

PHARMACY PHILE

University of Waterloo Society of Pharmacy Students
ISSUE 66 | November & December 2016

PRESIDENT & VP'S MESSAGE



“Deck the halls with beta-blockers LOL
LOL LOL LOL LOL LOL LOL LOL LOL”

From the SOPhS council, we wish everyone and their families a very happy, relaxing and safe holiday season! This time of year is always known for reflection, gratitude, and hope; as we look back on the past year at all of our accomplishments and challenges and the hopes and goals we have for the upcoming year. As we reflect on the past year at the School of Pharmacy, we would like to congratulate Rx2016 on your graduation and passing PEBC's and wish you good luck as you start your new journey as practicing pharmacists! We are so excited for you and hope to see/hear about the wonderful things you are doing in 2017!

Congratulations to everyone in Rx2017, Rx2018 and Rx2019 for completing another year of Pharmacy and moving one step closer to our goal - the PharmD. Hats off to Rx2019 for finishing and making it through 12 straight months of classes! We can relate to the challenges that you've faced this past year, and we hope that you take this break to look back on your accomplishments and everything you've learned/achieved, and best of luck as you all head out on your first co-op placement!

Even with final exams looming, these past two months have been quite busy here at the School of Pharmacy. Thanks to our Athletics Reps for planning a fun and active afternoon at Skyzone to give us a break from studying! We were also very fortunate to have the oppor-

tunity to attend educational sessions put on by various clubs here on campus, such as the Paediatric OTC Jeopardy Night, learning about Oncology Pharmacy with UWCAPhO, CSHP Symposium on Geriatric Care and a couple of OPA dinner and learns. One of the bigger events in November was CODE Blue hosted by the Waterloo Health Professions Club (WHPC). It is an interprofessional event held every year, that allows us pharmacy students to socialize and network with students from different healthcare programs such as Optometry, Medicine, and Social Work. Thank you WHPC for planning such a great event and we look forward to more interprofessional events in the future! On a more festive note, Santa Claus made a special visit to the School of Pharmacy for a photo session with the students, with proceeds from the photos going to the Rx2017 Graduation Committee.

Behind the scenes, SOPhS council has been hard at work planning Phrosh 2020 for the incoming pharmacy students. That's right; a new cohort of students will be starting their pharmacy journey with us in just under a week! The theme has been set, events scheduled, swag bags and t-shirts are waiting to be distributed as we welcome Rx2020 at our Opening Welcome Night on Monday, January 2.

Once again, we wish everyone all the best this holiday season! We hope you've been able to binge watch all your favourite tv-shows (because we all know that Netflix is a no-no during exams... haha), indulge on amazing homemade food, and spend time with your family and friends! Best wishes to Rx2019 on your first co-op and to those in Rx2017 who are starting their clinical rotations. For the rest of Rx2017 and Rx2018 we are excited to see you back on campus and reunite with our Phriends and Phamily.

- *Melanie Sanderson and Kristina Kozlovsky, SOPhS President and VP*

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CAPSI CORNER



WOW! Another semester has come and gone - whether that has been spent in school or on co-op. And for some students, a much needed break after a long year at school.

This term allowed for some friendly pharmacy competition where students put their clinical, compounding and literary skills to the test! The competitions included the Student Literacy Competition, Patient Interview Competition, OTC Counselling Competition and the Compounding Competition. The winners from each of these competitions will be off to compete in the national competitions in the warmest city in Canada - WINNIPEG!

The month of October also included our IPSF Health Week Campaign where students had the opportunity to learn some facts about worldwide Tobacco usage, collaborate with other health care professional students and indulge in some waffles. Thank you for all those who came out to support CAPSI whether it was in school or at home with our social media challenge! With your help we were able to raise over \$100 for The Lung Association!

UW CAPSI's most anticipated fall event, the High Stake Mock OSCEs were held on both November 28th and December 1st evening. This year 64 Rx2017 CAPSI members had the opportunity to gain some extra practice and prepare for their High Stake OSCEs.

