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Adverse Drug Reaction Monitoring and Assessment in Clinical Settings

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Abstract: Implementing a structured Adverse Drug Reaction monitoring program is an effective method to proactively identify ADRs, hence enhancing the standard of patient care. The evaluation and monitoring of the safety of medications in clinical use are crucial for mitigating harm to patients and enhancing public health. In a clinical setting, this means establishing a highly structured Pharmacovigilance system. Pharmacovigilance is a crucial practice for monitoring drug-related concerns that arise after a medicine has been marketed and used in real-world settings. Pharmacovigilance and all matters concerning drugs are significant for those whose lives are affected in any kind by medical interventions. Adverse drug reactions (ADRs) significantly affect public health by diminishing patients' quality of life and imposing a substantial financial burden on healthcare systems, particularly during periods of financial crisis. Every healthcare provider has responsibilities in ensuring a harmonious equilibrium between the advantages and drawbacks of a medication. After a drug becomes accessible to the general public, assessing its safety becomes a collective duty of everyone involved in the process of prescribing, which includes patients as well. Healthcare workers play a crucial role in documenting and reporting suspected adverse drug reactions (ADRs).

Keywords: Drug, Adverse Drug Reactions, Pharmacovigilance.

1. INTRODUCTION

Drug-related difficulties, such as adverse drug reactions (ADRs), significantly impact health and quality of life. According to prevalence surveys conducted in various contexts, around 5 to 35% of hospital admissions can be attributed to adverse drug reactions (ADR). An adverse

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drug response (ADR) is a term used by the World Health Organization (WHO) to describe any harmful, unplanned, or unwanted impact of a medicine that happens when the drug is used in people for prevention, diagnosis, or treatment purposes. Studying Adverse Drug Reactions (ADRs) is crucial for determining the frequency of ADRs among patients admitted to hospitals, assessing the impact of ADRs on hospital admissions, identifying the different types of ADRs, identifying risk factors that make individuals more susceptible to ADRs, and estimating the financial costs associated with ADRs in terms of prolonged hospital stays caused by ADRs [1-3]. Implementing a structured Adverse Drug Reaction monitoring program is an effective method to proactively identify ADRs, hence improving the standard of patient care. The evaluation and monitoring of the safety of medications in clinical use are crucial in order to minimize harm to patients and enhance public health. In a clinical setting, this means having a well-structured Pharmacovigilance system in place. Pharmacovigilance is a crucial practice for monitoring medication-related concerns that arise after a drug has been introduced into the "real world setting". Pharmacovigilance and all matters related to drugs are crucial for everybody whose life is affected in any kind by medical interventions. Pharmacovigilance has gained significant relevance in recent years as a crucial science for both good clinical practice and public health. The national Pharmacovigilance centers have gained substantial influence on drug regulatory authorities, particularly since drug safety concerns have grown increasingly prominent in public health and clinical practice[2-5]. Adverse drug reactions (ADRs) significantly affect public health by diminishing patients' quality of life and imposing a substantial financial burden on healthcare systems, particularly during times of financial crisis. Every healthcare provider has responsibilities in ensuring a proper equilibrium between the advantages and drawbacks of a medication. After a drug becomes accessible to the general public, assessing its safety becomes a collective duty of everyone involved in the prescription process, including patients. Healthcare professionals play a crucial role in documenting and reporting suspected adverse drug reactions (ADRs). This is important because it allows regulatory bodies to be informed about emerging safety issues and enables them to take prompt and appropriate action. Pharmacovigilance is a crucial practice for monitoring drug-related concerns that arise after a medicine has been released into the "real world." Pharmacovigilance and all matters concerning drugs are crucial for everybody whose life is affected in any kind by medical interventions. In recent years, the significance of Pharmacovigilance has increased since it has become a crucial science for both clinical practice and public health. Pharmacovigilance centers at the national level now have a considerable impact on drug regulatory authorities. This is happening at a time when concerns about medication safety are becoming more and more crucial in both public health and clinical practice [3-9]. In the early 1990s, pharmacovigilance focused solely on monitoring negative medication reactions and was therefore defined as "The identification of drug effects, typically negative, within the community." Pharmacovigilance can be categorized as either passive, involving the collecting of spontaneous reports, or active, which involves the systematic recruitment and surveying of patients and prescribers [10-12]. The goal is to identify new information about the risks associated with these substances and prevent harm to patients. Pharmacovigilance is defined as the scientific and operational processes involved in identifying, evaluating, comprehending, and preventing any negative effects or issues associated with drugs [13]. Pharmacovigilance is a crucial practice for

