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Medicament Reliability and Quality Avowal - Role of Homoeopathic Pharmacist

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Abstract: ***Practitioners, Doctors, Pharmacist and especially students of Homoeopathy must be cognizant of the safety and quality of Homoeopathic medicine as a fundamental prerequisite. Standardization procedures and knowledge about safe and effective methods for producing Homoeopathic medicine can be integrated into the Homoeopathic curriculum. Although the risks associated with homoeopathic products are relatively low when compared to conventional medications, the field is becoming more and more popular, and more people are turning to homoeopathy for self - medication. This means that ongoing oversight is necessary to guarantee the efficacy and security of products that are made directly available to consumers.***

Keywords: Medicament reliability, Homoeopathy, Medication error, Quality control

1. Introduction

Because it's homeopathic, it must be safe. Such remarks from the public and medical professionals are not uncommon, but are they accurate[1]?One of a pharmacist's primary responsibilities is to ensure that patients receive their medication prescriptions and refills safely. Pharmacists make sure that patients receive the right medication at the right dose and that they are given the instructions they need to use it safely and effectively.

Pharmacists are in charge of managing the supply of medications to guarantee that they are available at reasonable prices and that their quality is upheld throughout the supply chain. The hospital pharmacist is in charge of managing the entire medication distribution cycle, which includes writing prescriptions based on diagnoses, selecting medications, preparing and administering those medications, and dispensing them. As a result, the pharmacist can play a crucial part in guaranteeing the safety of medications in hospitals.

Despite their reputation as the people "behind the glass" dispensing drugs, pharmacists are now more widely recognized as essential members of the multidisciplinary care team that handle complex patient needs in the evolving healthcare environment[2].

Ways to keep up medication administration safety

Safety factors to consider:

1) To avoid disruptions, plan when to provide medications:
2) Dispense medication in a calm environment.
3) Refrain from conversing with others. Respect the no - interrupt zone policies of the agency.
4) Prescriptions should be prepared one patient at a time. When preparing drugs, remember the Seven Rights.
5) Check to see if the drug still works: that is expiry date is not over.
6) Keep your hands clean.
7) Look around for any additional safety precautions.
8) Show the patient who you are.
9) Use two patient identifiers, such as name and birthdate, to confirm the patient's identity in addition to verifying it with the drug administration record (MAR).
10) Check to see if MAR and the doctor's instructions are consistent.
11) Check the allergy band for any allergies and find out what kind and how severe they are.
12) Complete any necessary focused evaluations, and log vital signs and/or lab results on MAR.
13) Provide patient education when needed[3].
14) Perform the SEVEN RIGHTS (this must be done with each individual medication):
    - The right patient
    - The right medication (drug)
    - The right dose
    - The right route
    - The right time
    - The right reason
    - The right documentation
15) The right patient:

Use two patient identifiers, such as name and birthdate, to confirm that you are dealing with the appropriate patient.
The correct patient: Verify the patient's identity by utilising two patient identifiers, such as name and birthdate.

Examine the patient's wristband and MAR.

- **The suitable drug or medication:**

Verify that the medication you have is appropriate for the patient under the circumstances at hand.

- **The appropriate dosage:**

Verify that the dosage is appropriate for the patient's age, size, and condition.

- **The best root:**

Verify if the path is suitable for the patient's present state of health.

- **The appropriate time**:

follow the dosage and timing guidelines.

- **The proper reason:**

Verify that the patient is taking the drug for the intended purpose.

- **The proper documentation**:

Before giving out medication, always double - check any ambiguous or erroneous documentation.

It is imperative that you do not record the administration of a medication until it has been provided[4].

The medication's name, dosage, and route must be verified on the label and cross - referenced with the MAR three times:

- During the extraction of medication from the drawer
- While pouring of medication
- When medication is dispensed at the bedside.

Medication Mistakes and Their Avoidance

Errors that can occur during prescription, dispensing, or administration of pharmaceuticals are referred to as medication errors.

