World Journal of Current Medical and Pharmaceutical Research
ISSN-2582-0222

DBT Sponsered Two Days National Conference on A Paradigm Shift for Emerging Paraphernalia in Advancement of Cancer Research

28 and 29 Feb-2020

DOI: https://doi.org/10.37022/WJCMPR.2020.SC1

Organized By

Nirmala College of Pharmacy
Affiliated to Kerala University of Health Sciencess Thrrisur
Approved By Government of Kerala, PCI and AICTE
Nirmala College Rd, Kizhakkekara, Muvattupuzha, Kerala 686661

World Journal of Current Medical and Pharmaceutical Research
ISSN-2582-0222

IT CAN BE IDENTIFIED BEFORE IT APPEARS;

"GENETIC VARIATIONS AS GENETIC MARKERS"

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Abstract

Lynch syndrome or Hereditary Nonpolyposis Colorectal Cancer (HNPCC) is an autosomal dominant genetic condition which predisposes a person to have a high risk of colon cancer as well as other cancers including endometrial cancer, ovarian cancer, stomach cancer etc.It accounts for 2-5% of all colorectal cancers over the globe.People with Lynch syndrome have a 10-80% lifetime risk for colorectal cancer and 15-60% lifetime risk for endometrial cancer. This condition is mainly caused due to an inherited mutation in one of the DNA mismatch repair genes(MMR) .In HNPCC, a mutation that inactivates an MMR gene eventually leads to the accumulation of cell mutations and increases the likelihood of malignant transformation and cancer.The main genes involved are MLH1,MSH2,MSH6,PMS2 and EPCAM.If a person is diagnosed with lynch syndrome there is a 50% chance that the variant gene is inherited by the next generation.Hence efforts to identify as many individuals with Lynch Syndrome as possible will prevent cancers and save lives.This includes "cascade testing" which involves genetic counseling and testing in blood relatives of individuals who have been identified with specific genetic mutation. The two specific tests for Lynch Syndrome are the- Microsatellite Instability Testing (MSI) and Immunohistochemisty testing (IHC) .Nowadays universal tumour screening for Lynch Syndrome is being done.The primary goal for this relies completely on testing and counseling as many at-risk individuals as possible .This approach must be optimized to achieve high family reach.The management involves surgical removal of the particular part affected and chemotherapeutic medications.

This study aims at improving the awareness of general population on Lynch syndrome and helping them to identify the condition as early as possible so as to decrease the mortality and increase the life time.

Key words:lynchsyndrome,genecascading,immunohistochemistrytesting,microsatellite instability testing

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A STUDY ON USE AND PREVALANCE OF SELF-MEDICATION IN DERMATOPHYTOSIS IN A TERTIARY CARE HOSPITAL

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Abstract

Background: Dermatophytosis is a contagious health problem caused by filamentous fungi commonly called as dermatophyte leading to the infection of keratinized tissues.

Aim: The study was conducted to assess the use and prevalence of self-medication practice of patients with dermatophytosis attending a private tertiary care referral hospital to ascertain the growing menace of over the counter drug abuse and its implications in dermatophytosis.

Methods: We used data'sof all persons aged 13-60 years, however pregnant population was excluded, derived from observational-cross sectional study performed in KIMS Al ShifaHosptalPvt. Ltd, situated in perinthalmanna, Malappuram district of Kerala.

Results: A total of 48 patients among the 107 patients took self-medication for dermatophyte infection which contributes to 44.9% of the total population. Out of 39 male patients, only 23 (48%) patients have taken self-medication whereas 25 (52%) patients among the 43 female patients. Similarly it was found that 55.1% (59) of the population approached the physician directly when the clinical symptoms were presented. Among the different anatomical area affected tinea cruris was found to be the most prevalent followed tinea pedis. From the study, 58.3% of patients obtained medicines from nearby community pharmacies and 31.3% of patients based on the suggestion from the relatives or friends. A small percentage of population received medication from their own experience (6.3%) as well as from previous physician's prescription.

Conclusion: It was confirmed that the adolescent age group have mostly chosen self-medication for dermatophyte infection. Tinea cruris was the most common.

KEY WORDS: dermatophytosis, self-medication