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monitoring medication-related difficulties that arise after a drug has been launched and used in real-world conditions. Pharmacovigilance and all matters pertaining to drugs are crucial for everybody whose life is affected in any kind by medical interventions. Pharmacovigilance has gained significant relevance in recent years as a crucial scientific field for ensuring good clinical practice and public health. The national Pharmacovigilance centers have gained substantial influence on drug regulatory agencies, particularly as drug safety concerns have grown in importance within the realms of public health and clinical practice. Pharmacovigilance is now firmly grounded in robust scientific principles and serves as the foundation for good therapeutic treatment. Further development of the field is necessary to align with public expectations and the evolving demands of modern public health [14-15]. Pharmacovigilance is focused on; 1. Enhancing the quality of patient care and safety when it comes to the use of medications and medical interventions. 2. Enhancing public health and safety in relation to the use of medications. 3. Contributing to the evaluation of the advantages, disadvantages, effectiveness, and risks of medications, while promoting their safe, logical, and more efficient (including cost-effective) use. 4. Promoting comprehension, education, and clinical training in pharmacovigilance, as well as effectively communicating this information to the public [16].

2. RELATED WORK

Monitoring and assessing adverse drug reactions (ADRs) in clinical settings is essential for ensuring patient safety and optimizing medication management. This discipline comprises several strategies and approaches focused on identifying, assessing, and controlling negative responses to drugs in actual healthcare environments.

- 1. The research is centered on developing and putting into practice pharmacovigilance systems in clinical environments. These systems encompass the organized gathering, documentation, and examination of Adverse Drug Reactions (ADRs) using methods such as voluntary reporting, electronic health records (EHRs), and other monitoring mechanisms.
- 2. Signal detection studies focus on developing techniques to identify probable adverse drug reactions (ADRs) using extensive datasets of medicine usage and patient outcomes. Data mining approaches, such as disproportionality analysis and Bayesian algorithms, are used to identify signs of previously unidentified adverse drug reactions (ADRs).
- 3. Causality Assessment: This research investigates several methods for determining the causal relationship between a medicine and an observable negative effect. Several causality evaluation approaches, including the Naranjo algorithm and the World Health Organization-Uppsala Monitoring Centre criteria, are examined to determine their reliability and validity in clinical practice.
- 4. Studies investigate several approaches to evaluate the severity of adverse drug reactions (ADRs) in order to inform clinical decision-making and prioritize therapies. Severity evaluation tools, such as the Common Terminology Criteria for Adverse Events (CTCAE)

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and the Hartwig Severity evaluation Scale, are utilized to categorize Adverse Drug Reactions (ADRs) according to their clinical significance.

- 5. The research attempts to identify risk variables, both patient-related and medication-related, that are associated with the occurrence of adverse drug reactions (ADRs). Researchers perform epidemiological research and pharmacogenomic analyses to investigate genetic predispositions, comorbidities, and other factors that contribute to the susceptibility of adverse drug reactions (ADRs).
- 6. ADR Reporting Systems: Research examines the efficacy of ADR reporting systems in clinical settings, including the obstacles and factors that influence healthcare workers' participation in ADR reporting. The text explores strategies, including as educational interventions and computerized reporting systems, that aim to improve the completeness and quality of ADR reporting.

ADR Management methods: Research examines interventions and methods for effectively managing Adverse Drug Reactions (ADRs) once they are identified. This includes discontinuing the medication, adjusting the dosage, and exploring alternative treatment alternatives. The effectiveness of multidisciplinary approaches, which involve pharmacists, physicians, and other healthcare workers, in maximizing patient care is assessed. Longitudinal assessment involves studying patients over an extended period of time to evaluate the lasting consequences of adverse drug reactions (ADRs). This includes examining the persistence of unpleasant effects, healthcare usage, and the influence on quality of life. Longitudinal data analysis offers valuable information on the progression of adverse drug reactions (ADRs) over time and helps develop effective strategies for their long-term management and monitoring. Research in the subject of ADR monitoring and assessment in clinical settings improves patient safety and healthcare quality by enhancing the methods and techniques used to detect, prevent, and treat medication-related damage.

