



Pharmacist Course Brochure
2023

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2023 Courses

Alcohol-Associated liver disease and drug-related harm

Alcohol use disorder is a severe chronic drinking problem that is characterised by impaired ability to stop or control alcohol use despite adverse social, occupational or health consequences.

Objectives

After completing this activity, pharmacists should be able to:

- discuss the incidence of alcohol-associated liver disease;
- discuss the types of alcoholic liver disease;
- list commonly prescribed medications that may require dose reduction or cessation in people with alcohol-associated liver disease;
- discuss treatment options;
- discuss useful counselling tips to help patients manage their condition.

Ankylosing spondylitis

To help support early diagnosis & management of ankylosing spondylitis, it is important that health professionals are able to recognise the possibility of AS being present. The pharmacist is in a good position to help identify AS and referral to a GP. This course aims to provide an overview of this condition and provide pharmacists with insight on the pathophysiology, prevalence, causes, risk factors, diagnosis and management of AS.

Objectives

After completion of this activity, you should be able to:

- describe ankylosing spondylitis (AS) including what it is, its causes, risk factors and symptoms;
- briefly outline the techniques used to diagnose a patient with AS;
- discuss the management of AS (non-pharmacological and pharmacological);
- highlight the key impacts AS has on quality of life of patients and the role pharmacists can play in the management of AS.

Continuous Blood Glucose Monitoring

An important part of diabetes education is for patients to understand the long-term effects of high blood glucose and the importance of trying to keep blood glucose levels (BGLs) within target range. In addition to doctors monitoring haemoglobin A1c (HbA1c), also called glycated haemoglobin, most people with diabetes learn how to monitor their own blood glucose and how to respond to changes, whether high or low. Lifestyle changes regarding diet and exercise are important as is the administration of medications and possible adverse effects. The diabetes team, of which pharmacists are an important part, provide support and education to people with diabetes in their cycle of care and management plans.

Objectives

After completing this activity pharmacists should be able to:

- describe how diabetes should be monitored;
- describe which patients benefit from blood glucose monitoring;
- describe the use and advantages of continuous glucose monitoring devices.

Depression – Update

Depression is one of the most common mental disorders in the world. Depression is also one of the leading causes of disability in South Africa and worldwide. Given depression's effect on the population and healthcare system, it's important for pharmacists to be familiar with proper management of this common illness.

Objectives

On completion of this course, you will be able

1. Identify criteria for diagnosis of major depressive disorder.
2. Evaluate the role of psychotherapy for the treatment of major depressive disorder.
3. Recommend initial antidepressant therapy for a patient.
4. Choose an appropriate duration of therapy to maximize antidepressant treatment response.
5. Discuss potential adverse effects of antidepressants.

Exacerbations of COPD – minimising the risk

Pharmacists play an essential role in supporting their patients manage their COPD medications, inhaler selection and technique, as well as non-pharmacological strategies to help improve quality of life.

Objectives

After completing this activity, pharmacists should be able to:

- define COPD
- highlight the importance of monitoring COPD status over time;
- briefly discuss the pharmacological management of COPD;
- explain the importance of correct inhaler selection , and
- describe non-pharmacological strategies to support patients with COPD, in order to minimise COPD exacerbations.

Managing Medicines for Hyperglycaemia

Most medicines used to control hyperglycaemia have potential adverse effects. The wide range of pharmacological actions of medication used in diabetes management, particularly when more than one medication is used, increases the breadth of predictable adverse effects. To provide the necessary advice to patients, it is imperative that pharmacists can easily recognise and provide strategies to ameliorate both common and predictable adverse effects, as well as the less frequent but potentially serious adverse effects.

Objectives

After completing this module, pharmacists should be able to:

- recognise both common and serious adverse effects of medicines to manage hyperglycaemia;
- highlight the impact adverse effects of medication for diabetes management may have on patient quality of life and adherence;
- provide appropriate advice to patients experiencing problematic adverse effects of specific medication used for diabetes management.

Mental health and wellbeing of children

Pharmacists have a far-reaching impact on childhood mental health outcomes through a multitude of strategies that promote early intervention, appropriate treatment, counselling, monitoring, multidisciplinary collaboration, health promotion and medicines management.

Objectives

After completing this activity pharmacists should be able to:

- describe risk factors and protective factors that contribute to the mental health of children;
- identify the most common mental health conditions in children— attention deficit hyperactivity disorder (ADHD), anxiety disorders, major depressive disorder and conduct disorders;
- describe the role of pharmacists in regard to mental health support for children and their caregivers.