In the Professional Practice Lab, we had two tracks running with three very different interactive stations and one non-interactive station. Candidates faced scenarios, which included ethical dilemmas, drug interactions and recommending dosage adjustments. Our judges included current professors, recent graduates, a regional coordinator and a medical student! Judges provided students with on the spot feedback and share their wealth of knowledge.

Lastly, I would like to thank all of the judges, the standardized patients, and the Rx2017 for making it a successful night!

The term may be over, however UW CAPSI is hard at work preparing for next term's events. We look forward to seeing you all in the New Year!

*-Emily Cowley,
UW CAPSI Junior Representative*

PHRESH FROM THE PHARM

Cilantro Pesto Quesadilla

Ingredients:

Pesto

- 1 bunch fresh cilantro
- 1/2 cup pine nuts
- 1 cup Dried tomatoes
- 1/2 cup olive oil
- 1 tsp chili powder
- 1 tsp cumin powder

Quesadillas

- 8 10-inch flour tortillas
- 2 cups shredded jack cheese

- 1) Preheat oven to 450° F and turn on convection fan
- 2) Line baking tray with parchment paper
- 3) For the pesto, blend all ingredients together until smooth
- 4) On the baking tray, top a tortilla with a heaping spoonful of pesto. Then sprinkle evenly with cheese and top with a second tortilla. Repeat with remaining ingredients.
- 5) Bake for 5 minutes. Then flip and bake for another 5 minutes.



CSHP Hospital Pharmacists in Interdisciplinary Geriatric care



Seniors represent a demographic group with an escalating reliance on drug therapy. ODB claims made by senior residents increased by over two-fold from 1997 to 2006¹, and continues to be on the rise. In part, this accounts from the rising prevalence of the elderly in our society— the so-called “silver tsunami”. While the aging population is a triumph of overcoming medical and socioeconomic obstacles, it also presents a challenge to hospital pharmacists and the healthcare team of caring for a growing group with individual needs.

Polypharmacy and chronic illness go hand in hand for the elderly; as people age, they develop more chronic conditions requiring multiple drug therapies. The caveat of this is the increased potential for inappropriately prescribed medications and serious adverse effects leading to hospitalization. ADRs are prevalent in seniors due to their progressive organ dysfunction and hypersensitivity to certain drugs that decrease their ability to process medications effectively². Unsurprisingly, the consequences of polypharmacy in seniors include ADRs, nonadherence, increased risk of morbidity, and mortality². One study indicated that ADRs among Canadian seniors cost \$35.7M in 2007- with over 80% of the cost being accountable from hospitalization³.

Hospital pharmacists play a critical role in preventing ADRs in seniors

by collaborating with healthcare practitioners in medication reconciliation. In this systematic process, healthcare providers work together and with patients to create a precise list of medications that is consistent across all transition points within the hospital and other healthcare settings. Hospital pharmacists reconcile patients’ drug use through Best Possible Medication Histories (BPMHs). The hospital pharmacist interviews the patient and their family, and consults the patient’s community pharmacy to check drug use. The BPMH includes changes and discontinuation of drugs, as well as complete documentation of drug dosage, route, and frequency to carefully assess for drug interactions. If discrepancies occur between the patient’s drug use and the list obtained from their pharmacies or OBD, the hospital pharmacist advises physicians on correcting the inconsistency. The BMPH serves as a comprehensive medication history by including the sources of medication information, and hospital pharmacists chiefly lead this role in medication reconciliation.

The Acute Care of Elders (ACE) team is a model of inpatient geriatric care that involves pharmacists and the healthcare team working holistically towards minimizing adverse events and functional decline resulting from hospitalization. Each discipline involved, such as the physician and nurses, manages the acute issues of the patient and integrates assessments to determine the

optimal treatment. The hospital pharmacist’s role in the unit is diverse, from educating other healthcare practitioners on geriatric drug therapy, dose optimization, changing route of medication administration, and performing interventions such as addition and deletion of therapy⁴. The expanded scope of the hospital pharmacist in an ACE unit effectively enhances the medication use in senior patients and reduces ADRs.

