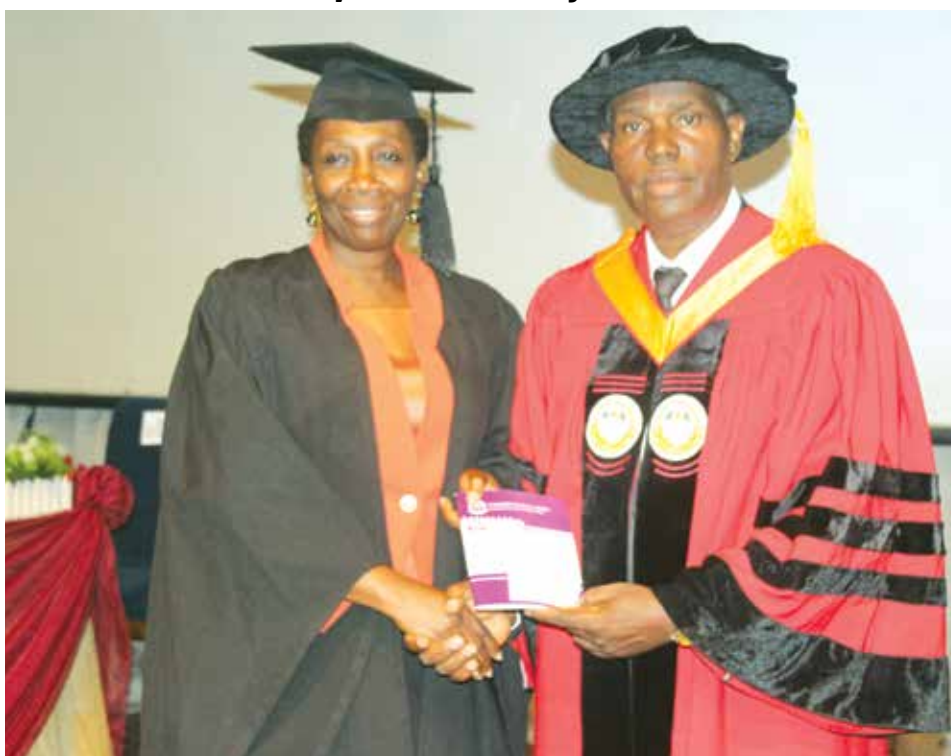
A professor of Pharmacy Management at the University of Lagos, Professor Emmanuel Nwanolue Anyika, has called for the introduction of more management courses in the faculties of pharmacy across the country.

He said such a move will sharpen the business skills of the younger generation of pharmacists, thereby ensuring greater success in all aspects of the pharmacy profession.

Anyika made the call while delivering the recent 2021/2022 inaugural lecture of the University of Lagos, titled, "Navigating the Pharmaceutical and Management Sciences in Our World of Healthcare Uncertainty".

In the lecture, the don highlighted the nexus between pharmaceutical and management sciences, while pinpointing how management sciences influence the thought processes of a healthcare professional. He added that there is an urgent need for the application of management principles in all pharmacy practice areas.

According to him, "An average Nigerian pharmacist



Prof. Emmanuel Anyika presenting the 2021/2022 Inaugural Lecture note he presented to the VC, University of Lagos, Prof. Folasade Ogunsola.

chooses to remain in a closed system to shield himself from environmental disturbances. Despite the uniqueness of his noble profession, he still does not believe that he is a big force to reckon with.

"The pharmacist is reluctant to acquire new skills, and self-development becomes a utopia. Unless he comes to terms with

reality, the vicious cycle will never be broken. His intellect will keep begging to be used."

On the way forward, Anyika said, "A postgraduate degree programme in pharmacy administration should commence to provide manpower for pharmacy management education, as well as full development of teaching

of pharmacy management to the teeming population of pharmacist business-owners, who are eager to acquire business skills."

He also called for the establishment of a full Department of Pharmacy Management Administration, adding that an interdisciplinary collaboration between the pharmacy and business administration faculties would encourage the training of hybrid health professionals with high entrepreneurial skills.

In her remarks, the Vice-Chancellor, University of Lagos, Professor Folasade Ogunsola, commended Anyika for his contribution to the body of knowledge, stressing that the institution would look into the recommendations made in the lecture and implement where possible, so as to better pharmacy education in the country.

Specifically addressing Anyika, the VC said: "Now that you have successfully paid your academic debt to the University of Lagos, on behalf of the Senate of the University of Lagos, you are hereby discharged and acquitted. I, therefore, welcome you to the committee of professors that have paid their dues."

## How Pharmaserv field service app improves sales and medical detailing - Anyaorah

Pharm. Emeka Anyaorah is the co-founder and chief executive officer of Pharmaserv Limited, a software solution provider for pharmaceutical and allied healthcare industries. In this interview with **MOSES DIKE**, Anyaorah speaks on the various solutions which Pharmaserv provides to aid pharmaceutical sales and marketing. Excerpts:

**Kindly tell us about PharmaServ, the vision behind the concept, and the relevance of your services to the Nigerian pharmaceutical industry.**

First of all, thank you for this wonderful opportunity. I would like to start with the problem we are tackling. Proven data has shown that more than ten per cent of pharmaceutical sales are lost to bad debts and malpractices by sales professionals. This costs the industry over \$2 billion annually in Africa. Secondly, sales and distribution practices are heavily manual, which gives room for errors.

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a sales workflow-support software that manages sales and medical detailing operations, as well as front-and-back-office activities of sales teams and sales managers in low-resource settings.

With PharmaServ, common data architecture, sales, medical, accounting, and marketing teams can work together in a more coordinated, customer-centric, and productive way.

