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My administration achieved Pharmacy Bill signing, consultant cadre approval, others – Usifoh

The outgoing President of the Pharmaceutical Society of Nigeria (PSN), Prof. Cyril Usifoh, has outlined the significant

achievements of his three-year administration, highlighting the signing of the Pharmacy Bill

into law by former President Muhammadu Buhari and the approval of the consultant cadre

continued on page 8



L-R: General Manager, Fosun Pharma, Pharm. Jusber Shu; Consultant Family Physician, General Hospital Lagos, Dr Clistus Ozuomba; Professor of Paediatrics, University of Ilorin Teaching Hospital, Professor Olugbenga Mokuolu; and Consultant Family Physician, Lagos State University Teaching Hospital, at the malaria symposium, organised by Fosun Pharma in Lagos.

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How I plan to mark my 100th birthday – Onuigbo, Nigeria's oldest pharmacist

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PSN 2024 Presidential Election: Candidates outline agendas

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High blood pressure: disease or dis-ease?

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PHARM. OYINKANSOLA EJOOR
Pharm. (Mrs) Oyinkansola Ejoor is a distinguished pharmacy professional, currently managing the pharmacy unit at Chevron Nigeria Limited.



Her academic journey began at Maryhill Convent School, Ibadan, for her primary education, followed by International School, University of Ibadan, for her secondary education. She then earned a Bachelor's degree in Pharmacy from Obafemi Awolowo University.

Ejoor's quest for knowledge led her to pursue a master's degree in Pharmaceutics and Industrial Pharmacy from the University of Ibadan. She further advanced her academic credentials with an MBA and an MRes from the University of Liverpool. Recently, she completed a doctorate in Business Administration, adding another prestigious feather to her cap.

Her professional career began at General Hospital, Isolo, where she had her National Youth Service Corps (NYSC) programme. Afterwards, she joined Oily Chemist, Ibadan, a pharmaceutical manufacturing company founded by her late father, Pharm. C. O. Odunsi, a Fellow of the Pharmaceutical Society of Nigeria.

Fondly known as "Oyinkan," Ejoor has been instrumental in leading numerous patient-centred care initiatives and quality improvement programmes that have significantly enhanced medication use, prescribing practices, patient outcomes, and the overall quality of life for her patients. These initiatives span medication reconciliation, antibiotic stewardship, medication utilisation reviews, supply chain inventory management, quality indicators, and medication safety practices.

With a proven track record of success, Ejoor's leadership extends beyond the professional sphere. She is an ordained official in her church and plays an active role as a youth pastor, focusing on nurturing moral values and personal development in young people.

Pharm. Ejoor is happily married and a proud mother, seamlessly balancing her family life with her professional and spiritual commitments. Her dedication, diligence, and drive for excellence make her a respected figure in the pharmacy profession and beyond.

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Inspiration

"Our greatest weakness lies in giving up. The most certain way to succeed is always to try just one more time." — **Thomas A. Edison**

"Don't watch the clock; do what it does. Keep going." — **Sam Levenson**

"The harder the conflict, the more glorious the triumph." — **Thomas Paine**

"Strength does not come from physical capacity. It comes from an indomitable will." — **Mahatma Gandhi**

"The only way to overcome is to hang in." — **Dan O'Brien**

"Obstacles don't have to stop you. If you run into a wall, don't turn around and give up. Figure out how to climb it, go through it, or work around it." — **Michael Jordan**

"The greater the obstacle, the more glory in overcoming it." — **Molière**

"Challenges are what make life interesting and overcoming them is what makes life meaningful." — **Joshua J. Marine**

"Life's challenges are not supposed to paralyse you; they're supposed to help you discover who you are." — **Bernice Johnson Reagon**

"Being challenged in life is inevitable, being defeated is optional." — **Roger Crawford**

"It's your life; you don't need someone's permission to live the life you want. Be brave to live from your heart." — **Roy T. Bennett**

"Unless you try to do something beyond what you have already mastered, you will never grow." — **Ronald Osborn**

"Know thyself means this, that you get acquainted with what you know, and what you can do." — **Menander**

"Successful and unsuccessful people do not vary greatly in their abilities. They vary in their desire to reach their potential." — **John Maxwell**

"Striving for success without hard work is like trying to harvest where you haven't planted." — **David Bly**

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NAFDAC workers' strike and Nigeria's wellbeing

The recent strike by employees of the National Agency for Food and Drug Administration and Control (NAFDAC), under the aegis of the Senior Staff Association of Statutory Corporations and Government-Owned Companies (SSASCGOC), is a stark reflection of the fundamental flaws that threaten the very core of Nigeria's public health and economic stability. NAFDAC, a vital institution tasked with safeguarding the quality and safety of food, medicines, and cosmetics, has been crippled by an industrial action that stems from grievances over unmet demands.

According to a statement by the Trade Unions Congress (TUC), to which SSASCGOC belongs, the decision to commence the industrial action followed NAFDAC management's failure to address the workers' concerns after a series of meetings had ended in deadlock. The demands comprise issues relating to staff promotion and general welfare.

The role of NAFDAC in Nigeria's regulatory framework cannot be overstated. This is the agency that stands between the Nigerian populace and the dangers of counterfeit drugs, unsafe food products, and substandard medical supplies. It is the firewall that protects Nigerians from the ravages of unsafe consumables. It goes without saying that when this firewall is weakened through such factors as workers' strike, the floodgates to public health disasters are wide open, leaving millions of Nigerians vulnerable.

An equally concerning

consequence of the strike is the halt in NAFDAC's regulatory processes. Thousands of new products, including essential medicines and food items, are now stuck in limbo, awaiting the agency's approval before they can enter the market. This bureaucratic paralysis is particularly perilous in the healthcare sector, where the availability of life-saving medications is a matter of life and death. Nigeria is already battling with a high disease burden, from malaria to HIV/AIDS, and the inability of NAFDAC to process drug approvals compounds an already critical situation.

Moreover, the economic implications are severe. In a nation already struggling with inflation, unemployment, and slow economic growth, the strike has thrown another wrench into the works. The pharmaceutical and food industries, which rely heavily on NAFDAC's timely approvals, are feeling the pinch. The delay in bringing new products to market is eroding investor confidence, both local and foreign, and stalling economic activities. Foreign investors are particularly wary of regulatory uncertainty, which this strike exemplifies.

The agricultural sector, too, is not spared from the strike's ripple effects. As the government continues its push towards

agricultural self-sufficiency and food security, NAFDAC's regulatory oversight is crucial for ensuring that agricultural inputs, such as fertilisers, pesticides, and animal feed, meet safety standards. Farmers across the country rely on these inputs for productivity, and any disruption in their availability could lead to reduced agricultural output, threatening food security.

Public health surveillance, another critical function of NAFDAC, has been brought to a halt. The agency is responsible for post-market surveillance to ensure that products on the market continue to meet safety standards. With the strike in effect, the risk of counterfeit and substandard products infiltrating the market is alarmingly high.

Nigeria is already known to be a hotspot for counterfeit drugs, with the World Health Organisation estimating that up to 70 per cent of drugs in circulation in some areas are fake. This situation presents a ticking time bomb for public health, as unregulated products flood the market, posing life-threatening risks to consumers.

Amid these mounting challenges, NAFDAC's leadership has attempted to appeal to the striking workers. Professor Christianah Adeyeye, the

agency's director-general, has acknowledged the workers' grievances and promised steps toward addressing their demands, particularly with regard to staff promotions. She highlighted the agency's efforts to secure the necessary approvals from the Head of Service for expanding vacancies to accommodate qualified personnel.

At its core, this strike is about more than just wage disputes or administrative disagreements. It speaks to the broader systemic issues that plague Nigeria's public institutions: chronic underfunding, neglect, and a lack of political will to prioritise the health and wellbeing of the population. It is a reflection of a government that has, time and again, failed to recognise the critical importance of regulatory agencies like NAFDAC in the broader framework of national development.

To resolve this crisis, the Nigerian government must engage in meaningful dialogue with the aggrieved workers and commit to providing the necessary resources to enable NAFDAC to function effectively. As the health and safety of millions hang in the balance, there is no room for dilly-dallying. This is a moment for decisive action. Nigeria's regulatory institutions are the backbone of public health and economic stability, and they must be treated as such. If NAFDAC fumbles, the entire nation will feel the impact—on its healthcare system, its economy and its general wellbeing.

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The joy of writing books

By Sir Ifeanyi Atueyi

Last December, my grandson, Jidenna Dibor, aged 18 and in his final year of secondary school, requested all my books be sent to him. He had already read my biography, published in 2019 to mark my 80th birthday, and was very impressed with its contents. Naturally, it was a pleasure for me to package all my books, autograph them as requested, and deliver them to him in Port Harcourt. I promised him a gift if he managed to read all 22 books.

A few days after receiving the books, he phoned to ask me why I had written two books in 2016. I recalled that during that year, I was on holiday in Calgary, Canada, which provided me the opportunity to complete several manuscripts. That year, I particularly enjoyed walking to the public library to read and exercise.

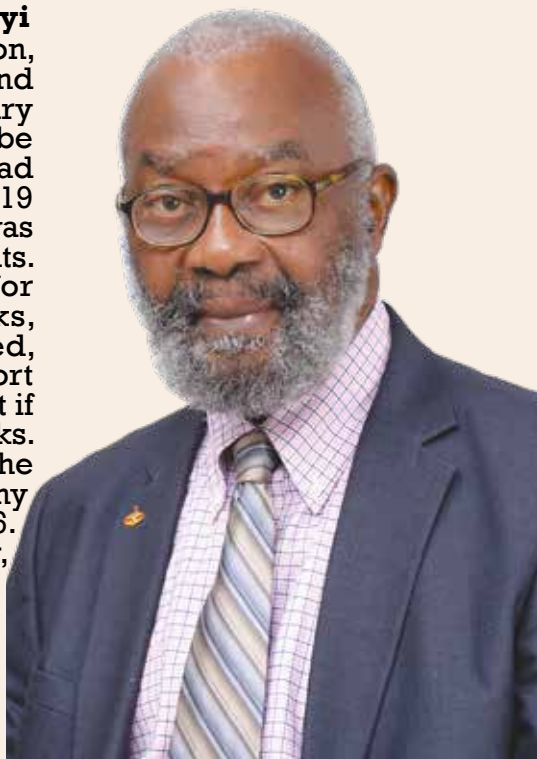
The encouragement for writing also came from a cousin when I told him I would be in Canada for the holidays. He said to me, "I know you will have time to write more books."

Last year was significant because I donated some of my books to the Synod delegates of the Nnewi Diocese (Anglican Communion), held in September in my hometown, Okija. My reason for doing this was that, during the Synod held at Okija in 2015, I had donated my book titled *The Living Sacrifice*, which was greatly appreciated. I also donated copies to the Synod delegates of the Lagos West Diocese, who met in May 2023 and May 2024.

The spirit of adding value to others' lives is my motivating factor for donating books. It is always a pleasure to give out my books, especially to those who appreciate them. Last year, I was honoured by the Dennis Memorial Grammar School (DMGS), Onitsha Old Boys Association, my alma mater, as the Chike Okonya Award winner for 2022. Apart from donating money to support our school's projects, I derived greater joy from donating books to the students. My long-term partners-in-progress, pharmacy students, have also been benefiting from my books. Whenever they send their usual list of items to support their activities, I include my books.

Giving books as gifts is a legacy because books touch people's lives in various places and times. Whenever I travel, I take some books to give out as the Spirit directs me. In this way, I have made friends among fellow travellers.

Travelling is always a good opportunity to read. I cannot be in a car without reading materials. I don't waste time complaining or worrying about traffic jams because they provide



an opportunity for me to read. I was pleased when our Bishop, Dr James Odedeji, told me last year at a function that each time he travelled, he would pick up one of my books to read.

Some time ago, a friend told me he appreciated my "book ministry." I was glad because some people think that ministry only refers to Christian ministry or service, which is an activity carried out by Christians to express or spread their faith. Ministry also involves giving of ourselves—our time, talents, and resources—to bless and help others. Therefore, it is not a commercial enterprise with a profit motive. Nevertheless, there are rewards for the services.

I believe that the rewards from ministry services are more durable and satisfying than profits from businesses. Acts 20:35 (NKJV) says, "It is more blessed to give than to receive." This implies that there is more joy to be found in God when we give than when we receive. God Himself gave us His only Son, Jesus Christ, because He loved us so much that the Son died on the cross for our sake.

From April this year, I activated my YouTube channel as a way of reaching out to people and adding value to their lives. My joy comes from knowing that I am leaving a legacy for future generations. I often ask myself how I will be remembered after this life.

Writing books provides an opportunity to tell your personal stories. Everyone has unique stories about themselves. The Full Gospel Business Men's Fellowship International (FGBMI), of which I am a member, believes in sharing personal stories as a means of evangelism. Members share their life stories before and after meeting our Lord Jesus Christ to win souls.



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Setting and achieving your goals

By George O. Emetuche, CES

"A goal properly set is halfway reached."— John Doerr

Most Goal Setting and Strategy Breakfast Sessions every January in Enugu and Lagos. Professionals from diverse industries attend. I have done some studies in the area of setting and achieving goals.

I promised numerous friends and fans that I would write a book on how to set and achieve goals someday, as I teach the concept every year. I am happy to say the manuscript is ready, and the book will be out this November. Glory to God!

The intentionality of success

I believe success is intentional. People who succeed plan to succeed by setting goals and taking the necessary actions to achieve the right results.

Setting goals is not usually the challenge; many people can set goals. In fact, people make numerous promises about what to start or stop on New Year's Eve! The question is, how many people actually keep the promises they make to themselves? Perhaps, only a few!

According to a report by Dream Maker, 38.5 per cent of US adults set New Year's resolutions, but 80 per cent of well-intentioned goals fizzle out by February. By the end of the year, 92 per cent will have failed to achieve their goals. This is a big challenge!

When you set goals, go to work!

You don't set goals and go to sleep. You set goals and go to work! The right actions bring the right results. The crux of the matter is taking actions that will help you achieve your goals. Starting a task is not the issue; the challenge is going all the way to finish it.

My experience as a training consultant, and sales and marketing expert, who interacts with many professionals, has taught me that many people wish to achieve great things in their lives, but their problem is knowing how to begin. Others in this category know how to begin, but their problem lies in sustaining the passion and staying on the right path until they achieve their goals. This is why knowledge of the concept of goal-setting is important for everyone.

My experience

Over the years, as a consultant in the knowledge industry and business community, I have encountered over 1,000 successful business leaders and top professionals. I have been privileged to study the patterns of over 100 people in this segment, and I must say that their methods are similar. They are visionary, focused, consistent, strategic, smart, hardworking, and possess a sense of mission that drives them to achieve their goals. You will find these attributes in men and women in this category. This suggests that truly successful people think alike!

When I say truly successful people, I mean those whose success is built on a strong foundation of hard work. I mean success that stands on diligence. I believe in hard work. I believe in thinking smart. I believe in strategy. I like to summarise it as "smart hard work."

Setting and achieving goals is about strategy

When you think, act! If you

invest the right amount of time to think about what your goals should be, and then have the ability to go all out to do the work necessary, using the right strategies, you will achieve what you set out to do. The path to success follows principles. Success is deliberate.

Goals and strategy are mutually inclusive. The goal is *the what*—what you want to achieve. The strategy is *the how*—how you will achieve your goals. You cannot achieve *the what* without deploying *the how*. Once your goal is clear and the strategy is brilliant, you will reach your planned destination.

Your guide

I have always maintained that the path to success lies in adhering to fundamental principles. If you want to achieve your goals, ensure you are guided by your vision, mission, and values. Your goals must align with your vision, which

defines your destination, and your mission, which defines what you do and who you do it for. Always be guided by fundamental principles.

Many people fail to achieve their goals because they lack focus and guidance. People in this category often work without clarity of purpose. Your goals must be clear, tangible, and written down. What makes a goal tangible is that it aligns with your vision and mission and is in line with your values. Goal-setting and achievement should stand on a firm foundation of vision and mission statements, as well as your values.

The interconnectivity of the theories

The theories of vision, mission, goals, objectives, strategy, and values are interconnected. The smart way to check if you are on the right path in setting and achieving your goals is to appraise this interconnectivity.

Check if your values guide your strategy; check if your strategy



powers your goals and objectives; check if your goals are linked to your mission; and check if your mission drives you towards the destination of your vision. This is how to ensure you are on the right track.

The good news is that you have what it takes to achieve your goals. Take action today and create the world of your dreams!

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Nigeria, malaria, and the challenge of “paracetamia”

Nigeria is a country rich in cultural diversity, abundant natural resources, and resilient people. Yet, it faces significant health challenges, with malaria being one of the most critical. This mosquito-borne disease continues to claim lives and hinder economic development, particularly in rural areas. Exacerbating the situation is a growing phenomenon known as “paracetamia,” a term that encapsulates the over-reliance on paracetamol as a primary treatment for malaria symptoms, often leading to misdiagnosis and inadequate care.

Malaria remains one of Nigeria’s most pressing public health issues, with the World Health Organisation (WHO) estimating that the country accounts for a substantial percentage of global malaria cases. Factors such as poor healthcare infrastructure, limited access to preventive measures like insecticide-treated nets, and a lack of awareness about the disease contribute to its prevalence.

Children under five and pregnant women are particularly vulnerable. The symptoms of malaria—fever, chills, and fatigue—often overlap with other illnesses, making accurate diagnosis challenging. As a result, many people resort to self-

medication, typically with readily available over-the-counter drugs like paracetamol, to alleviate their symptoms without seeking proper medical attention.

“Paracetamia” refers to the widespread practice of using paracetamol as a go-to treatment for fever and pain, particularly in situations where malaria is suspected. In Nigeria, it is common for individuals to take paracetamol at the first sign of a fever, hoping it will address the underlying issue. This practice is not only dangerous but also indicative of a larger systemic issue: the lack of accessible and effective healthcare.

While paracetamol can be an effective pain reliever and fever reducer, it does not treat malaria. This misuse leads to a cycle of misdiagnosis. Patients may experience temporary relief from their symptoms, delaying their visit to healthcare providers, which can result in severe complications or even death.

The ramifications of “paracetamia” extend beyond individual health. Self-medication can mask the symptoms of malaria, allowing the disease to progress unchecked. When patients eventually seek medical help, they often present with severe cases, complicating treatment and increasing the likelihood of adverse outcomes.

Moreover, the tendency to self-medicate creates a barrier to accurately understanding the malaria burden in Nigeria. Public health statistics may underreport malaria cases because individuals do not seek formal diagnosis and treatment. This data gap makes it challenging for health authorities to develop targeted interventions and allocate resources effectively.

Addressing “paracetamia” requires a multifaceted approach, beginning with education. Public health campaigns should aim to raise awareness about malaria, its symptoms, and the importance of seeking medical advice. Community health workers play a crucial role in this education, as they often serve as the first point of contact for health-related issues in rural areas.

Schools can also be instrumental in disseminating knowledge about malaria. By incorporating health education into the curriculum, children can learn about prevention methods and the importance of seeking proper medical treatment for fevers. This knowledge can be passed on to their families, creating a ripple effect that can improve community health outcomes.

Improving access to healthcare is another critical step in combating “paracetamia.” Many Nigerians, particularly in rural areas, face significant barriers to accessing medical care, including long distances to healthcare facilities and high costs. Expanding community clinics and providing mobile health services can bridge this gap, ensuring that individuals receive timely diagnoses and appropriate

treatments for malaria.

Moreover, training healthcare providers to recognise the signs of malaria and to educate patients on the dangers of self-medication is essential. This training can foster a more informed patient population that understands the importance of proper medical care, leading to better health outcomes.

Technology can play a pivotal role in addressing malaria and “paracetamia.” Mobile health applications can facilitate access to information about symptoms, treatments, and nearby healthcare facilities. Telemedicine services can connect patients with healthcare providers, allowing for remote consultations and reducing the need for travel, especially in emergencies.

In addition, digital platforms can be used for data collection and analysis, helping public health officials track malaria trends and improve resource allocation. Such technological solutions can complement traditional healthcare approaches and enhance the overall response to malaria in Nigeria.

The challenge of “paracetamia” in Nigeria is a symptom of deeper systemic issues within the healthcare system. Tackling malaria requires a comprehensive strategy that includes education, improved healthcare access, and the innovative use of technology. By addressing the root causes of “paracetamia,” Nigeria can better combat malaria and ultimately reduce its impact on public health and economic development. A concerted effort from the government, health organisations, and communities is essential in creating a healthier future for all Nigerians.

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Innovative uses of medical textiles

By Gloria Obikili

Medical textiles have transformed healthcare by extending beyond traditional fabric uses. These materials are now vital in creating products that aid in patient care, hygiene, and recovery. Medical textiles combine advanced textile technology with medical science and are found everywhere, from simple bandages to complex artificial organs.

To be effective, medical textiles need to meet strict requirements. They must be flexible, absorbent, non-toxic, and safe for prolonged use. Additionally, they should be strong, biodegradable, and sterile, ensuring they can be used for various treatments without causing harm. As the healthcare industry evolves, so do the demands on medical textiles, with innovations designed to enhance patient comfort, reduce infection risks, and improve the overall quality of care.

Recent breakthroughs, such as smart fabrics and nanotechnology, are playing an increasingly important role in healthcare. These advancements not only improve the efficiency of medical treatments but also contribute to patient well-being, helping doctors monitor and treat conditions more effectively. The use of medical textiles in healthcare has expanded into both implantable and non-implantable products, opening new doors to better care and faster recovery.

Making medical textiles effective

Medical textiles are highly specialised materials that need to meet specific design requirements based on their intended use. Below are some key applications, along with the forms these textiles should take to meet medical needs:

Contact lenses: Made from hydrogel or silicone hydrogel, these should be thin, breathable, and retain moisture, ensuring high oxygen permeability for comfort during extended wear.

Artificial corneas: Constructed from flexible, biocompatible materials like hydrophilic polymers or collagen, providing transparency and mechanical strength for vision restoration.

Artificial kidneys: Hollow fibre membranes, typically made from polyester or polyvinyl alcohol, should have microporous structures to filter blood efficiently during dialysis, while remaining durable and biocompatible.

Artificial lungs: Hollow fibres, usually under one micrometre in pore size, made from materials like PEEK, should effectively facilitate gas exchange, removing carbon dioxide and replacing it with oxygen.

Artificial ligaments: Woven polyester fibres mimic natural ligament movement, providing flexibility and strength, crucial for supporting the body's range of motion.

Artificial bones: Ultra-high molecular weight polyethylene (UHMWPE) forms rigid, durable structures, ideal for bone replacement, with surface treatments to encourage bone cell growth.

Artificial liver: Devices utilise hollow fibres made from materials like polysulphone, designed to support live liver cells for temporary metabolic support.

Smart medical textiles and nanotechnology

The rise of smart textiles and nanotechnology has created exciting new possibilities in healthcare. Smart textiles are fabrics embedded with sensors that can monitor a patient's vital signs, such as heart rate or body temperature. This technology allows

healthcare professionals to track patients' health in real-time without the need for invasive procedures.

Nanotechnology, on the other hand, involves using materials at an incredibly small scale—often on the nanometer level—to solve medical challenges. These materials offer properties such as increased strength, flexibility, and responsiveness. Nanofibers, for example, can be integrated into wound dressings to release medication directly to the affected area, promoting faster healing and reducing the risk of infection.

How smart textiles are used

Smart bandages: These high-tech bandages contain sensors that monitor the healing process and can detect infections before they become severe. By keeping a close eye on wounds, smart bandages can ensure that treatment is adjusted quickly, leading to faster recovery times.

Health monitoring clothing: Fabrics with built-in sensors are

increasingly being used in everyday clothing to monitor patients' vital signs. For example, smart shirts and undergarments can track heart rate, blood pressure, and even breathing patterns. This technology is particularly beneficial for heart patients who need continuous monitoring. If abnormalities are detected, healthcare providers are alerted immediately, reducing the risk of serious complications.

Nanofiber dressings: Wound dressings made from nanofibers can release antibiotics or pain medication directly to the injury site, helping wounds heal more quickly and preventing infection. These dressings also allow air to circulate, which is critical for proper wound care.

The future of medical textiles

As research continues, the future of medical textiles holds great promise. Scientists are exploring new materials and technologies to create even more advanced textiles that are lighter, stronger, and more versatile. The goal is to make medical



treatments less invasive, more comfortable, and more efficient for both patients and healthcare providers.

From helping the body heal faster to enabling remote health monitoring, medical textiles are becoming an integral part of modern healthcare. As the healthcare sector continues to evolve, so will the role of these innovative fabrics, paving the way for more personalized and effective treatments.



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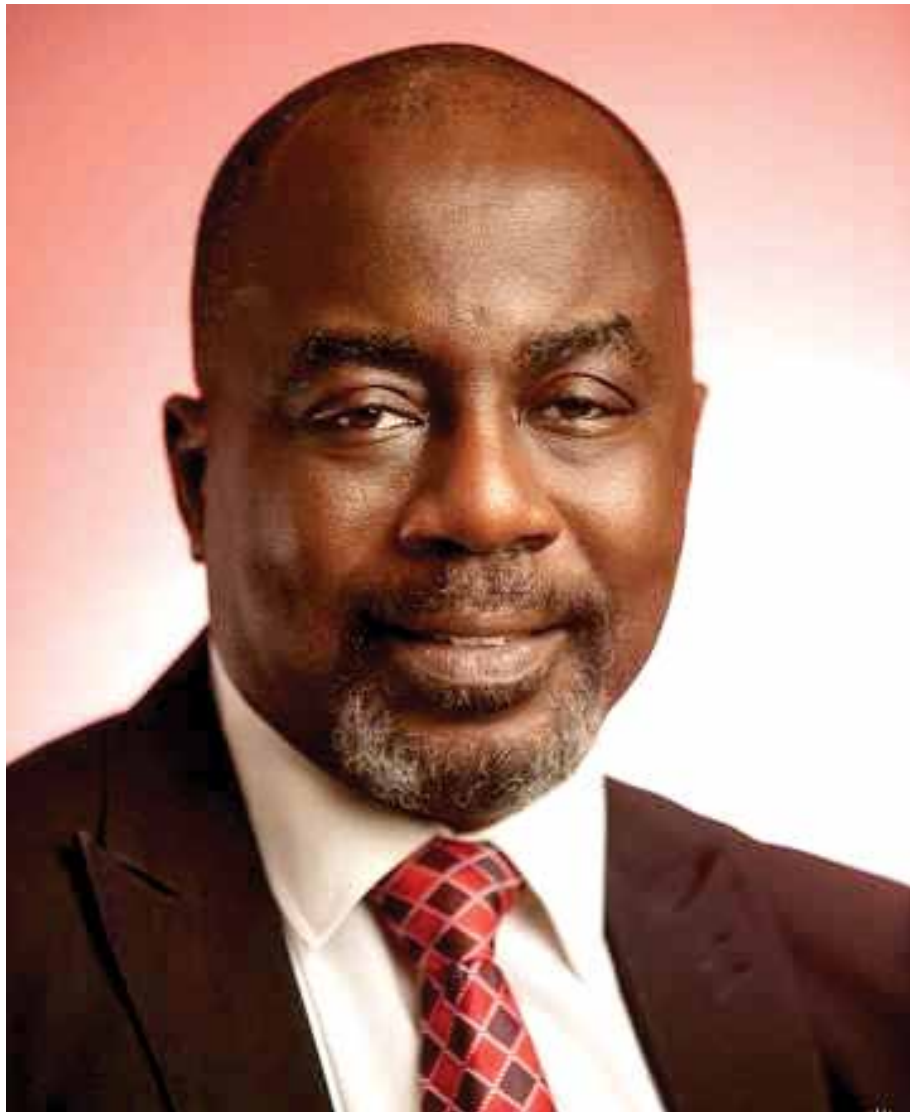
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My administration achieved Pharmacy Bill signing, consultant cadre approval, others – Usifoh

continued from front page



Prof. Cyril Usifoh
PSN President

for pharmacists.

He attributed these successes to the proactive advocacy and dialogue his executive team pursued with both federal and state authorities, resulting in a regular platform for discussions with the coordinating minister of health and social welfare, where the challenges faced by the profession are addressed.

In an exclusive interview with *Pharmanews*, Usifoh listed other landmark achievements of his tenure to include signing an agreement in Cape Town (South Africa) on medicine transfer and medicine security, resolving issues related to the Drug Revolving Fund (DRF), addressing the debts of tertiary institutions to pharmaceutical companies, and securing a two-year waiver on import duties for pharmaceuticals and medical devices.

He remarked: “I am cautious not to sound overly self-congratulatory. One major accomplishment is ensuring that

the Pharmacy Bill was signed into law, now the Pharmacy Council Act. This was a long-standing challenge that we were finally able to overcome through collaboration with various stakeholders.”

“The Federal Government, under former President Buhari, signed the bill into law. Additionally, we ensured that the consultancy cadre was approved. Many pharmacists have since been promoted as clinical pharmacy consultants in tertiary hospitals.”

He added, “We also engaged with international partners, signing an agreement in Cape Town on medicine transfer and security, positioning Nigeria as a significant player in this area. Achieving these outcomes required perseverance, commitment, and open dialogue with those in decision-making positions.”

Pharmanews can confirm that Prof. Usifoh has indeed met

some of the goals he listed in his manifesto, including his promises to leverage his experience to advance the profession, secure the approval of the consultant cadre, and actualise the Pharmacy Act. However, there have also been calls for improved transparency in the PSN leadership, particularly in financial matters. In response, Usifoh assured that a robust accounting system is in place to ensure transparency. “We’ve implemented proper accounting systems to ensure openness in all our dealings,” he stressed.