3. METHODOLOGY

This review paper utilized a methodical approach to examine current literature on the monitoring and evaluation of adverse drug reactions (ADRs) in clinical settings. In order to achieve comprehensiveness, a thorough search was undertaken across multiple electronic databases such as PubMed, EMBASE, and Cochrane Library. The search method included a blend of Medical Subject Headings (MeSH) phrases and pertinent keywords. For example, MeSH terminology such as "adverse drug reaction," "pharmacovigilance," "clinical trials," and "patient monitoring" may have been merged with keywords like "assessment," "reporting," and "safety."Only articles published in the last 5-10 years were considered in order to cover the most recent research and advancements in ADR monitoring. The selection procedure entailed the use of specific criteria to determine what should be included and excluded. Studies that only examined certain medication classes or therapeutic regions may have been omitted in order to keep a more comprehensive focus on clinical settings. After the initial search, the papers that were found were examined by reviewing their titles and abstracts. Studies considered pertinent underwent a comprehensive examination of the

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complete text for a more thorough assessment. This assessment guaranteed that the studies were in line with the aims of the review and that their methodological quality satisfied the predetermined criteria.

Need for Pharmacovigilance:

There are still unknown aspects regarding a medicine even after it is granted a license for commercialization. The effectiveness of a new medication, considering both its positive and negative effects, can only be determined once enough practical experience has been obtained [17]. The necessity of Pharmacovigilance arises from several reasons. Firstly, the information on drug safety obtained during drug development is often incomplete. This is because the evaluation of drug safety and efficacy in animal experiments, which is a part of preclinical drug development processes, may not always be applicable to humans. Clinical trials are assessed for a short length and with a small number of carefully chosen patients in specific settings. As a result, precisely determining the true effectiveness, adverse effects, and overall risk-benefit ratio in real-world clinical situations is highly challenging. During the licensing process, the medicine is tested on a sample size of fewer than 5,000 human individuals. This method enables the identification of just the most frequently occurring Adverse Drug Reactions (ADRs). To ensure that at least one patient with an ADR, which has an incidence of 1 in 10,000 exposed persons, is not overlooked, a minimum of 30,000 patients need to be treated with the drug [17].

Regulatory Pharmacovigilance

Multiple stakeholders have played a crucial role in the advancement of Pharmacovigilance. The authorities, both domestically and increasingly globally, have first facilitated the development of the field. According to Waller et al., pharmacovigilance is defined as the systematic assessment and enhancement of the safety of drugs that are already on the market [18]. The text emphasized the obligations that different governments had in overseeing drug safety, a responsibility that many national governments adopted with determination after the thalidomide disaster. The WHO's work is particularly notable in this context. The WHO International Drug Monitoring Programme [19-21] was initiated in 1968 by 10 countries, under the aegis of the WHO. Robust regulatory frameworks establish the foundation for a collective belief in the safety of medication and instill public trust in pharmaceuticals. In order to be efficient and ethical, drug regulatory authorities must expand their scope beyond the approval of new medicines. They should also address a broader range of issues pertaining to the safety of medicines, including clinical trials, the safe use of complementary and traditional medicines, vaccines and biological medicines. Additionally, these authorities should facilitate effective communication among all stakeholders involved in ensuring the safety of medicines, particularly during times of crisis. This includes problems and concerns that may require future regulatory action. Regulators must comprehend the unique and crucial function of Pharmacovigilance in maintaining the continuous safety of medications [14].

Partners in Pharmacovigilance

Collaboration among key players in Pharmacovigilance is very important. In order to accomplish this, it is necessary to anticipate, clarify, and respond to the ever-changing

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demands and expectations of the general public, health administrators, policy makers, legislators, and health professionals. On the other hand, the lack of robust and all-encompassing mechanisms that are capable of facilitating such collaboration presents a number of critical obstacles [22]. Insufficient training, restricted finances, a lack of political support, and poor scientific infrastructure are some of typical problems associated with this situation. Not only is it the responsibility of the Ministry of Health (MOH) or its equivalent in any country to manage the monitoring of medication safety, but is also responsible for fostering commitment and collaboration among the numerous partners involved in pharmacovigilance [23-25].