**How would you describe the contemporary practice of pharmaceutical marketing in Nigeria and how do you intend to leverage technology to make things better for the industry?**

My opinion is that the marketing practice here in Nigeria is pretty much very traditional. There are no prescribed standards across different tiers of businesses; nobody knows what comes from who, and where. Yes, on the individual level, we have the best talents to carry out most of these activities but the lack of basic infrastructure is inhibiting the opportunities the market presents.

This also provides an enormous commercial opportunity for digital infrastructure providers like us to innovate within this vertical, and build tools that will supercharge sales and marketing efforts across the pharmaceutical value chain.

It is also worth to note that there is an emerging generation that will be sitting in key positions in most of these traditional companies in the next five to 15 years' time. These are people who spend most of their time surfing the Internet or who grew up with cell phones and e-mail.

So, the new winners in the market will be technology-enabled businesses, and I will keep on saying that "the market is not what it is, the market is what it can be".

**Are you into any form of**



Pharm. Emeka Anyaorah

**partnership with the industry players and what are some of the challenges you have selling this idea to the pharmaceutical industry?**

*continued on page 58*

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## Building a world-class pharmaceutical company (2)

In the first part of this piece, we treated the following requirements as imperatives for building a world-class pharmaceutical company:

1. Vision and purpose
2. Strategic thinking and planning
3. Customer-centric approach
4. Learning and agile organization
5. Deliberate policies, processes and systems
6. Empowerment and collaboration
7. Pursuit of excellence

Let us proceed to other requirements and potential challenges, and thereafter, draw or conclusions

**8. Performance management and reward system:** Establishing a robust performance management framework is essential for driving accountability, motivating employees, and fostering a culture of excellence. In Nigeria, pharmaceutical companies can implement performance measurement systems that align with organisational goals and values. This involves setting clear objectives, conducting regular performance reviews, and providing constructive feedback.

Furthermore, organisations can introduce rewards and sanctions programmes to celebrate exceptional achievements, encourage a healthy competitive spirit and penalise poor results. By recognising and rewarding outstanding performance, organisations can boost employee morale, enhance retention rates, attract top talents, and ultimately drive the organisation's success upwards.

**9. Entrepreneurial mindset:** Innovation and entrepreneurship play a vital role in the growth and competitiveness of pharmaceutical organisations. In Nigeria, organisations can foster an entrepreneurial mindset by its reward and recognition practices among their workforce by encouraging risk-taking, creativity, and the exploration of new opportunities. This includes establishing dedicated innovation hubs and providing resources for research and development.

For instance, a pharmaceutical company could collaborate with local universities or research institutions to identify promising projects and support the development of novel drug formulations. By nurturing an intrapreneurial workforce, organizations can drive breakthrough innovations, introduce differentiated products, and contribute to addressing unmet medical needs in the marketing.

**10. Value-driven culture:** Core values act as guiding principles for an organisation's behaviour and decision-making. In the Nigerian context, pharmaceutical companies can embrace values such as excellence, integrity, transparency, customer-focus, etc. This involves establishing ethical practices, complying with regulatory requirements, and actively participating in initiatives that promote healthcare access and equity.

For example, a pharmaceutical company could engage in partnerships with local NGOs to provide free medical camps or donate medications to underserved communities. By embodying these values, organisations can build trust with stakeholders, strengthen their

brand image, and contribute to the sustainable development of the healthcare ecosystem.

### Surmounting challenges

It will be honest to admit that implementing the imperatives for building a world-class pharmaceutical organisation in Nigeria may pose several challenges. However, with careful planning and proactive strategies, these challenges can be overcome. Here are some potential obstacles and suggestions for overcoming them:

**(a) Limited infrastructure and resources:** Nigeria's healthcare infrastructure may be underdeveloped, lacking adequate facilities, supply chains, and distribution networks. Pharmaceutical companies can address this challenge by investing in infrastructure development, collaborating with other players and government entities, and leveraging technology to enhance supply chain efficiency and ensure timely delivery and availability of medications. Partnerships with logistics providers and engagement with industry associations can also help overcome infrastructure limitations.

**(b) Regulatory environment:** The regulatory landscape in Nigeria can be complex and subject to frequent changes. Companies must stay updated on regulations, invest in regulatory compliance, and establish strong relationships with regulatory authorities. Engaging in open dialogue, participating in industry associations, and seeking legal and regulatory expertise can help navigate the complexities and ensure compliance.

**(c) Access to capital:** Access to funding and capital can be a significant challenge for pharmaceutical companies in Nigeria. To overcome this, companies can explore partnerships with investors, venture capital firms, or development banks that have an interest in supporting healthcare initiatives. Participating in government funding programmes or seeking grants from international organisations can also provide financial support for research and development projects.

**(d) Talent acquisition and retention:** Attracting and retaining skilled professionals in the Nigerian pharmaceutical industry can be challenging, due to limited talent pools, absence of industry-wide standardisation of pharma-sales professionals competence, low integrity and competition from other sectors. Companies can overcome this by investing in employee development programmes, offering competitive compensation packages, and fostering a supportive and inclusive work environment. Collaboration with universities and research institutions can also help in nurturing a pipeline of talent through internships, research collaborations, and knowledge-sharing initiatives.

**(e) Counterfeit medications:** Nigeria has faced challenges related to counterfeit and substandard medications in the past. Pharmaceutical companies can address this issue by implementing robust quality control measures, investing in serialisation and track-and-trace technologies, and collaborating with regulatory bodies

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and law enforcement agencies to combat the production and distribution of counterfeit drugs.

**(f) Healthcare infrastructure and awareness:** Limited healthcare infrastructure and low awareness among the population regarding the importance of quality healthcare can hinder the success of pharmaceutical companies. To overcome this, organisations can engage in public health campaigns, collaborate with healthcare professionals and NGOs to educate the public, and invest in initiatives that improve healthcare access and awareness. This can include supporting medical education programmes, conducting health awareness campaigns, and partnering with local communities to address specific healthcare needs.