The reality of chronic diseases affecting the drug therapy of seniors elevates the importance of medical management for this group. Illnesses in the older population are often mistaken as a normal part of the aging process, raising the question of whether further training of healthcare practitioners is needed to manage geriatric patients effectively. As long as improving patient safety continues to be a priority for pharmacists and other healthcare practitioners alike, there will be a necessity for healthcare adaptations to meet the need of a growing older population.

-Eunice Ku, UW CSHP



CO-OP CHRONICLE

Dan Saragosti, Rx2018

Think Research

Tell us about the roles and responsibilities you took on in your co-op placement?

The company I worked at develops and digitizes standardized order sets and clinical protocols for hospitals. I was part of the Clinical Research and Development team, composed of pharmacists, nurses and physicians. Initially, my role was to help the team with drug-related queries but with time that role expanded to helping other team members develop up-to-date order sets and clinical protocols.

What was the biggest lesson you learned from co-op?

It was definitely a unique experience coming from a health science background. There were many lessons I learned, one of the more important ones has to be how positive and genuine collaboration can lead to better outcomes. Everyone was very approachable and it fostered a productive environment. I also learnt that you got to make the most of every opportunity. Although I was part of the R&D team, I actively sought opportunities to work with other departments including Clinical Implementation, Client Success, Sales, and Privacy and Security. It really provided a lot of insight into the way a start up company operates.

What were some barriers or challenges that you encountered?

I wouldn't characterize it as a barrier, but in the beginning I had to figure out what I wanted my role to be during this co-op experience. Nevertheless, this flexibility allowed me to maximize my learning opportunities rather than focus on a few designated tasks.

What were some personal highlights?

Definitely taking part in the pumpkin carving competition.

Does one day in particular stand out to you?

Going to Peterborough Regional Health Center to see how the applications developed by the company are used. It's one thing to work with a product in the development phase and another to see it actually go live in the healthcare setting.

Any words of wisdom to fellow students?

Ask questions and feed your curiosity!



Bridging the knowledge gap



Building tools clinicians love



Making care more collaborative



Providing tailored project support





SOPhS Communications

Have an opinion about our expanded scope of practice? Experience something on co-op that you'd like to share?

SOPhS encourages you to submit an article for the **Pharm Phile** newsletter! Submissions can be sent to pharmsoc@uwaterloo.ca by the end of every month for inclusion in the next edition!

If you have any interest in becoming involved with the SOPhS Communications Committee please send an email our way! We are especially looking for individuals interested in helping out with the SOPhS website.

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Please check out the calendar on the next page, or the weekly SOPhS Updates, for information about all of our events. If you have an event coming up that you would like to inform students about, please submit an article for a SOPhS Update to pharmsoc@uwaterloo.ca.



Society of Pharmacy Students (SOPhS)

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SOPhS 6 WEEK CALENDAR

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week 1	January 8	9	10	11	12	13	14
	15	16	17 Round 1 Co-Op Applications Due	18	19	20	21
Week 2	22	23	24 Round 1 Co-Op Job Interviews	25	26	27	28
	29	30 Round 1 Co-Op Rankings Open	31	February 1 Round 1 Co-Op Rankings Due Round 1 Co-Op	2	3	4
Week 3	5	6	7 Round 2 Co-Op Applications Due	8	9	10	11
	12	13	14 Round 2 Co-Op Job Interviews	15	16 Round 2 Co-Op Rankings Open	17 Round 2 Co-Op Rankings Due Round 2 Co-Op Matches	18
Week 4							
Week 5							
Week 6							

SOPhS Calendar Notes

Please note that event dates may be subject to change. Contact SOPhS if you are unsure of an event date.

You may also find this information on the SOPhS Google Calendar (<http://tinyurl.com/jo3awk7>). It is our hope that this calendar will provide you with all of the event and deadline information you need during each term. If you would like to add an event to the SOPhS calendar please email the SOPhS Secretary at secretary@sophs.ca.