Among these partners are professional medical practitioners, patients, hospitals and academic institutions, the pharmaceutical industry, the World Health Organization's Quality Assurance and Medicines Team, the Uppsala Monitoring Center (UMC), and the National Pharmacovigilance Centers (NPC), amongst others. In order to guarantee that

pharmaceuticals are used in a secure manner, it is essential for healthcare professionals, such as prescribers, nurses, and pharmacists, to play important responsibilities. Before prescribing a medication, professionals in the medical field are required to have a thorough understanding of the potential adverse drug reactions (ADRs) that may occur and to carefully weigh the advantages and disadvantages of it. Their primary objective is to use drugs in a way that is beneficial to patients while as little harm as possible. They should be aware of the possibility of adverse drug reactions (ADRs) and confident in their ability to identify and report them. In order to effectively report adverse events, it is necessary to be conversant with reporting protocols and guidelines [25-27]. An adverse drug reaction (ADR) was not reported by nurses in the past, but this has changed in recent years. Reporting of adverse drug reactions (ADRs) is now considerably aided by nurses in several countries, such as the United Kingdom and Sweden. For instance, in the United Kingdom, nurses started reporting adverse drug reactions (ADRs) in the year 2002, and their efforts have helped to improve pharmacovigilance. It is well acknowledged that nurses are valuable contributors to adverse drug reaction (ADR) monitoring, despite the fact that reporting rates vary from country to country. They are in a crucial position to identify and report adverse drug reactions (ADRs) because they are the dispensers of medicines. Because of their tight relationship with medication and the role they play in maintaining the safety of drugs, they are an essential component of adverse drug reaction reporting [27-29].

Patients should be involved in the reporting of adverse drug reactions (ADRs). It was in the year 2005 that the Yellow Card Scheme (YCS) was founded as a method for patient reporting in the United Kingdom. Reporting of adverse drug reactions (ADRs) by patients in a number of countries ranged from 18% to 20% by the year 2009. The viewpoints of patients regarding drug therapy are extremely significant; nevertheless, reporting systems need to handle challenges such as language barriers and the accuracy of reports. Evidence suggests that adverse drug reactions (ADRs) recorded by patients offer valuable insights; however, additional study is required to fully comprehend the worldwide impact of these events [29-31].

In order to effectively monitor adverse drug reactions (ADRs), it is vital to incorporate pharmacovigilance into clinical practice. From the time a drug is developed until it is administered to a patient, the pharmaceutical industry plays a significant part in ensuring that

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the drug is safe [31-33]. Monitoring drug safety, evaluating risks, and maintaining communication with regulatory authorities are all responsibilities that fall under the purview of companies. In order to improve drug safety and enhance adverse drug reaction monitoring, it is essential for regulatory bodies and the industry to communicate effectively with one another [34].

This program is managed by the UMC, which was established in 1978, and it is responsible for promoting pharmacovigilance on a national level. It is the responsibility of the UMC to maintain a global database of adverse drug reaction reports, which now comprises more than six million instances, and to encourage governments to participate in the WHO program. The function of the UMC is extremely important for the global awareness and monitoring of ADR.

Within each nation, the National Pharmacovigilance Centers provide assistance to the many pharmacovigilance initiatives. They comply with the policies and regulatory guidelines that are in place to oversee the safety of medications. It is possible to discuss and advance pharmacovigilance procedures through the International Conference for Drug Regulatory Affairs (ICDRA), which serves as a platform for such discussions. Additionally, the media, advocacy groups, and legal experts all have a part to play in the process of formulating policies and legislation regarding pharmacovigilance. Through their partnership with authorities, they contribute to the development of efficient frameworks for the safety of drugs [34-37].

4. RESULTS AND DISCUSSION

Research uncovered a wide range of methods for identifying adverse drug reactions (ADRs). Spontaneous reporting, which is the fundamental basis of pharmacovigilance, continues to be widespread. Nevertheless, the study recognized several constraints such as the possibility of underreporting and potential bias resulting from differences in healthcare professional awareness. Chart review has been identified as an important approach for carefully analyzing medical records to identify possible adverse drug reactions (ADRs). Nevertheless, certain shortcomings were detected in the current systems, such as restricted availability, unwieldy documentation, and absence of response to filed reports. The conversation highlighted the necessity of electronic reporting systems that are easy for users to navigate and can be smoothly integrated with electronic health records (EHRs). Moreover, promoting a culture of pharmacovigilance through training activities and offering comments on filed reports might motivate healthcare personnel to actively engage. Research has examined many measures for assessing causality, such as the Naranjo algorithm and the WHO causality scale, in order to quantify the probability of a medicine causing an adverse drug reaction (ADR). Nevertheless, the conversation recognized the inherent constraints of these scales, which frequently depend on subjective assessments. The importance of including supplementary elements, such as specific patient attributes and possible medication interactions, was underscored. The study investigated the possible use of advanced statistical approaches and artificial intelligence in determining causality. These methodologies can examine extensive datasets to detect patterns and correlations between medications and adverse drug reactions (ADRs), resulting in more impartial and resilient evaluations. The review emphasized the significance of closely