Monkeypox – A brief Overview

Monkeypox virus, is an enveloped double-stranded DNA virus that is part of the orthopoxviral genus (which also includes smallpox). The name monkeypox, comes from its initial discovery amongst monkeys in a laboratory in 1958. Monkeypox can infect animals, such as Gambian pouched rats, rope squirrels and tree squirrels. Transmission of monkeypox is mainly through close contact with an infected animal, close or sexual contact, or contact with contaminated materials (e.g. bed linen).

Objectives

By the end of this activity, participants will be able to:

- Review monkeypox epidemiology and presentation.
- Outline current recommendations for prevention and treatment of monkeypox including vaccination strategies and guidance for management of infected individuals
- Articulate the role of the pharmacist in working with the health care team to mitigate the spread of monkeypox

Onychomycosis

Onychomycosis is a fungal infection of the nail unit, caused by dermatophyte fungi, non-dermatophyte moulds (NDMs) and yeasts (mainly *Candida* spp.). It presents with some, or all nail plate and bed discolouration, thickening, onycholysis and can affect the nail folds.

Objectives

By the end of this module, pharmacists should be able to:

- describe onychomycosis in terms of aetiology, clinical features, risk factors and situations that warrant referral
- discuss OTC medicines used to manage onychomycosis;
- outline the lifestyle changes for the prevention of onychomycosis recurrence;
- describe the role pharmacists can play in ensuring the appropriate management of onychomycosis.

Shingles

Diagnosis and management early is key to the management of shingles. Pharmacists need to know the symptoms, risk factors, those who are vulnerable and possible complications. Prevention and management strategies are also important.

Objectives

After completing this module pharmacists will be able to:

- describe shingles in terms of its prevalence, aetiology, risk factors, symptoms, and diagnosis
- outline some of the complications of shingles infection, including postherpetic neuralgia
- highlight the importance of vaccination as a preventative measure for shingles and its associated complications
- discuss the management of shingles, including pharmacological and non-pharmacological measures
- discuss the management of postherpetic neuralgia.

Trans and gender diverse healthcare

Pharmacists play a vital role in primary healthcare. It has been widely documented that a pharmacist will see their patients more than any other healthcare practitioner,¹ as they are among the most accessible. However, as a profession, pharmacists receive very little formal education regarding trans and gender diverse patients. To date, it has largely been up to the individual to self-educate, with little guidance of where to search for advice, management and referral pathways.

Objectives

- explain what transgender means highlighting some of the problems and challenges they face,
- discuss gender-affirming care. For medical intervention, describe the therapies used.
- highlight some of the side effects associated with taking hormones.
- discuss how pharmacists can counsel transgender patients to provide a supportive environment for transgender and gender diverse individuals.

Work-related musculoskeletal disorders

This module discusses the importance of managing work-related musculoskeletal disorders in primary care including the typical features that pharmacists should be aware of. It examines the role of medicines in facilitating the active interventions needed for optimal recovery, and important considerations for pharmacists when choosing the most appropriate option for patients.

Objectives

After completing this module, pharmacists should be able to:

- describe work-related musculoskeletal disorders in terms of social and economic burden
- discuss the evidence for treating WMSD with non-pharmacological and pharmacological interventions
- explain key considerations when treating WMSD with non-steroidal anti-inflammatory drugs
- provide effective counselling to patients to assist their recovery and safe return to work

2022 Courses

Bipolar Disorders - Update

Bipolar disorder, also referred to as bipolar affective disorder or manic depression, is a psychiatric diagnosis that describes a category of mood disorders defined by the presence of one or more episodes of abnormally elevated energy levels, cognition, and mood with or without one or more depressive episodes.

Objectives

- describe the various forms of bipolar disorder;
- demonstrate empathy about common issues faced by people who are suffering from bipolar disorder;
- recommend various strategies to assist these people to improve quality of life; discuss the various treatment options for bipolar disorder;
- discuss the various treatment options for bipolar disorder in pregnancy.

Constipation in Adults

When it comes to constipation management, one size doesn't fit all. Pharmacists need to treat the individual suffering from constipation with consideration of their variable factors and red flags needing referral.

Objectives

After completing this activity, pharmacists should be able to:

- describe the causes of constipation in adults, including causes requiring referral;
- discuss lifestyle measures and pharmacotherapy used in the management of constipation in adults;
- describe the role of the pharmacist in assessing, managing and supporting an adult with constipation.

Cough in the pharmacy

Due to the vast nature of coughs and the abundance of cough medications available, this course will focus on the classification and differential causes of cough, impact of cough on quality of life, and over-the-counter (OTC) antitussive therapy for relief of that stubborn dry cough.