Reflecting on his vision for the PSN at the inception of his administration, Usifoh said: “My vision for PSN is a united and progressive family, ensuring that my executive team builds a formidable structure that cannot be sidelined when critical decisions are being made in the health sector. Pharmacists must be present in the boardroom where important decisions are taken, and unity is key to achieving this.”

Regarding the ongoing issues with the Drug Revolving Fund (DRF), Usifoh explained that while pharmaceutical manufacturers disclosed the debts owed by tertiary institutions, some hospital pharmacists resisted the PSN’s efforts to reveal their own debt

burdens. He added that, despite this, his team pursued advocacy with the Federal Ministry of Health, making significant progress towards resolving the matter.

Usifoh also disclosed that his administration secured internship placements for pharmacy students, while also initiating public health campaigns focused on natural food consumption and immunisation. He equally highlighted successful lobbying efforts, which led to the government enforcing zero tariffs on active pharmaceutical ingredients (APIs), medical devices, and other pharmaceutical imports for two years.

When asked about the legacy he is leaving behind as president, Usifoh deferred to PSN members, saying: “It is up to the members to determine what they have gained from my administration.”

While refraining from giving specific advice to his successor, Usifoh said, “One day, my successor will need to assess the current state of affairs, consult with stakeholders, and carefully listen before laying out plans for PSN’s future. Like I did, they should lean on the advice of past presidents, who I refer to as living ancestors, to guide them through any potential challenges.”

PCNNews

PCN shuts down over 2000 premises in nationwide crackdown

- Intensifies efforts to safeguard the pharmaceutical sector
By Ifeoluwa D. Afolayan

The Pharmacy Council of Nigeria (PCN) has ramped up its enforcement operations during the third quarter of 2024, sealing over 2000 illegal pharmaceutical outlets across several states in its ongoing efforts to sanitise the country’s pharmaceutical landscape.

In July 2024, an enforcement exercise in Bauchi State resulted in the sealing of 571 out of 762 premises visited: 37 pharmacies, 144 patent medicine stores, and 390 illegal medicine stores. These premises were shut down for operating without proper licences, failing to meet required storage standards, and other regulatory infractions.

By August 2024, the PCN extended its crackdown to Cross River State, where an additional 405 premises were sealed out of 500 visited, including 31 pharmacies, 174 patent medicine stores, and 200 illegal medicine stores.

In September 2024, enforcement efforts covered Kaduna and Adamawa States, where 666 premises were shut down in Kaduna alone. Additionally, the open drug markets in Zaria and Kaduna were sealed. In Adamawa, the PCN national enforcement team sealed 581 premises, many of which operated without the supervision of a pharmacist, were unregistered, or sold medications in inappropriate conditions, thereby compromising drug safety and efficacy.

The closure of open drug markets, which began in February 2024 with a joint enforcement operation by the PCN and NAFDAC in Kano State, led to the sealing of 1,321 premises located in key areas such as Niger Street, Mallam Kato Plaza, Mai Karami Plaza, Yanfata, and Sabon Gari Open Drug Market. A Federal High Court ruling in Kano on 16 February 2024 ordered all premises involved in the wholesale of drugs in those locations to relocate to the Coordinated Wholesale Centre (CWC) in Kano.

Throughout these operations, the PCN emphasised the dangers posed by unregulated medicine outlets, particularly those selling drugs without professional oversight or proper documentation. The council also warned operators of illegal stores to regularise their operations in compliance with its regulations or face further penalties.

In total, the PCN has sealed more than 2,220 illegal outlets between July and September 2024. These actions reflect the PCN’s unwavering commitment to ensuring the distribution of safe, effective, and high-quality medicines across Nigeria, while upholding the integrity of the pharmaceutical profession.

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continued on page 16

The fight against non-communicable diseases: Are we losing?(2)

By Pharm. (Dr) Onyinye Chiekwe Bridget, PharmD, MPH, ABMP
pharmbree25@gmail.com

Last month, we explored the impact of non-communicable diseases (NCDs) and the burden they place on society and families. The rise in NCDs is closely tied to several factors, including rapid urbanisation and lifestyle changes.

Poor dietary habits and increasingly sedentary lifestyles have contributed significantly to the rise of obesity, high blood pressure, and high cholesterol—key risk factors for many NCDs. The increasing prevalence of smoking, alcohol consumption, and air pollution also fuels the rise of these diseases.

In Africa, the situation is compounded by weak healthcare infrastructure and a lack of awareness about early detection and prevention. According to a 2018 WHO report, Africa is projected to experience the highest increase in deaths from NCDs between 2010 and 2030. If interventions are not scaled up, NCDs could overwhelm fragile healthcare systems and reverse progress made in tackling infectious diseases.

Ironically, while technological and medical advancements have helped eradicate or control many communicable or infectious diseases, they have done little to slow the rise of NCDs. In many cases, modern conveniences—such as processed foods and digital gadgets that encourage inactivity—have exacerbated this epidemic.

Role of healthcare providers

In the face of this growing challenge, healthcare providers—particularly pharmacists—play a critical role in alleviating the

burden of NCDs. Pharmacists are often the most accessible healthcare professionals in many communities, making them key allies in this fight.

Medication management and adherence

Many NCDs require long-term management through medication, but poor adherence to treatment regimens remains a major obstacle. Pharmacists are uniquely positioned to manage medication therapy for patients with chronic conditions like diabetes, hypertension, and asthma.

Poor medication adherence is a major factor that worsens NCDs, and pharmacists can intervene by offering counselling, medication synchronisation, and reminders to ensure patients take their medications consistently. For example, studies have shown that pharmacist-led interventions can significantly improve medication adherence in hypertensive patients, leading to better blood pressure control and reduced risk of cardiovascular events.

Early screening and risk assessment

Pharmacists are also well-positioned to offer screening services for conditions such as hypertension, high cholesterol, and diabetes; they can take on roles in prevention and early detection. In many low-resource settings, community pharmacies serve as primary points of care, providing essential health checks that can detect diseases early. Pharmacists can help identify at-risk individuals and refer them to appropriate healthcare providers for further management.

Lifestyle counselling and education

Given that NCDs are largely preventable through lifestyle changes, the importance of education cannot be overstated. Pharmacists can empower patients to make informed choices about their diet, exercise, and habits, which can go a long way in preventing or managing NCDs. Through regular engagement with patients, pharmacists can reinforce healthy behaviours and offer practical advice tailored to individuals' needs.

Education and advocacy

Pharmacists are in a unique position to advocate for greater awareness of NCDs. By educating their communities, they can help shift the narrative from treatment to prevention, empowering individuals to take control of their health. Pharmacists can also advocate for policies that promote healthier lifestyles and improve access to care, especially in underserved areas.

Policy development

Pharmacists can influence healthcare policy, particularly when it comes to access to medications and preventive services. By participating in policy-making processes and advocacy efforts, pharmacists can help ensure that NCD management is prioritised on national healthcare agendas. In Nigeria, for instance, pharmacists can advocate for policies that improve access to affordable medications and strengthen NCD awareness campaigns.

Have we truly lost the fight?

The statistics may seem grim, but the fight against NCDs is far from lost. While we are currently facing an uphill battle, the reality is



that NCDs are largely preventable and manageable. The numbers are staggering, but there are pathways to change—preventive care, lifestyle modification, and better access to healthcare.

The rise of NCDs does not signify a lost war, but rather a call to action. Countries that have implemented comprehensive strategies to tackle NCDs—such as policies to reduce tobacco use, promote physical activity, and improve access to healthcare—have seen declines in mortality rates from these diseases. However, more needs to be done, particularly in low-resource settings like sub-Saharan Africa. Collaboration between government agencies, healthcare providers, and community organisations is key to scaling up interventions.

Pharmacists must be at the forefront of these efforts, helping to reduce the incidence and impact of NCDs. They have the knowledge, access, and trust needed to influence patient behaviour, improve treatment outcomes, and help communities manage these diseases more effectively.

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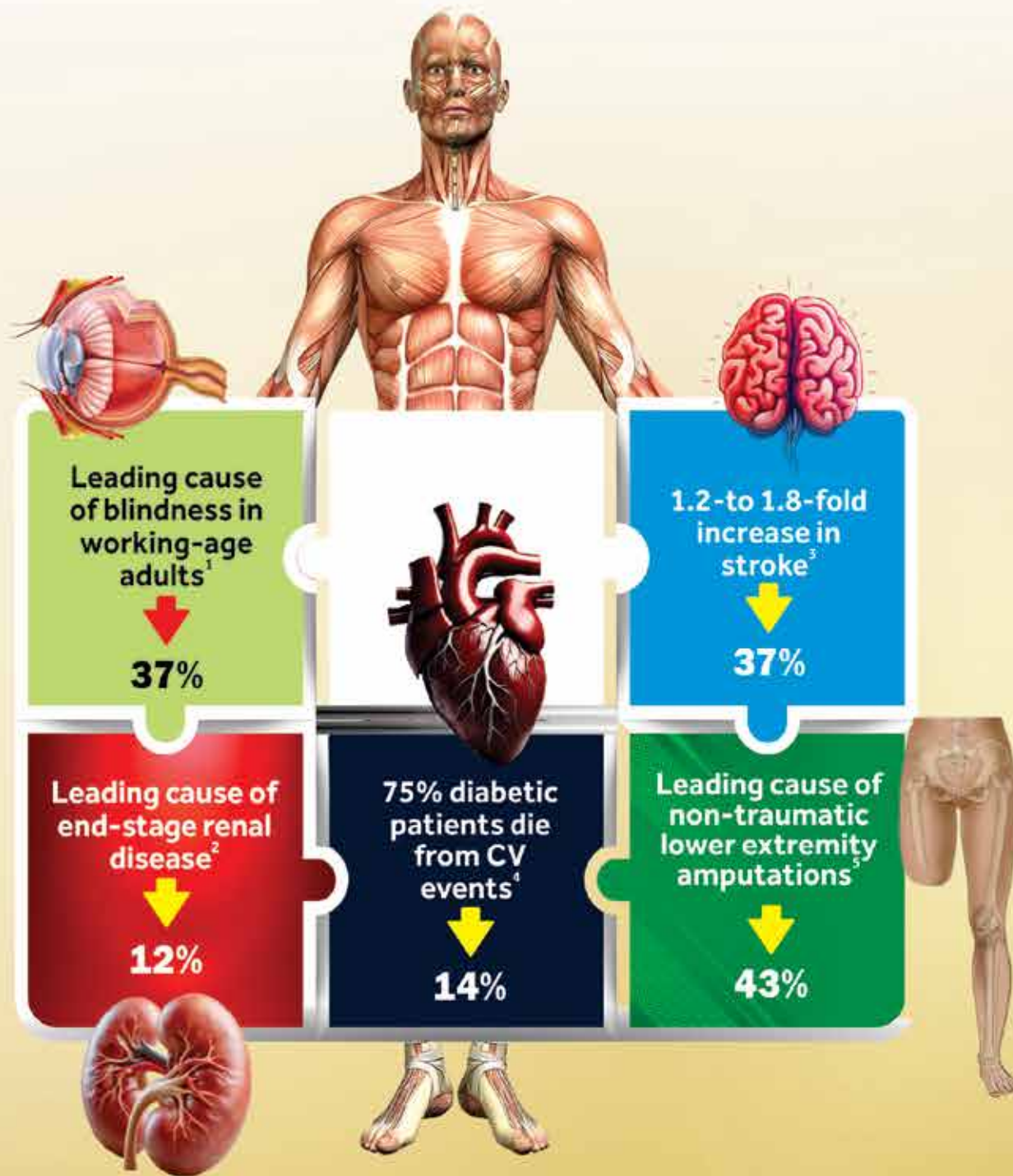
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New trends in managing diabetes

Diabetes mellitus is a chronic metabolic disorder characterised by elevated blood glucose levels due to insufficient insulin production, impaired insulin action, or both.

It is a chronic disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. Insulin is a hormone that regulates blood glucose. Hyperglycaemia, also called raised blood glucose or raised blood sugar, is a common effect of uncontrolled diabetes and over time leads to serious damage to many of the body's systems, especially the nerves and blood vessels.

In 2014, 8.5 per cent of adults aged 18 years and older had diabetes. In 2019, diabetes was the direct cause of 1.5 million deaths and 48 per cent of all deaths due to diabetes occurred before the age of 70 years. Another 460,000 kidney disease deaths were caused by diabetes, and raised blood glucose causes around 20 per cent of cardiovascular deaths.

Between 2000 and 2019, there

was a 3 per cent increase in age-standardised mortality rates from diabetes. In lower-middle-income countries, the mortality rate due to diabetes increased by 13 per cent.

By contrast, the probability of dying from any one of the four main noncommunicable diseases (cardiovascular diseases, cancer, chronic respiratory diseases or diabetes) between the ages of 30 and 70 decreased by 22 per cent globally between 2000 and 2019.

Diabetes is now considered a global epidemic with significant public health implications. As of 2023, the International Diabetes Federation (IDF) estimates that 537 million adults worldwide are living with diabetes, and this number is expected to rise to 783 million by 2045.

In Nigeria, the prevalence rate stands at approximately 3.8 per cent among adults aged 20-79 years, with undiagnosed cases increasing the burden. There is a globally agreed target to halt the rise in diabetes and obesity by 2025.

Type 1 diabetes

Type 1 diabetes (previously known as insulin-dependent, juvenile or childhood-onset) is characterised by deficient insulin production and requires daily administration of insulin. In 2017 there were 9 million people with type 1 diabetes; the majority of them live in high-income countries. Neither its cause nor the means to prevent it are known.

Type 2 diabetes

Type 2 diabetes affects how your body uses sugar (glucose) for energy. It stops the body from using insulin properly, which can lead to high levels of blood sugar if not treated.

Over time, type 2 diabetes can cause serious damage to the body, especially nerves and blood vessels.

Type 2 diabetes is often preventable. Factors that contribute to developing type 2 diabetes include being overweight, not getting enough exercise, and genetics.

Early diagnosis is important to prevent the worst effects of type 2 diabetes. The best way to detect diabetes early is to get regular check-ups and blood tests with a healthcare provider.

Symptoms of type 2 diabetes can be mild. They may take several years to be noticed. Symptoms may be similar to those of type 1 diabetes but are often less marked. As a result, the disease may be diagnosed several years after onset, after complications have already arisen.

More than 95 per cent of people with diabetes have type 2 diabetes. Type 2 diabetes was formerly called non-insulin-dependent, or adult onset. Until recently, this type of diabetes was seen only in adults but it is now also occurring increasingly frequently in children.

Gestational diabetes

Gestational diabetes is

hyperglycaemia with blood glucose values above normal but below those diagnostics of diabetes. Gestational diabetes occurs during pregnancy.

Women with gestational diabetes are at an increased risk of complications during pregnancy and at delivery. These women and possibly their children are also at increased risk of type 2 diabetes in the future.

Gestational diabetes is diagnosed through prenatal screening, rather than through reported symptoms.

Other types of diabetes

In addition to type 1, type 2, and gestational diabetes, there are less common forms of the condition. Some examples include:

Monogenic diabetes: In this form, a single gene change causes the condition to develop. There are two main types of monogenic diabetes: neonatal diabetes mellitus and maturity-onset diabetes of the young.

Type 3c diabetes: This type of diabetes, which people may also call pancreatogenic diabetes, can result from damage to the pancreas following surgery to remove the organ, injury, or illnesses, like pancreatitis.

Cystic fibrosis-related diabetes: People living with cystic fibrosis may develop this type of diabetes as a complication of the condition.

Prediabetes

Prediabetes, or borderline diabetes, occurs when a person's blood sugar levels are elevated but not enough for a diagnosis of diabetes.

For a doctor to diagnose prediabetes, an individual must meet the following criteria:

- glucose tolerance levels of 140-199 milligrams per

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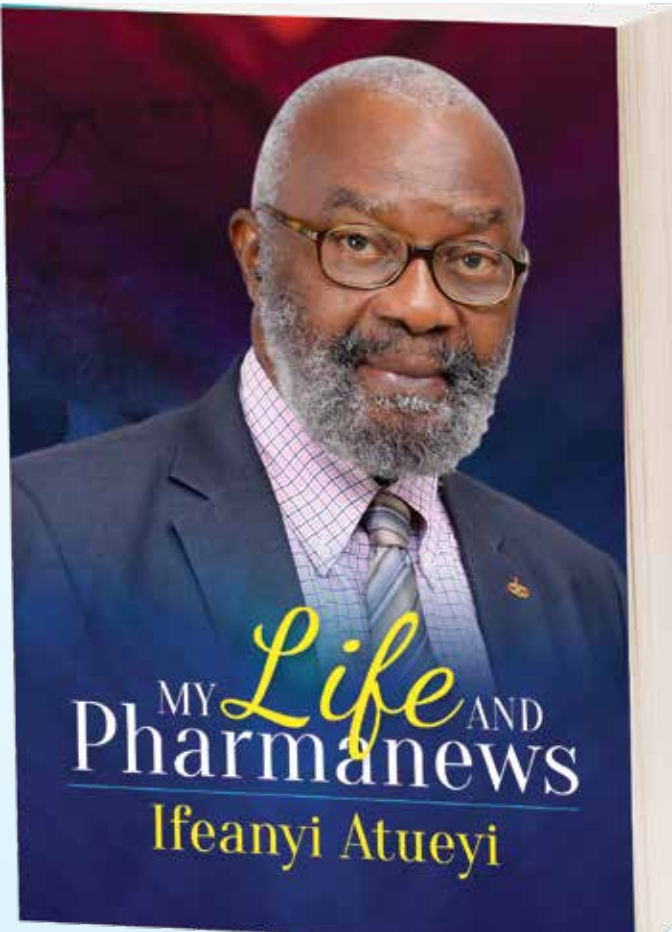
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THE FORMATIVE YEARS (5)

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

I was so shaken by that experience that it weighed me down for a long time. However, I was able to receive the lesson that God wanted me to learn – honesty and integrity are paramount to success in business and life in general. And with that valuable lesson at the beginning of our business, Pharmanews has for the past 40 years been known for truthfulness and transparency in all that we do. We never strike a shady deal with any company. Nor do we tell lies to advance our business. In fact, so strong is the lesson I learnt on integrity that I keep the door of my office open at all times. I do not hold any business discussion in secret. Indeed, if you come to my office and ask that the



successful. The journal's readership base continued to increase, as more people within and outside the country were exposed to it. This naturally translated to more attention and, consequently, more adverts.

After the maiden edition, I started looking for staff to delegate some responsibilities. Consequently, I gradually hired staff in editorial, advertising, and graphic designs. In August 1979, I employed the advert manager, Mr David Chukuezi, who also assisted in gathering news from the companies.

Some months after, the business progressed to the point that the children's dining/playing room could no longer accommodate our activities. Accordingly,

we moved to a two-room office apartment, on Abbi Street, in Mende, Maryland. That relocation not only helped to enhance our work but also gave me the opportunity to supervise my SUTÁ Pharmacy which was directly opposite the new office.

To this day, we have continued

to make positive changes to our operations, as the occasion requires. However, one area of our operation that has remained constant and may not change is our decision not to get into commercial printing. Even though commercial printing is a much more lucrative business I have always wanted to be focused, without getting lured away by the business opportunities and prospects that come with commercial printing.

Actually, from the very beginning I clearly established in my mind that being in publishing and owning a printing press are two different business considerations which do not necessarily have to go together. Interestingly, over the years, I have had experiences and encounters that have further helped to reinforce this belief.

I believe that our decision to continue to print **Pharmanews** with reliable printers was God-inspired. This is one reason we have remained focused. Even more interesting is that, despite not having our own press, we have succeeded in publishing the journal every month without a single interruption. We have never experienced a disappointment on any edition, despite the fact that we have used several printers over the years. Of a truth, God Himself has been ordering our steps in choosing the printing press to handle our jobs. *Continues next edition*

door be closed for a discussion, I will immediately suspect that you have something dishonest to hide.

As I will be revealing shortly, this decision to be truthful and transparent has not only preserved our business but has also opened great doors of

blessings at very critical times for us.

Progress and Expansion

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New trends in managing diabetes

continued from page 11

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- an A1C test result of 5.7–6.4 per cent
- fasting blood sugar levels of 100–125 mg/dL

People living with prediabetes have a higher risk of developing type 2 diabetes, but they do not usually experience the symptoms of full diabetes.

The risk factors for prediabetes and type 2 diabetes are similar. They include:

- obesity or overweight
- a family history of diabetes
- HDL cholesterol lower than 40–50 mg/dL a history of high blood pressure
- gestational diabetes or giving birth to a child with a birth weight of more than 9 pounds
- a history of polycystic ovary syndrome (PCOS)
- being African American, Native American, Latin American, or Asian Pacific Islander
- being older than age 45 years
- not getting enough physical activity

Causes and risk factors

The causes of diabetes are multifactorial, encompassing both genetic and environmental factors.

Genetic factors

A family history of diabetes significantly increases one's risk of developing the disease, especially for type 2 diabetes. Specific genes that influence insulin production and action have been identified.

Environmental and lifestyle factors

Lifestyle choices such as a diet high in refined sugars, physical inactivity, and obesity are the most common triggers for type 2 diabetes. Urbanisation, with its associated sedentary lifestyle and increased consumption of processed foods, has accelerated the rise in diabetes cases.

Other risk factors

Age: The risk of Type 2 diabetes increases with age, particularly after 45.

Ethnicity: African, Hispanic, Asian, and Native American populations have a higher predisposition to diabetes.

Medical conditions: Hypertension, polycystic ovary syndrome (PCOS), and high cholesterol levels are common comorbidities.

Symptoms of diabetes

The symptoms of diabetes can range from mild to severe, and they often go unnoticed in the early stages of type 2 diabetes. Some common symptoms include:

Frequent urination (Polyuria): Elevated glucose levels lead to increased urine output.

Excessive thirst (Polydipsia): The body loses more water as it tries to eliminate excess glucose through urine, causing dehydration and thirst.

Unexplained weight loss: Without adequate insulin, the body begins to break down muscle and fat for energy, leading to weight loss.

Fatigue: Lack of glucose in the cells results in a lack of energy.

Blurred vision: High blood sugar can cause swelling in the lens of the eye, leading to temporary vision changes.

Slow-healing wounds: Poor circulation and high glucose levels can impair the healing process.

In extreme cases, untreated

diabetes can lead to diabetic ketoacidosis (DKA), a life-threatening condition that occurs when the body produces excess ketones as it burns fat for fuel.

Complications of diabetes

Acute complications

Hypoglycaemia: Low blood sugar levels, often due to excessive insulin or oral diabetes medications, can cause dizziness, confusion, and, in severe cases, loss of consciousness.

Diabetic ketoacidosis (DKA): Common in type 1 diabetes, DKA results from dangerously high levels of blood glucose and ketones.

Hyperglycaemic hyperosmolar state (HHS): A severe complication of Type 2 diabetes characterized by very high blood sugar and dehydration.

Chronic complications

Cardiovascular disease: Diabetes increases the risk of heart disease and stroke by accelerating atherosclerosis (the build-up of fatty

deposits in the arteries).

Nephropathy (kidney disease): Chronic high blood sugar can damage the kidneys' filtering system, leading to kidney failure.

Neuropathy (nerve damage): Peripheral neuropathy, which causes tingling, numbness, and pain, typically affects the feet and hands.

Retinopathy (eye damage): High blood sugar can damage the tiny blood vessels in the retina, potentially leading to blindness.

Amputation: Poor blood circulation and nerve damage in the extremities increase the risk of foot ulcers and infections, which may lead to amputation.

Diagnosis and monitoring

Diagnostic tools

Fasting blood sugar test: Measures blood glucose after an overnight fast. A reading of 126 mg/dL or higher indicates diabetes.

HbA1c test: Reflects average blood sugar levels over the past 2–3 months. An HbA1c level of 6.5% or

higher is diagnostic for diabetes.

Oral glucose tolerance test (OGTT): Measures blood sugar levels before and after consuming a glucose-rich drink. It is particularly useful for diagnosing gestational diabetes.

Monitoring

For effective management, regular blood sugar monitoring is crucial. Patients can use glucometers at home, and continuous glucose monitors (CGMs) have emerged as innovative tools that provide real-time blood sugar readings throughout the day.

Diabetes management

Medications

Insulin: Essential for Type 1 diabetics and sometimes required for Type 2 patients when oral medications are insufficient.

Oral hypoglycaemic agents: Common drugs for type 2 diabetes include metformin (which reduces liver glucose production) and sulfonylureas (which increases

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Celebrating 45 Years of Uninterrupted Monthly Publication (1979-2024)

New trends in managing diabetes

continued from page 13
insulin secretion).

Lifestyle modifications

Diet: A balanced diet, rich in whole grains, vegetables, lean proteins, and healthy fats can help regulate blood sugar. Carbohydrate counting and glycaemic index awareness are critical for diabetics.

Physical activity: Regular exercise helps the body use insulin more efficiently. Patients are advised to engage in at least 150 minutes of moderate aerobic activity per week.

Weight management: Achieving and maintaining a healthy weight can significantly improve blood sugar control.

Prevention strategies

Primary prevention

Preventing the onset of type 2 diabetes involves lifestyle interventions such as maintaining a healthy diet, engaging in regular physical activity, and avoiding tobacco use. Public health campaigns should promote awareness of diabetes risk factors and encourage early screening.

Secondary prevention

For individuals diagnosed with prediabetes or at high risk, lifestyle interventions coupled with medications like metformin can delay or prevent the progression to type 2 diabetes.

Diabetes in Nigeria

Diabetes poses a significant healthcare burden in Nigeria, where many cases remain undiagnosed due to inadequate access to diagnostic tools and treatment. Nigeria's



healthcare system struggles to cope with the rising incidence, compounded by cultural factors that affect disease management. Traditional remedies and the stigma attached to chronic illnesses further complicate care. Addressing these challenges requires a multi-pronged approach, including government support, healthcare policy reforms, and grassroots awareness initiatives.

According to Dr Ifeoma Okafor, a consultant endocrinologist with the Lagos University Teaching Hospital (LUTH), diabetes is a growing concern in Nigeria, particularly type 2 diabetes, due to lifestyle changes, urbanisation, and poor diet.

She added that many patients do not realise they have the condition until it has progressed significantly, saying early screening, regular exercise, and a balanced diet, particularly reducing carbohydrate intake, are key preventive measures.

Dr Emmanuel Abayomi, a General Practitioner, at University College Hospital (UCH), Ibadan, speaking during a healthcare symposium focused on non-communicable

diseases, said the major challenge we face with diabetes in Nigeria is the lack of awareness and early detection.

He said a significant portion of our population doesn't access regular healthcare. Patients often present when complications have set in. Public health campaigns are crucial in educating people on the importance of regular check-ups and managing risk factors like obesity.

In the same vein, Dr Amina Bako, Public Health Specialist at Ahmadu Bello University Teaching Hospital (ABUTH), Zaria, at a public health forum addressing chronic diseases in Northern Nigeria, said the burden of diabetes in Nigeria is not only medical but also socio-economic.

Many families struggle to afford insulin and other medications. The government needs to subsidise diabetes care and ensure that these medications are accessible at affordable rates. Community-based awareness programs focusing on nutrition and lifestyle changes can also significantly reduce diabetes prevalence.

Also, Mrs Folake Adeoye, a Nurse and Diabetes Educator at Obafemi Awolowo University Teaching Hospitals Complex (OAUTHC), Ile-Ife, said in her speech during a diabetes education workshop for healthcare professionals that one of the barriers we face in managing diabetes is the stigma and lack of understanding.

"Many people believe that diabetes is a death sentence or that it can only be managed by avoiding sugar. There's a need for continuous education on the comprehensive management of diabetes, including medication, diet, and exercise. Emotional support for patients is also critical."

Diabetes management in Nigeria

Diabetes management in Nigeria faces several challenges, including a lack of awareness, inadequate healthcare infrastructure, and financial constraints. However, there are efforts by healthcare professionals, government agencies, and private organisations to improve the management of this chronic condition. Here's an overview of diabetes management in Nigeria

Medications and accessibility

Access to medications such as insulin and oral hypoglycaemics (like metformin and sulphonylureas) is uneven across Nigeria. While these drugs are available in urban centres, they are often expensive and difficult to procure in rural areas. In addition, counterfeit diabetes medications are a significant issue in Nigeria, posing a grave risk to patients' health.

Role of traditional medicine

In many rural and peri-urban

continued on page 17

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Reference: 1. Diabetes Ther (2020) 11:533–548 <https://doi.org/10.1007/s13300-020-00833-x>

* Remicron MR official dossier

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Lola Oni: Nurse consultant who became colossus of sickle cell care

By Ola Aboderin

Dr Iyabode Lola Oni is a specialist nurse consultant, educator, and advocate who has made monumental contributions to global healthcare through her pioneering work in the field of sickle cell and thalassaemia. A distinguished figure in haemoglobinopathies, Oni has spent over 40 years championing the rights and care of individuals affected by these genetic conditions, many of whom are from African and Caribbean communities. Her work has significantly improved clinical practices and patient outcomes, making her a foremost authority on sickle cell and thalassaemia worldwide.

Beyond clinical care, Oni has been at the forefront of shaping health policies and raising awareness about these conditions. She was instrumental in developing the UK's first professionally accredited specialist course for haemoglobinopathies and played a pivotal role in establishing robust screening and counselling programmes for sickle cell and thalassaemia.

Oni's educational initiatives have helped healthcare professionals understand the clinical standards needed to treat patients with these conditions effectively. In addition to mentoring countless nurses and healthcare workers, her advocacy has also extended to combating the deeply ingrained prejudices that often hinder the care of patients with sickle cell disease.