By proactively addressing these challenges, pharmaceutical companies in Nigeria can create a conducive environment for implementing the imperatives outlined earlier. Overcoming these obstacles will require a combination of strategic planning, collaboration with stakeholders, and a long-term commitment to improving the healthcare ecosystem in Nigeria.

Overall, building a world-class pharmaceutical organisation in Nigeria requires a strategic focus on imperatives that are relevant to

the region's unique challenges and opportunities. By adopting a visionary and customer-centric approach, fostering an agile and learning culture, streamlining processes, empowering employees, pursuing excellence, implementing effective performance management systems, nurturing an entrepreneurial mindset, and embracing core values, pharmaceutical organisations can drive sustainable growth and make significant contributions to improving healthcare outcomes.

Through strategic implementation and continuous improvement, these imperatives will enable organisations to build resilience, navigate industry complexities, and unlock their full potential as key players in the Nigerian pharmaceutical landscape.

*Tunde Oyeniran, B.Pharm., MBA, is a sales/marketing strategist, selling/sales management trainer and personal sales coach. He is the president of the Society for Pharmaceutical Sales and Marketing of Nigeria and lead consultant, Ekini White Tulip Consulting Limited, Lagos. We deliver training, recruitment and field force management solutions. Feedback channels: 080-2960-6103 (sms/whatsapp) /ekiniwhitetuliptraining@gmail.com or check out https://fb.me/ekiniwhitetulipconsulting*

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# Nett Pharmacy bags NHEA's 2023 Pharma Retail Outlet Award

By Adebayo Oladejo

**N**ett Pharmacy, a leading pharmaceutical retail outlet in the country, has bagged the Nigerian Healthcare Excellence Awards (NHEA) for the Pharmaceutical Retail Outlet of the Year 2023.

The award is one of the categories presented at the just concluded 2023 NHEA ceremony, held at Eko Hotel and Suites, Victoria Island, Lagos, with several doctors, hospital administrators, pharmacists, owners of health management organisations (HMOs), captains of industry and other stakeholders in the health sector in attendance.

Speaking at the occasion, described as the Oscar of the health sector, the First Lady of Lagos State, Mrs Ibijoke Sanwoolu, who was the guest of honour, noted that the award ceremony was not only to celebrate excellence in various areas of medical practice but also to engender intellectual conversation on topical issues in healthcare delivery.

Sanwoolu, who was represented by Dr Cecilia Mabogunje, chief executive officer, Massey Street Children Hospital, Lagos, said the state cannot shy away from discussing how to strengthen, intensify and sustain critical investment in the health system, saying this is strategically important towards improving the health and well-being of all Nigerians.

In his speech, Chairman of



**L-R, Mrs Chinyere Okorocho, treasurer, Healthcare Federation of Nigeria (HFN), in a group photograph with Pharm. Mrs Josephine Ehimen, CEO, Nett Pharmacy; Pharm. Ehimen Semilore Oaikhena, business development manager; and Pharm. Adebayo Salam, regional manager, while receiving the award plaque and certificate at the event.**

the Advisory Board of NHEA, Dr Anthony Omolola, applauded the contributions of all the nominees and winners to the development of the healthcare sector in the country, adding that over the years, NHEA had continued to strive to deliver new and creative ways to honour excellence across the nation's healthcare space.

Speaking on the significance of the award to the company, the chief executive officer, Nett Pharmacy, Pharm. Josephine Ehimen, said, "We are grateful for this recognition by NHEA and we also appreciate

the clients that have trusted us immensely with their health needs through the years.

"As a foremost retail pharmacy chain in the country, with presence in about seven states of the federation, the award is a testament to the effort we are steadily putting in, to ensure the quality of products and services available at Nett Pharmacy is excellent and unmatched. It is also a reminder to uphold the standard of our patient care, quality products and professional services, which have been our

watchwords through the years, in ensuring our customers live well and better."

Speaking on the company's resolve to keep providing top-quality products and services to consumers, she said; "The country's health sector has experienced a lot of challenges, some of which are connected to the lapses in the pharmaceutical supply chain. These lapses tend to adversely affect the health outcomes of patients. We recognise the severity of these challenges, which is why we are working tirelessly to ensure that we only stock the best quality medications and skin care products in all our outlets.

She added, "We hope to expand to more locations across the country, as we believe everyone has a right to good quality medications and professional health services to protect their health and wellbeing".

The Pharmaceutical Retail Outlet of the Year category recognises pharmaceutical companies and organisations whose expertise and innovation have contributed significantly to the country's pharmaceutical retail sector and in turn, improving health outcomes for patients.

For this year's ceremony, other pharmaceutical awards went to Alpha Pharmacy and Stores Limited, as Community Pharmacy of the Year; and Ecomed, as Pharmaceutical Manufacturing Company of the Year.

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# Adopt multidisciplinary nutrition care to improve healthcare delivery, Pounds urges FG

By Temitope Obayendo



Prince Julius Adesusi-Adeluyi, chairman of the occasion, exchanging pleasantries, with Dr Teresa I. Pounds, founder, WASPEN, (right) and Pharm. (Mrs) Clare Omatseye, keynote speaker, (left) at the WASPEN 2023 Clinical Conference, held in Lagos recently.

Founder and President of West African Society of Parenteral and Enteral Nutrition (WASPEN), Dr Teresa Isichei Pounds, has charged the Federal Ministry of Health to initiate a multidisciplinary nutrition support team, saying this will help to revamp the country's healthcare delivery system that is currently ranked among the poorest in the world.

Pounds, who bemoaned the

present condition of several patients in Nigerian hospitals, described them as underserved due to the absence of expert nutrition support groups.