Among the most common kinds of pharmaceutical errors are:

- Dosage mistakes, - - - - - - - - such as using the wrong dosage
- Route errors - - - - - - - include those caused by improper or non - specified routes.
- Formulation errors - - - - - , such as missing formulas
- Error in frequency, - - - - - such as missing frequencies
- Incorrect strength, - - - - - for example, is a strength error.
- Administration errors, - - - - - such as negligence, incompetence, or miscommunication
- Incorrect drug substitution, - - - - - incorrect medicine given

Any safety issue that occurs when prescribing, preparing, dispensing, administering, monitoring, or giving advise on medications is considered a medication error.

Methods to Cut Down on Medication Mistakes

1) **Verify that the seven rules of medication are being observed.**
2) **Comply with the Correct Procedures for Medication Reconciliation**;
   There should be procedures in place for medication reconciliation whenever individuals are moved between residences or facilities. Medication needs to be examined and confirmed in accordance with the previously mentioned five R s. Next, this information should be verified by nurses and chemists using the medication administration record (MAR).
3) **Carefully Examine Procedures Frequently**
   Nurses who are starting a new shift or working the same shift as another must go over all medication records to make sure that each patient's treatment has been appropriately ordered, acknowledged, and transcribed. This ought to be contrasted with the treatment administration record, the MAR, or the doctor's order. A chart flag procedure may be used in certain nursing homes to indicate any new orders that demand confirmation.
4) **Request that Additional Nurses Review the Treatment**
   Reducing pharmaceutical errors requires collaboration among team members. An additional nurse reading back a prescription or treatment to the providing doctor significantly lowers the likelihood of incorrectly written drugs. In order to guarantee that the MAR has been checked and is as accurate as feasible, nurses can also employ this approach.
5) **Take Into Account a Name Alert**
   For persons whose names sound same or even similar, name notifications can help avoid prescription mistakes.
6) **Write down the numbers clearly (30/200/IM).**
7) **Keep a record of everything you do**.
   Lack of documentation can result in missing or duplicate doses since there is no record of the prior course of treatment. It's also recommended practice to read the medication's prescription label and expiration date.
8) **Make Sure Prescriptions are Stored Correctly**
   Each medication will need to be stored differently.
9) **Get to Know the Correct Guidelines for Medication Administration**
   It is crucial to understand the policies, rules, and procedures around the administration of medications. By recording everything you do, we can lower the number of errors. This includes accurately identifying pharmaceuticals and keeping accurate medication records.

Medication errors can endanger lives, result in serious illnesses, or significantly lower someone's quality of life. Rather of focusing on assigning blame, you attempt to determine what initially led to the drug error. Acquiring knowledge from medicine mishaps entails figuring out why something went wrong and taking action to keep mistakes from happening again[5].

It mandates that you:

- record drug mistakes
- Analyse the reasons behind errors
- Create a plan of action to take measures to avoid various mistakes.
- Examine whether those actions have improved the safety of medications as intended.

Patient councelling

Empowering and Educating patients

In order to decrease pharmaceutical errors, we are always changing or improving processes and putting regulations in place, but if we don't prioritise the patient, these efforts may not succeed.

Prescriber ignorance of other medications and preparations the patient is taking is the biggest cause of medication errors, as it can result in dangerous interactions or overdoses. This vital information, which is only known by the patient, helps to avoid drug errors. The patient alone is aware of the prescription medications they are taking, as well as how and when they are taken.

Methods for guaranteeing pharmaceutical quality control

To get the desired therapy result, the next five components are essential.

1) It has been demonstrated that the active pharmaceutical ingredient (API) is both safe and effective for this treatment.
2) The product is of a quality appropriate to yield a useful result.
3) The prescriber correctly determined that the treatment is necessary.
4) The patient has received enough instructions from the prescriber or dispenser on how to use the product.
5) The patient appropriately follows the recommended regimen.