Path to impact

Born in April 1956 in Nigeria, Oni's father passed away shortly before her third birthday, and her mother, a nurse, brought the family to the UK when she was nine years old. She was drawn to the nursing profession from an early age, inspired by her mother's elegant uniform and the idea of caring for others. After obtaining the necessary qualifications, she became a registered general nurse, midwife, and health visitor.

Oni's path to specialising in sickle cell care came through a defining moment in her career. As a charge nurse, she encountered a patient suffering from a severe sickle cell crisis—a condition she had never heard of at the time. According to her, for the first time in her career, she found herself unable to help a patient whose life was in her hands. Although the patient survived, the experience made her realise the dire need for knowledge and expertise in treating haemoglobinopathies, sparking her lifelong dedication to improving care for patients with these conditions.

Oni's impacts began to be felt in the mid-1980s when she became one of the first healthcare professionals in the UK to focus on the newly emerging field of sickle cell and thalassaemia. She was tremendously instrumental in the early development of this specialist field, serving first as a specialist health visitor at the Lambeth Sickle Cell and Thalassaemia Centre for several years.



Dr Lola Oni, OBE

A critical focus of her work during this period was the re-education of medical personnel. She realised that many doctors and nurses lacked the knowledge and understanding needed to provide effective care for sickle cell patients. To address this, she not only helped develop accredited courses but also delivered workshops and provided on-the-ground training across London hospitals. Her relentless push to "legitimise the pain" of sickle cell patients significantly helped shift attitudes in the medical community.

Oni also undertook a leadership position at the Brent Sickle Cell and Thalassaemia Centre, where she served as service director. Her expertise saw the development of one of the most comprehensive specialist services in the country. She led a multidisciplinary team that provided vital care, screening, and counselling to patients and their families, ensuring they received the support they needed.

Further education and academic leadership

Dr Oni's passion for education saw her obtain a Bachelor of Education (Hons) from Southbank University and later a PhD from Surrey University in 2007, with a thesis on African and Caribbean people's attitudes toward sickle cell disease. She took up an appointment as a lecturer at Normanby College, which later merged with King's College London University, where she was appointed specialist subject lead and course leader for the first professionally accredited specialist programme in haemoglobinopathies in the UK.

Oni later returned to a full-time clinical role as service director at the Brent Sickle Cell and Thalassaemia Centre, Central

Middlesex Hospital, leading a multidisciplinary team of health and allied professionals, managing a local and regional specialist service. She ultimately became a consultant nurse approved and endorsed by the University of West London.

Global contributions and policy advocacy

Oni has been a significant contributor to policy development and international advocacy for sickle cell and thalassaemia. She has served on several local, regional, and international committees. She was an inaugural member of the NHS England Antenatal and Newborn Sickle Cell and Thalassaemia National Screening Programme Committee (2002-2019). She co-founded and chaired the Sickle Cell & Thalassaemia Association of Nurses, Midwives, and Allied Professionals (STANMAP).

She was also a key member of the UK government's Human Genetics Commission; member of the NHS England Chief Nursing Officer Black and Minority Ethnic Advisory Group; committee member of the Human Genetics Commission, Department of Health; committee member of the UK Haemoglobinopathy Forum until 2021; and an educational lead for the West London NHS Haemoglobinopathy Coordinating Centre (HCC). A Senior Fellow of the Inaugural Class of the Nigerian Leadership Initiative (NLI), she has mentored several nurses through the Nursing and Midwifery Council (NMC) professional working groups.

Aside from her massive contributions to academic journals, policy documents, and specialist training courses, Oni has authored and co-authored key instructional materials, including the widely used "Parents Guide to

Managing a Child with Sickle Cell Disease". This groundbreaking handbook has been adopted by the NHS and given to all parents of newly diagnosed babies and children in England, and adapted for use in Northern Ireland, Scotland, and Wales.

Oni's expertise and advocacy have taken her beyond the UK. She has worked in Nigeria on several occasions, as well as in Guyana, Brazil, and Barbados, where she has lectured, mentored healthcare professionals, and contributed to global policy discussions. Her leadership in these international efforts has empowered health systems to better manage haemoglobinopathies, particularly in communities where these conditions are most prevalent.

Trailblazer for equality in healthcare

Throughout her career, Oni has been a champion for equality and has challenged the systemic racism that sickle cell patients often face. She noted that many healthcare professionals viewed young Black patients as "junkies" or a burden, and she worked hard to change these attitudes through re-education and training. Her emphasis on compassion and competent care has been pivotal in addressing the stigma surrounding sickle cell disease.

Her passion for justice extended to advocating for the rights of healthcare workers of Black and minority ethnic backgrounds. As a member of the NHS England Chief Nursing Officer Black and Minority Ethnic Advisory Group, she has worked to ensure greater representation and support for minority healthcare professionals.

Awards and legacy

Dr Oni's contributions to healthcare have been recognised with numerous prestigious awards. In 2004, she was appointed an Officer of the Most Excellent Order of the British Empire (OBE) for her services to the NHS. In 2020, she was honoured with the Queen's Nursing Institute (QNI) Lifetime Achievement Award, and in 2021, she was made a Fellow of the Royal College of Nursing (FRCN).

She has also received the Sickle Cell Society Award (1997), the NHS-70 Award from the Nigeria High Commission (2018), and the North-East London University Award for excellence in her field, among other accolades.

Now retired from her role as the service director at the Brent Sickle Cell and Thalassaemia Centre, Dr Lola Oni's legacy lives on through her work as an educator, policy shaper, and advocate for compassionate, skilled care for patients with sickle cell disease and thalassaemia. Her drive to improve healthcare standards and challenge racism has made her a true hero of healthcare, not only in the UK but around the world.

Even in retirement, she remains an honorary lecturer at King's College London, continuing to share her wealth of knowledge with future generations of healthcare professionals.

New trends in managing diabetes

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areas, there is a high reliance on traditional healers and herbal remedies for managing diabetes. While some traditional practices may offer complementary benefits, the absence of scientific validation and standardisation poses significant risks, especially when such methods are used in place of conventional treatments.

Challenges in lifestyle modification

Encouraging lifestyle modifications—such as dietary changes, increased physical activity, and weight management—is particularly challenging in Nigeria. Cultural factors, including the high value placed on starchy foods like rice, yam, and fufu, make dietary modifications difficult. Additionally, **food insecurity** means that many individuals with diabetes cannot afford healthier food options such as fruits, vegetables, and lean proteins.

Prevention Strategies in Nigeria

Public health campaigns

Efforts to prevent diabetes in Nigeria are gradually increasing, with government agencies and NGOs launching public health campaigns. However, these campaigns are often underfunded and sporadic. **Diabetes awareness walks**, educational programmes and community screenings are important, but their reach is limited due to a lack of consistent government support.

Screening and early detection

Routine screening for diabetes is not a widespread practice in Nigeria, largely due to insufficient healthcare



resources and public awareness. Initiatives to introduce **community-based screenings** have shown promise but require greater investment to cover Nigeria's large and diverse population effectively.

Diabetes in Nigeria: A broader perspective

Diabetes in Nigeria is an under-recognised health issue that presents serious challenges for individuals and the healthcare system. The disease disproportionately affects the **urban poor** and **rural populations**, where access to care is minimal. As a result, the majority of Nigerians living with diabetes remain undiagnosed until they develop complications, increasing the overall cost of care. There is also a lack of data on diabetes, which hampers effective policymaking and the allocation of resources.

Future directions for diabetes care in Nigeria

Expanding healthcare access

Improving diabetes care in Nigeria requires expanding access to diagnostic tools, medications, and specialist care. Investment in primary healthcare systems, especially in rural areas, is critical. More emphasis should also be placed on training healthcare workers to diagnose and manage diabetes effectively.

National health policies

A robust national diabetes programme that includes prevention, early diagnosis, and affordable treatment options is essential for tackling the growing burden of diabetes. Public health education, community outreach, and subsidised medications must be integrated into Nigeria's healthcare policies to ensure that diabetes care reaches every corner of the country.

Research and data collection

There is an urgent need for more **research** on diabetes in Nigeria. Establishing comprehensive

national diabetes registries and conducting more localised studies will help.

WHO response

WHO aims to stimulate and support the adoption of effective measures for the surveillance, prevention and control of diabetes and its complications, particularly in low- and middle-income countries. To this end, WHO:

- provides scientific guidelines for the prevention of major noncommunicable diseases including diabetes;

- develops norms and standards for diabetes diagnosis and care;

- builds awareness of the global epidemic of diabetes, marking World Diabetes Day (14 November); and
- conducts surveillance of diabetes and its risk factors.

In April 2021 WHO launched the Global Diabetes Compact, a global initiative aiming for sustained improvements in diabetes prevention and care, with a particular focus on supporting low- and middle-income countries.

In May 2021, the World Health Assembly agreed on a Resolution on strengthening prevention and control of diabetes. In May 2022 the World Health Assembly endorsed five global diabetes coverage and treatment targets to be achieved by 2030

Report compiled by Adebayo Oladejo, with additional information from medicinenet.com; American Diabetes Association; Pharmanews, WHO, Cleveland Clinic, Mayo Clinic, MedicalNewsToday, Medscape, National Institutes of Health, Healthline, Punch, NAN, and Federal Ministry of Health.

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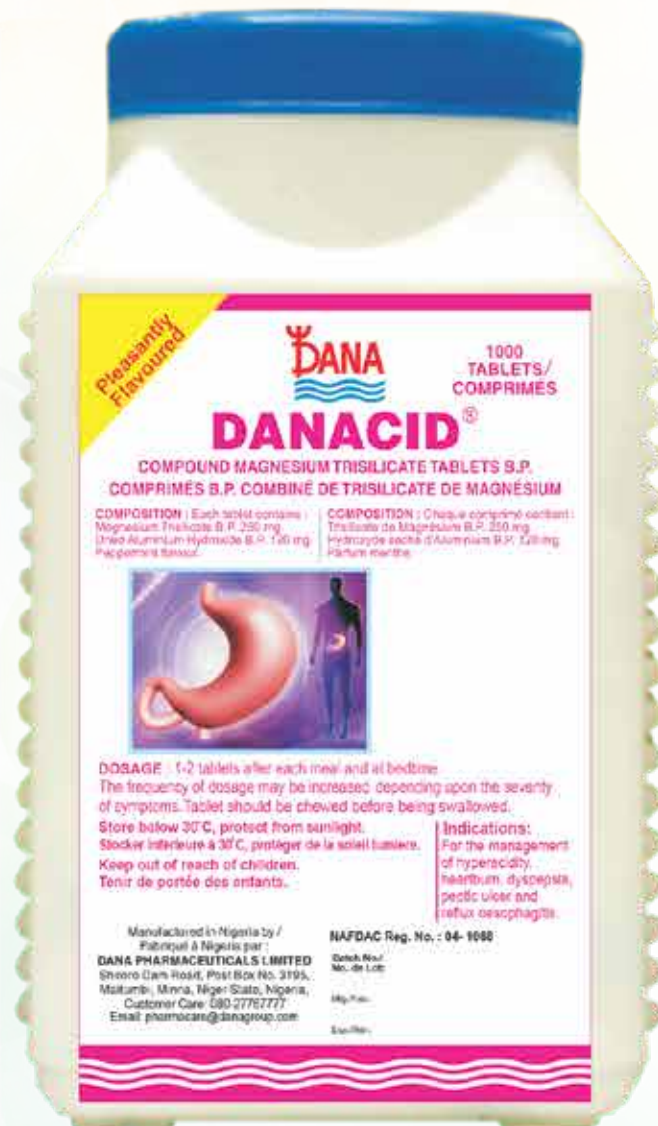
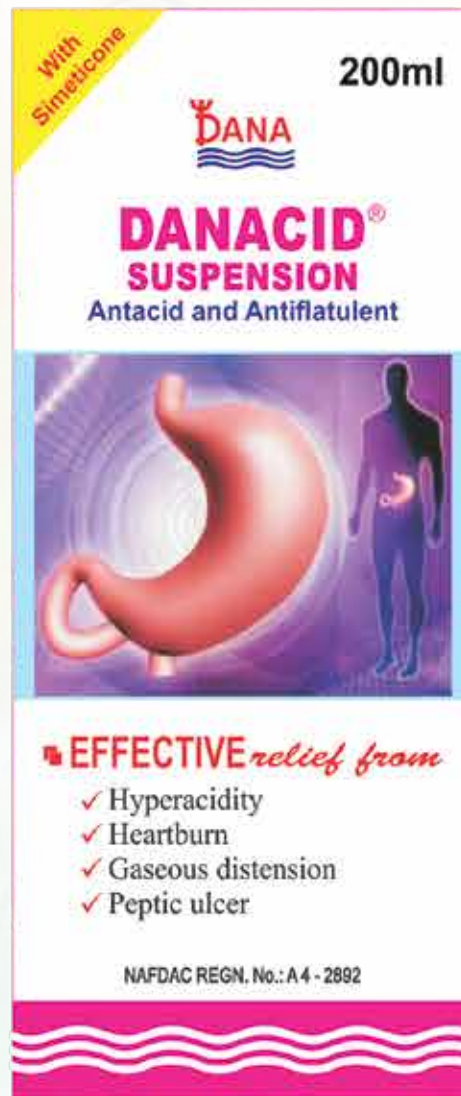
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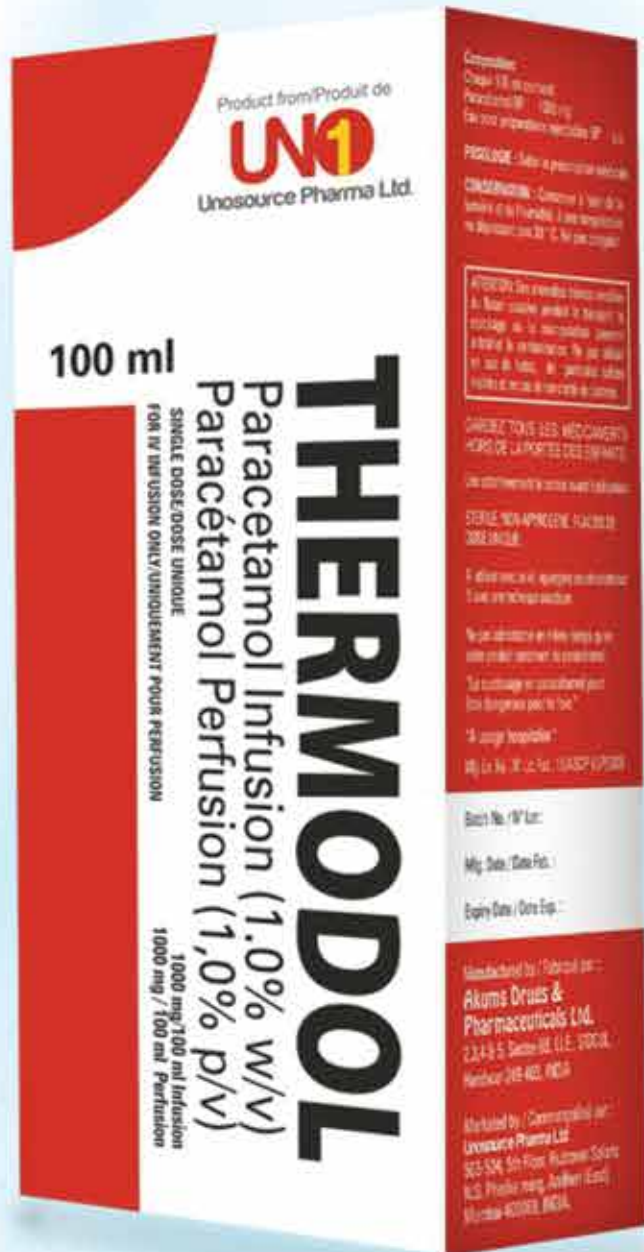


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Trypanosomiasis in West Africa: History, prevention, and treatment

By Patrick Iwelunmor

Trypanosomiasis, commonly known as sleeping sickness, is a debilitating disease caused by parasitic protozoa from the *Trypanosoma* genus. Primarily transmitted through the bites of infected tsetse flies, it poses significant health risks, particularly in West Africa. The disease is divided into two forms: *Trypanosoma brucei gambiense*, which causes chronic infections in humans, and *Trypanosoma brucei rhodesiense*, responsible for acute infections.

The history of trypanosomiasis in West Africa is intertwined with colonialism, agriculture, and public health challenges. The disease became a significant concern in the late 19th and early 20th centuries when European colonization intensified. The presence of tsetse flies in vast areas of West Africa hindered agricultural expansion and forced many communities to abandon fertile lands, leading to economic hardships.

By the 1920s, sleeping sickness had reached epidemic proportions in some regions, prompting colonial administrations to implement public health measures. However, efforts were often inadequate, and the disease continued to devastate populations. The introduction of the "Sleeping Sickness Control Scheme" in the 1930s marked a turning point, as it aimed to improve surveillance, treatment, and education about the disease. Despite these efforts, outbreaks persisted throughout the 20th century, exacerbated by civil conflicts, which disrupted healthcare systems.

Today, trypanosomiasis remains endemic in several West African countries, particularly in areas near the tsetse fly habitats. The disease predominantly affects rural populations engaged in subsistence farming and those living in poverty. The World Health Organisation (WHO) reported that around 1,000 new cases of sleeping sickness were recorded annually, although actual numbers may be higher due to underreporting and lack of access to healthcare.

Factors contributing to the persistence of the disease include the expansion of agricultural activities into tsetse-infested areas, environmental changes, and the movement of populations due to conflicts or economic opportunities. The cyclical nature of epidemics highlights the need for continuous surveillance and intervention strategies.

Prevention

Preventing trypanosomiasis is critical for safeguarding public health in West Africa. Various strategies have been employed over the years, focusing primarily on controlling the tsetse fly population and protecting vulnerable communities.

Vector control

Vector control is the cornerstone of trypanosomiasis prevention. Techniques include:

Insecticide-treated cattle: Cattle are often targeted by tsetse flies, and treating them with insecticides can reduce fly populations.

Traps and targets: Simple traps baited with attractants can capture tsetse flies, significantly decreasing their numbers in specific areas.

Clearing bushland: Regularly clearing vegetation in tsetse-infested regions reduces fly habitats and decreases their populations.

2. Community awareness and education

Educating communities about trypanosomiasis is essential for prevention. Awareness campaigns focus on:

Recognising symptoms: Educating individuals about the early signs of sleeping sickness, such as fever, headaches, and changes in sleep patterns, can facilitate early diagnosis and treatment.

Protective measures: Communities are encouraged to use protective clothing, avoid areas with high tsetse fly populations, and engage in regular health check-ups.

3. Surveillance and monitoring

Establishing effective surveillance systems enables health authorities to monitor and respond to outbreaks quickly. Community health workers play a crucial role in identifying cases and educating locals about preventive measures.

Treatment options

Treating trypanosomiasis is crucial for patient recovery and preventing further transmission of the disease. Treatment varies depending on the stage of the infection:

1. Early-stage treatment

For early-stage *Trypanosoma brucei gambiense* infections, the first-line treatment is **pentamidine**, which is administered via injection. It is effective but can cause side effects, including kidney toxicity. For early-stage *Trypanosoma brucei rhodesiense*, **suramin** is used, also delivered via injection, with similar side effects.

2. Late-stage treatment

Late-stage infections, where the parasites invade the central nervous system, require more intensive treatment:

Eflornithine: Approved for treating late-stage gambiense sleeping sickness, this drug has significantly improved outcomes. It requires multiple daily infusions over several days and can cause side effects, such as gastrointestinal issues and anemia.

Nifurtimox-eflornithine combination therapy (NECT): This newer treatment regimen combines two drugs, offering an effective and simplified treatment for late-stage infections.

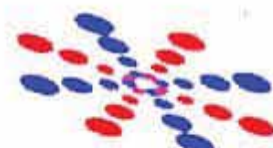
Challenges in treatment

While treatment options exist, challenges remain:

Access to healthcare: Many rural communities lack access to healthcare facilities, delaying diagnosis and treatment.

Drug resistance: The emergence of drug-resistant strains of the parasite complicates treatment efforts, necessitating ongoing research for new therapeutic options.

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with

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 (Specialty: Internal Medicine, from John Hopkins University)
 Tel: 0809 771 4455
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High blood pressure: disease or dis-ease?

What exactly is high blood pressure? Is it a disease or a “dis-ease”? To explore this question, here are three cases from Carib Health Wellness Centre that highlight the issue.

Case #1

The first case involved a 36-year-old gentleman. He was referred to us by his physician for high blood pressure management after failing to respond to therapy. Initially, he had been seen by his doctor about seven to ten days before coming to our attention. At the time, his blood pressure (BP) was over 200 systolic, and his doctor immediately put him on infusions. He was subsequently placed on oral amlodipine, but over the next several days, his BP began rising again. His doctor increased the dose of amlodipine, but the BP shot back up to 200. Very concerned, my colleague physically brought the patient to my clinic.

works in the Nollywood industry, and many times he is up until three, four, or five in the morning on set, filming.

He eats and drinks whatever is provided, usually fast food, junk food, and sugary soft drinks. His sleeping pattern was highly erratic, a consequence of his work.

After obtaining the history and examining this gentleman, I noted that although he had no headache or chest pains, he felt generally unwell. His systolic BP was 194, and his diastolic was 110. I immediately instructed my staff to prepare for infusions.

While the infusions were

being set up, I asked the nurse to give him two fresh young coconuts to consume the coconut water. From his history, it was clear to me that he was chronically dehydrated. He had disrupted his circadian rhythm over a long period and was eating nutrient-deficient foods.

After consuming the first and second coconut water, he requested a third. This confirmed his dehydration. By the time he finished the third coconut water, about an hour or maybe an hour and 15 minutes had passed since he arrived at the clinic. At this point, we had not yet started the infusion.

I then instructed my nurse to check his blood pressure. It was 146 systolic over 80 diastolic. His doctor, who was still present, was pleasantly surprised, as was the patient. At this point, I felt there

was no need for the infusion to lower the blood pressure further.

The cause of his high blood pressure was threefold:

1. Chronic disruption of his normal circadian rhythm due to his work lifestyle.
2. Chronic dehydration – consuming inadequate amounts of water and instead drinking soft drinks.
3. Chronic poor nutrition – eating food lacking in micronutrients.

By addressing these causes consistently, the body was able to respond and normalise his blood pressure without medical intervention.

Subsequently, he came to the clinic every day to pick up three coconuts for the water. By the end of the month, his doctor had weaned him off the medication completely.

To this day, he has maintained normal blood pressure. Let me add that during the month he was coming for coconut water, he brought several of his colleagues from the movie industry to our centre, for which we are grateful.

This is a simple example of understanding that high blood pressure is not a disease but rather a state in which the body is no longer at its natural ease. (Continues next edition).



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PCN inducts 128 COOU pharmacy graduates

- As faculty prepares to launch PharmD programme

By Ranmilowo Ojalumo

The Faculty of Pharmaceutical Sciences, Chukwuemeka Odumegwu Ojukwu University (COOU), Igbariam, recently graduated 128 new pharmacists, all of whom were inducted into the pharmacy profession by the Pharmacy Council of Nigeria (PCN).

The graduates were inducted during the third oath-taking and induction ceremony held at the university.

Speaking before

administering the oath, the Registrar of the PCN, Pharm. Babashehu Ahmed, represented by Dr Anthony Idoko, urged the inductees to maintain ethical standards in their professional conduct. He also encouraged them to work towards the advancement of the Nigerian healthcare sector, emphasising that they should be exemplary ambassadors for the pharmacy profession.

The registrar highlighted the PCN's strong stance against

professional misconduct and advised the inductees to avoid actions that could tarnish the reputation of the profession.

In his address, the Dean of the Faculty, Prof. Theophine Chinwuba Akunne, noted that the graduates had undergone rigorous academic training over five years and had been deemed worthy in both character and learning to practise pharmacy in Nigeria and beyond.

The Dean said, "Rest assured that you have acquired the

necessary knowledge and skills during these five years of intensive training, which will enable you to practise pharmacy with confidence and contribute meaningfully to global healthcare."

He continued, "In line with the three 'V's mantra of our esteemed Vice-Chancellor, Prof. Kate Omenugha—

value, viability, and visibility—you are challenged to go out into the wider society and pharmaceutically add value, be morally and mentally viable, and, above all, remain professionally visible and outstanding."

Akunne also expressed his gratitude to the acting VC for her support of the Faculty within her short time in office, noting the positive impact she had already made.

"These few months of your leadership at Chukwuemeka Odumegwu Ojukwu University have been incredibly beneficial to both the university and our Faculty," the dean remarked.

Meanwhile, the faculty is preparing to launch its Doctor of Pharmacy (PharmD) programme. Akunne announced that the PharmD programme will begin in the next academic session.

He commended the VC for her efforts in securing the Senate approval for the programme.

"You facilitated the Senate's approval for the six-year Doctor of Pharmacy (PharmD) programme, as well as the professional Diploma (part-time) in Herbal Medicine and Nutrition. Under your guidance, these two programmes will commence in the upcoming academic session," the dean said.

The highlight of the event was the presentation of various awards and prizes, with Pharm. Wendy Ozoh receiving the award for the best graduating student, alongside other outstanding graduates.



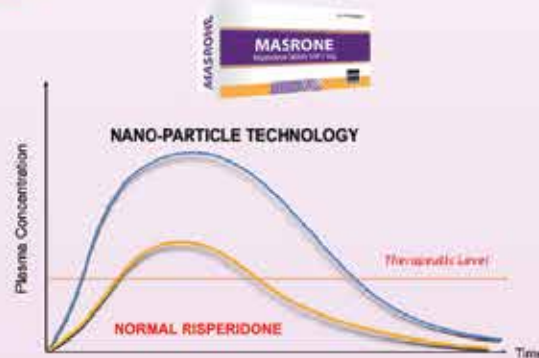
A cross-section of the graduating pharmacy students of Chukwuemeka Odumegwu Ojukwu University, at their oath taking/induction ceremony recently.

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Bipolar mania: in children and adolescents	0.5 mg	1 to 2.5 mg	1 to 6 mg
Irritability associated with autistic disorder	0.25 mg (Weight < 20 kg)	0.5 mg (< 20 kg)	0.5 to 3 mg
	0.5 mg (Weight ≥ 20 kg)	1 mg (≥ 20 kg)	



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- Bipolar mania adults
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Lagos ALPs trains over 250 girls on digital skills

By Nneoma Kalu

No fewer than 250 girls from the Alimosho Grammar School Complex, in Ipaja area of Lagos State, have been digitally empowered by the Association of Lady Pharmacists (ALPs), Lagos State Chapter. This initiative was part of the association's activities to commemorate the 2024 International Day of the Girl-Child.

The event, themed, "Girls' Vision for the Future: Embracing the Digital Generation," aimed to empower the girls from over 10 schools by encouraging them to embrace technology, leadership roles, and self-confidence in this ever-evolving digital landscape.

Pharm. (Mrs) Shakirat Adeosun, director of pharmaceutical services, Lagos State Primary Healthcare Board, delivered the keynote address, focusing on the importance of digital literacy and technological skills in shaping the future of the girl-child. She highlighted how digital tools have become central to every profession, from healthcare to the arts. "Whether you aspire to be a pharmacist, an engineer, or a business leader, technology will be integral to your success," she stated.

She urged the girls to participate in STEM (Science, Technology, Engineering, and Mathematics) programmes, encouraging them to attend coding boot camps, science fairs, and mentorship initiatives to build their confidence. Technology is not just a tool, she stressed, noting that it is the driving force that connects humans, helps them innovate, and solves tomorrow's problems."

Also speaking at the programme, Pharm. (Mrs) Olufunmilayo Bankole, permanent secretary, Lagos State Health District 1, who was the chairman of the occasion, further emphasised the importance of girls having equal access to education and technology. She charged the girls to be bold and strive for excellence. "Believe in yourself, and no matter the obstacles, you can achieve greatness," she advised. Bankole also highlighted the imperative role of technology in unlocking the potential of young girls, stating, when girls have access to the technological resources available, they can harness creativity and intelligence to pursue their passions.

Addressing the importance of collaboration in achieving a vision for the future, Pharm. (Mrs) Foluke Akinniranye emphasised that girls need both internal and external support to reach their full potential. "Girls need allies, people who believe in them and help them achieve their dreams," she said.

She elaborated on the idea of intrinsic empowerment, which is the confidence girls must cultivate within themselves, and extrinsic empowerment, which includes support from mentors, parents, and communities. "Breaking gender stereotypes and taking on leadership roles is crucial. Collaboration and support from society will help you get there," she advised.

In an interview with Pharm. (Dr) Afusat Adesina, chairman of ALPs, Lagos Chapter, at the programme, she called for equality in education and end to the barriers that hold girls back from pursuing their dreams. There is no difference between a girl and a boy, she insisted, saying that they should be given equal opportunities to learn and grow.

She reiterated the importance of ensuring that girls in underserved communities have access to quality education, noting that when a girl is educated, the entire community benefits. She also stressed the need for cultural shifts, stating, "We must challenge the norms that limit the girl child. When girls are supported, the nation thrives."