She said such support groups, made up of physicians, nurses, pharmacists and dietitians, will critically assess patients' nutrition status from the point of admission into the hospital, as a means of diagnosing the appropriate

treatment for them.

Speaking with *Pharmanews* during the recent 2023 WASPEN Clinical Nutrition Conference, held in Lagos, the clinical pharmacist, who doubles as president of the National Association of Pharmacists and Pharmaceutical Scientists in the Americas (NAPPSA), emphasised the need to stem the rate at which Nigerians die from treatable and

manageable conditions.

She said: "How many patients die in the hospital because of malnutrition daily? How many of our loved ones go into the hospital for surgical procedures, and the wounds not healing for a long time, or the wound opening up?"

"So, we are passionate about nutrition support for malnourished patients with non-functioning gastrointestinal (GI) tract, who for one clinical problem or the other can't absorb food, and they have to be fed intravenously.

"Again, when you are looking at healthcare costs, studies have shown that malnutrition jacks up healthcare cost, because patients with special nutrition needs stay longer in hospitals, due to various complications, and wounds not healing up.

"So I'm hoping that the Federal Ministry of Health, under this new administration, led by President Bola Tinubu, can critically look into this issue and address it immediately, to put a stop gap to this unnecessary morbidity and mortality burden of the nation."

Pounds further narrated how she and her team in the USA were able to successfully manage over 10 cases of pregnant women with hyperemesis gravidarum, which is extreme vomiting throughout pregnancy, with parenteral nutrition all through the period. She added that same had been done to nurture neonates and

*continued on page 58*

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# Accolades, as PANS-IUO honours Atueyi, Kikanme, Iboi

By Adebayo Oladejo

In recognition of their immense contributions to healthcare and the development of pharmacy education in Nigeria, Pharm. (Sir) Ifeanyi Atueyi, publisher, Pharmanews; Pharm. Luke C. Kikanme; and Pharm. Allen Iboi have each been conferred with the Award of Excellence of Pharmaceutical Association of Nigeria Students, Igbinedion University, Okada (IUO).

The award presentation, which was held at the Library Auditorium, Permanent Site, IUO, Edo State, during the opening ceremony of the PANS-IUO Week, had the theme "Beyond the Shelf and Drugstore: The 8-Star Pharmacist in Policymaking and Governance".

Delivering his keynote address at the event, which had in attendance students from the Faculty of Pharmacy, and other pharmacy students from the University of Benin, Edo State, Kikanme stated that an 8-star pharmacist must be a caregiver, decision-maker, communicator, manager, lifelong learner, teacher, leader and researcher. He revealed that this is the standard outlined by the World Health Organisation (WHO).

Kikanme added that the keywords in the standard constitute the declaration of the fundamental principles of the profession, based on moral obligations. He averred that pharmacists who abide by the principles work assiduously to protect and improve the well-being of society, safeguard the distribution of medicines, hold personal knowledge about their patients and clients, enlarge knowledge, maintain honour and never do anything that will tarnish the image of the profession.

"The emerging 8-star pharmacist is a bundle of love in his or her local community, sees all patients, irrespective of the previous appointment, scales up cases that need medical attention and must rapidly build a monumental relationship with people that matter because of the value of linkage effect," he said.

He continued, "Many challenges such as funding, crime, quackery, fake products, forex scarcity, devaluation of the naira, inflation, running cost, and critical decisions are there for you as starters; but self-actualisation, the establishment of contact, both in the public and private sector, as well as the necessity of association, cannot be overemphasised."

Also speaking on the topic, "The 8-Star Pharmacist in Community Pharmacy Practice: A Leader and a Manager", Pharm. Iboi, also the chairman of the Association of Community Pharmacists of Nigeria, Edo State Chapter, said pharmacy practice is undergoing a significant transformation in the world, evolving from medication-centred pharmacy to medication and patient-centred pharmacy.

"Community pharmacists are well-respected professionals within their local communities, who use their expert knowledge of medicines to help patients get the best possible care and outcomes from their medicines," he stated.

According to the ACPN boss, community pharmacists who have the ability to reach the latest valid scientific evidence and have the competence to communicate, using evidence-based information, to the patients and stakeholders who need it, will be the most required and most sought-after pharmacists.

Earlier, in his welcome speech, the Dean, Dora Akunyili College of Pharmacy, IUO, Prof. Igbe Ighodaro, noted that over the years, the college had demonstrated an enviable



A cross-section of IUO PANS executives with the dignitaries at the event.

reputation for producing pharmacy graduates with great prospect of practising in different fields, such as academia, hospital, industries, administration, research and in

other human endeavours, adding that the students are in the process of building their future.

Represented by Associate Prof.

Aiwaguore Obarisiagbon of the Department of Pharmaceutics and Pharmaceutical Technology, he said, "I want you to have a deep belief in your own dignity, worth and yourself. Your integrity as a future pharmacist should not be compromised. You must have as the basic principle, the determination to achieve excellence in your various field of endeavour. I also urge you, in spite of the country's economic plight, in spite of the situation that you find yourself in today, not to lose focus until you achieve success."

Also speaking at the event, Atueyi, who was represented by Mr Adebayo Oladejo, senior reporter, **Pharmanews**, urged the undergraduates to endeavour to add value to society while upholding excellence, which the Pharmacy profession is known for.

The highpoint of the event was the launching and unveiling of the Regimen Magazine, a yearly journal of the faculty, and the presentation of trophies and medals to the football team by the President, PANS, IUO, Larry Clinton, and his counterpart from the University of Benin, Edo State, Osakpolor Ogiemudia.

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# Sanwoolu seeks end to brain drain in healthcare sector

- As Pharmanews, Mopson boss, Alpha, others win NHEA Awards

By Adebayo Oladejo

The First Lady of Lagos State, Mrs Ibijoke Sanwo-Olu, has expressed concern over the mass emigration of Nigerian healthcare professionals to foreign countries, describing it as worrisome.