Course Objectives

By the end of this course participants should be able to:

- classify and differentiate the aetiologies of cough;
- identify the impact of coughing on quality of life;
- compare and contrast over-the-counter (OTC) antitussive therapies for cough relief.

Differentiating Abdominal Pain

Pharmacists should be familiar with the medicines available over the counter for symptomatic relief of abdominal pain and their usefulness in diagnosis. However, the diagnosis of abdominal pain is complex and there is a great potential for harm due to delayed treatment or masked symptoms. The role of the pharmacist in this context is to be familiar with the key red flags and effectively communicate with patients the importance of discussing these symptoms with their doctor when appropriate.

Learning Objectives

After completing this activity, pharmacists should be able to:

- describe some of the common causes of infertility;
- describe what options are available in pharmacy to help patients wanting to conceive;
- describe the referral points for patients having difficulty conceiving

Endometriosis, endometrial hyperplasia and polycystic ovarian syndrome

This article discusses the clinical presentation of endometriosis, endometrial hyperplasia and polycystic ovarian syndrome, and the role that metformin has in the management of each condition.

Learning Objectives

By the end of this activity, pharmacists will be able to

- recognize common symptoms and presentation of endometriosis, endometrial hyperplasia and polycystic ovary syndrome;
- identify treatment options commonly prescribed for patients who have endometriosis, endometrial hyperplasia, or polycystic ovary syndrome;
- recall lifestyle management approaches that pharmacists can recommend to patients with polycystic ovary syndrome;
- identify the role of metformin in the management of endometriosis, endometrial hyperplasia, polycystic ovary syndrome.

First Aid 1 - Common minor injuries

Pharmacy is often the first port of call for patients who need first aid treatment. Pharmacy staff will be expected to be able to provide empathetic, efficient, and up-to-date evidence-based advice and treatment. Pharmacies should have a first aid kit and a trained first aider on the premises. This module is the first in a series of three and will be looking at commonly encountered situations that may require first aid in the pharmacy, considering the relevant advice and action to take.

Objectives

From this module you will learn about:

- Common minor injuries that patients may present with in the pharmacy
- How these injuries should be managed in a pharmacy setting
- When to refer patients to their GP
- Information and advice pharmacists can offer patients

First Aid 2 - Intermediate injuries

Pharmacy is often the first port of call for patients who need first aid treatment. Pharmacy staff will be expected to be able to provide empathetic, efficient, and up-to-date evidence-based advice and treatment. Pharmacies should have a first aid kit and a trained first aider on the premises. This module is the second in a series of three and will be looking at injuries that may require first aid in the pharmacy, considering the relevant advice and action to take.

Objectives

From this module you will learn about:

- Intermediate injuries that may present in the pharmacy
- How these injuries should be managed in a pharmacy setting
- When to refer patients to their GP
- Information and advice pharmacists can offer patients

First Aid 3 - Medical Emergencies

Pharmacy is often the first port of call for patients who need first aid treatment. Pharmacy staff will be expected to be able to provide empathetic, efficient, and up-to-date evidence-based advice and treatment. Pharmacies should have a first aid kit and a trained first aider on the premises. This module is the third in a series that focus on medical emergencies pharmacy teams may encounter.

Objectives

From this module you will learn about:

- Medical emergencies that may present in the pharmacy
- First aid support pharmacy teams can offer while waiting for emergency services
- Key red flag symptoms for medical emergencies
- Information and advice pharmacists can offer patients

Infant Nutrition

Pharmacists are a reliable source of evidence-based information when it comes to infant care. Infant nutrition is not just about breastfeeding nowadays. With the wide range of infant formula available, current advice is that parents should always speak to a healthcare professional with regard to infant feeding. Pharmacy teams must therefore keep themselves up to date with the latest information.

Objectives

By the end of this course pharmacy teams should:

- Understand the role of infant nutrition
- Describe the risks and benefits of breastfeeding
- Describe infant formula as an alternative to breastfeeding
- Describe the role of the pharmacy team

Infertility

Pharmacists are ideally placed to support couples in their fertility treatment journey by helping them understand the rationale for the various prescribed treatments and refer them to appropriate resources or counseling, where appropriate.

Objectives

After completing this activity, pharmacists should be able to:

- describe some of the common causes of infertility;
- describe what options are available in pharmacy to help patients wanting to conceive;
- describe the referral points for patients having difficulty conceiving.

Medication Overuse Headache

Medication overuse headache (MOH) is a chronic headache disorder that is caused by the overuse of medicines often used to treat headaches and migraines. Given the devastating impact MOH can have on an individual's relationships, productivity and health; it is imperative to apply evidence-based patient-centred care to the management of this condition.