For Pharm. (Mrs) Olufunmilayo Agbeniyi, chairman of the planning committee, the outreach and its theme



L-R: Pharm. Olufunmilayo Ajoke Agbeniyi, chairman planning committee, IDGC; Pharm. (Mrs) Osineye Khadijat, ADPS, Alimosho LGA(HOU); Pharm. (Mrs) Foluke Akinniranye; Pharm. (Dr) Afusat Adesina, chairman, ALPs Lagos State; Pharm. (Mrs) Shakirat Adeosun, DPS, LSPHCB; Dr (Mrs) Olufunmilayo Bankole, PS, LSHD1; Pharm. (Mrs) Beatrice Chinonye Onuba, CEO, Mooveon Pharmacy; and Pharm. (Mrs) Nafeesah Iyabode Akindele, DPS LSHD1, at the commemoration of the 2024 International Day of the Girl Child at Alimosho, Lagos.

was very apt, as the girl-child needs all the motivation to break the glass ceiling limitation. She expressed the

association's unwavering belief in the potential of the girl-child, which explained their long-standing

dedication to empowering girls "We know that you girls have a bright future filled with hope and big possibilities. However, there are distractions and societal contests about whether girls should take certain positions, but let me tell you, what a boy or a man can do, a girl can do better." Agbeniyi reminded the girls that the International Day of the Girl Child, recognised by the United Nations in 2011, is a testament to the global community's commitment to

acknowledging the power and efficiency of girls in shaping the **continued on page 33**

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AHAPN, ALPs urge incoming PSN leadership to standardise practice, cut politics costs

continued from page 19

various technical and interest group conferences translated into more concrete actions that benefit the profession. Good communiqués are issued, but their implementation is often lacking.

“Prof. Usifoh has worked tirelessly to ensure that pharmacy and pharmacists have a voice in the country. He engaged with the government at the highest levels to create a conducive practice environment for pharmacists. His consultative efforts have yielded results. It was during his tenure that the Pharmacy Bill was approved, the PCN Board was reconstituted, and the Federal and State Governments approved the implementation of the consultants cadre for Fellows of the West African Postgraduate College of

Lagos ALPs trains over 250 girls on digital skills

continued from page 31

future. She asserted that girls have the power to turn nations around for good, urging the students to recognise their potential and start making a difference in their communities now.

The students were deeply inspired by the event as they expressed their appreciation and inspiration gathered from the event. One of the girls, Echibe Precious, of State Comprehensive Junior College, Alimosho, reflected on the lessons learned, saying, “I learned that a girl-child should always determine what to achieve in life, be brave and that we are special.”

Another participant, Odunsi Moranugba, expressed her aspirations, saying, “I wish I could be president or governor in the future. And I have learnt that the future starts now.”

Pharm. Adeosun cited examples of young Nigerian women who have made significant technological breakthroughs, including Temitope Okusomo, who developed an app to help farmers at age 17, and Tomisi Okunubi, who built a locator app for lost children at just 12. “These girls are proof that with the right support and access to technology, you can achieve great things,” Adeosun remarked, motivating the young girls to envision themselves as future leaders and innovators in the digital world.

Pharm. Bankole, also reinforced the event’s core message, reminding the girls of their limitless potential in the digital age, by leveraging technology as a tool, to drive their vision and passion for the future.

Students from 13 schools were in attendance at the programme, including Alimosho Junior Grammar School; Alimosho Senior Grammar School; State Senior High School, Alimosho; State Junior High School, Alimosho; State Senior College, Alimosho; State Comprehensive Junior College, Alimosho; Community Junior Grammar School, Ipaja; Ipaja Junior College, Alimosho; Community Senior Grammar School, Alimosho; Jakande Estate, Comprehensive, Senior College, Alimosho; Abesan Senior High School, Alimosho; Abesan Comprehensive Junior High School, Alimosho; and Abesan Junior High School, Alimosho.

Pharmacists. These are significant achievements.”

Discussing the challenges that limit female pharmacists’ opportunities for early leadership, such as balancing family and work, and securing a conducive work environment that supports both career development and childcare, she acknowledged that these issues can be resolved through dialogue and understanding between pharmacists, families, and workplace management. She further stressed the importance of diversification and versatility for female pharmacists, highlighting that, while these areas are challenging, they are achievable with effort.

“Other challenges include the need for diversification and versatility among lady pharmacists. They must build

capacity in diverse areas, becoming multipurpose professionals with skills beyond their academic qualifications. By doing so, they will become sought-after professionals, with unique abilities. It is also vital that they work on their attitude, social relationships, and self-development to add value to their academic achievements,” she explained.


The top lady pharmacist in Nigeria also underscored the importance of professional merit, value, and commitment, which she said foster a sense of belonging and motivation. At every level, she observed, recognition is essential for performance and job satisfaction.

Growing credibility and influence are crucial leadership

pillars, and she urged female pharmacists to aspire to leadership positions within the Society. She assured that ALPs branches across the states will continue to build relationships within PSN’s key leadership groups and engage in projects affecting various departments. She also encouraged her members to propose innovative solutions to longstanding challenges.

For Oyim, the welfare of pharmacists in hospital and administrative roles remains a significant task for the incoming PSN leadership. He called for improvements in their working conditions, enhanced welfare packages, adequate staffing, and recognition of their contributions to further boost their productivity. These, he noted, should be a key focus of the new leadership.

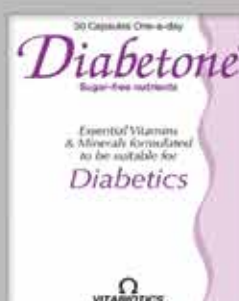
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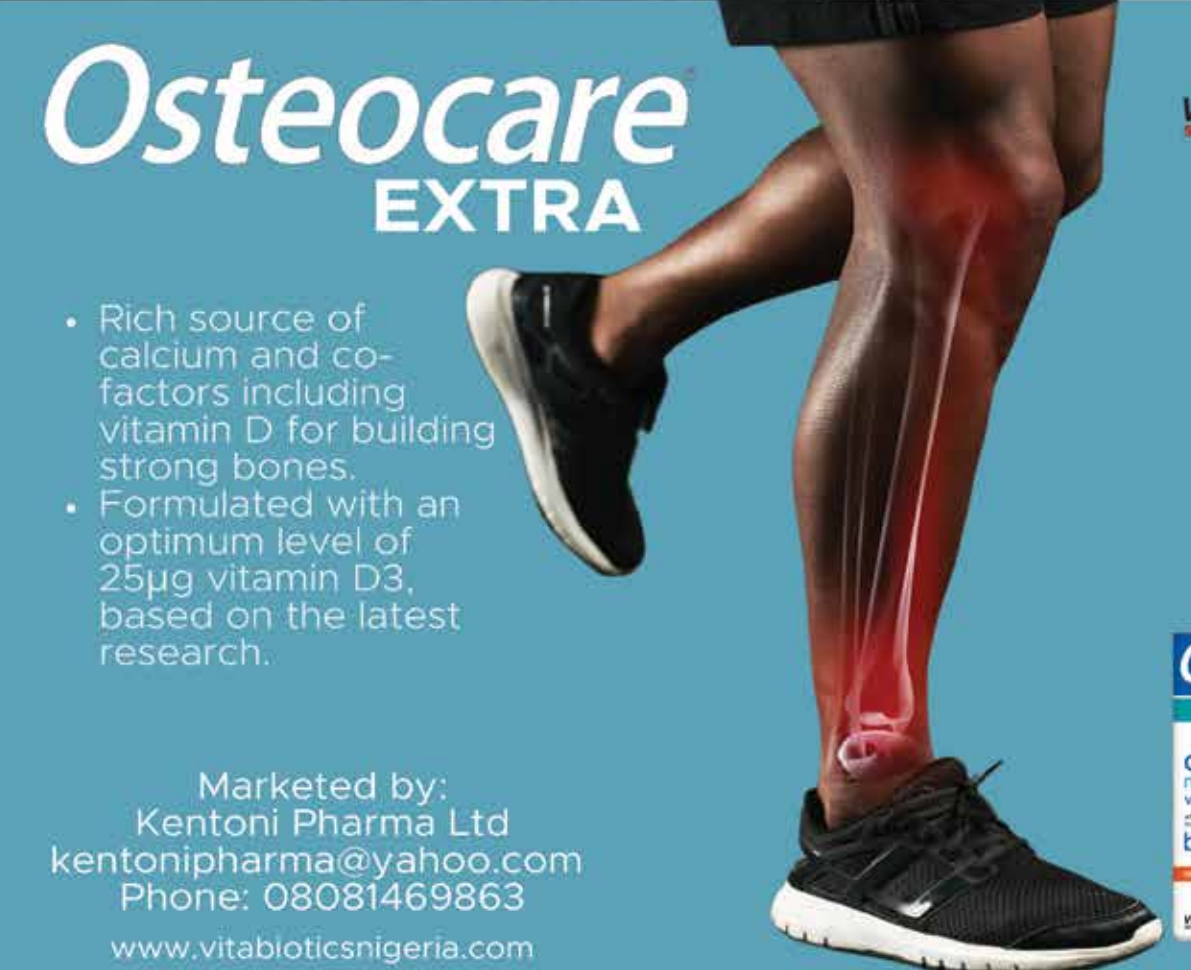
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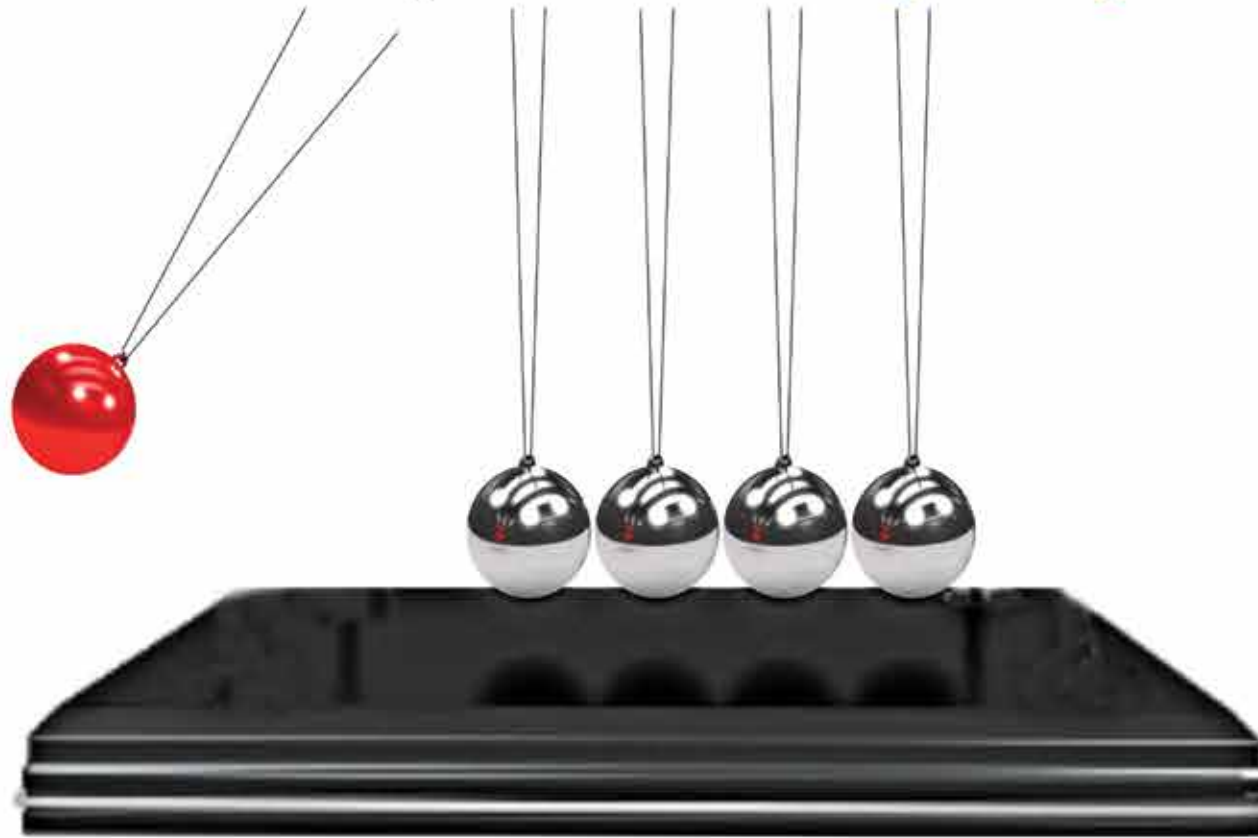


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Mega Lifesciences unveils diabetes management app, We Care

By Temitope Obayendo

In celebration of World Diabetes Day 2024, themed "Diabetes and Wellbeing," Mega Lifesciences has launched the We Care Diabetes App—a pioneering mobile platform aimed at transforming diabetes management across Nigeria. This launch comes at a crucial time, with diabetes becoming a growing global health crisis, particularly in Nigeria, where over 11 million people live with the disease.

The We Care Diabetes App, according to the pharmaceutical company, is designed to provide real-time support to diabetes patients. It enables users to monitor their blood glucose levels, access professional health coaching, and store their medical history, all through a user-friendly interface. By offering advanced remote care, the app addresses the pressing need for accessible healthcare, especially in rural and underserved regions where such services may be limited.

The app was unveiled during the 45th Annual General Meeting and Scientific Conference of the Endocrine and Metabolism Society of Nigeria (EMSON) in Abeokuta, Ogun State. The event, themed "Diabetes and Technology," brought together Nigeria's leading endocrinologists and healthcare professionals to discuss the role of digital innovations in enhancing diabetes care. The launch of the We Care Diabetes App was a key moment, reinforcing Mega Lifesciences' dedication to improving healthcare access. Their partnership with EMSON for the symposium further demonstrated their commitment to advancing diabetes care through education and technology.

Speaking at the launch, Mr Maneesh Mehra, managing director of Mega Lifesciences, West Africa, stated,



Some members of the Mega Lifesciences Nigeria team on ground at the symposium.

"The We Care Diabetes App is not just a technological innovation—it empowers patients to take control of their health. Through this app, diabetes patients can monitor their condition, track progress, and engage with healthcare professionals from the comfort of their homes. This aligns with our goal to make healthcare accessible to all, particularly in areas where medical facilities are limited."

Also in attendance was Dr Binu Joy, CEO of Health@Home, the digital division of Mega Lifesciences. Dr Joy highlighted the importance of data-driven, personalised care for patients, saying, "The digital healthcare landscape is evolving rapidly, and with the We Care Diabetes App, our focus is on providing precision and personalised care to each patient. The platform goes beyond diabetes

monitoring—it offers patients visibility and autonomy in managing their condition, while fostering a community of care."

Binu also emphasised the app's ability to bridge the communication gap between healthcare providers and patients, stating, "One major challenge for both patients and doctors is the lack of real-time data and communication. The We Care Diabetes App addresses this by enabling continuous interaction, allowing doctors to offer timely interventions based on real-time data." He reiterated the company's commitment, saying they aim to provide solutions that tackle healthcare challenges and help patients live healthier, longer lives through digital tools.

The Health@Home CEO further stated that the new diabetes app offers multiple features that enhance diabetes

management, such as blood glucose monitoring, which allows patients to log and track their daily readings and gain valuable insights into their health. "It also includes real-time health coaching from certified professionals to guide patients in managing their diabetes more effectively. Additionally, users can store and share their medical records, lab results, and prescriptions with healthcare providers, which improves the efficiency of consultations," he said.

Mr Amit Singh Raguvanshy, head of the Chronic Care team at Mega Lifesciences, explained that the app was designed to meet the needs of diabetes patients by guiding them through every aspect of managing their condition.

In a country like Nigeria, where access to healthcare can be inconsistent, the We Care Diabetes App offers an innovative solution to many of the challenges faced by diabetes patients. Prof. Michael Olamoyegun, a consultant endocrinologist at Ladoko Akintola University of Technology Teaching Hospital, highlighted the app's potential to fill critical gaps in diabetes care: "Many patients, especially in remote areas, struggle with late diagnosis and lack of timely treatment. The We Care Diabetes App bridges this gap by equipping patients with the tools to monitor their health and seek professional guidance remotely."

Olamoyegun further added, "When patients consistently track their health data, doctors can provide more tailored and timely treatment, significantly improving diabetes management outcomes."

As the world observes World Diabetes Day, Mega Lifesciences, through the We Care Diabetes App, takes a meaningful step towards addressing the campaign's core theme: access to care. By offering advanced diabetes management tools via a mobile platform, the app empowers patients to take control of their health, wherever they are.

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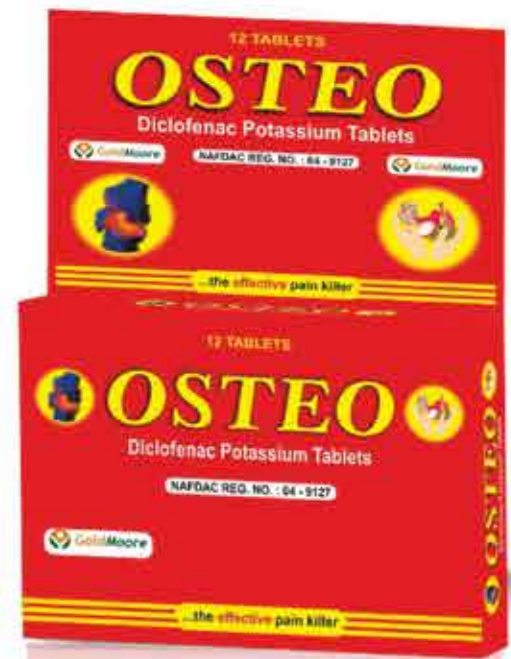
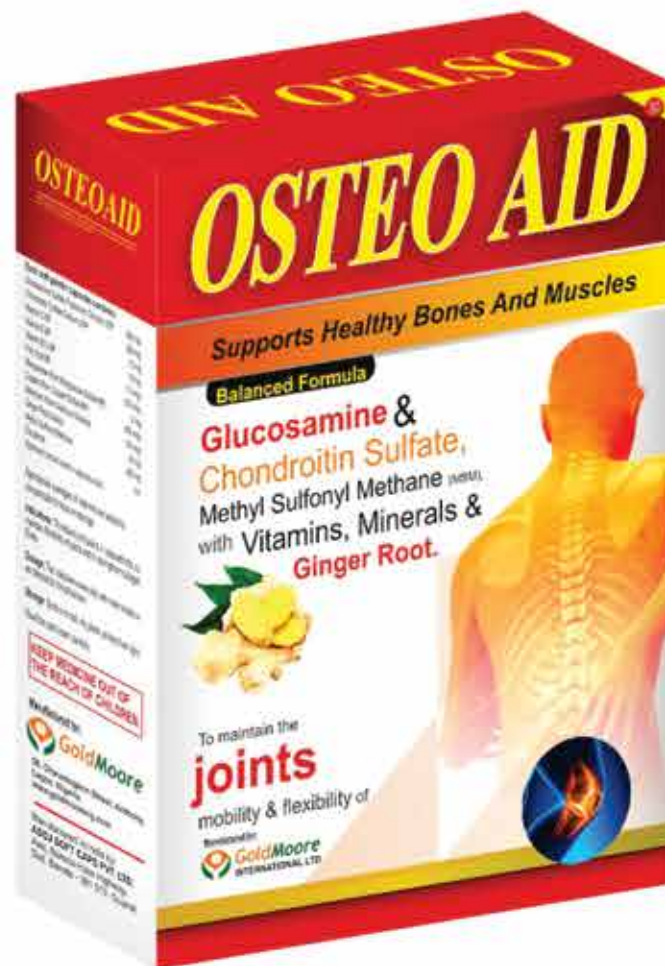
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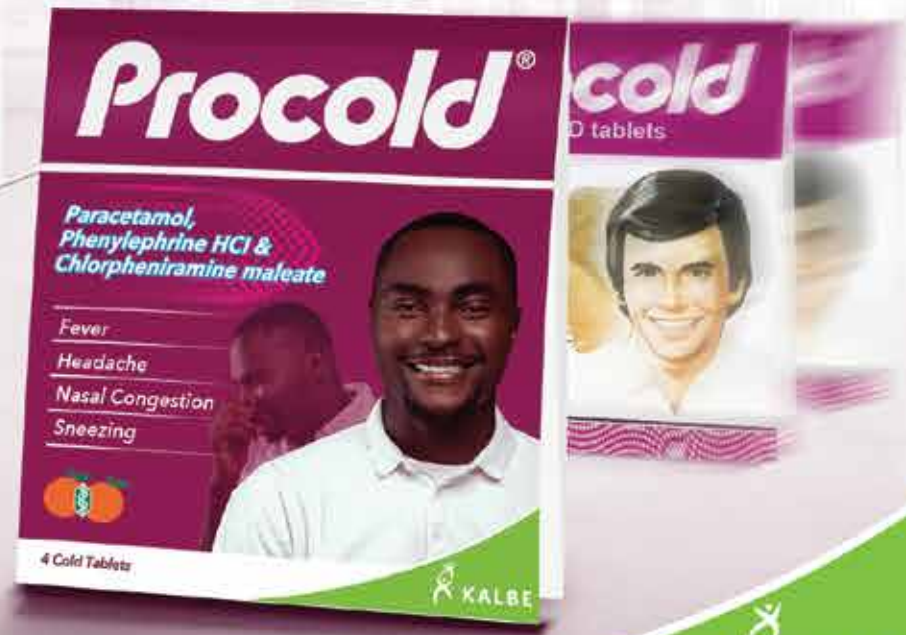
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Future of Nigerian pharma industry is nutraceuticals – Vaswani

Mr Mahesh Vaswani, an accomplished technocrat in the pharmaceutical industry and managing director of SK Medicines Nigeria Limited, has lived in Nigeria for over 50 years. In this interview with Moses Dike, he shares his experiences in the Nigerian pharmaceutical industry and provides insights on how to maximise its potential. **Excerpts:**



Mahesh Vaswani

Could you give us a brief profile of yourself, your childhood, and education?

My name is Mahesh Vaswani. I graduated from Maharaja Sayajirao University in Baroda, India. I have lived and worked in Nigeria for over 50 years, gaining extensive experience as an executive in both domestic and international operations. My career has involved handling multi-channel products and marketing, including start-ups and established organisations.

From 1996 to 2012, I served as chief executive officer of Medreich Nigeria Limited, where I led operations and strategic direction. I managed cross-functional teams and oversaw four regional managers and over 200 employees. With the support of my team, we turned the company around, achieving high profitability and positioning it

among the top five in the country. We also developed strategic alliances across West Africa.

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Medreich Nigeria Limited products in 2012, I had the opportunity to establish a new pharma marketing company, SK Medicines Limited, where I currently serve as chief executive officer. SK Medicines offers over 120 products, including multivitamins, eye preparations, antibiotics, and a wide range of cardiovascular products, all registered with the same manufacturer, Medreich Limited, India.

How would you describe your experiences in the Nigerian pharmaceutical industry?

I have been in Nigeria for over 50 years. Growing up, I saw how substandard products were being freely sold to the public. This deeply affected me, and it was always at the back of my mind. It was one of the reasons I decided to pursue a career in the pharmaceutical industry. From the outset, our mission has been to provide quality medicines at affordable prices for

honorary fellowship of the Society for Pharmaceutical Sales and Marketing of Nigeria (SPSMN). What does this award mean to you, and why do you think you were recognised?

I am sincerely grateful to the SPSMN for this honour, which shows that our work is being observed. This recognition came at a time when I was feeling down, due to the enormous economic challenges facing business owners in the country. The award has uplifted my spirits.

As an industry stakeholder in Nigeria, what are some of the challenges facing the pharmaceutical sector that you believe require urgent attention?

A healthy nation is a wealthy nation. Concessions should be given to all stakeholders in this industry. Waivers and foreign exchange should be made available. In terms of indigenous manufacturing, substantial infrastructural support is needed to attract investors. Preventive medicines, particularly vaccines, need far greater attention from policymakers. The regulatory body should also be empowered to combat the issue of fake products.

As managing director of SK Medicines Ltd, could you tell us more about the company and your efforts to advance its fortunes within the Nigerian pharmaceutical space?

Our motto is "health for all", and our mission is to provide premium quality medicines at affordable prices. We started 29 years ago, setting a benchmark for quality products at reasonable prices. Many in the pharmaceutical industry have copied not only our packaging but also our labels and designs. My primary goal is to work hand in hand with all stakeholders and regulators, including NAFDAC, to eradicate fake medications from the country.

Having lived in Nigeria for over 50 years, what do you see as the key potentials of the country, particularly within the pharmaceutical industry, that need to be harnessed?

Nigeria is a blessed country—God has a special love for her. In terms of the pharmaceutical industry, there are countless untapped opportunities. Public awareness and basic hygiene practices can significantly reduce the burden of acute and seasonal diseases. The future lies in nutraceuticals. Nigeria's land is blessed, and this potential must be explored carefully.

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Morinda lucida: The brimstone against diseases

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



Morinda lucida

Morinda lucida Benth, from the Rubiaceae family, is a tropical rainforest tree commonly known as the "Brimstone tree." In Nigeria, it is called *oruwo* or *ruwo* in Yoruba, *huka* or *eze-ogu* in Igbo, and *njisi* in Hausa. It is also known as a "nutrient factory." In Togo, it is referred to as *amake* or *atak ake*.

Constituents

Phytochemical analysis of Morinda lucida extracts has revealed the presence of tannins, alkaloids, steroids, saponins, flavonoids, phenols, and anthraquinones. The plant is also rich in vitamins A, K, and E, along with moderate amounts of proximate compounds such as carbohydrates, protein,

fat, fibre, ash, and moisture.

Preparations

Morinda lucida is available in various forms, including the whole plant, leaves, stem bark, and roots. The root bark or leaves can be used fresh, pounded, chopped, or boiled. They can also be prepared as decoctions, infusions, or plasters.

Pharmacological actions and medicinal uses

The presence of anthraquinones, steroids, alkaloids, and tannins in Morinda lucida explains its potential in managing ailments such as constipation, heart conditions, malaria, and diarrhoea. It is one of the four

most commonly used plants in traditional medicines for treating fevers.

Plant extracts have been reported to show anti-inflammatory, analgesic, antibacterial, anti-malarial, gastric motility, anti-hepatotoxic, vermifugal, antipyretic, anti-thrombotic, antioxidant, and cardio-protective properties. In simpler terms, it detoxifies and protects the liver, kills intestinal worms, reduces fever, prevents blood clots, combats free radicals, and safeguards heart muscles. Additionally, inhibitory effects on cancer tumours in mice have been reported. The richness of the plant in vitamins A and E, two powerful antioxidants, makes it valuable in managing degenerative diseases such as atherosclerosis.

In Central and West Africa, infusions and decoctions of the root, bark, and leaves are used to treat a range of ailments, including trypanosomiasis, diabetes, insomnia, dysentery, cerebral congestion, stomach ache, ulcers, wounds, abscesses, chancres, microbial infections (including leprosy and gonorrhoea), and worm infestations. In South-West Nigeria, a filtrate of macerated fresh leaves in fresh palm wine is used orally to control blood sugar levels in suspected diabetic patients.

The leaf and stem bark

are reported to have anti-spermatogenic properties. Additionally, the leaves are used to treat and improve all forms of infertility in women. Locally, the Brimstone tree is also used to treat irregular menstruation, insomnia, jaundice, and fever during childbirth.

Adverse effects

No known adverse effects have been reported for Morinda lucida, even after acute and sub-acute toxicity studies conducted on Wistar rats.

Economic uses and potentials

The wood of Morinda lucida yields yellow to red dyes. In Nigeria, Gabon, and Congo, it is used to dye textiles and baskets scarlet red and pale green, respectively. The bitter roots are used to flavour food and alcoholic beverages, and in Nigeria, they are popular as chewing sticks. The wood is also useful for making charcoal, construction, mining props, furniture, canoes, poles, and fuelwood. Additionally, the leaves are used for cleaning and scouring. There is great potential in the cultivation, processing, sale, and distribution of Morinda lucida and its products.

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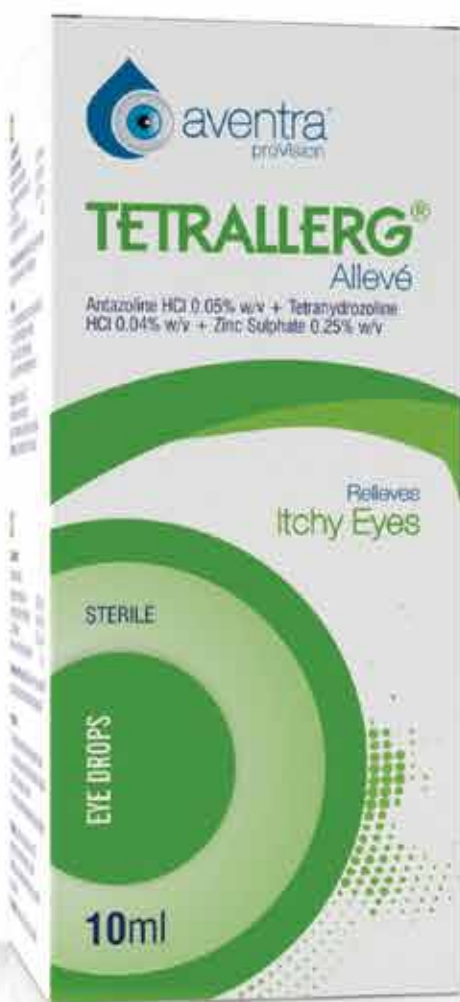
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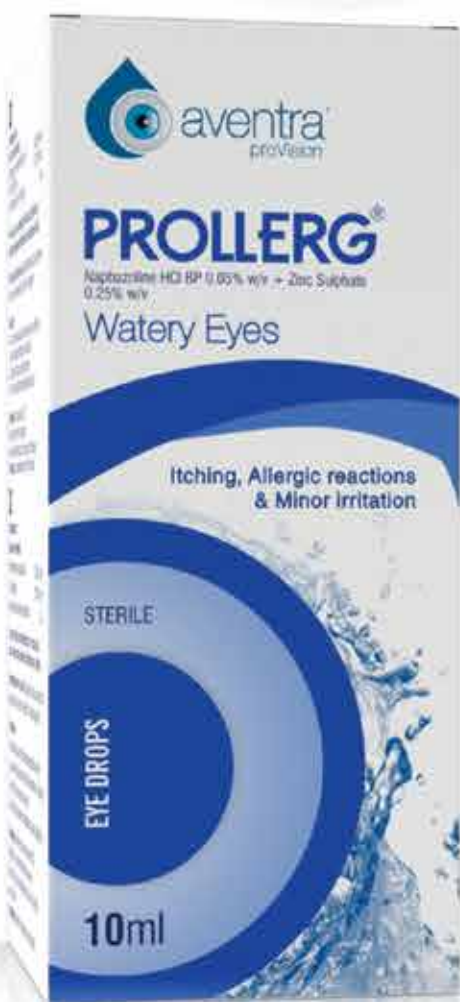
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Micro Labs acquires Swipha to expand footprint in Nigeria, Africa

Speaking on the benefits of the acquisition, Sharma said, "The acquisition will create significant value by consolidating both companies' portfolios and their

As part of its efforts to expand its footprint in Nigeria and across the African continent, Micro Labs Limited (Micro Labs), India, has acquired Swiss Pharma Nigeria Limited (Swipha), a leading pharmaceutical company in Nigeria.