Speaking at the 9th Annual Nigerian Healthcare Excellence Awards (NHEA) ceremony, held at the Eko Hotel and Suites, Victoria Island, Lagos, Sanwoolu attributed the disturbing trend to inadequacy of infrastructure and remuneration packages. She, however, assured that the Sanwoolu administration had been working to positively change the narrative with regard to scaling up investments in healthcare infrastructure and expanding access.

According to her, the state government's efforts had "resulted in the completion of various healthcare facilities, initiation of new ones and improved welfare of healthcare professionals, all to ensure that people have access to prompt, efficient, affordable and accessible healthcare services."

She continued, "For me, we cannot successfully discuss strengthening investment in health systems without considering the welfare and interest of healthcare providers like the doctors, nurses, pharmacists, lab scientists and all other stakeholders in the healthcare ecosystem."

"We must invest in training and retraining and make the atmosphere conducive for our healthcare professionals to display their skills and talents. The truth is, Nigeria is blessed with talented healthcare professionals who are making us proud worldwide daily."

Mrs Sanwo-Olu, who was a guest of honour at the award dinner, jointly organised by Global Health Project & Resources (GHPR) and the Anadach Group in the United States, noted that the theme of the event, "Investing in strengthening our health system", highlighted the need to address the big elephants in the room as far as healthcare services are concerned.

The first lady, who was represented by Dr Cecilia Mabogunje, chief executive officer, Massey Street Children Hospital, Lagos, said, "We cannot shy away from discussing how to strengthen, intensify and sustain critical investment in the health system, as this is strategically important towards improving the health and well-being of all Nigerians. Our health system should be based on the principle of universality, equity and sustainability."

While commending the Board of Trustees of the NHEA and all partners behind the project for sustaining the initiative of celebrating top performers in the healthcare sector, Sanwoolu also congratulated the awardees, urging them to continue on the trajectory of exceptional contributions to the healthcare sector.

At the event, three healthcare professionals who had distinguished themselves in the various fields of healthcare were presented with Lifetime Achievement Awards. The awardees were Pharm. (Dr) Michael Oyebanjo Paul, an astute businessman, pharmacist of great repute, and chairman, Mopson Pharmaceutical Limited; Dr Mathew Ame Idoko, an accomplished and experienced medical professional with a distinguished career spanning several decades; as well as Dr Adekunle Hassan, a visionary pioneer in Eyecare and chief medical director, Eye Foundation Hospital.



L-R: Pharm. (Mrs) Bisi Bright, chief executive officer, LWI, presenting an award plaque to Sir Ifeanyi Atueyi, publisher, Pharmanews (middle), in company of the Editor, Pharmanews, Mr Patrick Iwelunmor at the award ceremony.



A cross-section of guests at the event

Also, for the sixth record time, **Pharmanews** won the Healthcare Media Excellence Award (Print) 2023, beating the likes of PharmaTimes, ER International Magazine and Health Standard Journal to emerge winner of the category.

In other categories of the award, special recognition awards were given to Dr Faruk Umar Abubakar, registrar and chief executive officer, Nursing and Midwifery Council of Nigeria; Prof. Dimie Ogoina, an esteemed professor of Medicine and Infectious Diseases at Niger Delta University, Bayelsa State; Procold, Nigeria's premier non-drowsy remedy for cold, flu and catarrh; and Smile Train, the largest cleft focused organisation.

Several other organisations continued their winning streak, including JNCI, who won Biomedical Engineering Company of the Year; Clina-Lancet Laboratories, Private Laboratory Service Provider of the Year; Clinix Healthcare, Radiology

Service Provider of the Year; St Nicholas Hospital, Dialysis Service Provider of the Year; The Bridge Clinic, IVF Service Provider of the year; ISN Products Nigeria Limited, Laboratory Equipment Company of the year.

This year's Pharmaceutical Awards went to Nett Pharmacy, as Pharmaceutical Retail Outlet of the Year; Alpha Pharmacy and Stores Limited, Community Pharmacy of the Year; and Ecomed, as Pharmaceutical Manufacturing Company of the Year.

Chairman of the Advisory Board of NHEA, Dr Anthony Omolola, applauded the contributions of all the nominees and winners to the development of the healthcare sector in the country, adding that over the years, NHEA has continued to strive to deliver new and creative ways to honour excellence across the healthcare space.

He stated that nominations opened in February 2023 and closed in May 2023, with over 20,000 nominations received in several

categories, saying the entire process was keenly contested with healthy rivalry amongst several nominees.

"On our part, our processes have continued to improve with better online voting on the NHEA voting portal. NHEA visitation teams went to certain categories of nominees to evaluate claims of nominees across the country. Over 50,000 online votes were received for all nominees this year and the selection process was carefully evaluated," he said.

Dignitaries at the event included Pharm. (Sir) Ifeanyi Atueyi, publisher, Pharmanews; Dr Atinuke Onayiga, chairman, Lagos State Health Service Commission; Mrs Edith Egube, members, Committee of Wives of Lagos State Officials; Mrs Chinyere Okorochoa, treasurer, Healthcare Federation of Nigeria; HRM Oba Abdulhafees Olakunle Badiru, Elejigbo of Langbasa Kingdom, Langbasa, Ajah, Lagos State; Dr Olaokun Soyinka, former Ogun State Commissioner for Health, among many others.