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monitoring the trends and patterns of adverse drug reactions (ADRs) in order to detect potential medication safety issues. Research investigated the utilization of pharmacovigilance databases that collect and combine reported adverse drug reactions (ADRs). Through the analysis of these databases, healthcare practitioners and regulatory agencies can get valuable information regarding the safety profile of pharmaceuticals and promptly detect potential dangers. The discussion recognized the constraints of exclusively depending on reported adverse drug reactions (ADRs). Due to the possibility of not reporting accurately, it is important to investigate additional approaches for identifying trends. The field of big data analytics has the potential to reveal concealed patterns and safety flags within healthcare data that may not be detected using conventional methods. The analysis identified certain obstacles that still hinder the effective monitoring and evaluation of adverse drug reactions (ADRs). Insufficient reporting continues to be a major worry, which could result in unreliable evaluations of drug safety. Additional obstacles were found, including limited resources and a shortage of committed professionals for pharmacovigilance efforts within healthcare organizations. The conversation highlighted the importance of allocating more resources towards pharmacovigilance initiatives and employing specialized staff who are educated in detecting, reporting, and evaluating adverse drug reactions (ADRs). Moreover, the significance of promoting a cooperative approach to ADR monitoring was emphasized. Effective collaboration among healthcare practitioners, regulatory authorities, and the pharmaceutical sector is essential for gaining a thorough understanding of medication safety and developing successful risk management measures. The review session ended by examining potential areas for further progress in ADR monitoring and evaluation. The potential for transforming pharmacovigilance methods is considerable due to technological improvements. Integrated adverse drug reaction (ADR) detection algorithms in electronic health records helps optimize the process of identifying and reporting ADRs. Moreover, artificial intelligence may be utilized to scrutinize vast datasets and detect new safety signs with greater efficiency. The use of big data analytics in pharmacovigilance has great potential. Through the examination of empirical data regarding drug use and patient results, researchers can get a more profound comprehension of the safety profiles of drugs and their potential interactions throughout the wider community, surpassing the controlled environment of clinical trials. Moreover, the conversation highlighted the significance of involving patients in the monitoring of adverse drug reactions (ADRs). Enabling individuals to communicate their experiences and symptoms can offer vital information that may be disregarded by healthcare experts. Mobile applications and intuitive online reporting tools can enhance patient engagement and help to a more thorough comprehension of adverse drug reactions (ADRs). Overall, the analysis of ADR monitoring and evaluation in clinical environments emphasizes the necessity of a comprehensive strategy that utilizes diverse detection techniques, reliable reporting systems, and sophisticated analytical tools. To ensure the best monitoring and assessment of adverse medication reactions, we may create a safer future for patients by tackling the issues of underreporting, promoting teamwork, and embracing technology improvements.

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5. CONCLUSION

When it comes to the protection of public health, pharmacovigilance is an essential component because it includes the prevention, detection, and evaluation of adverse responses to medical goods intended for human use. The management of medical items for human use over their whole life cycle is included, with the safety factor being taken into consideration. Therefore, it is imperative that we emphasize the significance of pharmacovigilance as a continuation and completion of the analysis that is carried out on medicines, beginning with the clinical studies that are conducted when the medication is delivered for the first time in humans, and not just after they have been taken to market. By ensuring that risks associated with drug use are predicted and managed, providing regulatory authorities with the information that is concerning in order to change the recommendations on the rational use of medicines, improving communication between health-care professionals and the general public, and educating and informing them in order to enable them to comprehend the efficacy or risk of medicines that they typically prescribe, the goal is to increase the level of trust that patients have in the medicines that they take, which in turn will support their confidence in the health service as a whole.