Micro Labs officially disclosed the acquisition to *Pharmanews* on Monday, confirming that it will retain all existing Swipha staff.

Micro Labs Limited, India, is a fully integrated pharmaceutical company primarily engaged in the manufacture and marketing of branded generic formulations in India and emerging markets. The company specialises in producing high-quality, affordable generic medicines across a diverse range of therapeutic areas, with several formulations listed on the WHO pre-qualification list, including, but not limited to, anti-malarial drugs.

According to the Managing Director of the company in Nigeria, Mr Hemant Sharma, who is now also chairman of Swipha, Micro Labs' portfolio includes cardiology, dermatology, pain management, dermatology, ophthalmology, veterinary medicine, and neurology.

Headquartered in Bangalore, Karnataka, India, Micro Labs has a strategic network of 14 formulation plants, including an injectable unit and a bulk drug facility. The company has established international offices in key locations such as the United States, the United Kingdom, Germany, Australia, and Nigeria, with representative offices in other emerging markets.

In Nigeria, Micro Labs operates



L-R: Executive Director, Micro Labs India, Mr Ashok Jain; Director, HR, Swipha, Marcellina Iluke; former MD, Swipha, Mr Frederic Lieutaud; Business Development & Licensing Director, Swipha, Mr Abbas sambo; Finance Director, Swipha, Mrs Meeta Shah; MD, Micro Nova Pharmaceutical Ind. Ltd/Chairman, Swipha, Mr Hemant Sharma; Sales Director, Swipha, Mr Ibrahim Ugbede; Chief Commercial Officer, Micro Labs India, Elavia Dinyar; Director and Principal Investor, Micro Labs India, Anand Surana; Supply Chain Director, Swipha, Bright Chigbu and Technical Director, Swipha, Mrs Yetunde Adigun, shortly after an important meeting at Swipha office recently.

through Micro Nova Pharmaceutical Ind. Limited, which has been active in the Nigerian pharmaceutical industry for over a decade, and has emerged as a market leader in specialised therapeutic segments.

Swipha, on the other hand, is a leading pharmaceutical company, incorporated in 1976, dedicated to providing high-quality, affordable medicines to improve healthcare outcomes in Nigeria and Africa. Swipha is engaged in

the manufacturing, marketing, and distribution of branded generics and INNs, with a portfolio that includes therapeutic classes such as the central nervous system, anti-malarials, anti-infectives, cardiovascular, and anti-diabetic medications.

Swipha was also the first company in Nigeria, as well as in West and Central Africa, to attain WHO pre-qualification for Zinc (anti-diarrhoeal) and Sulfadoxine-Pyrimethamine (anti-malarial)

WHO journey, with the aim of providing affordable, quality medicines to the people of Nigeria and Africa. It will also expand the range of treatments for malaria, infections, cardiovascular, and metabolic conditions, among others."

Sharma added, "The acquisition will provide more comprehensive treatment options. Swipha's distribution network and CRM system will improve supply chain efficiency, while its WHO-approved plant will enable Micro Labs to support manufacturing and

export products to neighbouring countries.

"With Micro Labs' presence across the entire pharmaceutical value chain – Research and Development (R&D), Active Pharmaceutical Ingredients (APIs), and Finished Formulations – the synergies will reduce costs. Both companies are known for their quality and business acumen, making this acquisition a strategic move to leverage their combined strengths for greater success."

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How business leaders can win friends and influence people

By Pharm. Sesan Kareem

Dale Carnegie's timeless classic, "How to Win Friends and Influence People," offers invaluable insights into human relationships and effective communication. While the book was originally written for individuals, its principles can be applied equally well to business leaders seeking to build strong teams, foster a positive company culture, and achieve organisational success.

As a business leader, I have used these principles to improve customer satisfaction, build strong relationship and inspire my team. Below are ten principles every business leader must imbibe.

1. Become genuinely interested in others

One of the most fundamental principles of effective leadership is to genuinely care about the people you work with. By taking a genuine interest in your employees' lives, both personally and professionally, you can create a more positive and supportive work environment. Ask about their families, hobbies, and goals. Show that you care about their well-being and are invested in their success.

2. Smile and make others feel important

A warm smile can go a long way in making others feel welcome and valued. When you greet your employees with a smile, it sends a message that you're happy to see them and that they're important to the team. Additionally, make a conscious effort to make others feel important by recognising their contributions, acknowledging their achievements,

and expressing appreciation for their hard work.

3. Remember names and use them frequently

Names are a powerful tool for building rapport and making people feel special. By remembering and using people's names, you demonstrate that you care about them and their well-being. This simple gesture can go a long way in building trust and fostering positive relationships within your team.

4. Be a good listener

Effective listening is essential for building strong relationships and understanding the needs and perspectives of your team members. When you actively listen to others, you show that you value their opinions and are interested in what they have to say. This can help to build trust, improve communication, and create a more collaborative work environment.

5. Talk in terms of the other person's interests

People are more likely to be receptive to your ideas when you present them in a way that benefits them. By understanding your employees' interests and needs, you can tailor your communication to be more persuasive and effective. For example, when discussing a new project, explain how it aligns with their career goals or benefits the team as a whole.

6. Make the other person feel important

Everyone wants to feel valued and appreciated. By recognising and acknowledging others' accomplishments, you can boost their self-esteem and create a positive

and supportive work environment. This can be as simple as offering a word of encouragement, providing constructive feedback, or publicly recognizing someone's contributions to the team.

7. Give sincere appreciation

Expressing gratitude and appreciation is a powerful way to build relationships and foster goodwill. By recognising and acknowledging others' contributions, you can create a positive and supportive work environment. Make a conscious effort to express your appreciation for your employees' hard work and dedication. This can be done through formal recognition programs, informal praise, or simply by saying "thank you."

8. Avoid arguments

Arguments are often counterproductive and can damage relationships. By focusing on finding common ground and avoiding confrontational language, you can resolve conflicts peacefully and maintain positive relationships within your team. When faced with a disagreement, try to see things from the other person's perspective and look for ways to find a mutually beneficial solution.

9. Turn enemies into friends

Even in challenging situations, it is possible to build bridges and create positive relationships. By focusing on common interests and finding opportunities for cooperation, you can transform adversaries into allies. This can be particularly important in business, where conflicts can arise between departments, teams, or individuals with competing interests.



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

10. Be enthusiastic about your work

Your enthusiasm is contagious. When you're passionate about your work, it can inspire and motivate your team members to do their best. By showing your excitement and enthusiasm for your company and its goals, you can create a positive and energising work environment.

By applying these principles, business leaders can create a more positive, productive, and fulfilling work environment. By building strong relationships with your team members, fostering a culture of trust and respect, and inspiring others to achieve their best, leaders can achieve both personal and professional success.

ACTION PLAN: I show genuine interest in others, I make other people feel important, and I give sincere appreciation.

AFFIRMATION: I am action-oriented. I am a goal-getter. I am blessed and highly favoured.

Sesan Kareem is the visionary Founder of HubPharmAfrica, a patient-centric digital pharmacy, www.hubpharmfrica.com, and Principal Consultant at the Sesan Kareem Institute, www.sesankareem.com.ng. To engage SK for your training and speaking engagements, send an email to sesankareem2@gmail.com.

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Idemyor to address global healthcare, climate change at ASHP 2024

By Ola Aboderin



Professor Vincent Idemyor

Renowned scholar from the University of Port Harcourt (UNIPORT), Professor Vincent Idemyor, is set to play a leading role at the prestigious American Society of Health-System Pharmacists (ASHP) Clinical Meeting, taking place in New Orleans, Louisiana, on 10 December 2024.

According to a statement from UNIPORT management, Professor Idemyor will not only deliver a keynote address but will also moderate a pivotal session focused on the theme "Preparing Healthcare Service Delivery for Climate Change Impacts." The ASHP Clinical Meeting, which attracts over 20,000 pharmacy professionals from across the globe, is one of the largest gatherings aimed at advancing pharmacy practice and healthcare innovation.

In his plenary speech, Idemyor will explore the growing intersection between climate change and healthcare, highlighting how shifts in the global climate are already exacerbating a variety of health conditions. He will examine both the immediate and long-term impacts of climate change on public health, with a particular focus on respiratory diseases, cardiovascular conditions, and mental health disorders.

A key aspect of his presentation will centre on the significant impact of rising temperatures on mental health, particularly in relation to stress, anxiety, depression, and grief. He will also address the lesser-known issue of how heat exposure can alter the way medications interact with the body, urging both healthcare providers and patients to be aware of the risks associated with certain treatments during extreme heatwaves. He will emphasise that failing to address these factors could lead to adverse health outcomes, as medications may behave unpredictably in hotter environments.

In addition to these topics, Idemyor will call on the healthcare profession to play a proactive role in addressing climate-related health risks. He will argue for the need for urgent policy changes within healthcare systems to ensure they are prepared to manage the challenges posed by climate change.

The statement from UNIPORT also revealed that Idemyor will advocate for the integration of climate science into medical education and professional development programmes, ensuring that future healthcare providers are equipped to tackle the evolving health threats posed by a changing climate.

Additionally, Idemyor will discuss strategies for effectively communicating the links between climate change and health to policymakers and the general public, stressing the ethical responsibility healthcare professionals have to become climate advocates. He will propose the establishment of climate-health task forces within healthcare institutions, aimed at driving sustainable practices and influencing climate policy.

Recognising climate change as the greatest threat to public health, Idemyor will echo the warnings of over 200 medical journals calling for urgent action to reduce heat-trapping emissions. His address will remind healthcare professionals that their role extends beyond treating symptoms, to addressing the root causes of health challenges, including environmental factors. As he will argue, safeguarding global health is inextricably linked to the fight against climate change.

Idemyor's contributions to this vital global dialogue will underscore the critical need for action, emphasising that a healthier future for all depends on confronting climate change head-on.

Events in Pictures



L-R: Dr Kunle Tometi, Emmanuel Ezirim, Prof. Cyril Usifoh, Dr Anthony Ikeme, Dr Simon Agwale, Dr Teresa Pounds, Mazi Sam Ohuabunwa, Prof. Barry Bleidt, Prof. Charles Esimone, Dr Aloy Ibe, and Dr Jude Nwokike at the NAPPSA conference, held recently.



L-R: Emmanuel Ezirim, Dr Aloy Ibe, Dr Adeleye Ogunkami, Dr Eucharia Igwe, Dr Kunle Tometi, Dr Teresa Pounds, and Dr Anthony Ikeme.



L-R: Dr Anthony Ikeme, managing editor, AJPPS; Dr Amanda Kitten, editor, AJPPS; Dr Kathleen Lusk, associate editor, AJPPS; and Dr Patrick Nwakama, editor-in-chief, AJPPS.



A cross-section of participants at the NAPPSA 5th Annual 5K Run/Walk at the 18th Scientific Conference and Exposition.

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I'll leverage my BOF chairmanship experience to resolve PSN challenges - Adagadzu

Dr Joel Ewuga Babakandzhi Adagadzu is an accomplished pharmacist and management expert, who served the Plateau State Government and the Federal Government for 35 years, until his retirement in June 2011. In this exclusive chat with **Temitope Obayendo**, he shares how his wealth of experience will be instrumental in solving the challenges faced by pharmacists and the pharmacy profession, should he emerge as the new president of the Pharmaceutical Society of Nigeria (PSN). Excerpts:

As the outgoing BOF chairman, what informed your decision to vie for the seat of the PSN president?

I have served the PSN in many capacities before becoming chairman of the Board of Fellows. By the time I assumed that role, I had very lofty plans to make the Fellows more visible and to have a positive impact on pharmacists generally. I was determined to collaborate closely with the PSN leadership to raise the profile of the pharmacy profession and make pharmacists proud professionals in their own right.

For some reasons, my expectations have not been fully met. Rather, the chairmanship of the Board has provided me with some glimpses of the larger picture of the PSN and its growing challenges. I saw how frustrated and disillusioned many pharmacists have become in recent years. I realised that I could not address the myriad problems confronting the PSN from my position as BOF chairman. The authority and capacity to do so reside in the presidency of the PSN. This sparked my interest in serving the profession at a higher level.

As I was pondering over this, I was approached by a group of colleagues who convinced me to contest for the PSN presidency, having found me worthy. After some thought, I accepted their request in the interest of our dear profession. It then occurred to me that God had made me chairman as a prelude to becoming president. I realised that my experiences as chairman will come in handy if I become president.



Dr Joel Ewuga B. Adagadzu

It is a matter of simply stepping up and hitting the ground running.

What specific plans do you have to strengthen the role of pharmacists in Nigeria's healthcare system, particularly in primary healthcare delivery?

In terms of strengthening the role of pharmacists in Nigeria's healthcare system, particularly in primary healthcare delivery, my background as a former director of food and drug services in the Federal Ministry of Health provides a solid foundation. I have always advocated for

pharmacists' interests, such as pushing for the creation of more vacancies and the consultant cadre. I plan to continue advocating for more positions for pharmacists, especially in primary healthcare, and to push for better conditions of service to motivate pharmacists to serve diligently.

I will also work to mend inter-professional rivalries among healthcare workers, which have hindered the role of pharmacists within the system. By fostering collaboration and mutual respect, I hope to restore unity within the healthcare sector, allowing pharmacists to play a pivotal role in achieving universal health coverage. Improving relations between the PSN and pharmacists in government will be a priority, ensuring a conducive environment for pharmacists to thrive.

In the face of increasing regulatory challenges and drug counterfeiting in Nigeria, what strategies would you implement to collaborate with regulatory bodies such as NAFDAC and PCN, and ensure the effective enforcement of policies to curb counterfeit drugs and promote patient safety?

Addressing the issue of drug counterfeiting is a top priority. While NAFDAC estimates that 15-25 per cent of drugs in Nigeria are counterfeit, I believe more accurate data is needed. My first strategy would be to encourage a comprehensive

survey to establish the true extent of counterfeiting, in collaboration with bodies like WAHO and WHO. Once we have reliable data, we can effectively lobby the government to strengthen regulatory bodies such as NAFDAC and PCN. Additionally, I will advocate for better funding for these bodies to ensure they can carry out their duties effectively.

Collaboration with Customs and other security agencies will be critical in the fight against counterfeit drugs. Furthermore, public enlightenment campaigns on the dangers of counterfeit drugs will be essential, and I will seek the cooperation of the media, health professionals, NGOs, and civil society in this effort.

Aside from the above, in what other ways do you intend to build the pharmacy profession?

Beyond these strategies, I intend to work closely with the pharmaceutical industry to boost local drug production, including vaccines, and foster reciprocity with countries that dominate drug exports to Nigeria. Government support will be vital, and I will advocate for policies that favour the growth of local drug manufacturing.

I also plan to engage with other ministries, agencies, and NGOs to create more job opportunities for pharmacists. Improving the pharmacy curriculum in universities is another area of focus, ensuring that our graduates are well-equipped for the demands of the profession.

Finally, I will promote mentorship programmes to strengthen the relationship between older and younger pharmacists, ensuring the profession continues to grow based on strong ethical and moral values. My goal is to ensure the pharmacy profession thrives and remains a cornerstone of healthcare delivery in Nigeria.

My vision is to drive initiatives that promote innovation and inclusivity in PSN – Foyibo

Dr (Mrs) Ejiro Oyovwin Foyibo is an eminent community pharmacist, with over 28 years of experience. A native of Delta State, she has dedicated her career to providing quality pharmaceutical care while also contributing significantly to leadership within the Pharmaceutical Society of Nigeria (PSN). In this engaging interview with **Temitope Obayendo**, the PSN presidential aspirant shares how passionate she is about service and providing solutions to the many challenges facing pharmacists and the pharmacy profession. Excerpts:

As the immediate past vice-president (South) of the PSN, what informed your decision to vie for the position of PSN president?

My decision to run for the presidency stems from a deep commitment to the PSN's mission. I have a strong passion for service and problem-solving, and I always aim to inspire others. After over 11 years of serving on NEC/Council and working with four past presidents, I've gained invaluable insights into the Society's challenges and opportunities. I believe my experience equips me to provide effective leadership and foster collaboration. My vision is to drive initiatives that align with our goals, promoting innovation and inclusivity so that the PSN continues to thrive and serve its community.

What specific plans do you have to strengthen the role of pharmacists in Nigeria's healthcare system, particularly in primary healthcare delivery?

To strengthen the role of pharmacists in primary healthcare, I plan to advocate for the integration of pharmacists into multidisciplinary healthcare teams. It is essential to work with policy makers to establish this role in primary care.

Additionally, I aim to enhance training programmes for pharmacists, equipping them with skills to manage chronic diseases, offer counselling,



Dr (Mrs) Ejiro O. Foyibo

and promote health education. By increasing community engagement, pharmacists can play a more visible role through health fairs and outreach programmes.

I will also promote collaboration between pharmacists, physicians, and other healthcare professionals to ensure holistic care and improved patient outcomes. Expanding telepharmacy services is another priority, as it would increase access to pharmaceutical care in underserved areas. Furthermore, I

would work towards incorporating primary healthcare services, such as immunisations, into the pharmacy curriculum by collaborating with relevant regulatory bodies.

In the face of increasing regulatory challenges and drug counterfeiting in Nigeria, what strategies would you implement to collaborate with regulatory bodies such as NAFDAC and PCN and ensure the effective enforcement of policies to curb counterfeit drugs and promote patient safety?

Addressing regulatory challenges and drug counterfeiting requires a multi-faceted approach. I would focus on strengthening partnerships with regulatory bodies such as NAFDAC and PCN through regular communication and collaborative meetings. Developing training programmes for pharmacists to help them recognise counterfeit drugs and understand regulatory requirements is crucial in empowering them as frontline responders. Public awareness campaigns are also vital, and I would involve community pharmacists in educating the public on how to identify legitimate medications and the dangers of counterfeits.

Additionally, I will create streamlined reporting mechanisms for pharmacists to report suspected counterfeit drugs promptly. Advocacy for stricter penalties against counterfeiters and better pharmaceutical tracking systems is another important aspect. Working with NAFDAC and PCN to conduct joint inspections of pharmacies and suppliers will ensure regulatory compliance and the removal of

counterfeit drugs.

Lastly, I will support the replication of policies such as the Coordinated Wholesale Centres, starting with Kano, to safeguard the pharmaceutical supply chain and ensure integrity across all states.

Aside from the above, in what ways would you drive an inclusive agenda for female pharmacists in organised pharmacy activities?

Driving an inclusive agenda for female pharmacists involves several key initiatives. I plan to establish mentorship programmes that connect emerging female pharmacists with experienced leaders who can provide guidance and support. Leadership training workshops will be essential in equipping women with the skills needed for leadership, negotiation, and public speaking. I will also advocate for policies that ensure equal representation of women in decision-making roles, pushing for gender quotas where necessary.

By highlighting the contributions of female pharmacists through awards and recognition at conferences, we can create visibility and inspire more women to step into leadership roles. It's also important to foster a supportive environment where female pharmacists can openly discuss the challenges they face, and I will facilitate forums for this purpose.

Finally, I will encourage the formation of collaborative networks and women's groups within the pharmacy sector, helping women share their experiences and support one another in navigating the political landscape.

I envision a PSN where members are valued, well-paid, organised and highly-motivated – Ayuba

Pharm. Tanko Ayuba is a distinguished Nigerian pharmacist and one of the contestants in the forthcoming presidential election of the Pharmaceutical Society of Nigeria (PSN). In this exclusive interview with **Pharmanews**, he shares his vision for the Society and discusses key issues affecting pharmacy practice in Nigeria. Excerpts:

How would you describe the performance of the outgoing president of the PSN?

The outgoing president has dedicated his time and energy to the role and achieved a great deal. He should be available to offer advice, clarify issues, and provide guidance. However, the position of PSN president is a continuous one, and I intend to build on his achievements, continue from where he stopped, introduce new initiatives, tackle emerging challenges, and move forward.

Why do you believe you have what it takes to become the next PSN president?

I have intentionally prepared myself for the PSN presidency from the time I graduated. That was why I joined the Kaduna State PSN executive committee as a young pharmacist in the early '90s. I held various positions, and eventually became the PSN chairman. I then advanced to the role of 1st deputy president and unofficial member of NEC.

Having gained substantial experience in PSN leadership over the years, I felt ready for the position of president and made an attempt to contest in 2015, which was unfortunately cut short. In 2021, I contested again, but the current president was the one favoured by



Pharm. Ayuba Tanko Ibrahim
FPSN, MIAD, MBA

Pharm. Tanko Ayuba

God to win. I accepted the result in good faith and was the only candidate among the contestants who attended his inauguration.

And now, here we are in 2024, and I am a candidate once more. I am resilient, tenacious, and filled with self-belief and a "can-do" spirit. I do not quit; I am a winner, and winners

don't quit! I am retired and have all the time needed to dedicate to the PSN presidency.

Pharmacy practice has evolved, with technology driving innovation in the field. How do you hope to leverage this to grow a better pharmaceutical industry in Nigeria?

Leveraging technology to drive innovation in Nigeria's pharmaceutical industry requires a multi-faceted approach. First, we need to enhance digital literacy among pharmacy professionals so they can effectively utilise technology. We should also invest in digital infrastructure, including high-speed internet and reliable power supply. Additionally, we should establish automated pharmacy systems in

hospitals and retail pharmacies and develop efficient logistics and supply chain systems to ensure timely delivery of medicines.

We will collaborate with young pharmacists and support them in leading our projects on Artificial Intelligence (AI) and Machine

Learning (ML). The disruption is here, and we must not be caught napping. Young pharmacists understand these topics better than we do, so we will fully involve them. We will lead together. By leveraging technology and implementing these strategies, Nigeria's pharmaceutical industry can experience significant growth, improved efficiency, and better patient outcomes.

What is the major focus of your campaign as a prospective PSN president? What are you bringing to the table?

My vision is for PSN to be recognised as a society whose members are valued, well-paid, well-organised, and highly motivated healthcare professionals, accessible to the public and responsible for the provision and rational use of safe, effective, and affordable medicines, pharmaceutical care, and the promotion of public health and quality of life.

Do you have any words of advice for other contestants, bearing in mind that you all are motivated to build a better pharmaceutical society in Nigeria?

My appeal to the other contestants is to run issue-based campaigns, avoiding sentiment, personal attacks, and negativity. I have instructed my supporters to remain civil and focus on the many positive qualities I possess. They should not engage anyone in arguments. We can disagree without being disagreeable. Elections will come and go, but pharmacy will remain.



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How I plan to mark my 100th birthday – Onuigbo, Nigeria's oldest pharmacist



Pharm. (Elder) Dick Onuigbo

Pharm. (Elder) Dick Onuigbo, Nigeria's oldest pharmacist, will be marking his centenary birthday in December this year. In this exclusive interview, conducted by Pharm. Emmanuel Obiora Okafor, the Abia State chairman of the Pharmaceutical Society of Nigeria (PSN), on behalf of Pharmanews, Onuigbo reminisces on his upbringing, education, professional career, passion for music, and the lifestyle modifications that have kept him active at nearly 100 years of age. Excerpts:

May we know your full name, sir?

My name is Dick Obichereihe Onuigbo.

According to our records, you are the oldest pharmacist in Nigeria, aged 99. And by God's grace, you're planning to celebrate your centenary birthday on 31 December this year. Congratulations, Sir! How does it feel to be 99 years old and counting?

I feel good, like an athlete who has completed a 100-metre race. It's been a long journey—sometimes tough, with uncertainties and surprises along the way. But there has also been joy, happiness, and success.

Tell us a bit about your early life. What were your childhood experiences like, and how did they shape who you are today?

I was born in Amachara, a town three miles west of Umuahia in present-day Abia State. My childhood was typical - I lived with my parents, did household chores, farmed, traded, and participated in ceremonies, dances, and church services.

I started school at the age of nine at home. I attended Methodist schools and completed my

secondary education at Methodist College, Uzuakoli. Growing up in a compound between the Methodist Church and the Methodist Hospital greatly influenced my life. The principles I learnt from the Methodist Church have remained with me.

How have time and age influenced your lifestyle, and how do you cope with the challenges that come with old age?

Throughout my life, I've remained committed to Methodist principles. Challenges come, but I face them like a Methodist—trusting God to guide my steps and making the best of every situation.

At nearly 100 years of age, we understand that you still play the piano at your local church. Can you tell us about your passion for music and other activities you still enjoy?

As I mentioned, Methodist teachings have deeply influenced me, including my love for music. The Methodist Hymn Book has been my companion since my school days and continues to inspire me. Methodism was born in songs, and music became a beacon in my life. I bought a piano in 1961 in Aba, and my passion for music has brought me immense joy. I read musical notes, sing solos and duets, and participate in choir practices and concerts.

Why and how did you decide to study Pharmacy at the School of Pharmacy, Yaba, from 1948 to 1950?

After completing secondary school at Methodist College, Uzuakoli, I qualified to study a higher course at Yaba College. It was a two-year course in Chemistry, Physics, Botany, and Zoology, which I completed in 1948.

While studying at Yaba, I interacted with students from the School of Medicine and School of Pharmacy, which piqued my interest in the medical field. I eventually applied to the School of Pharmacy and was admitted in the second year. My interest in the medical profession was also shaped by my experiences at Amachara Hospital.

Who were some of your colleagues and lecturers at the School of Pharmacy?

Our principal was a white man named A. T. Deaman. Malam Dikko taught Dispensing and Forensic Pharmacy, and Marcus taught Chemistry. Some of my classmates included E. O. Ashamu, Adefarasin, S. N. Onuoha, J. Udoh, Thomas Amadi, Gideon Akpan, and Miss Antia from Ghana.

You established Urban Chemists. Could you share your experience with running the business?

After completing my training in 1950, I worked in various government hospitals in Lagos, Yaba, Ebute-Metta, Okigwe, Port

Harcourt, and Ikot Ekpene. In 1956, I opened Urban Chemists in Yaba. It was a fulfilling practice. I applied the experience I gained from government hospitals and divided my pharmacy into four sections: a retail shop, a dispensing section, a consulting room, and a store.

We prepared mixtures, ointments, powders, and lotions. It was a laborious but lucrative practice, and I enjoyed every bit of it.

What was community pharmacy practice like during your time?

Pharmacy during my time was largely a practical profession. We compounded mixtures and dispensed them to patients based on their needs. For example, we made blood tonics, purgatives, and treatments for urinary tract infections.

While we did sell over-the-counter medicines, much of the work involved preparing and dispensing proprietary drugs. Patients treated us with respect, and Pharmacy was a trusted profession.

How do you relax, and what lifestyle modifications have you adopted to stay fit and active?

I relax by reading newspapers, novels, and music books, playing my keyboard, watching the news and sports, and taking walks. I make sure to exercise regularly, walk at least one mile every morning, eat balanced meals with plenty of vegetables, drink warm water, and take my siesta.

I also stay connected with family and friends, attend Sunday services, choir practices, and church meetings. I believe in taking things in stride, reducing stress where possible, and maintaining peace with everyone.

How are you planning to celebrate your centenary birthday, and how would you like to be remembered?

My centenary celebration is being planned by my children and grandchildren in Amachara, my hometown. The celebration began months ago, with my church choir honouring me on 27 July, followed by another celebration from the Umuahia-Ikwuano brethren. I want to be remembered for my moderation, humility, service to humanity, allegiance to God, and peaceful relationships with others.

Finally, Sir, what advice would you give to the younger generation of pharmacists on how to make the most of their profession?

My advice is to avoid greed, as it is the root of many vices. Be humble, love your neighbour, trust in God, and strive to live in peace with everyone. If you apply these principles in your pharmaceutical practice, all will be well. Thank you.

My centenary celebration is being planned by my children and grandchildren in Amachara, my hometown. The celebration began months ago, with my church choir honouring me on 27 July, followed by another celebration from the Umuahia-Ikwuano brethren. I want to be remembered for my moderation, humility, service to humanity, allegiance to God, and peaceful relationships with others.

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May & Baker marks 80th anniversary with CSR, hypertension walk

- Restates commitment to saving lives

By Ranmilowo Ojalumo



L-R: Head, Pharma Sales & Marketing, Mr Obinna Emeribe; Director of Finance, Mr Ayodeji Aboderin; MD/CEO, May & Baker Nig. Plc, Mr Patrick Ajah; Head, Human Capital Development, Mrs Emem Essien; Head, Pharma Plant Operations, Mr Silver Ajalaye and Head, Internal Control and Compliance, Mr Godwin Obiakor at the company's 80th anniversary on September 4, 2024.

