



SRI VENKATESWARA COLLEGE OF PHARMACY (Autonomous)

Approved by PCI & AICTE, New Delhi | Permanently Affiliated to JNTUA, Ananthapuramu
Accredited by NAAC, Bengaluru | Accredited by NBA, New Delhi for UG Programme under Tier-II
Recognized under section 2(f) & 12(B) of UGC Act, 1956
Recognized Research Centre for Pharmaceutical Sciences by JNTUA
Recognized In-House R & D by DSIR, New Delhi | DST – FIST Sponsored Institute
Ranked 62nd by NIRF 2021 Rankings by MHRD, Govt. of India
RVS Nagar, Tirupati Road, CHITTOOR – 517 127, Andhra Pradesh

FARMACIA PRACTIA LETTRE JANUARY – JUNE 2025, VOLUME IX, ISSUE I NEWSLETTER FROM THE DEPARTMENT OF PHARMACY PRACTICE

Patron

Dr. Ravuri Venkataswamy

Chairman

SV Group of Institutions

Co-Patron

Sri. Ravuri Srinivas

Vice Chairman

SV Group of Institutions

Advisory Board

Dr. Shalini, MBBS, MD

Dr. M.R. Gayathri,

Director, Quest Life Sciences

Dr. C. Arun Kumar, M.B.B.S, M.S

Medical Superintendent,

Government Hospital, Chittoor.

Editor-in-chief

Dr. D. Jothieswari, M. Pharm, Ph. D

Principal, Sri Venkateswara College of Pharmacy

Editor

Dr. J. Gangadhar Naik,

B.Pharm., Pharm.D (PB), Ph.D

Editorial Board

Dr. C. Radhika, M. Pharm, Ph. D

Dr. V. Ragini, M. Pharm, Ph. D

Mrs. G.N.A. Lakshmi, M. Pharm, (Ph.D)

Mr. N. Audinarayana, M. Pharm, (Ph. D)

Dr. S. Ooha, Pharm.D., (Ph.D)

Dr. A. Jayasri, Pharm.D

Dr. P. Pravallika, Pharm.D., (Ph.D)

Mrs. E. Latha, M. Pharm

Dr. D. Ravikiran, Pharm.D., (Ph. D)

Student Editor

P. Shiva Datta Sai, VI Pharm.D

B. Sreeja, VI Pharm.D

S. Surya, II M. Pharm

S. Rukmini, II M. Pharm

Kalishankar Tharu, IV B. Pharm

A Fazil, IV B. Pharm

Principal's Message

It gives me immense pleasure that our department of pharmacy practice, Sri Venkateswara College of Pharmacy is releasing its newsletter. The clinical pharmacy activity of our pharmacy practice department has gained strength in the last couple of years with the start of the Pharm.D program and our faculty and students are involved in patient services activities in clinical departments of RVS hospitals, a tertiary care super specialty hospital. It is indeed a matter of great pride and pleasure to share some of our experiences in patient care with every one of you. Practice directions and other documents will be drafted and approved with the assistance of the standards of practice committee. The mandate of the college is to train high-caliber healthcare professionals, offer specialized pharma services to the community, conduct research, offer consultancy services, and participate in health policy formulation. The college has adequate modern facilities to execute its mandate. The faculty and student editorial team deserve special appreciation and offer this newsletter to our beloved chairman and vice chairman.

Dr. D. Jothieswari, Principal,
Sri Venkateswara College of Pharmacy

IN THE CURRENT ISSUE

- **Drug profile**
- **Disease based information**

DRUG PROFILE ETRIPAMIL

Etripamil, marketed under the brand name Cardamyst, is a nasal spray developed by Milestone Pharmaceuticals for the treatment of paroxysmal supraventricular tachycardia (PSVT). Expected to receive FDA approval by March 2025, this medication offers a non-invasive, self-administered solution for managing sudden episodes of rapid heartbeats, a condition affecting approximately 0.2% of the U.S. population. By providing an alternative to emergency interventions and invasive procedures, Cardamyst addresses a crucial need for more accessible and convenient treatment options.