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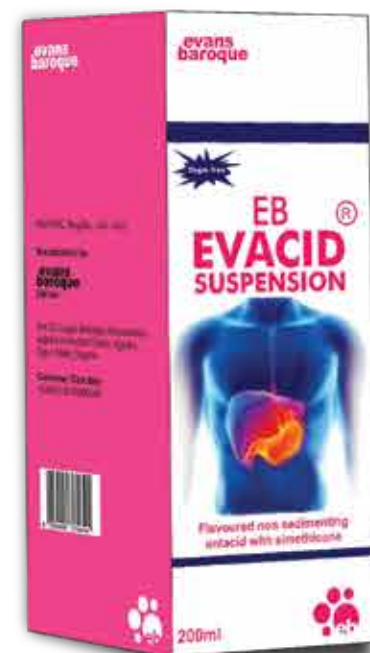
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## Adopt multidisciplinary nutrition care to improve healthcare delivery, Pounds urges FG

continued from page 52

prenates with nutrition challenge to maturity.

The WASPEN president also tasked community pharmacists to incorporate nutrition screening into their pharmaceutical care routine, stressing that once patients are diagnosed to be malnourished, they should be referred to a dietitian for nutrition assessment.

Advocating nutrition as a human right, she emphasised the importance of availability and affordability of parenteral products for malnourished patients in the right quantity.

"I'm also preaching that nutrition is a human right and I'm hoping that we can have these products in Nigeria for patients use. So the question is, are there products available for this set of patients, in terms of affordability?" she said.

The President, West African Private Healthcare Federation (WAPHF), Pharm. (Mrs) Clare Omatseye, in her keynote address at the conference, pointed out the essence of best nutrition for best healthcare, stating that adequate nutrition is key to having a healthy population.

Identifying malnutrition as a major limitation to achieving individual and national development, she said 48 million people are projected to be lacking

access to good nutrition in 2023.

Omatseye, who is also the founder of and managing director of JNCI, highlighted causes of malnutrition to include poor food availability and production, recurrent infections, lack of nutritional education, lack of sanitation, erratic healthcare provision, chronic diarrhoea, hookworm, malaria and chronic infection.

On the way forward, she urged the Federal Government to include malnutrition as one of the conditions to be covered under the National Health Insurance Act (NHIA), as well as establishing free access to healthcare for the vulnerable.

She also recommended the provision of budgetary allocation to malnutrition, investment in healthcare infrastructure, recruitment of more health workers, creation of more awareness on nutrition, mandatory nutrition screening by an interdisciplinary nutrition support team, among others.

Dignitaries at the conference included Prince Julius Adelus-Adeluyi, as the chairman of the occasion; Dr Obi Peter Adigwe, director general, NIPRD; Dr Leo Egbujiobi, patron; Prof. Olukemi Odukoya; Prof. Azusa Oparah; Pharm. Vern Ohaya; Dr Adedapo Olumide Osinowo, and others.

## How Pharmaserv field service app improves sales and medical detailing - Anyaorah

continued from page 47

Yes, we have several partners in both the Nigeria market and other West African markets. We recently secured a pilot programme with a leading pharmaceutical company in the francophone West African market. That also enabled us to internationalise our software with multi-languages and currencies. We have a strong African mandate!

By default, building in low-income countries comes with an avalanche of challenges. And one of the most prominent ones is lack of trust in start-ups like us. Especially when you are selling to mid-sized and big companies, it can be super difficult. Even after getting a buy-in from the top executive, you have to still convince the management team.

Corollary to that, most global Big Pharma have a strong existing playbook on how to work with or partner with smaller start-ups, either through corporate social responsibility or even merger and acquisition.

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**What are some of the challenges facing the use of technology in sales management, especially**

**in Nigeria and how do your solutions help in enhancing track-and-trace capability in pharma industries?**

For the past few years, we have seen a rise in the adoption of software tools across companies of different sizes. Companies are adopting low and high-tech solutions to streamline their business processes and improve productivity. However, adoption in the pharma sector is relatively slow, when compared to other industries like the financial service sector. This can be attributed to the use of legacy systems and heavily manual processes in the pharma industry.

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# Experts advocate review of national guidelines on food production

*continued from back page*

a recent stakeholders meeting on heart-healthy milk, nutritious food and livelihood, urging the Federal Government to urgently revise the national food policies to incorporate more milk consumption for children and adults.

In his presentation at the programme, titled, "Healthy food for all: Concept and implications", NSN President, Prof. Wasiu Afolabi, averred that the stressful condition of most Nigerian cities demand the intake of healthy food for all to neutralise the effects of free radicals in the human system.

He bemoaned the ignorance of many Nigerians on healthy diets, saying the current increase in hospital admission is due to the consumption of unhealthy food for their bodies.

Afolabi, who was represented by the Lagos State Chairman, NSN, Mrs Celia Penny Moses-Nagbiku, said per capita milk consumption in Nigeria is estimated at 8 litres per year, as against the WHO recommendation of 210 litres per person per year, which makes milk consumption far too low in the country. He noted that 8 litres per year is equivalent to 21.9mls of milk per day, which is about a volume of 20mls syringe.

The nutritionists further explained that most sicknesses that lead to hospitalisation are due to intake of imbalanced diets, which makes the body's acidity level to be disproportionate to the alkaline level.

He also condemned the widespread notion that it is only the affluent that can eat healthily, saying it is not until one is stinking rich that he can consume healthy food.

Afolabi further stated that, since



**L-R: WHO Team Lead, Dr Ahmed Kelia; Dr Enitan Ademuson, director, Programme, NHF; Prof. Babatunde Salako, director general, NIMR; Dr Olorunnibe Mamora, minister, Science, Technology and Innovation and Dr Kingsley Akinroye, executive director, NHF, at the stakeholders meeting.**

Nigeria is yet to meet up with the world average or WHO standard for milk consumption, the Federal Government should incorporate, in its food guidelines, adequate milk consumption for its citizens.

"Milk and other dairy products should form an integral part of the School Feeding Programme to build the dairy consumption culture in the country," he stated.