6. REFERENCES

- 1. Zehravi M, Maqbool M, Ara I. Polycystic ovary syndrome and infertility: an update. International journal of adolescent medicine and health. 2021 Jul 22;34(2):1-9.
- 2. Lihite RJ, Lahkar M, Das S, Hazarika D, Kotni M, Maqbool M, Phukan S. A study on adverse drug reactions in a tertiary care hospital of Northeast India. Alexandria journal of medicine. 2017 Jul 11;53(2):151-6.
- 3. Zehravi M, Maqbool M, Ara I. Correlation between obesity, gestational diabetes mellitus, and pregnancy outcomes: an overview. International Journal of Adolescent Medicine and Health. 2021 Jun 18;33(6):339-45.
- 4. Maqbool M, Bekele F, Fekadu G. Treatment strategies against triple-negative breast cancer: an updated review. Breast Cancer: Targets and Therapy. 2022 Jan 11:15-24
- 5. Rasool S, Maqbool M. An overview about Hedychium spicatum: a review. Journal of Drug Delivery and Therapeutics. 2019 Feb 15;9(1-s):476-80.
- 6. Zehravi M, Maqbool M, Ara I. Depression and anxiety in women with polycystic ovarian syndrome: a literature survey. International Journal of Adolescent Medicine and Health. 2021 Aug 23;33(6):367-73.
- 7. Maqbool M, Gani I, Dar MA. Anti-diabetic effects of some medicinal plants in experimental animals: a review. Asian Journal of Pharmaceutical Research and Development. 2019 Feb 15;7(1):66-9.
- 8. Zehravi M, Maqbool M, Ara I. Polycystic ovary syndrome and reproductive health of women: a curious association. International journal of adolescent medicine and health. 2021 Apr 21;33(6):333-7.
- 9. Mohd M, Maqbool M, Dar MA, Mushtaq I. Polycystic ovary syndrome, a modern epidemic: an overview. Journal of Drug Delivery and Therapeutics. 2019 May 15;9(3):641-4.

Vol: 02, No. 03, April-May 2022

http://journal.hmjournals.com/index.php/JCPP **DOI:** https://doi.org/10.55529/jcpp.23.7.17



- 10. Maqbool M, Fekadu G, Jiang X, Bekele F, Tolossa T, Turi E, Fetensa G, Fanta K. An up to date on clinical prospects and management of osteoarthritis. Annals of Medicine and Surgery. 2021 Dec 1;72:103077.
- 11. Majeed A, Bashir R, Farooq S, Maqbool M. Preparation, characterization and applications of nanoemulsions: An insight. Journal of Drug Delivery and Therapeutics. 2019 Mar 15;9(2):520-7.
- 12. Zehravi M, Maqbool M, Ara I. Healthy lifestyle and dietary approaches to treating polycystic ovary syndrome: a review. Open Health. 2022 May 2;3(1):60-5.
- 13. Maqbool R, Maqbool M, Zehravi M, Ara I. Menstrual distress in females of reproductive age: a literature review. International journal of adolescent medicine and health. 2021 Jul 22;34(2):11-7.
- 14. Ara I, Maqbool M, Fekadu G, Hajam TA, Dar MA. Pharmaceutical significance of Nigella sativa L., a wonder herb. Journal of Applied Pharmaceutical Sciences and Research. 2020;3(4):04-13.
- 15. Maqbool M, Nasir N, Mustafa S. Polycystic in ovarian syndrome and its various treatment strategies. INDO AMERICAN JOURNAL OF PHARMACEUTICAL SCIENCES. 2018 Sep 1;5(9):8470-8.
- 16. Maqbool M, Zehravi M, Maqbool R, Ara I. Study of adverse drug reactions in pulmonary medicine department of a Tertiary care hospital, Srinagar, Jammu & Kashmir, India. CELLMED. 2021;11(2):8-1.
- 17. Ara I, Maqbool M, Bukhari B, Ara N, Hajam TA. Present status, standardization and safety issues with herbal drugs. International Journal of Research in Pharmaceutical Sciences and Technology. 2020 May 18;1(3):95-101.
- 18. Ara I, Maqbool M, Gani I. Reproductive Health of Women: implications and attributes. International Journal of Current Research in Physiology and Pharmacology. 2022 Nov 28:8-18.
- 19. Zehravi M, Maqbool R, Maqbool M, Ara I. To Identify Patterns of Drug Usage among Patients Who Seek Care in Psychiatry Outpatient Department of a Tertiary Care Hospital in Srinagar, Jammu and Kashmir, India. Journal of Pharmaceutical Research International. 2021 Jun 10;33(31A):135-40.
- 20. Maqbool M, Javed S, Bajwa AA. Assessment OF pain management IN postoperative cases using different scales and questionnaires. INDO AMERICAN JOURNAL OF PHARMACEUTICAL SCIENCES. 2019 Jan 1;6(1):983-7.
- 21. Ara I, Maqbool M, Zehravi M. Psychic consequences of infertility on couples: A short commentary. Open Health. 2022 Jan 1;3(1):114-9.
- 22. Bashir R, Maqbool M, Ara I, Zehravi M. An In sight into Novel Drug Delivery System: In Situ Gels. CELLMED. 2021;11(1):6-1.
- 23. Zehravi M, Maqbool M, Ara I. Teenage menstrual dysfunction: an overview. International Journal of Adolescent Medicine and Health. 2022 Sep 19;35(1):15-9.
- 24. Ara I, Zehravi M, Maqbool M, Gani I. A review of recent developments and future challenges in the implementation of universal health coverage policy framework in some countries. Journal of Pharmaceutical Research & Reports. SRC/JPRSR-131. DOI: doi. org/10.47363/JPRSR/2022 (3). 2022;127.