Realistic methods for ensuring quality

There are three categories into which the processes for creating an extensive quality assurance programme can be separated:

1) **Processes to guarantee that only pharmaceuticals that satisfy the most recent quality criteria are purchased.** These consist of:

- carefully choosing the product
- carefully choosing the supplier
- carefully selecting each batch of the product
- certifying good manufacturing processes
- certifying batches
- Including in the contract specifics about the quality of the product.

2) Processes to confirm that shipped items fulfil the requirements. These consist of:

- Inspection both before and after shipment

3) **Processes to keep an eye on and preserve the quality of prescription drugs from the time they are received until the patient takes them.** These include,

- Adequate distribution and storage practices;
- suitable dosing;
- patient instructions about medication administration;
- Pharmacovigilance reporting programmes and product defects [6].

Labelling and Packaging

Medicinal product manufacturing necessitates exacting attention to detail and strict adherence to quality control protocols.

One of the most important parts of producing pharmaceuticals is packing and labelling the final goods.

The Food and Drug Administration (FDA) has established extensive regulations under Title 21, Chapter I, Subchapter C, Part 211, known as the Current Good Manufacturing Practice (cGMP) for Finished Pharmaceuticals, to guarantee the safety, efficacy, and traceability of pharmaceuticals.

The identification of a drug's active ingredients and excipients, as well as the provision of instructions to guarantee patient safety and effective medication administration, are all made possible by drug labels.

The Drugs and Cosmetics Rules, 1945, Section 106A

1) The words ‘Homoeopathic medicine'.
2) The name of the medicine—
3) The potency of the Homoeopathic medicine - - - decimal, centesimal or millesimal scale.
4) When sold in the manufacturer's original containers, the manufacturer's name and address are listed.
   If a Homoeopathic medication is offered in a container different from the one used by the manufacturer, the vendor's name and address should be noted.
5) If the homoeopathic medication contains alcohol, the label must indicate the ALCOHOL CONTENT in terms of ethyl alcohol % by volume. [Given that it will not be required to indicate the alcohol content on the label if the total amount of homoeopathic medicine in the container is 30 millilitres or less.]
6) a) A DISTINCTIVE BATCH NUMBER, that is, the number that is used to record and make available for inspection the details of the manufacture of the specific batch from which the substance in the container is taken; the figures corresponding to the batch number are preceded by the terms "Batch No. " or "Batch" or "Lot Number" or "Lot" or any other prefix that distinguishes;
   b) manufacturing licence number; the number is preceded by the terms "Manufacturing Licence Number, " "Mfg. Lic No. " or "M. L. "[7]

How may drug errors be recorded?

Name, identification number, diagnosis, medication name, dosage, route, frequency, and indication; error type and severity; actual or potential patient harm; corrective action taken; causes and contributing factors of the error; and suggestions for improvement are all included in this.

When documenting pharmaceutical errors, utilise language that is objective, unambiguous, and free of criticism or assigning blame.

The purpose of recording pharmaceutical errors is to learn from the mistake and keep it from happening again, not to place blame or punish someone.

Use language that describes the facts rather than expressions that cast doubt on the facts.

Avoid using confusing or vague terminology as well.

How may drug errors be reported?

Medication errors related to the usage of a pharmaceutical product may be reported voluntarily and unsolicited to a competent body by a consumer or a healthcare provider.

Records should be kept of suspected adverse reactions (both serious and non - serious) linked to medication errors, that is, when the suspected adverse reaction is a direct result of the medicinal product and was brought on by an error.

2. Conclusions

When it comes to lowering pharmaceutical errors and enhancing medication safety, Pharmacists have a vital role. They can manage drug regimens, encourage medication adherence, and prevent medication - related issues owe to

their special knowledge of pharmaceuticals and possible side effects. To create patient - centered medication management plans and guarantee that patients receive the best possible pharmaceutical therapy, healthcare professionals must work together. By preventing medication errors and acknowledging the necessity of adverse drug events in homoeopathy, it becomes the responsibility of all Homoeopathic practitioners and beneficiaries to help provide the groundwork for the safe use of Homoeopathic medications.

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