Professor O.A. Olorunnisomo, a specialist in dairy science and ruminant production, also highlighted the importance of milk consumption to the human system, stating that it improves intelligence. He added that a cup of milk before bed time will ensure a good sleep, due to its

tranquillising effects.

In his contribution at the programme, the WHO Team Lead, Dr Ahmed Kelia, enlightened participants on the importance of good nutrition with exercise, saying this enhances the maintenance of healthy heart.

He cited the example of his work-life pattern, saying he does not accommodate any official work after closing hours. He said he had communicated same to his team members, not to engage in official assignments after closure of work, for their heart health.

The Executive Director, NHF, Dr Kingsley Akinroye, chronicled the progress achieved by the

organisation in the pursuit of heart-healthy foods, especially palm oil, which was earlier demonised by the western world, while indigenous research had found it to be healthy.

The consultant cardiologist called for more collaboration among stakeholders on research to improve milk products, as well as promote front of pack labelling and heart-healthy mark certification of all milk and dairy products sold and served in Nigeria.

He also advocated for funding for the school feeding programme to ensure food rich in milk and milk products are consistently served in all schools.

## Minimise errors in care delivery, pharmacists, others charged

*continued from back page*

He averred that clinical uncertainty could arise from the health professional's medical knowledge, policy limitations, and/or cognitive and effective functioning.

Ambiguity, according to Anyika, is another source of uncertainty in healthcare, and this has to do with lack of evidence or contested evidence. While noting that complexity is an aspect of multiplicity of causal factors, he added that uncertainty could arise from how individuals interact and form relationships, such as clinician to patient, clinician to clinician, clinician to pharmacist, and pharmacist to patient.

He explained further that uncertainty could also be a problem resulting from living within complex adaptive systems, where varying mixes of natural and man-made systems interact and resist control.

While assessing prescription-related uncertainty, the professor discussed his research team's study which assessed "Prescribing Errors and Uncertainty", focusing on coping strategies of physicians and pharmacists at a university teaching hospital, where they used doctors and pharmacists who experienced prescribing errors and uncertainty.

According to him, while 35.1 per cent of doctors and 40 percent of pharmacists used in the study admitted to having committed medication errors, none disclosed to

the patients that they had committed or noticed errors. He, therefore, called for quality organisational culture and structure to foster a care process that is less prone to prescribing errors and uncertainty.

Anyika also referenced another study, "Dispensing Errors (DE) and Uncertainty: Perspectives of Pharmacists in a Tertiary Health Facility in Lagos", in which his team's data analyses showed human-based, human-system-based and system-based or structural dimensions that would aggravate dispensing errors and uncertainty. Their findings led to the conclusion that pharmacists, pharmacy technicians, and nurses need continuous training to minimise dispensing errors.

According to him, "Multiple regression analyses show that two errors have a more direct effect on healthcare uncertainty; and both types of errors have the greatest direct effect on pharmaceutical care".

Anyika also delved into regulatory uncertainty with a study, titled "Regulatory Uncertainties (RU) in the Pharmaceutical Sector: Perceptions Among Nigerian Pharmacists and Policy Implications for Decision Making". The study, he noted, was carried out to assess pharmacy chief executives' understanding of regulatory and environmental complexities in different practice areas, their policy choices, and decision-making.

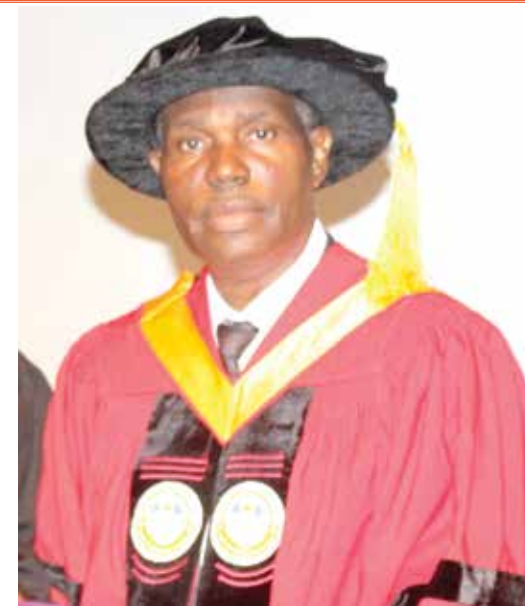
Regarding his findings, the pharmacy management professor remarked, "Majority said that inadequate legislative control and regulatory uncertainties will increase business risks and cause varied enforcement decisions. They also recognised the role of politics in the outcomes in the pharmaceutical sector."

In a subsequent interview with *Pharmanews*, Anyika urged pharmacists to be customer-focused so that patients will feel their impact better.

He said, "Uncertainty involves everything we do in life but the most important thing is to keep it down to the barest minimum and to be able to do this, you must be very knowledgeable. It is when you are knowledgeable that you will carry out activities in a more purified and certain manner, thereby minimising the probability of errors in all that you do."

"The government should be conscious of the fact that there is high-level manpower in the country. Unfortunately, the government is not tapping into it. We don't need to be importing drugs, year in, year out, when we have the manpower. There are competent pharmacists, and we have the industry. We can supply the whole of West Africa if we harness our resources and manpower."

The professor, who took his time to show the fusion of pharmaceutical and management



**Prof. Emmanuel Anyika**

sciences, also established how management sciences influence the thought processes of a healthcare professional. He noted that there is an urgent need for the application of management principles in all pharmacy practice areas.

While reacting to the lecture, the Vice-Chancellor, University of Lagos, Professor Folasade Ogunsola, described Anyika as an all-around pharmacist who is grounded in all aspects of Pharmacy and business management.

She also lauded his presentation, saying he had evaluated the uncertainties arising from prescribing, dispensing, and medication administration errors in the nation's healthcare system.