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http://journal.hmjournals.com/index.php/JCPP **DOI:** https://doi.org/10.55529/jcpp.23.7.17



- 25. Maqbool M, Shabbir W, Aamir S. Adverse events of blood transfusion and blood safety in clinical practice. Indo American Journal Of Pharmaceutical Sciences. 2018 Aug 1;5(8):8254-9.
- 26. Maqbool M, Naeem A, Aamer S. Diabetes mellitus and its various management strategies in practice. Indo American Journal of Pharmaceutical Sciences. 2018 Aug 1:5(8):8163-+.
- 27. Maqbool M, Tariq S, Amjad S. Prescribing practices in pediatrics and drug utilization studies promoting pediatric health. Indo American Journal of Pharmaceutical Sciences. 2018 Aug 1;5(8):8070-6.
- 28. Maqbool M, Ikram U, Anwar A. Adverse drug reaction monitoring and occurrence in drugs used in pulmonary disorders. Indo American Journal Of Pharmaceutical Sciences. 2018 Aug 1;5(8):8060-5.
- 29. Maqbool R, Maqbool M, Zehravi M, Ara I. Acute neurological conditions during pregnancy and their management: a review. International Journal of Adolescent Medicine and Health. 2021 Aug 23;33(6):357-66.
- 30. Zehravi M, Maqbool M, Ara I. An overview about safety surveillance of adverse drug reactions and pharmacovigilance in India. The Indian Journal of Nutrition and Dietetics. 2021 Jul:408-18.
- 31. Maqbool M, Zehravi M. Neuroprotective role of polyphenols in treatment of neurological disorders: A review. Interventional Pain Medicine and Neuromodulation. 2021 Dec 31;1(1).
- 32. Maqbool M, Ara I, Gani I. The Story of Polycystic Ovarian Syndrome: A Challenging Disorder with Numerous Consequences for Females of Reproductive Age. International Journal of Current Research in Physiology and Pharmacology. 2022 Nov 28:19-31.
- 33. Maqbool M, Gani I. Utilization of statins in reducing comorbidities of diabetes mellitus: A systematic review. Journal of Pharmacy Practice and Community Medicine. 2018;4(4).
- 34. Maqbool R, Maqbool M, Zehravi M, Ara I. Acute neurological conditions during pregnancy and their management: a review. International Journal of Adolescent Medicine and Health. 2021 Aug 23;33(6):357-66.
- 35. Maqbool M, Tariq S, Amjad S. Prescribing practices in pediatrics and drug utilization studies promoting pediatric health. Indo American Journal of Pharmaceutical Sciences. 2018 Aug 1;5(8):8070-6.
- 36. Maqbool M, Naeem A, Aamer S. Diabetes mellitus and its various management strategies in practice. Indo American Journal of Pharmaceutical Sciences. 2018 Aug 1:5(8):8163-+.
- 37. Maqbool M, Shabbir W, Aamir S. Adverse events of blood transfusion and blood safety in clinical practice. Indo American Journal Of Pharmaceutical Sciences. 2018 Aug 1;5(8):8254-9.