The Managing Director of May & Baker PLC, Pharm. Patrick Ajah, has attributed the company's resilience and determination to continue saving lives as key factors that have sustained it through 80 years of operation. Founded on 4 September 1944 as Nigeria's first pharmaceutical company, and beginning local medicine

manufacturing in 1976, May & Baker recently celebrated its 80th anniversary.

Speaking at the event marking the milestone, Ajah reaffirmed the organisation's commitment to saving lives. He emphasised that May & Baker is unfazed by the exit of companies such as GSK from Nigeria, stating that the company is resolved to bridge the gap left

behind by providing efficacious drugs to improve public health.

"We are marking this anniversary for three main reasons. Firstly, 80 is a landmark age and deserves to be celebrated. Secondly, over these years, the company has saved millions of Nigerian lives through the

provision of quality, effective medicines. Thirdly, this is a new beginning for us, as May & Baker transitions from a company under foreign ownership to a wholly indigenous entity with global aspirations," said Ajah.

To commemorate the event, May & Baker embarked on a series of Corporate Social Responsibility (CSR) projects to give back to society. Ajah revealed that the company donated a borehole to the Egusi Ota community in Ogun State, where its factory is located. In

addition, May & Baker renovated the pavements and walls of Modupe Cole Memorial Child Care and Treatment Home in Akoka, Lagos State.

Furthermore, the company supported several indigent but brilliant final-year university students by covering their tuition fees. May & Baker also visited four charity homes in Lagos and Ogun States, donating products and other gifts.

Ajah remarked, "Our success has been driven by an unwavering commitment to scientific excellence, a passion for research and development, and a dedication to improving patient outcomes, despite the challenges of the operating environment.

"Today, we stand at the forefront of an ever-evolving industry. While we are proud of our past achievements, we are even more excited about the future. Our ongoing investment in research and development, our focus on adopting cutting-edge technologies, and our commitment to collaboration and partnerships will guide us as we navigate the constantly changing healthcare landscape."

He further highlighted the company's proactive response to recent health challenges, such as Ebola and Covid-19, with the swift introduction of Smartans hand sanitiser to help combat these pandemics. Additionally, May & Baker is working diligently on plans for local production of Biovaccines to support routine immunisation in Nigeria.

The managing director explained that in 2005, May & Baker, in partnership with the Federal Government of Nigeria, established Biovaccines, a local vaccine production subsidiary. This partnership remains ongoing, with the ultimate goal of setting up a factory to meet the nation's vaccine needs.

As the company looks to the future, Ajah expressed excitement about the road ahead,

reiterating that May & Baker will continue to prioritise research and development while putting Nigeria first.

"As we look ahead, our resolve remains strong. We are committed to pushing the boundaries of science and technology, improving the quality of life for people everywhere, and maintaining the highest standards of integrity and excellence in all that we do. We celebrate not only our past achievements but also the promise of what is yet to come. We are excited about the opportunities and challenges ahead and remain steadfast in our mission to create a healthier future for all Nigerians," he said.

As part of its 80th anniversary activities, May & Baker also organised a "Walk for Life" — a hypertension awareness walk — during which it raised awareness about hypertension and screened participants to check their blood pressure levels. The walk took place through major streets in Ikeja and Agege, Lagos.

Pharm. Ajah explained that although May & Baker traditionally holds its "Walk for Life" during World Hypertension Day, the company decided to include it in its anniversary activities as part of its CSR efforts to give back to society.

"Over the course of 80 years, May & Baker has made significant contributions to the health of Nigerians. We have been involved in vaccine management, including joint ventures with vaccine manufacturers. At one point, May & Baker was the representative of Aventis in Nigeria.

"In the area of antimalarials, May & Baker has played a major role, and our brand of paracetamol is a household name, known even in the most remote parts of the country. We have also made substantial contributions in the management of hypertension," said Pharm. Ajah.

He went on to highlight the dangers of hypertension, describing it as one of the most lethal conditions that can lead to sudden death. Pharm. Ajah urged Nigerians to monitor their health, especially their blood pressure and blood sugar levels, as undiagnosed hypertension and diabetes can be a deadly combination, referring to them as a "dangerous alliance."

"More importantly, people need to be aware of their blood sugar levels. If someone is diabetic, they must monitor their blood pressure because the combination of diabetes and hypertension can lead to sudden death if not properly managed. We used to refer to this as a 'dangerous alliance'. I encourage everyone to go for medical check-ups at least twice a year," Pharm. Ajah advised.

On the future of the company, Ajah reaffirmed May & Baker's commitment to maintaining high-quality standards while pursuing growth and expansion. He revealed plans to double the company's production capacity over the next three to five years.

"We are on a growth trajectory, and by the time we reach our centenary, it will be fantastic," Ajah concluded.

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Fosun Pharma unveils new product at malaria symposium

- As experts brainstorm on disease management

By Patrick Iwelunmor



L-R: Alwel Ilegar (National Marketing Executive), Matthew Cai (Operations Manager), Jusber Shu (General Manager), Dr Sixtus Ozuomba (GH Lagos Island), Prof. Olugbenga Mokuolu (UIH Ilorin), Dr Oluwajimi Sodipo (LASUTH, Lagos), Sudipta Nandi (National Sales and Marketing Manager), Afam Nwolu (Zonal Sales Manager, Lagos/West).

Fosun Pharma has introduced a new anti-malaria product, Argesun Artesunate injection, for the first time in Nigeria. The product, an Artesunate injection, is available in 30mg, 60mg, 120mg, and 180mg doses.

During his presentation at the unveiling on 28 September, at Radisson Blu Hotel, Ikeja, Lagos, Mr Jusber Shu, General Manager of Tridem Pharma Nigeria Limited (a Fosun Pharma company), highlighted Fosun Pharma's strategic role in the global pharmaceutical and healthcare market.

Shu described Fosun Pharma as a global innovation-driven pharmaceutical and healthcare industry group, which operates across pharmaceuticals, medical devices, medical diagnostics, and healthcare services. He explained, "Fosun Pharma is patient-centred and focuses on unmet clinical

needs. Through diverse and multi-level cooperation models—such as independent research, cooperative development, and industrial investment—the company continually enriches its innovative product pipeline. Our focus is on differentiated product R&D with high-tech barriers, aiming to enhance the value of our pipeline."

The symposium, themed "Current Trends in Malaria Case Management," featured notable speakers such as Professor Olugbenga Mokuolu (Professor of Paediatrics, University of Ilorin Teaching Hospital) and Dr Oluwajimi Sodipo (Consultant Family Physician and Head of Medicine, Lagos State University Teaching Hospital). Both experts emphasised the importance of caution in diagnosing and treating malaria, urging that only trained personnel should handle malaria microscopy to ensure accuracy.

Sodipo noted that 97 per cent of Nigeria's population is at risk of contracting malaria, with Northern Nigeria having the highest prevalence due to heavy rainfall from July to September. He added that global malaria cases increased from 218 million in 2019 to 230 million in 2020, with deaths rising from 552,000 to 604,000. Nigeria accounted for 60 million cases in 2022, representing 30 per cent of the global burden and 30 per cent of global malaria deaths, with the highest prevalence among children in Northwest Nigeria.

Mokuolu acknowledged that while Plasmodium falciparum is the most common malaria parasite strain, the less-published Plasmodium knowlesi, a zoonotic disease, also poses a health risk, particularly in Southeast Asia. It is transmitted via contact with the rhesus macaque (rhesus monkey).

To reduce child mortality from malaria, Mokuolu stressed the need for proper diagnosis, early detection, and treatment. He urged stakeholders, including the government and healthcare providers, to ensure the availability of quality medicines, commending the launch of Argesun as a timely and innovative addition to Nigeria's anti-malaria efforts.

Speaking on the significance of the symposium and the launch of Argesun, Pharm. Sudipta Nandi, National Sales and Marketing Manager of Tridem Pharma Nigeria Limited, stated that the event was part of the company's Corporate Social Responsibility initiative. He explained that the symposium serves as a strategic platform to raise awareness about malaria and introduce an innovative solution to combat the disease.

"This programme brings together doctors, nurses, pharmacists, and key distribution personnel to address the real issue of malaria holistically," Nandi said. "With Argesun, people should not die easily from malaria. We recognise that 30% of the global malaria burden and deaths occur in Nigeria. This is a significant concern, and we aim to reverse this trend by offering innovative solutions like Argesun for the benefit of patients."

"Our core objective is to improve patient care through innovative products. As a pharmaceutical company, Fosun Pharma and Tridem Pharma are committed to reducing Nigeria's substantial malaria burden. Despite the economic challenges causing many pharmaceutical giants to exit Nigeria, we are here to stay and will weather the current tough times," he concluded.

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Micronutrients supplementation and the outcome in preterm neonates in a tertiary health centre

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Abstract: Approximately 15 million babies are born preterm each year.¹ Preterm infants commonly experience postnatal growth failure due to insufficient intake of micronutrients. We aim to determine the outcome of preterm neonates that received micronutrients.

Methods: The study subjects comprised of 210 preterm neonates admitted to (SCBU) of Federal Medical Centre, Brinin Kebbi, Kebbi State from 1st June 2020 to 31st May, 2022.

The subjects were randomized into two groups; 100 preterm neonates (Study group) received micronutrients (Reload; Reload Brands, LLC, Salt Lake City, Utah, USA) while, 110 preterm neonates (Control group) did not receive micronutrients. Biodata and other important information were obtained. All the babies (210) received the usual treatment protocol of preterm admitted to our SCBU. Ethical approval was obtained from the Research and Ethics Committee.

Results: Birth weights of the 210 neonates ranged from 800grams to the highest 2500grams with mean

birth weight of 1.54kg ±0.95. Average daily weight gains in 71% of the study subjects ranged from 25grams to a maximum of 29 grams per day while, in the non-micronutrients group, 54% had daily weight gain range of 10-14grams per day ($p = 0.001$). Twelve (12%) of the Micronutrient group (MG) and 30% of the Non-Micronutrient group (NMG) had need for blood transfusion respectively ($p = 0.002$). The average hospital stay was 22.95±9.68; hospital stay for the MG was 8 to 21 days while that of the NMG was 22 to 42 days ($p = 0.001$).

Conclusions: Micronutrients intake were in consistent with optimal weight gain, shorter hospital stay and lower need for blood transfusion in preterm newborns.

Recommendations: We recommend early commencement of micronutrients supplement (Reloads) in preterm babies.

Key Words: Micronutrients, outcome, neonates

Introduction

Survival of preterm babies is very critical; Preterm birth is a persistent health challenge with its attendant high morbidity and mortality.¹ Approximately 15 million babies are born preterm each year; Sixty percent of them are born in sub-Saharan Africa and South Asia.¹ Approximately 1 million children die each year from complications of preterm birth.¹ Many survivors face a life-time of disability, including learning disabilities, visual and hearing problems.¹⁻⁴

In low-income settings, preterm babies die due to a lack of feasible, cost-effective care.¹ Extremely preterm infants have high nutrient requirements and they commonly experience postnatal growth failure.⁵⁻⁸ The required micronutrients for the optimal growth of these preterm population include vitamins and minerals.

Objective: Determination of the outcome of preterm neonates that received micronutrient supplementation (Reload drops and Reload Kids LLC, Salt Lake City, Utah, USA) that we used in this study

Material and Methods

Study Area

Federal Medical Centre (FMC) Kebbi is located in Brinin Kebbi, the capital of Kebbi State, north western Nigeria. Kebbi State has an estimated population of 4.7 million. Kebbi State has the worst newborn death rates of 55 per 1000 births which is higher than the national average of 37 per 1000 births.⁹ The Federal Medical Centre Kebbi serves as a referral centre in north western Nigeria. The hospital provides secondary and tertiary care to the population of Brinin Kebbi and the neighbouring states. The Special Care Baby Unit (SCBU) is run by consultants, residents, medical officers and nurses who provide expert health care for both inborn and out-born pre-term and term neonates. The unit is equipped with radiant warmers, incubators, im- provided CPAP, mechanical ventilators, cribs, suctioning machines, and oxygen delivery system among others. It is the only newborn unit in the entire state

Study Population: Preterm neonates (28/52 weeks to less than 37 completed weeks of gestation) admitted and managed in the Special Baby Care Unit of the Federal Medical Centre, Brinin Kebbi for a period of two years from 1st June 2020 to 31st May, 2022.

(a) Inclusion criteria

- All preterm babies admitted to SCBU who survived greater than 24 hours
- Preterm babies with obtained verbal and/or written consent of parents or the care-giver to participate in the study (Group A).

(b) Exclusion criteria

- Preterm babies that the parents or care-giver refused consent
- Preterm babies with major congenital malformations
- All preterm babies with perinatal asphyxia

A two-group study (A and B)

Group A: Group A: A descriptive longitudinal study:112 preterm babies were admitted during the study period between 1st June, 2021 and 31st May, 2022 to our Special Baby Care Unit (SCBU) but, 100 met the inclusion criteria and were recruited for the study (Study group). Babies in this group received enteral Reload drops (Multivitamin and Minerals) 1ml once a day. The intervention was started 48 hours after introduction of feeds and continued until 38 weeks' post-menstrual age. The dosage was then changed to Reload for kids at 2.5mls twice daily and continued after discharge until 12 weeks of chronological age. Their daily and weekly weight gain while on admission and after discharge was monitored respectively until 12 weeks of chronological age. In addition to the Reload therapy, these babies also had the units' routine protocol of care for preterm newborns. Birth weight and packed cell volume (PCV) were obtained and documented at the point of contact for admission. The need, if any for blood transfusion was also documented. Thereafter, daily weight gains and weekly PCV were obtained and documented. Only babies that received micronutrients and survived to the point of discharge were included in the analysis (group A).

Group B: (Control group):118 preterm babies were admitted during the study period between 1st June, 2020 and 31st May, 2021 to our Special Baby Care Unit (SCBU) but, 110 met the inclusion criteria and were recruited in the study (Control group). Birth weight, packed cell volume (PCV) and random blood sugar (RBS), daily weight and weekly PCV were obtained and documented from their case files. Biodata and other important information were also obtained from the case files for all the groups using a preformed questionnaire. The outcome of the babies in group A (Study group; micronutrients group, MG) was then compared to babies in group B (controls, none micronutrients group, NMG) that had no contact with Reload Vis-à-vis; daily weight gain, PCV pattern and duration of hospital stay. The study subjects were not matched for gender.

Ethical Approval

Ethical approval was obtained from the Research and Ethics Committee of the Federal Medical Centre, Brinin Kebbi, Kebbi State.

Data analysis

A unique number was allocated to every baby in this study and it was used in the storage and management of all data. The data was manually sorted out for completeness and cleaned using standardized queries to conduct range and logic check. Data were analysed using SPSS Statistical software (Version 25.0 for Windows, SPSS Inc. Chicago, IL). version 25. Where there are discrepancies in records, they were rectified by the records of the babies concerned. The program was used to compute frequencies, proportions and means of study variables using tabular and graphical presentation of the data. Chi square test or where figures were small, Fisher's exact test was used for comparison of proportions, while means were compared using student t-test. An independent sample t-test was used to compare the performance of the micronutrient (Reload) amongst the two preterm groups. Statistical significance was accepted at a 5%(p- value of less than 0.05).

Results

A total of 324 preterm babies were admitted to the SCBU during the study period; 210 met the criteria for the present study: 100 newborns were recruited in the group A, 110 where recruited into the control group. Forty-four Percent (44%) of the study group (MG) were males compared to 40% males in the NMG group. Concerning Birth weight; 51% of the study group had low birth weight as against 59% in the NMG group. Sixty-four percent of the study group were inborn via SVD being the highest (64%) mode of delivery while, in the NMG group 58% were inborn and 59% were delivered vaginally. Seventy-two percent of the study group (MG) were of low socio-economic status as compared to 59% in the NMG group ($p = 0.131$). Thirty-three percent (33%) of mothers in the study group had morbidity (Table 1)

Table 1: Neonatal and maternal baseline socio-demographic characteristics

Variables	Reload NM (n = 100)	NMG (n = 110)	P-value
Socio-economic status			
Low	72	84	0.131
Mid	11	14	
High	17	12	
Weight at discharge			
1.40	0	76	0.000
1.42	1	2	
1.5	16	25	
1.52	0	3	
1.53	0	4	
1.55	3	0	
1.6	72	0	
1.7	8	0	
Transfusion			
Yes	12	34	0.002
No	88	76	
Average daily weight gain			
10-14	0	61	0.000
15-19	0	49	
20-24	25	0	
25-29	71	0	
>30	4	0	
EGA Category			
Extremely preterm	1	0	0.593
Very preterm	44	45	
Moderate preterm	30	31	
Late preterm	25	34	
Hospital stay (days)			
<7	0	0	0.000
8-14	58	1	
15-21	42	0	
22-28	0	24	
29-35	0	60	
36-42	0	25	

Pattern of Weight Amongst study groups

The birth weights of the 210 preterm neonates ranged from the lowest 800grams to the highest of 2500grams. Forty-six (46%) of the study group were early preterm and eighty-five percent were appropriate-for-gestational age while, forty-one percent of the NMG were early preterm and 79% were appropriate-for-gestational age. Concerning average daily weight gain amongst the study subjects; 71% of the Micronutrient group gained a range of 25grams to a maximum of 29 grams per day while, in the non-micronutrient group, 54% had daily weight gain range of 10-14grams per day ($p = 0.001$). Seventy-two percent (majority) of the MG were discharged with high weight of 1600grams while majority (76%) of the NMG were discharged with weight of 1400grams ($p = 0.001$) (Table 2)

Variable	Reload MG (n=100)	NMG (n=110)	Total
Gender			
Male	44(48%)	48(52%)	92(100%)
Female	56(47%)	62(53%)	118(100%)
Birth weight			
ELBW	2	4	6
VLBW	46	43	89
LBW	51	63	114
NORM	1	0	1
Place of delivery			
Inborn	64	64	128
Outborn	36	46	82
Mode of delivery			
SVD	64	66	130
EMCS	29	44	73
ELCS	7	0	7
Weight-for-age			
AGA	85	86	171
SGA	15	24	39
Birth attendant			
Skilled	85	98	183
Unskilled	15	12	27
Maternal morbidity			
Yes	33	38	71
No	67	72	139
Socioeconomic status			
Low	72	84	156
Mid	11	14	25
High	17	12	29
Neonatal Morbidity			
Yes	70	86	156
No	30	24	54

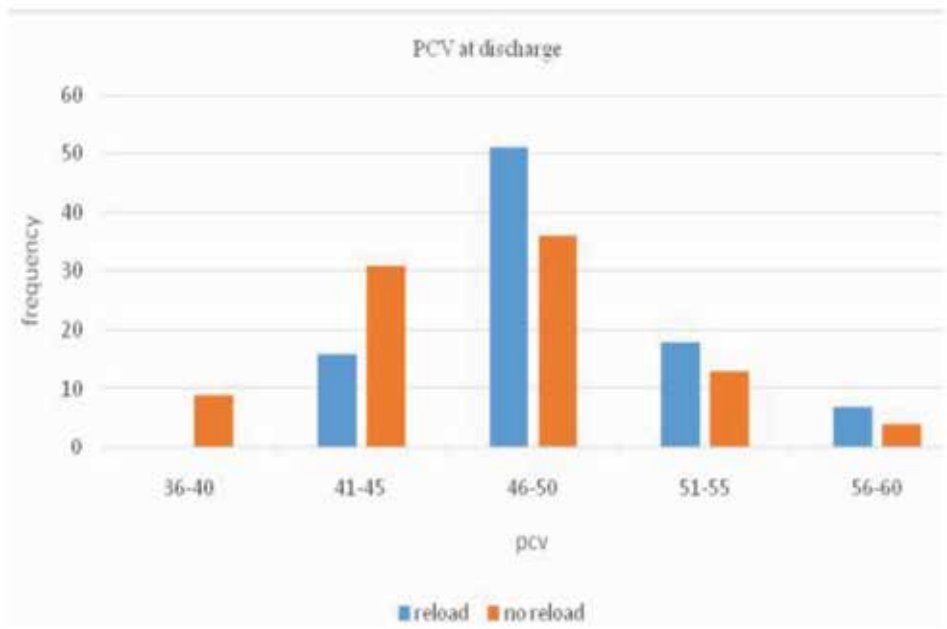
Average Hospital Stay Amongst Study Groups

The average hospital stay for the study subjects was 22.95±9.68; Fifty-eight (58%) of the MG had a hospital stay of 8 to 14 days while 54% of the NMG had a hospital stay of 29 to 35 days ($p = 0.001$) (Table 2).

Pattern of PCV amongst Study Groups

The Packed Cell Volume (PCV) of the 210 preterm neonates at presentation ranged from the lowest 32% to the highest 71% with a mean of 44.97% ±7.5. The mean PCV amongst the study group showed a significant rise from 42.7% at presentation to 48.62% at discharge ($p = 0.001$) while, the mean PCV for the NMG showed a decrease from 47.24% at presentation to 46.3% at discharge (Figure 1). Twelve (12%) of the MG had blood transfusion while a higher number 30% of the NMG had blood transfusion. The difference in the proportion was statistically significant ($p = 0.002$) (Fig. 1).

Fig 1: Packed cell volume in the MG and in the NMG



Discussion

Aggregate of previous studies have confirmed the significant positive role of micronutrients in the growth of both extreme low-birth weight and preterm new-borns however, the routine use of micronutrients is yet to be adopted in third world countries.^[2,8] In most cases, the reason is the not only the cost of payment which is usually out-of-pocket but, dearth of knowledge on the clinical need for micronutrients for growth and development in preterm neonates amongst health care providers. Our study was carried out to evaluate the clinical outcome with the use of micronutrients for rapid growth and development in preterm babies. The present study showed significant association between the use of micronutrients (Reload) and average weight gain, need for blood transfusion, average packed cell volume and length of hospital stay.

The study group (MG) showed a significant optimal weight gain with the use of the micronutrient (Reload); 71% of them had daily weight gain ranging from 25-29grams as against only 54% of the NMG having daily weight gain in the range of only 10-14 grams. This finding is in agreement with previous studies including the Sweden study,^[2,5,8] where they observed that the extreme preterm neonates that received micronutrients supplementation had optimal weight gain. The result further highlights the fact that achieving weight gain in preterm neonates still remains a major management problem in neonatal practice. The optimal weight gain amongst the MG has led to their shorter hospital stay.

The Micronutrient group had lesser need for blood transfusion compared to the NMG; Over 30% of the NMG had blood transfusion for various reasons with exclusion of probable anaemia of prematurity when compared to less than 12% of the MG where there is the use of micronutrients. Similar studies where there was no use of micronutrients amongst neonates reported similar high rates of blood transfusion.^[10-14] However, there is the need for a larger study for results that will adequately power an acceptable generalization on positive use of micronutrients to improve PCV in neonates. Blood transfusion procedure is cumbersome with increasing financial implication in addition to the associated risks of infection transmission and immunologic reactions. Therefore, reduced frequency for blood transfusion amongst neonates is apt.

Another documented finding from this study was the shorter duration of hospitalization associated with the use of micronutrient supplementation. The average hospital stay for the study subjects was 22.95±9.68. More than half(58%) of the MG had hospital stay of 8 to 14 days compared to 54% of the NMG with a hospital stay of 29 to 35 days. This observation of longer hospital stay amongst the NMG is similar to finding in previous studies.^[15,16] The shorter hospital stay might have led to reduced cost of care, and less of both mental and physical stress for the parents/caregivers as most of the cost are out-of-pocket payments. This is particularly important as majority of the patients in both groups are of low socio-economic status; 72% and 59% of the MG and the NMG respectively. There was no significant association between the MG and the NMG when the socio-economic status of their parents was compared.

Conclusions

- Intakes of Reload (micronutrients and minerals) were in consistent with the expected optimal weight gain of between 20 to 30grams per day.
- Lesser need for blood transfusion and
- There was shorter hospital stay in preterm new-borns

Recommendations

Early commencement of micronutrients is therefore, recommended in preterm neonates to achieve optimal postnatal growth. However, there is the need for multicentre intervention studies using single or multiple micronutrients in preterm infants including absorption studies to increase nationwide acceptance and usage.

Limitation

We were not able to analyse the absorption and utilization of individual micronutrient's contribution to the growth of the neonates. The study subjects and the NMG used for the study were not matched for gender.

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Plateau State Government committed to leading a healthy population – Executive secretary, PS-DMCMA

The Plateau State Drug and Medical Commodities Management Agency (PS-DMCMA) was recently in the news for announcing the local manufacturing of its own drugs. In this exclusive interview with **Patrick Iwelunmor**, the Executive Secretary of the agency, Pharm. (Hon) Kim Bot, discusses PS-DMCMA's mission and its efforts to boost Nigeria's local manufacturing sector, among other issues. Excerpts:

The Plateau State Drugs and Medical Commodities Management Agency has started manufacturing its own drugs. Can you enlighten us on this development and what it means for the local drug manufacturing sector in Nigeria?

Since I came on board, I developed a four-pillar strategic initiative to guide my team in achieving the agency's key objectives. By law, we have seven functions, and in no particular order, I will begin to list them for you.

Number one is to create access to safe, effective, and high-quality medicines. Number two is to operationalise the state's drug revolving fund across all health facilities, meaning the agency will be the sole source of these medicines. Number three is to ensure that pharmacovigilance activities are efficiently carried out by tracking adverse drug reactions. Number four is to engage in pharmaceutical manufacturing and collaborate with pharmaceutical companies to



Pharm. (Hon) Kim Bot

achieve affordability. Number five is to warehouse all commodities and medicines. Number six is to carry out logistics related to the distribution of medicines to the last man. Number seven is to provide an accountability framework across all functions.

We have streamlined our strategic initiatives to align with these seven functions. Upon my appointment, we conducted a SWOT analysis of the agency.

One of our key strengths is the governor's strong support. Governor Barrister Caleb Muftwang is deeply committed to the safety and well-being of Plateau's people. He believes he can only lead a healthy population, which is why he has released counterpart funding that enabled us to complete our warehouse. We also have a quality control lab inside the warehouse. If we find that an adverse drug reaction is due to the chemical composition of the drug, we will flag it. If it is due to idiosyncrasy, we will inform you.

How has PS-DMCMA impacted local drug manufacturing in the state?

Here in Plateau, we have taken the bold step of joining the sector-wide initiative to locally manufacture five products. Of the products we have manufactured, two are for oral use, and three are for external use. The oral drugs are a cough syrup and an antacid. The antacid was fully prepared by us here in Jos, just like the cough syrup.

For the cough syrup, we only

imported one of the raw materials, while the other two were sourced locally. All the raw materials for the antacid were sourced locally here in Plateau State. The three external-use products are a WHO-approved hand sanitiser, antiseptics for hospital use, and methylated spirit.

The remarkable thing about all this is that, for example, we prepared 200 ml of antacid at a very affordable price. A high-quality antacid in the market costs at least 1000 naira, but we have decided to sell ours for 750 naira.

How long has this agency been in existence?

The agency was signed into law in October 2022 by the former governor, who personally appointed my predecessor. Unfortunately, the agency never took off until we came on board. Since then, we have been making strategic efforts to work with stakeholders to ensure the agency lives up to its mandate.

NAFDAC already has a stake in our agency by being part of the board. We deliberately decided that NAFDAC should have a representative on the board to demonstrate our commitment to collaborating with credible stakeholders.

As a sign of our seriousness, we made it clear in one of our correspondences that we would temporarily suspend production until all necessary discussions with NAFDAC were finalised, ensuring best practices. This shows our respect for standards and regulations. The cough syrup, for example, did not last an hour

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...Championing Healthy Living

Plateau State Government committed to leading a healthy population – Executive secretary, PS-DMCMA

continued from page 66

after production before it was exhausted, as we shared it for free. People are already providing testimonials about its efficacy. The same applied to the antacid and methylated spirit, which were also distributed free of charge. Even the Secretary to the State Government called to confirm the effectiveness of the cough syrup.

To what extent do you think this development can boost the revenue of Plateau State?

An agency like ours has an economic benefit, even though our primary goal is saving lives. The economic catch is that we create access to medicines with a minimal profit margin. For instance, by interfacing with manufacturers, we can apply just a ten percent markup, as opposed to the conventional thirty percent. This ten percent margin has five elements enshrined in our operational procedures.

We are currently in talks with a pharmaceutical company, and we hope to sign an MOU with them soon. Once signed, they will be with us here for at least two years, during which time we will work together to ensure we finalise everything with NAFDAC. Once we reach that point, we will undoubtedly create employment opportunities, and the workers will pay taxes, generating revenue for the state government. Additionally, more raw materials



Pharm. (Hon) Kim Bot

will enter Jos as contracts, resulting in remittances to the Bureau of Public Procurement, the Plateau State Internal Revenue Service, and ultimately, FIRS.

While pharmaceuticals are exempt from VAT, we will still contribute through withholding tax and development levies. We also have a software system that will help us track these revenues,

keeping the governor informed of how much we are generating from these sources.

Some economists argue that we consume more than we produce, which is why our economy struggles. Are there plans by your agency to export some of your products outside Nigeria?

Absolutely. If we can import their products, why can't they take ours? It is time for us to start thinking differently. Nigeria is still

reliant on a one-size-fits-all approach to medication, which will not take us far. The best form of healthcare is personalised medicine, such as genomic prescription and usage of medication. This is common in developed countries, where investigations are conducted right down to the genome level. This allows you to determine the

dosage and even predict adverse drug reactions and elimination patterns.