Mechanism of Action

Etripamil is a calcium channel blocker designed for rapid-acting relief of paroxysmal supraventricular tachycardia (PSVT). Unlike traditional calcium channel blockers, which are taken orally or intravenously, Etripamil is administered as a nasal spray for faster absorption and effect.

Calcium Channel Blockade

- Etripamil selectively blocks L-type calcium channels in the heart.
- This reduces calcium influx into cardiac muscle cells, slowing electrical conduction in the atrioventricular (AV) node.

Adverse Drug Reactions

Etripamil, like other calcium channel blockers, may cause certain adverse drug reactions (ADRs), though its short duration of action helps minimize prolonged effects.

- Nasal irritation or discomfort
- Dizziness or lightheadedness
- Hypotension

Dosing Considerations

Etripamil is administered as a nasal spray for the acute management of paroxysmal supraventricular tachycardia (PSVT). Proper dosing is essential to ensure effectiveness while minimizing adverse effects.

Initial Dose: 70 mg (one spray in one nostril) at the onset of a PSVT episode.

Limitations of Use

While Etripamil (Cardamyst) is effective for managing paroxysmal supraventricular tachycardia (PSVT), it has certain limitations that must be considered before use.

Not for Chronic or Preventive Use

Designed for acute, on-demand treatment of PSVT episodes.

Advantages Over Existing Therapies

Etripamil (Cardamyst) introduces a self-administered, non-invasive approach to treating paroxysmal supraventricular tachycardia (PSVT), offering several advantages over traditional therapies.

Clinical Trials and Efficacy

Etripamil (Cardamyst), developed by Milestone Pharmaceuticals, has undergone several clinical trials to evaluate its safety, efficacy, and tolerability for managing paroxysmal supraventricular tachycardia (PSVT).

DISEASE BASED INFORMATION H5N9 Avian Influenza:

Introduction

H5N9 avian influenza is a newly identified strain of bird flu that emerged in early 2025. It was first detected on a duck farm in California and is believed to have resulted from a genetic combination of H5N1, H7N9, and H9N2 influenza viruses.

Causes

H5N9 avian influenza is caused by the influenza A virus, which primarily affects birds but has the potential to infect humans and other animals. The main causes include:

Genetic Reassortment: H5N9 emerged due to the mixing of genetic material from different avian influenza strains (H5N1, H7N9, and H9N2), leading to the formation of a new variant.

Wild Bird Migration : Wild birds, especially waterfowl, act as natural reservoirs for the virus and can spread it across regions through migration.

Signs and Symptoms

In Birds

- Sudden death without clear symptoms

Mild Symptoms

- Fever and chills

Severe Symptoms:

- Difficulty breathing or shortness of breath

Diagnosis

Clinical Examination: Doctors assess symptoms such as fever, respiratory distress, and flu-like signs, especially in individuals exposed to birds or poultry farms.

Laboratory Tests

RT-PCR (Reverse Transcription Polymerase Chain Reaction): Detects viral RNA from respiratory samples (throat/nasal swabs).

Imaging Tests (For Severe Cases)

Chest X-rays or CT scans: Used to check for pneumonia or lung complications in severe infections.

Treatment

Antiviral Medications

Oseltamivir (Tamiflu) and Zanamivir (Relenza):

- These antiviral drugs can reduce the severity and duration of illness if taken early (within 48 hours of symptom onset).
- Analgesics and Antipyretics: Medications like acetaminophen to reduce pain and fever.

Prevention

Biosecurity Measures in Poultry Farms

- Regular disinfection of poultry farms and equipment.

Personal Protective Measures

- Avoid direct contact with sick or dead birds.



Suggestions and comments may kindly be sent to the Editorial Board, Department of Pharmacy Practice, SVCOP, Chittoor. Phone: 7729999181 Email: editorsvcopnewsletter@svcop.in