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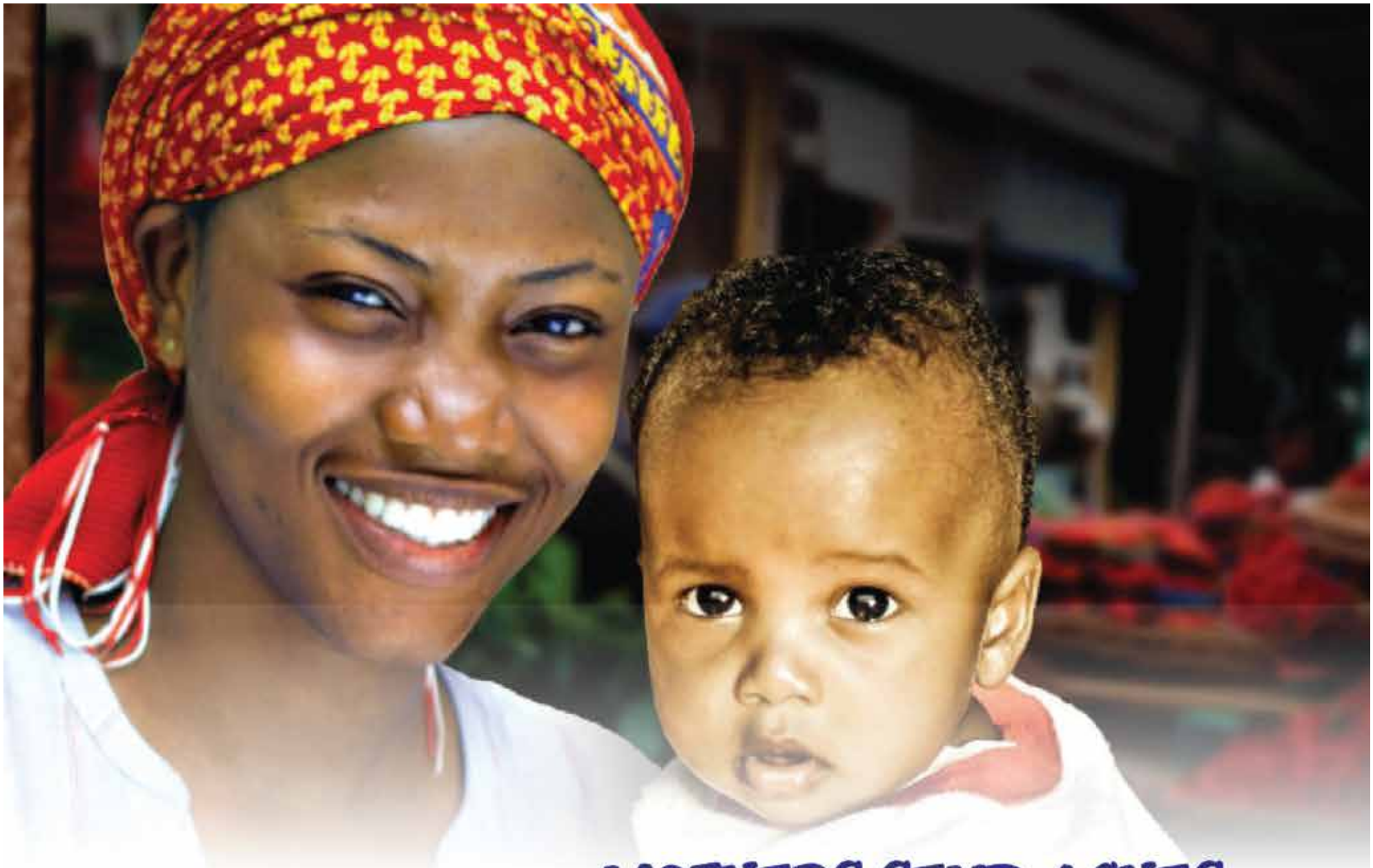
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# Experts advocate review of national guidelines on food production

By Temitope Obayendo

For the current gloomy statistics on malnutrition in Nigeria to take a positive turn, experts from the Nigerian Heart Foundation (NHF) and the Nutrition Society of Nigeria (NSN) have canvassed a review of the national guidelines for the production and consumption of heart-healthy food, especially milk.

The practitioners who submitted that milk consumption plays a crucial role in meeting adults' and children's daily nutritional requirements, decried low consumption of milk intake in the country.

They ascribed the burden of malnutrition in the country to limited consumption of rich foods like dairy products, due to financial inability of households to access them. They say this explains why the nation has the second highest burden of stunted children in the world and a national prevalence rate of 32 per cent of children under five.

The experts made the call at continued on page 60



L-R: Pharm. Clare Omotseye, managing director, JNC International Ltd.; Pharm. (Sir) Ifeanyi Atueyi, managing director, Pharmanews Ltd. and Patrick Iwelunmor, editor Pharmanews at the the Nigerian Healthcare Excellence Award (NHEA) held recently in Lagos.

# Minimise errors in care delivery, pharmacists, others charged

By Ranmilowo Ojalumo

Professor of Pharmacy Management at the University of Lagos, Professor Emmanuel Nwanolue Anyika, has called on pharmacists and other healthcare professionals in the country to acquire sufficient knowledge that will enable them to minimise errors in healthcare delivery.

Anyika, whose areas of research interest also include pharmacy practice and pharmacotherapeutics made the call recently, while delivering the 2021/2022 inaugural

lecture series of the University of Lagos.

Speaking on "Navigating the Pharmaceutical and Management Sciences in Our World of Healthcare Uncertainty", Ayika evaluated the uncertainties and outcomes arising from prescribing, dispensing, and medication administration errors in the Nigerian healthcare system.

The erudite don noted that probability is one of the sources of uncertainty in healthcare, which is the indeterminacy of future outcomes.

continued on page 60

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