I foresee a future where we will export our products for use in neighbouring countries and even in developed nations.

Despite the abundance of medicinal flora and fauna in Plateau State, there remains a scarcity of pharmaceutical manufacturers. Why is that?

This was one of the things that shocked me when I took office. I conducted a quick mapping of manufacturers in the state, and we found only three pharmaceutical manufacturers. Of these, one produces only oral syrups, suspensions, sterile eye preparations, and table water. Another has ceased operations, while the third has issues with NAFDAC. As you know, we cannot work with any company facing regulatory challenges.

However, a former governor of Plateau State, Senator Jonah Jang, initiated a mini production unit in Pankshin General Hospital. I took the time to inspect the facility, and I doubt we will find such quality equipment anywhere else. I quickly took an inventory and locked the place up. I plan to dust off the facility and explore how we can revive it. Our agency's activities will undoubtedly stimulate economic development in Plateau State by harnessing the natural resources we have.

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Building strong relationships: Key to sustained success in pharma sales

In the competitive world of pharmaceutical sales in Nigeria, the ability to build and maintain strong relationships is paramount. For sales managers, these relationships are not just transactional; they form the foundation of trust, loyalty, and long-term success. This article explores the critical components of relationship-building, including enhancing key relationships with customers, engaging with them daily, and fostering meaningful connections within the industry.

Enhance your key relationships (customers, HCPs, retailers, etc.)

Building strong relationships with customers, healthcare professionals (HCPs), and retailers is essential for driving sales and ensuring customer loyalty. Sales managers must prioritise understanding the unique needs and preferences of these stakeholders to create tailored solutions that meet their expectations.

Strategies for enhancing key relationships

- **Personalise interactions:** Take the time to understand each customer's specific needs and preferences. Personalising interactions can make customers feel valued and appreciated, fostering loyalty.
- **Provide value beyond sales:** Offer insights, resources, and support that go beyond the sale of products. By positioning yourself as a trusted advisor, you can strengthen relationships and encourage repeat business.
- **Follow up regularly:** Consistent follow-up demonstrates commitment and reliability. Use follow-up calls or emails to check in on customers, address any concerns, and reinforce your availability for support.

Engage with customers daily

Regular engagement with customers is crucial for maintaining strong relationships and staying attuned to their evolving needs. Sales managers should make it a priority to connect with customers on a daily basis, whether through direct interactions, phone calls, or digital communication.

Tips for daily customer engagement

- **Schedule regular check-ins:** Set aside time each week for scheduled check-ins with key customers. These conversations can

Networking is a vital aspect of sales success, and building meaningful relationships within the industry can open doors to new opportunities. Sales managers should actively seek to connect with colleagues, industry leaders, and other professionals to expand their network and enhance their influence.

provide valuable insights into their experiences and needs.

- **Utilise technology:** Leverage customer relationship management (CRM) tools to track interactions and preferences. This technology can help you stay organised and ensure that you are consistently engaging with customers.
- **Be approachable and responsive:** Foster an open line of communication by being readily available for questions and concerns. Quick responses to enquiries can significantly enhance customer satisfaction and loyalty.

Build meaningful relationships for networking

Networking is a vital aspect of sales success, and building meaningful relationships within the industry can open doors to new opportunities. Sales managers should actively seek to connect with colleagues, industry leaders, and other professionals to expand their network and enhance their influence.

Strategies for effective networking

- **Attend industry events:** Participate in conferences, trade shows, and networking events to meet new contacts and strengthen existing relationships. Engaging with industry peers can provide valuable insights and opportunities for collaboration.
- **Join professional associations:** Becoming a member of professional organisations related to the pharmaceutical industry can facilitate networking and provide access to resources and support.
- **Leverage social media:** Use platforms like LinkedIn to connect with industry professionals, share insights, and engage in discussions. Social media can be a powerful tool for expanding your network and building

relationships.

Takeaway

Building strong relationships is a cornerstone of sustained success in pharmaceutical sales. By enhancing key relationships with customers, engaging with them daily, and fostering meaningful connections within the industry, sales managers can create a robust network that supports their growth and success.

As we continue this series on essential mindsets, behaviours, and practices for salespeople in Nigeria, the next article will focus on *Achieving Financial*

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Responsibility: A Crucial Step in Staying Ahead as a Sales Manager. This article will explore the importance of financial literacy, debunk the myths surrounding instant wealth, and emphasise the significance of financial discipline for long-term stability. Stay tuned for insights that will empower you to take control of your financial future while excelling in your sales career.

Tunde Oyeniran, B Pharm, MBA, FSPMN, a Sales/Marketing Strategist, Selling/Sales Management Trainer, and Personal Sales Coach, is the Lead Consultant at Ekini White Tulip Consulting Limited (eWTC), Lagos. eWTC provides training, recruitment, online CME/medico-marketing, and field force management solutions services.

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1. Cardiovasc J Afr. 2010 Feb; 21(1): 61-62.; 2. Drugs. 2006;66(1):51-83.; 3. Expert Opinion on Pharmacotherapy 2011;12(17):2719-2735

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1. Clin Med Insights Cardiol. 2012; 6: 17-33.; 2. JAMA 2007 Mar 28;297(12):1344-53.; 3. Journal of the American College of Cardiology 2017;69(22).; 4. ACC/AHA CLINICAL PRACTICE GUIDELINE; Circulation 2019; 140(11): e596-e646.

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Abayomi, Cole, others, advocate digital solutions to boost healthcare delivery

- As HCPAN hails Lagos' mandatory health insurance for residents

By Adebayo Oladejo

In a significant move to enhance healthcare access and quality in Nigeria, key stakeholders, including Prof. Akin Abayomi, commissioner for health, Lagos State, Dr. Michael Olawale-Cole, past president of the Lagos Chamber of Commerce and Industry, Dr. Jephthan Aletan, Head of Design and Product at Wellahealth Technologies Limited, and Pharm. Abiola Paul-Ozieh, Chairman of Healthcare Providers Association of Nigeria, HCPAN, Lagos, have called for the adoption of digital solutions to revolutionise the nation's healthcare system.

The call to action was made during HCPAN's Scientific Conference and Annual General Meeting (AGM), held at the Lagos Chamber of Commerce and Industry (LCCI) in Alausa, Lagos, with the theme "Leveraging Digital Technology to Improve Residents' Enrollment and Enhance Providers' Efficiency in the Nation's Health Insurance Programme."

In his address, Prof. Abayomi, the guest of honour, emphasised the pressing need for innovative solutions as Nigeria grapples with challenges in its healthcare system, stating that the integration of technology into healthcare is not just an option but a necessity.

He noted that the recent executive order mandating health



Dr Adenike Olaniba, former president, HCPAN, presenting an award plaque to Prof. Akin Abayomi, commissioner for health, Lagos State, at the HCPAN Scientific Conference and AGM, in Lagos.

insurance coverage for all Lagos residents is a landmark decision that will "reset the economic clock of healthcare delivery in Lagos," ensuring that no resident is left without access to quality

healthcare.

"The goal is to provide financial protection for our citizens and ensure that healthcare is affordable and accessible to everyone, regardless of their

income status," Abayomi added. He highlighted that the order aims to address issues such as the lack of an insurance culture among Lagosians and the challenges

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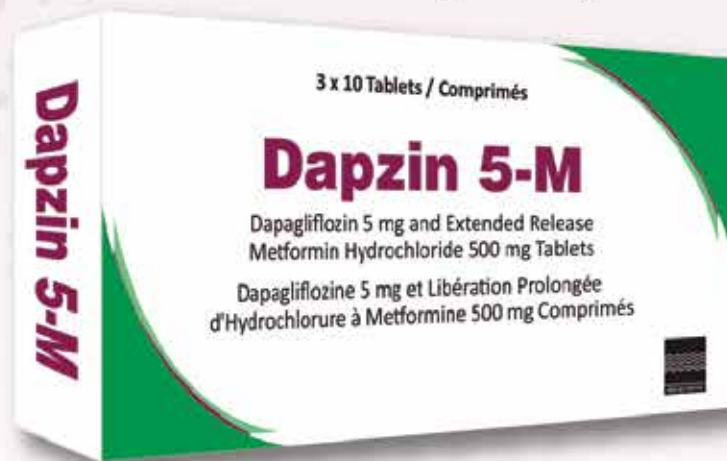
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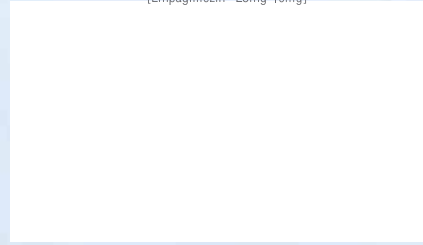
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Abayomi, Cole, others, advocate digital solutions to boost healthcare delivery

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of tracking the informal sector, which constitutes 80 per cent of the workforce.

The Commissioner further emphasised the role of the Lagos State Health Management Agency (LASHMA) in implementing this order, promoting private sector participation, and transitioning to a cashless healthcare payment system. This initiative aims to reduce the burden of out-of-pocket payments and curb outbound medical tourism while tackling the issue of brain drain in the state's health sector.

Abayomi commended both private and public health insurers in Lagos, noting that over 1.8 million residents are already insured through private health maintenance organisations (HMOs), with an additional 1 million benefiting from public schemes. He assured residents that private insurers would be able to integrate their services with the state's scheme, eliminating the need for dual insurance plans.

The Lagos State government is also reinvesting in its Equity Fund to cover vulnerable residents who cannot afford insurance. Eligible residents will be profiled for enrollment in the fund, ensuring they receive adequate healthcare protection. A regulatory framework will be established to maintain high standards among accredited healthcare providers, with strict monitoring of HMOs to ensure compliance and efficient

responses to healthcare needs.

To raise awareness about health insurance, Prof. Abayomi announced a public health campaign alongside enforcement measures. "We are committed to ensuring every Lagosian carries health insurance, whether public or private, so that we can inject more resources into the health sector and elevate healthcare delivery," he stated.

He also unveiled plans for Lagos State's healthcare sector, including the establishment of the first stand-alone University of Medicine and Health Sciences, which aims to produce 2,500 medical professionals annually, saying the initiative will significantly increase the state's healthcare workforce and help address the shortage of healthcare personnel.

"We are positioning Lagos as a hub for quality healthcare services in Africa, matching cities like London, Paris, and New York in healthcare delivery," he concluded.

Dr Olawale-Cole also underscored the critical need to leverage digital resources to enhance resident enrolment and improve provider efficiency within Nigeria's health insurance framework. He highlighted the pressing challenges facing the national health insurance programme, notably low enrolment rates and systemic inefficiencies that hinder access to essential healthcare services.

He stressed the importance of data-driven outreach campaigns to raise awareness of health insurance benefits, particularly in rural communities where knowledge of such programmes is limited. Utilising social media, SMS, and online advertising can effectively target demographics in need of these services.

Olawale-Cole also highlighted telemedicine as a powerful tool for improving both enrollment and healthcare provider services. By enabling remote consultations, telemedicine can enhance access to care for individuals in underserved areas, optimise resource usage, and improve patient outcomes.

He called for collaboration among government agencies, healthcare institutions, and practitioners to realise the digital transformation of Nigeria's healthcare system, reiterating, "The future of healthcare in Nigeria is digital." He emphasised that collective efforts are essential to build a more inclusive, efficient, and sustainable healthcare system for all Nigerians.

In her opening speech at the AGM, Pharm. Abiola Paul-Ozieh emphasised the urgent need for digital transformation in Nigeria's healthcare system, while also commending the Lagos State Government's recent Executive Order aimed at expanding health insurance coverage for all residents.

She praised Governor

Babajide Sanwoolu for the Executive Order, which aims to make the Mandatory Social Health Insurance Programme a reality, demonstrating the state government's commitment to the NHIA Act 2022 and the Lagos State Health Scheme. She further commended the government's efforts over the past four years, particularly the Ilera-Eko Programme aimed at improving healthcare access.

Pharm. Paul-Ozieh applauded the Ministry's digitalisation efforts through the launch of the Lagos State Health Information Platform (LAGOS SHIP), noting its importance in improving healthcare delivery. She urged the Commissioner to ensure clear definitions in three crucial areas: classification of facilities, professionalism and quality service delivery, and payment mechanisms to successfully upscale health insurance enrollment in Lagos State.

In his keynote address titled "Leveraging Digital Technology to Improve Residents' Enrollment and Enhance Providers' Efficiency in the Nation's Health Insurance Programme," Dr. Aletan emphasised that the future of healthcare is digital and that the time for transformation is now. "Digital technology can revolutionise Nigeria's health insurance by improving access and efficiency. It's time for stakeholders to embrace this transformation to achieve better healthcare for all," he stated.



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Atueyi tasks pharmacy students on critical thinking

- As UNILAG wins 2024 Pharmanews Debate Contest

By Adebayo Oladejo

Pharm. (Sir) Ifeanyi Atueyi, Managing Director of Pharmanews Limited, has urged pharmacy students to embrace critical thinking and leadership as essential tools for their future careers, while reaffirming his commitment to nurturing the next generation of pharmacists through initiatives like the Pharmanews Inter-School Essay and Debate Competition.

Speaking at the fourth edition of the Pharmanews Inter-School Debate and Quiz Competition, held during the 49th Convention of the Pharmaceutical Association of Nigeria Students (PANS), at the Faculty of Pharmaceutical Sciences, University of Ilorin, Kwara State, Atueyi emphasised that such competitions go beyond public speaking, serving as platforms for developing essential skills.

"Competitions like this are not merely exercises in public speaking or writing. They offer opportunities to develop critical thinking, effective communication, and teamwork qualities that will shape both your academic and professional lives," Atueyi stated.

His remarks set the tone for a day of intellectual engagement, as eight universities competed for top honours. The event attracted over 200 pharmacy students from across Nigeria, with the debate sparking fierce competition among the participating schools.

In a closely contested final, the University of Lagos (UNILAG) emerged victorious, defeating the host institution, the University of Ilorin (UNILORIN), after intense rounds of debate.

Speaking at the event, the outgoing National President of PANS,



A cross section of Pharmacy Students and their leaders in a group picture with the representative of Sir Ifeanyi Atueyi, publisher of Pharmanews, Mr Adebayo Oladejo, senior reporter, Pharmanews, at the 49th Annual Convention of PANS, at the University of Ilorin, Kwara State.

Melody Okereke, expressed his delight at the high level of intellectual discourse displayed throughout the competition. "We are excited to welcome all the participating teams. The enthusiasm and performance of the students have been outstanding, and I commend the judges for their impartiality," he said.

Ikrama Aliyu, the newly elected PANS President, lauded Pharmanews for its vital role in fostering growth within the pharmacy community, particularly during the COVID-19 pandemic when the journal provided an online version accessible to students across the country. "I look forward to deepening our partnership as we prepare for our 50th anniversary, which will coincide with the 5th edition of the Pharmanews inter-school debate," Aliyu added.

Babagariye Yaseen, the National General Secretary-elect and chief

judge of the competition, praised the debate's intellectual rigor and its potential to shape future leaders. "This debate is one of the best experiences I've had at this convention. It gives students a chance to explore their capabilities, and I believe it will continue to grow and make an even greater impact in the future," Yaseen noted.

The competition also drew praise from other panelists and participants. Abu David, President of PANS, University of Jos (UNIJOS), commended Pharmanews for providing a platform for students to showcase their talents, while Joyann Oluchukwu Amaefule, Vice President of PANS, Niger Delta University, expressed her excitement about the event and her intention to establish a debate team in her faculty after witnessing the competition's standard.

The final day of the competition featured four universities—UNILORIN, UNILAG, Niger Delta University (NDU), and Chukwuemeka Odumegwu Ojukwu University (COOU), following the elimination of four other schools during the preliminary rounds.

Muhammad Sobur, national public relations officer of PANS, outlined the criteria used to score participants, which included the use of evidence to support arguments, fluency and poise in delivery, and the relevance of arguments to real-world outcomes.

The motions debated included, "The illicit use of drugs ought to be treated as a matter of public health, not criminal justice," "Student Loans in Nigeria: A Necessary Financial Support for Youth or a Path to Lifelong Debt?" and "The 'Japa' Syndrome: Is Youth Migration from Nigeria Justified or Should It be Hindered?"

In the final round, UNILAG's team delivered a compelling argument on the 'japa' syndrome, securing their victory with a score of 73.1 points, while UNILORIN came in second with 67.9 points. Niger Delta University placed third with 61.3 points.

In his concluding speech, Atueyi, represented by Adebayo Oladejo, senior reporter at Pharmanews, remarked, "Regardless of today's outcome, I hope each participant leaves here more inspired and determined to make impactful contributions to the pharmacy profession."

The Pharmanews Debate and Essay Competition continues to stand as a beacon of excellence, providing pharmacy students across Nigeria with a platform to sharpen their intellect and contribute to the evolving healthcare landscape.

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Ajayi, Adebakin Charge Nigerians on preventive healthcare - as Tolaram Wellness reiterates commitment to citizens' wellbeing

By Ranmilowo Ojalumo

Chairman of the Lagos State chapter of the Association of Community Pharmacists of Nigeria (ACPN), Pharm. Tolulope Ajayi, has called on Nigerians to prioritise preventive healthcare, emphasising that prevention is both better and cheaper than cure.

Ajayi made this call at a wellness retreat recently organised by Tolaram Wellness Limited, manufacturer of Nutrify supplements, in collaboration with the Young Pharmacists Group (YPG) of the Pharmaceutical Society of Nigeria (PSN). The event was part of the activities marking the 2024 Pharmacy Week of the Lagos State chapter of PSN.

The ACPN chairman emphasised that nutraceuticals have a significant role to play in ensuring a healthy life both now and in the future. He charged healthcare providers to continue educating patients on preventive healthcare and to advocate for the use of nutrient-rich products like Nutrify to address micronutrient deficiencies, reiterating that prevention is better than cure.

While encouraging Nigerians to be intentional about their health and to explore the benefits of nutraceuticals to prevent diseases, Ajayi noted that the global healthcare trend is increasingly shifting towards preventive healthcare approaches, stressing that healthcare is now less about curative measures.

He, however, added that it is equally crucial for citizens to be warned not to accept everything presented to them as herbal products or nutraceuticals without proper verification.

While remarking that there are numerous opportunities in the nutraceutical space that pharmacists can explore, Ajayi urged companies like Tolaram Wellness, which operate in the nutraceutical market, to be deliberate about the quality of their



L-R: Uche Ugorji, marketing consultant, Dimensions Africa Ltd.; Eyo Nsikak Asuquo, Nutrify regional sales manager (General Trade Lagos); Pharm Nmesoma Ohakwe, state coordinator PSN- YPG (Lagos); Atinuke Agbeniyi, Nutrify digital manager; Abimbola Adebakin, CEO/Founder, Advantage Health Africa; Pharm Ehimen Semilore Oaikhena, Nutrify regional sales manager (Modern trade) Lagos; and Tolulope Ajayi, Chairman, Association of Community Pharmacists of Nigeria (ACPN) at the wellness retreat for Lagos PSN Pharmacy Week, organised in Lagos by Nutrify in collaboration with Young Pharmacists Group, recently.

products.

Expressed concern over the continued sale of medications at motor parks and in buses, Ajayi called on health authorities to enhance their regulatory functions to curb this menace.

The ACPN chief also called on the government to strengthen regulatory agencies within the pharmaceutical industry so that they can effectively oversee the sector, stressing that the pharmaceutical industry should prioritise safeguarding public health over profit.

Also speaking at the retreat, the Founder/Chief Executive Officer of Advantage Health Africa, Abimbola Adebakin, pointed out that Nigerians would experience less pain and illness if they paid more attention to preventive

healthcare.

Adebakin urged pharmacists to take nutraceuticals seriously, emphasising that it is the future of healthcare. She challenged pharmacists to embark on extensive research to discover new products within the nutraceutical space and encouraged the adoption of technology, such as artificial intelligence, in drug discovery.

Adebakin noted that AI can help reduce both the cost and duration of drug discovery processes.

The Advantage Health CEO further added that Africa has the potential to discover preventive health solutions through technology, stressing that when health innovations are discovered on the continent, the balance of power will shift towards Africa.

While commending Tolaram

Wellness for its role in promoting preventive healthcare through Nutrify, Adebakin encouraged companies and individuals dealing with nutraceutical products to ensure the efficacy of their products before introducing them to the market.

In her remarks, the Lagos State Coordinator of PSN-YPG, Pharm. Nmesoma Ohakwe, called on young pharmacists to intensify their efforts in creating awareness about the importance of nutrients for the human body and to advocate for nutraceuticals.

She also urged young pharmacists to increase their involvement in research, which will enable them to make valuable discoveries that contribute to the growth of the nutraceutical industry.

Meanwhile, Tolaram Wellness Limited, the producer of Nutrify supplements, has reiterated its commitment to the wellbeing of Nigerians by addressing gaps in the health supplements market. The company aims to provide much-needed supplements that will help Nigerians boost their immune systems and prevent various diseases.

Speaking at the retreat, Nutrify's Regional Sales Manager (Modern Trade), Pharm. Ehimen Semilore Oaikhena, explained that the wellness retreat was organised to raise awareness about preventive healthcare by educating pharmacists and Nigerians on Nutrify, a certified nutraceutical product.

Pharm. Oaikhena stated that the company is committed to improving health outcomes for Nigerians. He noted that the introduction of the Nutrify supplement into the nutraceutical market earlier this year was aimed at helping Nigerians address micronutrient deficiencies, thereby preventing diseases that could be more expensive to manage or cure.

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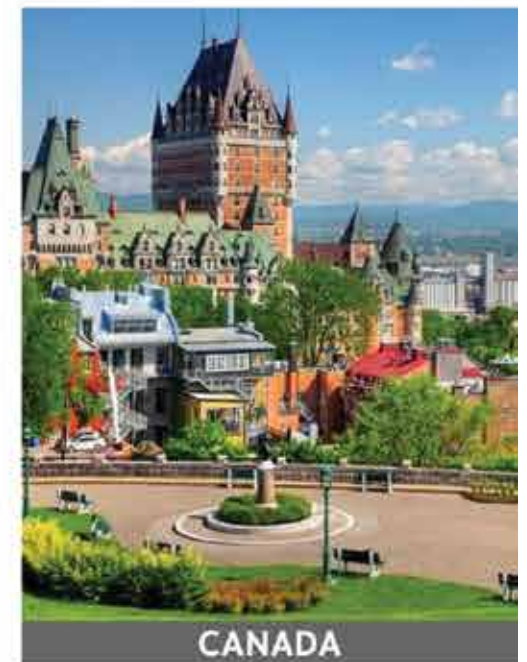
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A Communique issued at the end of the 27th Annual National Conference of The Association Of Industrial Pharmacists Of Nigeria (NAIP) Held From 4th – 8th of June, 2024 at De Signature Tower Hotel, Jericho, Ibadan, G.R.A., Ibadan, Oyo State, Nigeria

1.0 Introduction

The Association of Industrial Pharmacists of Nigeria (NAIP) is a technical arm of the Pharmaceutical Society of Nigeria (PSN) and the professional body of all registered and licensed Pharmacists in the Pharmaceutical Industries within Nigeria, dedicated to the promotion of Pharmacy profession, Pharmacy education/research and Pharmacy practice within the Industrial sector. NAIP having over 500 companies as corporate members representing over 1000 Pharmacists from all over Nigeria, held the 27th edition of its Annual National Conference on June 4th – 8th June, 2024 at the De Signature Tower Hotel, Ibadan, Oyo State.

The Conference involved a keynote address on the theme, sessions on the sub-theme and panel discussions to brainstorm and provide solutions to the myriad of problems and challenges facing the Pharma Industry and the Nigerian Industrial Pharmacists and the need for Digital Technologies and Innovations in Achieving Universal Health Coverage.

The theme of the Conference was “The Roles of Digital Technologies and Innovations in Achieving Universal Health Coverage: The Nigeria Industrial Pharmacy Perspectives” was addressed by the keynote address delivered by Professor Oludele A. Itiola, FPSN, Professor of Pharmaceutical Technology at the Faculty of Pharmacy, University of Ibadan. The Chairman of the occasion was Sir Asiwaju Theophilus Adebawale Omotosho, the Asiwaju of Afijo Land and Executive Chairman and Founder of Bond Group of Companies.

The Plenary session for the Conference theme also held. The Lead Discussant was Prof. Michael Ayodele Odeniyi. Other Discussants included Pharm Wale Oladigbolu, FPSN, National Chairman of ACPN; Pharm Oghenechuko Omaruaye, Chairman of PWDAN; Pharm Dr. Vern Ogha, Executive Director, Trustee Drug Inc.; Dr. (Mrs.) Olubunmi Jetawo-Winters, Executive Secretary, Kwara Health Insurance Agency and Pharm Stella Ifeoluwa Adedeji, Superintendent Pharmacist, Dana Pharmaceuticals.

The Plenary session with the second sub theme was titled “The Pharmaceutical/ Sales Representatives of Today: The Good, The Bad and The Ugly”.

The Conference featured two Technical Sessions. The first technical session titled “Control Substances and the Promotion of Access to medicines: the meeting point”. The Speaker was Pharm. (Mrs.) Yetunde Adenuga, Director, Narcotics and Control Substances, NAFDAC while the Lead Discussant, Professor Oluwatoyin A. Odeku, FPSN, Professor of Pharmaceutics and Industrial Pharmacy, University of Ibadan was ably Dr. Tolulope O. Ajala. The panelists were made up of the following: Alhaji Abubakar L. Wali, Commandar of Narcotics NDLEA Zonal Command, Lagos State; Mrs. Patricia Afolabi, Deputy Director, Directorate of Forensic and Chemical Monitoring, NDLEA; Brig. Gen. Stella Nkiru Ibeh, Managing Director, NADMACO Limited; Pharm (Prince) Gbenga Falabi, FPSN, Immediate Past National Secretary of PSN and Pharm Solomon Shihii, fsi, Deputy Director, PCN.

The second session titled “The Pharmaceutical/Sales Representatives of Today: the Good, the Bad and the Ugly” (Case Study Presentation) was delivered by Pharm. Ken Onuegbu, FPSN, National Chairman of NAIP and Pharm Ifeanyi Emene, CEO, Kanselor Business Innovation and Kiyix Recruitment Hub.

2.0 Attendance /Acknowledgements

The opening ceremony was chaired by Pharm (Asiwaju) Theophilus Adebawale Omotosho, FPSN, Chairman/Founder, Bond Chemical Industries Limited. Other dignitaries present included Dr. Ajetunmbi Oluwanmi, Honourable Commissioner for Health, Oyo State; Pharm. (Mrs.) B.L. Akinwande, former Director of Pharmaceutical Services, Oyo State Ministry of Health; Prof. Cyril Odianose Usifo FPSN, President, Pharmaceutical Society of Nigeria (PSN); Pharm. Dr. Udeorah Egbuna FPSN Deputy President PSN South; PCN Registrar, ably represented by Pharm Ogunlola Adenike; Pharm Olumide Akintayo, FPSN, Past President of PSN, Pharm Ejiro O. Foyibo, FPSN, former Deputy President PSN South; Pharm. Gbenga Falabi FPSN, Immediate Past National Secretary PSN; Pharm. Ken Onuegbu FPSN, National Chairman NAIP; Pharm. Amaka Okafor, former Director of PCN; Pharm. Yedunni Adenuga, representative of DG NAFDAC; Pharm Julius Adeluyi-Adelusi was ably represented by Prof. Lere Baale, FPSN, Chairman Board of Trustees (BOT) of NAIP; Pharm. Adewale Oladigbolu FPSN, National Chairman of ACPN; Dr. Ezekiel Olugbenga Akinkunmi, FPSN, National Chairman, National Association of Pharmacists in Academia (NAPA); Pharm Olabode Ajayi Ogunjemiyo, FPSN, National Chairman, Association of Hospital and Administrative Pharmacists of Nigeria (AHAPN); Pharm. Mnena Scholastica Lan FPSN, National Chairperson of Association of Lady Pharmacists (ALPS); represented by Pharm Olushola Potter; Pharm Dr. Eric Bagashe, CEO Proforma Uganda Limited, Professor Michael Odeniyi Ayodele; Baale of Oluyole, Oloye Yemi Ogunyemi, Pharm. (Col. rtd) Victor Ajanaku, Chairman PSN Oyo State; Pharm. Clement Adegboye, Chairman, NAIP, Oyo State, Pharm. Bayo Gbadamosi, Chairman ACPN, Oyo State; Prof Martin Emeje, DG/CEO Nigeria Natural Medicines Development Agency (NNMDA), Chairmen of PSN other Technical Group, NAIP Immediate and Past Chairmen, Pharm I.G. Anukwu, Pharm Dr. Lolu Ojo, FPSN, Pharm Sola Solarin, FFIP; MD/

CEOs of Pharmaceutical companies across the Country.

The Conference was also attended by NAIP Executive, Council and BOT members as well as NAIP delegates from eleven states including Anambra, Delta, Edo, Enugu, Kano, Kwara, Lagos, Oyo, Imo, Niger, Ogun and Plateau states.

3.0 Summary of Discussions

The following is a summary of discussions made during the speeches, paper presentations, technical sessions, panel discussions and contributions of participants:

The Conference recommended the embracement of technology to accelerate universal health coverage attainments.

Pharma manufacturing in Nigeria will easily attain the desired heights by the application of digital technology.

The Conference noted that Digital Transformation happens every day in the Pharma practices. Technology has moved away from analogue process of producing drugs which was the norms decades ago, machines are now used to produce drugs.

Pharmacists were urged to embrace Digital Technology so as to move healthcare delivery to the next level that will enhance the attainment of universal health coverage.

Nigerian Government was requested to act fast by way of creating an enabling environment that will enhance integration of technology as part of the national healthcare delivery for optimum patients' outcomes.

It was also noted that value chain in the Pharma industry cannot survive without the application of digital technology hence the theme of this conference.

It was noted that at any stage of all the value chain in the Pharma industry, we need to apply technology, therefore, the Pharmacists need to have a good understanding of what has happened in the past and what is happening now, so that they will be able to predict what will happen in future.

Conference noted that various technologies can be adopted in the Pharma industry to promote quality healthcare delivery.

Application of digital technology in pharma practice will enhance better decision making, improve efficiency and productivity. It encourages innovations and collaboration, makes communication and teamwork easier and as well improve working condition.

Any company that does not embrace technology will be overtaken by competition.

Nigeria contributes less than 2% to the global Pharmaceutical market.

Conference agreed that regulation of Controlled substances is vital and should be enforced according to the stated laws which should be well understood by the relevant regulatory bodies.

Conference agreed that NAIP should organize a training for NDLEA staffs to enhance their understanding as it related to control substances regulations among Pharmacists.

Conference noted that we have different categories of Pharmaceutical/ Sales representatives and employers should ensure that due diligence is carried out before employing these company representatives.

Conference noted that the way Companies treat their Pharmaceutical/ Sales representatives goes a long way to determining the outputs of these staffs.

A precondition to medicine security is localized manufacturing.

Local production of essential medicines has the potential to reduce the infiltration of falsified and substandard medicines as well as improve the economy of the country.

Challenges facing the Pharmaceutical industries include lack of infrastructure, weak industrial linkages, weak technology and engineering base, lack of petrochemical industries to enable API production, poor funding, inadequate incentives, high and multiple taxation, dysfunctional supply chain, brain drain of professionals, inconsistent fiscal and monetary policies, etc.

In addition, Nigeria fully relies on other Countries like India and China for Active Pharmaceutical Ingredients and excipients and this dependency is worrisome.

4.0 Key Decisions:

In the light of the observations made, Conference arrived at the following: A holistic approach requiring the active involvement of all stakeholders as regards medicine security in Nigeria must be employed.

5.0 Follow-up Actions

The Conference participants expressed their commitment to partner with the regulatory bodies, Government as well as other stakeholders in activities that would be leveraged towards ensuring the availability of essential medicines consummating the quest for quality health for all Nigerians.

Yours sincerely

For: ASSOCIATION OF INDUSTRIAL PHARMACISTS OF NIGERIA



Pharm. Ken Onuegbu FPSN
National Chairman



Pharm. Joy Adeshina FPCPharm
National Secretary

Unlocking your transformative leadership potential (2)

By Prof. 'Lere Baale, *FPSN, FPCPharm, FNAPharm, FNIM*
(Business School Netherlands International)

Definition of leadership

Leadership is a broad and complex term, encompassing various aspects that make it challenging to define. Nevertheless, countless researchers and theorists have dedicated their efforts to shedding light on the true essence of leadership. At its core, leadership involves an individual who possesses the power to influence and inspire others to achieve a common goal. A leader aims to effect positive change, transforming the existing state of affairs into an ideal future. But what motivates individuals to willingly follow a leader's guidance?

People gravitate towards leaders they respect—individuals with clear direction and a solid moral compass. To garner respect, leaders must uphold exemplary ethical standards, demonstrating a principled approach to decision-making. Additionally, a leader's ability to shape a clear sense of direction depends on their capacity to form and communicate a compelling vision. This vision must be effectively articulated and put into action. Leaders who can ignite passion and excitement around their vision will attract more dedicated followers, ultimately manifesting that vision into reality.

It is crucial to differentiate leadership from management, as the two concepts are often confused. Upon careful analysis of various definitions, leadership emerges as a distinct quality characterised by the ability to take initiative, make difficult decisions, assume responsibility, build and motivate teams, guide them towards predetermined objectives, seek cooperation, display unwavering determination when necessary, and adeptly resolve problems and conflicts as they arise. A skilful leader possesses a deep understanding of communication, organisation, and psychology. This knowledge allows them to unlock the hidden potential within individuals and inspire their professional growth and development. Naturally, all of this is attainable with the possession of strong leadership skills.

In conclusion, leadership encompasses a multifaceted set of qualities and skills that enable an individual to inspire and guide others towards achieving collective goals. Resilient leaders who prioritise ethical conduct, possess a clear vision, and excel in communication and organisational prowess can tap into the latent potential of their team members, fuel their motivation, and drive professional growth. Truly effective leadership hinges upon navigating challenges, resolving conflicts, and charting a course towards a brighter future.

Different leadership styles

The field of leadership studies offers several models and approaches to analysing leadership. Scholars and researchers have conceptualised leadership from diverse perspectives and identified various leadership models. For example, Tannenbaum and Schmidt (1958) developed three additional "forces," including representative leadership—a kind of realism concept—and leadership/maintenance. Robert Blake and Jane S. Mouton (1964/1978) included these in their leadership model as Special Types: Patron Change, Task Leadership, and Human Resource Leadership. Hersey and Blanchard (1982), P. Youle, S. Chikhouni, and A. Döpp developed the "Path-

Goal Theory" of leadership. Tannenbaum and Schmidt (1958) and White R. (1953) also developed a description of various leadership styles, including representative (an interactive approach with followers), which is essential for the leadership of healthcare and business organisations.

There are four major leadership theories or concepts: Charismatic Leadership, Transactional Leadership, Situational Leadership, and Transformational Leadership. This article does not attempt to analyse these concepts in detail but offers a descriptive summary of transformational leadership and leadership styles to enable leaders in health service organisations or nurse managers to implement their leadership abilities in managing and leading their followers or employees. Each of these leadership styles has inherent characteristics. Studies and reports have led the author to conclude that three styles of leadership are predominant and have been associated with contemporary theorists of leadership such as Max Weber (1947), who popularised his theories involving charismatic leadership; Transactional leadership, also discussed by Frederick Taylor and Bossidy (2007); and finally, Burns (1979), Bass (1987), and House (2004), who advocate a transformational leadership style.

The concept of leadership is vast and multifaceted within leadership studies. Scholarly discourse and research have led to the exploration of diverse perspectives, resulting in the identification of numerous leadership models. For instance, esteemed researchers Tannenbaum and Schmidt (1958) expanded the scope of analysis by introducing three additional "forces" that encompass representative leadership, a concept grounded in realism, and leadership/maintenance. These aspects were further embraced by Robert Blake and Jane S. Mouton (1964/1978) in their leadership model as Special Types: Patron Change, Task Leadership, and Human Resource Leadership. Similarly, the collaboration between Hersey and Blanchard (1982), P. Youle, S. Chikhouni, and A. Döpp birthed the concept of the "Path-Goal Theory" of leadership. Additionally, Tannenbaum and Schmidt (1958) and White R. (1953) developed a comprehensive description of diverse leadership styles, wherein representative leadership, characterised by interactive follower engagement, stands as a crucial element guiding the leadership of healthcare and business organisations.

Among the extensive repertoire of leadership theories and concepts, four major themes dominate the discourse: Charismatic Leadership, Transactional Leadership, Situational Leadership, and Transformational Leadership. Despite this, this article focuses on the theory of transformational leadership and leadership styles. It offers readers a descriptive summary that empowers leaders and nurse managers within health service organisations to pragmatically implement their leadership prowess when guiding and inspiring their followers or employees. Each leadership style boasts distinct characteristics that contribute to its effectiveness and impact.

Examining various studies and reports, the author concludes that three leadership styles reign supreme and are often associated with notable contemporary leadership theorists. Max Weber (1947) emerged as a prominent figure who propelled his theories on charismatic leadership into popular discourse. Similarly, the concept of Transactional Leadership finds its roots in the works of Frederick Taylor and Bossidy (2007), while the transformational leadership style is passionately endorsed by Burns (1979), Bass (1987), and House (2004). This collective body of thought champions the significance and potential of transformational leadership in driving positive change and organisational growth.

Self-awareness and emotional intelligence

Self-awareness is a crucial first step in effective leadership. Leaders who exhibit self-awareness are better able to understand their strengths and the impact they have on others. Emotional intelligence is also critical for effective leadership. These skills are vital in understanding your emotions and those of your team or fellow employees. If tangible, complex, or taboo emotions or experiences are shared, you should also be mentally prepared for the coaching and support you need as a leader. Emotional intelligence encompasses many skills, but at

its core, it is perceived vs. actual behaviour and the emotional impetus at work.

Self-awareness is about knowing yourself and identifying your patterns. Reflect on how you react in various situations where leadership is required. Do not be immune to criticism. 360° feedback tools can be incredibly potent at identifying this match or mismatch. Traditional feedback tools may need to be adapted to capture some of these softer agendas. Techniques such as 360° feedback can be a powerful source of material that reflects the individual's impact on others. Simple exercises such as drawing a "strength CV" and reflecting on when you felt at your best and what you were doing can give a flavour of what individuals bring to the leadership table and how to refine it for leverage.



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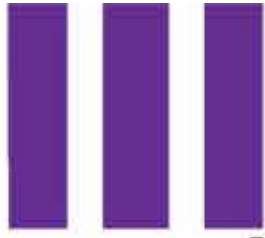
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Eminent pharmacists decry data shortage in pharma industry

- As firm unveils *Versus* to address anomaly

By Ranmilowo Ojalumo

Notable pharmacists in Nigeria have raised concerns over the severe shortage of reliable data in the nation's pharmaceutical industry. Speaking at the recent launch of *Versus*, a data platform by PBR Life Science in Lagos, they stressed the critical need for accurate data to drive the industry forward and improve decision-making.

Chairman of the Association of Industrial Pharmacists of Nigeria (NAIP), Pharm. Ken Onuegbu, lamented the lack of robust data, emphasising that the pharmaceutical sector is lagging behind in this area. He warned that without reliable data, the industry would struggle to reach its full potential. Onuegbu commended PBR Life Science for its innovation in developing *Versus*, a platform designed to address this gap.

"We may get everything else right, but without data, we have not even begun. To succeed, we need real-time data. Whether you are starting a pharma business, investing, or manufacturing, data is the foundation," Onuegbu said. He added that data helps pharmaceutical company CEOs plan, focus, and identify areas for improvement, including staff training. "This is why I commend PBR for their efforts with this new platform."

Pharm. Ade Popoola, managing director of Real Pharmaceuticals Limited, also expressed concern over the absence of reliable data in the Nigerian pharmaceutical industry. He explained that the limited available data significantly undervalues the sector. "If there is anything Nigeria is lacking, it's data. Nobody has reliable data on the Nigerian pharma



L-R: Mr Uti Ogenevogaga Franchise, head Assene Laborex; Pharm. Ade Popoola, CEO Reals Pharmaceuticals; Mr Ayobami Aremu, CEO Greenlands group; Dr Ken Onuegbu, national chairman NAIP; and Pharm. Julie Wole-Ajayi, director of marketing, during the unveiling of *Versus* in Lagos recently.

industry. If you want to succeed with your product, let data guide you," said Popoola.

He further explained that a lack of data has contributed to the issue of expired products in the market, as companies are unaware of demand trends. As a result, they pay hefty fees to the National Agency for Food and Drug Administration and Control (NAFDAC) to dispose of expired products. Popoola noted that with better data, companies would be able to identify the right therapy areas to focus on and avoid these losses. He praised the unveiling of "*Versus*," which he believes will help fill this critical gap.

During a panel session at the event, Mr Uti Oghene, franchise business manager at Assene-Laborex Limited, emphasised that data is essential for any business to thrive.

"Data is life," he declared, stressing that without it, businesses are bound to fail.

Similarly, Mr Ayobami Aremu, convener of Greenlands Integrated Agribusinesses Group, pointed out that data is the first asset every business owner should acquire before launching any venture. He warned that without reliable data, businesses in Nigeria would continue to face failure.

In his keynote address, titled *How Data Can Support Survival and Pricing Challenges in the Current Economy: A Focus on the Pharma Industry*, Mr David Makanjuola, managing director of ICIYANA Global Limited, highlighted that data serves as the foundation for decision-making in businesses worldwide. Makanjuola, a former head of financial institutions at First Bank Nigeria, urged key

stakeholders in the pharmaceutical industry to embrace data in their operations to advance the sector.

Meanwhile, PBR Life Science's Marketing Director, Pharm. Wole Julie Ajayi, introduced *Versus* as a solution designed to bridge the significant data gap within the pharmaceutical and life science industries. "*Versus* helps pharmaceutical companies unlock success and thrive at the retail pharmacy level. It's a valuable tool for companies looking to launch new products, assess market share, or evaluate which therapy areas are performing well," she explained.

Ajayi, who has worked with several pharmaceutical companies across Nigeria and Africa, stated that the lack of data made it difficult to plan effective marketing strategies. She said she joined PBR Life Science because of its commitment to providing data-driven solutions for the industry.

Mr Adeoye Sobande, chief product and innovation officer at PBR Life Science, explained that *Versus* collects data from retail pharmacies across Nigeria and processes it using advanced technology to provide actionable insights.

"The platform offers detailed information about what is happening at the retail level, enabling companies to make informed decisions. If you want to know how your products are performing or gain insight into your competitors, *Versus* is the platform for you," said Sobande.

Sobande added that the platform provides local data and insights that allow pharmaceutical companies to understand their brand performance in retail pharmacies. The data is collected quarterly from retail pharmacies in 25 states across Nigeria, with a target of 1,000 pharmacies. Sobande noted that the platform is affordable and offers tremendous value to businesses by helping them reduce losses and make data-driven decisions.

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Beta-Lactamase Stability	Unaffected by Beta-Lactamases	Unaffected by Beta-Lactamases

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

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Pharmacists to Sanwo-Olu: Consultant cadre approval long overdue

- Call for Coordinated Wholesale Centre to tackle fake drugs

By Adebayo Oladejo

Pharmacists in Lagos State, under the auspices of the Pharmaceutical Society of Nigeria (PSN), have issued a strong appeal to Governor Babajide Sanwo-Olu to expedite the approval of the Consultant Pharmacists Cadre, stressing that this long-overdue decision is crucial for enhancing pharmaceutical services and healthcare delivery in the state.

They made the call during a press conference in Lagos commemorating the 2024 World Pharmacists Day, themed "Pharmacists: Meeting Global Health Needs". The pharmacists highlighted the critical role of consultant pharmacists in the healthcare system, particularly in clinical settings. They argued that establishing this cadre would enhance the quality of patient care and ensure better healthcare outcomes.

World Pharmacists Day, observed annually on 25 September 25, is organised by the International Pharmaceutical Federation to recognise and celebrate the vital contributions of pharmacists in building healthier communities worldwide.

In his address, Babayemi Oyekunle, chairman of the Lagos State chapter of PSN, emphasised the importance of the consultant pharmacist cadre for recognising the expertise of pharmacists who specialise in various fields. He noted that the approval is not merely a professional advancement but is essential for improving patient safety and healthcare delivery in Lagos State.

Oyekunle stated, "The consultant pharmacist cadre has become fully operational at the federal level, with the necessary elements integrated into the IPPIS payment platform for consultant pharmacists. Over 250 consultant pharmacists have been appointed in federal health institutions recently, with University College Hospital, Ibadan, leading the way with over 30 appointments."

He further pointed out that all other six southwest states have finalised the implementation of the consultant pharmacists cadre, leaving Lagos State embarrassingly as the only state where delays continue.

Oyekunle urged the state government to expedite action on other lingering agreements and new ones to avert what he termed "a seemingly inevitable labour unrest that could engulf the health sector."

Additionally, he called on Governor Sanwo-Olu to establish a Coordinated Wholesale Centre (CWC), similar to the one in Kano State, to address the rampant issues of drug abuse and the sale of counterfeit and expired medications.

He stated, "Setting up a CWC in Lagos will allow us to trace every drug entering the state, thereby eliminating the sale of adulterated, substandard, and fake drugs. This centre will enable us to identify the sources of all medications consumed by the citizens of Lagos."

Oyekunle emphasised the importance of establishing this centre, stating, "Lagos State has the highest population in Nigeria and should adopt global best practices.

Worldwide, people can trace the sources of their medications, but currently, in Lagos, we cannot trace the origins of our drugs."

Pharm. Tolulope Ajayi, chairman of the Association of Community Pharmacists of Nigeria (ACPN), Lagos State chapter, corroborated Oyekunle's statements, advocating for a holistic approach to patient care. He urged the government to demonstrate the political will necessary to establish a CWC, cautioning that without it, falsified drugs will continue to infiltrate the system unchecked. He identified the absence of coordinated wholesale centres as a major contributor to the proliferation of illegal medicine stores in the country.

Pharm. Abiola Paul-Ozieh,

chairman of the Healthcare Providers Association of Nigeria (HCPAN), highlighted the significance of World Pharmacists Day in recognising the vital contributions of pharmacists to enhancing patient care and public health. He stated, "Pharmacists play an essential role in

raising public awareness of health issues, ensuring the safe use of pharmaceuticals and healthcare equipment, and educating the public about medications."

This year's World Pharmacists Day also featured a health walk by members, starting at the busy Ojota Junction and concluding at the PSN office in Ogudu, Lagos



Some Lagos pharmacists at the rally ground to commemorate World Pharmacists Day 2024

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Events in Pictures



L-R: Head of Lagos Office, NIDCOM, Mr Dipo Adebowale, representing the NIDCOM Chairman, Abike Dabiri-Erewa; the CEO, Africa Resources Centre for Excellence in Supply Chain Management, Pharm. Azuka Okeke; Pharmanews Publisher, Pharm. (Sir) Ifeanyi Atueyi; Chairman, MTN Foundation Nigeria and Juli Pharmacy PLC, Prince Julius Adelus Adeluyi; NAFTraPh President, Dr John C. Ejezie; keynote speaker, Dr Joachim Okafor and John Hopkins Community Physician, Department of Medicine, Baltimore, Dr Terrance Baker at the NAFTraPh conference in Lagos recently.



L-R: Pharm. Ayuba Tanko Ibrahim, PSN presidential aspirant; Pharm. Adekunle Tometi, NAPPSA president-elect; Pharm. Folusho Ajenifuja; and Pharm. Segun Onakoya, director of Pharmaceutical services, Lagos State Health Service Commission, at the Lagos PSN Scientific Week, held recently.



Director, Finance & Internal Control, Kropmann Communications Limited, Mr Ayotunde A. Matthew; NAFTraPh President, Dr John C. Ejezie; Prof. Bolajoke Aina, Faculty of Pharmacy, Unilag; John Hopkins Community Physician, Department of Medicine, Baltimore, Dr Terrance Baker and Chairman, Lagos Chapter of ACPN, Pharm. Tolulope Ajayi at the NAFTraPh conference in Lagos, recently.



L-R: Pharm. (Dr) Modupe Oyawole, director of pharmaceutical services, LASUTH; Pharm. (Mrs) Oyinkansola Mojisola Ejoor, manager, Pharmacy and Medical Information, Chevron Nig. Ltd, and a Merit Award Winner of the Lagos PSN; Pharm. (Mrs) Oluwatoyin Ojo, LASUTH; and Pharm. (Dr) Titilayo Onedo, director of pharmaceutical services, National Orthopedic Hospital, Igbobi, felicitating with the awardee at the Lagos PSN Scientific Week, held recently.



NAFTraPh President, Dr John C. Ejezie presenting award to Chairman, Lagos Chapter of ACPN, Pharm. Tolulope Ajayi at the NAFTraPh conference in Lagos recently.



L-R: Pharm. Gafar Madehin, national secretary, PSN; Pharm. Babayemi Oyekunle, chairman, Lagos State PSN; Pharm. Adekunle Tometi, president-elect, NAPPSA; Dr Toni Adeyemi, senior special assistant to the Lagos State Governor on health; and Dr Emmanuella Olutoyin Zamba, general manager, Lagos State Health Management Agency (LASHMA), at the 2024 Scientific Week of the Lagos State Chapter of PSN, held recently.



A group photograph of PANS Presidents with Mr. Adebayo Oladejo, Senior Correspondent, Pharmanews, at the 49th Annual National Convention of PANS held at the University of Ilorin.



A cross-section of the executive members of the Association of Community Pharmacists of Nigeria (ACPN), Ikeja Zone, during the celebration of World Pharmacists Day 2024 at Omole Junior and Senior Secondary Schools, Ojodu, Lagos.

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PSN elections 2024: Stakeholders seek unifier, progress driver as president

continued from back page

Pharmacists of Nigeria (NAIP), Pharm. Ken Onuegbu, expressed the association's hope for a smooth transition of power and a more united PSN.

"Our expectation is for a hitch-free and smooth transition of power. We want to see a PSN where core democratic values are upheld, allowing the overwhelming majority of Nigerian pharmacists to determine who will govern them for the next three years or so. We hope to see a more united PSN, where members view themselves as one body, united by our profession," said Onuegbu.

Prasenjit Banerji, general secretary of the Indian Pharmaceutical Manufacturers and Importers in Nigeria (IPMIN), also shared his thoughts on the upcoming election. He emphasised the need for an incoming PSN president capable of effective advocacy with the Nigerian government on fiscal matters, especially in relation to foreign exchange.

He also called for improved dialogue with NAFDAC regarding its drug registration policies, noting that the registration window has not been opened for some time and that fees remain exorbitant compared to other countries.

Similarly, Pharm. Dr Margaret Obono, chairman of the West African Postgraduate College of Pharmacists (WAPCP), Nigeria Chapter, outlined the expectations of the college's Fellows for the new PSN president.

"We want a leader who will advance the course of the pharmacy



Pharm. Ambrose Ezeh
National Chairman, ACPN

profession, build capacity for wealth creation, and ensure more vibrant practices across all sectors of the profession. We expect a president with influence, vision, and access to government at the highest levels, who can drive progress and proactively engage in the politics of the health sector," Obono said. She also stressed the importance of fully implementing the consultant pharmacist cadre.

Meanwhile, the National Chairman of the Association of Community Pharmacists of Nigeria (ACPN), Pharm. Ambrose Igwekamma Ezeh MAW, expressed optimism about the election,



Pharm. Ken Onuegbu
NAIP National Chairman

anticipating visionary leadership that will guide the pharmaceutical industry into a new era of innovation, collaboration, and sustainable growth.

"We expect the new PSN president to prioritise the interests of community pharmacists, who often serve as the first point of contact for healthcare in our communities. Strengthening their role within the healthcare system is crucial for improving patient outcomes and access to quality care," said Igwekamma.

He further highlighted the need for stronger collaboration with

government agencies, regulatory bodies, and other stakeholders, in order to create policies that support the growth of the pharmaceutical industry and curb the menace of counterfeit medicines. He also called for the incoming president to champion professional development, ensuring that community pharmacists have opportunities to upgrade their skills.

"As we face global challenges such as pandemics and increasing demand for healthcare, we expect the new PSN leadership to support sustainable practices and drive innovation within the sector. This includes leveraging technology to improve service delivery and enhance patient care. The new president must advocate for policies that safeguard the professional space for pharmacists and ensure that our role in public health is not diminished," Igwekamma added.

He called on stakeholders in the pharmaceutical industry to approach the PSN election with integrity, a shared vision, and a commitment to advancing the profession.

He said: "To all stakeholders in the pharmaceutical industry – government agencies, healthcare practitioners, suppliers, manufacturers, and our colleagues in the various branches of the PSN – I urge us to come together to create an enabling environment for pharmacists to thrive."

"The future of our profession depends on the collective efforts of all stakeholders. Together, we can build a stronger, more resilient pharmaceutical industry in Nigeria, one that meets the needs of our communities and fosters growth for all."

Moniepoint partners ACPN to drive digital healthcare solutions

continued from back page

During the launch of the case study at the ACPN national secretariat in Lagos, Pharm. Ambrose Igwekamma Ezeh, national chairman of ACPN, stressed the importance of community pharmacies in Nigeria's healthcare system. He acknowledged the challenges they face, such as infrastructural deficits, regulatory hurdles, and the nation's reliance on imported drugs, while advocating for stronger partnerships with institutions like Moniepoint to improve healthcare outcomes.

Ezeh also highlighted the growth opportunities within the Nigerian pharmaceutical sector, particularly in light of the African Continental Free Trade Area Agreement (AfCFTA), which is expected to boost local drug production and increase foreign exchange through exports.

Dr Benjamin Olowojebutu, first national vice-president of the Nigerian Medical Association (NMA), commended the collaboration between ACPN and Moniepoint. He emphasised the need to address healthcare demands in rural and underserved areas, noting that insights from Moniepoint's report could guide research and funding efforts to improve healthcare delivery.

The case study also reveals that many pharmacies in Nigeria face challenges related to access to capital, inventory management, and sourcing quality medications. With over 70 per cent of pharmaceutical products being



L-R: Pharm. Oyekunle Babayemi, chairman, PSN, Lagos State; Pharm Omokhase Ashore, national secretary, ACPN; Mr Richard Eseka Lagos State Enterprise Sales Coordinator, Moniepoint Inc; and Pharm. Ambrose Igwekamma Ezeh, national chairman of ACPN, at the launch of the Moniepoint Case Study on Community Pharmacies in Lagos.

imported, counterfeit drugs remain a major concern.

However, Moniepoint is tackling some of these issues by providing pharmacies with Point of Sale (POS) terminals, enabling fast and reliable digital payments even in remote locations. Additionally, Moniepoint's working capital loans allow pharmacies to stock essential drugs, improving their ability to serve the public.

Didi Uwemakpan, vice-president of Corporate Affairs at Moniepoint, underscored

the significance of the report in shaping policy and offering actionable insights for Nigeria's healthcare and economic sectors.

According to Uwemakpan, "Moniepoint's mission is to create financial happiness and power dreams. Reports like this help us save lives through a fast, reliable payment system that everyone loves. We are dedicated to equipping pharmacies with the financial tools they need to enhance healthcare access for all."

"We are delighted to partner with ACPN on this groundbreaking

report. Moniepoint exists to create financial happiness and power dreams. Reports like this move us closer to that goal, allowing us to save lives through a fast, dependable payment system that has become widely trusted. With access to data on their business transactions and our business management tools, community pharmacies can efficiently plan their inventory and staffing needs, ensuring they are fully equipped to serve more customers."

The event

was attended by prominent figures, including ACPN national secretary, Pharm. Omokhase Ashore; Pharm. Oyekunle Babayemi, Lagos State chairman of the Pharmaceutical Society of Nigeria (PSN); Pharm. Josephine Ehimen, CEO of Nett Pharmacy; Richard Eseka, Lagos State enterprise sales coordinator, Moniepoint; Bemigho Awala, public and media relations manager, Moniepoint Inc; Aderayo Adesokan, external communications manager, Moniepoint; and Emmanuel Paul, brand storyteller at Moniepoint, among others.

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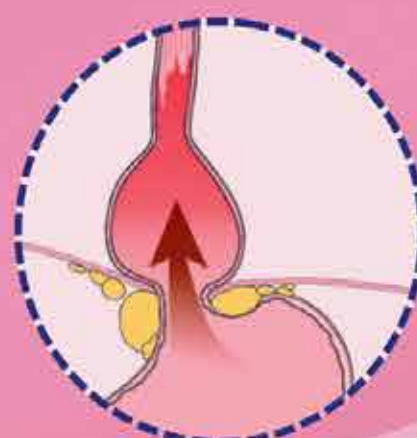
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PSN elections 2024: Stakeholders seek unifier, progress driver as president

By Ranmilowo Ojalumo

As the tenure of the current President of the Pharmaceutical Society of Nigeria (PSN), Professor Cyril Usifoh, end in November 2024, stakeholders in the pharmaceutical industry have begun voicing their expectations for the next president. Many hope for a unifier who will bring together all segments of the industry and drive progress for both the profession and the pharmaceutical sector at large.

The PSN will elect a new president during its 97th Annual National Conference, scheduled to take place in Uyo, Akwa Ibom State, from 4 to 9 November. However, there is growing concern within the industry regarding who will succeed Usifoh, especially given the current economic challenges facing the pharmaceutical sector in Nigeria.

Several industry players, speaking anonymously to *Pharmanews*, expressed their frustrations with the political atmosphere within the sector. They, however, remain hopeful that the right candidate will emerge on 8 November to lead the industry forward.

Speaking on behalf of drug manufacturers, Chairman of the Association of Industrial

continued on page 92



L-R: Mrs. Opeyemi Akinyele, managing director/head of Pharma Business, Shalina Healthcare; Samuel Oni, Brand Manager; Daniel Douglas, Winner's Coach; Alex Ajayi, Winner; Kiran Prakash, head of Sales and Marketing, Shalina Healthcare; and Chiuba Nwaosu, marketing manager, during the Shalina Ibucap Digital Contest grand finale and prize presentation held in Lagos.

Moniepoint partners ACPN to drive digital healthcare solutions

By Adebayo Oladejo

Moniepoint Inc, recognised by the *Financial Times* as Africa's fastest-growing financial institution, has partnered with the Association of Community Pharmacists of Nigeria (ACPN) to enhance healthcare access by equipping community pharmacies with innovative payment solutions and working capital.

This collaboration follows the release of a case study titled *Inside Nigeria's Community Pharmacies:*

How Moniepoint Drives Healthcare Access with Payments and Funding, which examines the crucial role community pharmacies play, especially in areas with limited access to hospitals and clinics. The study highlights how Moniepoint's digital payment solutions and working capital loans are helping these pharmacies address challenges related to payments, funding, and distribution networks.

continued on page 92

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