Objectives

After completing this activity, pharmacists should be able to:

- describe the risk factors for the development of medication overuse headache;
- describe therapeutic options available for patients affected by medication overuse headache.

Medications that cause Obesity

Overweight and obesity refer to excess body weight, which is a risk factor for many diseases and chronic conditions such as cardiovascular disease, type 2 diabetes, high blood pressure, asthma, back pain and some cancers. Overweight and obesity are also associated with higher rates of death.

While there are many causes of weight gain, many medicines may also cause weight gain. People who may be within normal weight may experience weight gain due to the choice of medication. This may result in non-adherence further increasing risk factors.

This article aims to examine choices of medication for common medical conditions that have the least negative impact on weight.

Learning Objectives

After completing this activity, pharmacists should be able to:

- list some causes of increase in weight;
- identify which medicines can cause weight gain;
- recognise medicines for common conditions that have a lower risk of weight gain.

Medicine Induced Upper Gastrointestinal Disease

Upper gastrointestinal symptoms are common complaints discussed and treated in pharmacy. Pharmacists are well placed to identify potential medicine-related causes and make recommendations to remove or reduce the risk. In this course, we take a closer look at medicine-induced upper gastrointestinal (GI) symptoms including their pathophysiology, risk factors and medication management.

Objectives

After completing this activity, pharmacists should be able to:

- describe the term dyspepsia;
- identify medicines that can induce peptic ulcer disease;
- recommend preventative therapy for peptic ulcer disease;
- recognise medicines that can induce oesophagitis.

Melanoma

By encouraging their patients to have regular skin checks and counselling them on the safe and effective use of medicines prescribed to treat melanoma skin cancer, pharmacists can make a significant contribution to both its prevention and management.

Objectives

After completing this activity, pharmacists should be able to:

- describe the burden of melanoma skin cancer;
- describe the risk factors, signs and symptoms, aetiology, and stages of melanoma skin cancer;
- outline the diagnosis and treatment of melanoma skin cancer.

Parkinson's disease – Update

This course is an update on the pharmacological and non-pharmacological treatments which are recommended for use in Parkinson's disease.

Learning Objectives

By the end of this course participants should know more:

- About pharmacological treatment for Parkinson's disease
- About non-pharmacological treatment for Parkinson's disease
- The prognosis for those suffering from Parkinson's disease
- The information and advice you can give to patients and their carers

Post-Traumatic Stress Disorder

Exposure to traumatic events commonly results in a degree of psychological distress. In most instances, psychological symptoms of distress settle down in the days to weeks following the event. However, a minority of people have persisting symptoms and develop acute stress disorder and/or post-traumatic stress disorder.

Objectives

After completing this course, pharmacists should be able to:

- differentiate between stress and trauma;
- describe the DSM-5 criteria for post-traumatic stress disorder (PTSD);
- describe the various consequences of undiagnosed PTSD;
- discuss the various non-pharmacological treatments for PTSD;
- discuss the use of trauma-focused cognitive behavioural therapy (TF-CBT);
- discuss the role of pharmacotherapy in treatment of PTSD

Pulmonary Hypertension

Pulmonary hypertension can be a devastating disease that is easily missed in the early stages because of its typically nonspecific presentation with gradually increasing dyspnoea. Early diagnosis and treatment are key to improving functional and haemodynamic outcomes and survival. With advances in management, most forms of pulmonary hypertension are treatable.

Course Objectives

After completing this activity, pharmacists should be able to:

- describe the symptoms and signs of pulmonary hypertension;
- list the classification of pulmonary hypertension;
- discuss the main causes of pulmonary hypertension;
- discuss the pharmacological treatments for pulmonary hypertension;
- counsel people about the management of pulmonary hypertension.

Sexually transmitted infections

Sexually transmitted infections are on the increase and treatment is hampered by antimicrobial resistance. This module reviews the current situation.

Course Objectives

After completing this course, you should be more aware of:

- The eight principal STIs and their causes
- Transmission routes for STIs (sexual and non-sexual)
- Common symptoms and adverse effects of STIs
Serious long-term implications of STIs
- The extent to which STIs can be asymptomatic
- Chlamydia screening and drug management
- Concerns about antimicrobial resistance (AMR), especially in relation to gonorrhoea Human papilloma virus (HPV) and its health implications
- Antibiotic treatment recommendations for syphilis, trichomoniasis and PID.

The Progesterone Only Oral Contraceptive Pill

Progesterone is an endogenous hormone produced by the adrenal cortex and gonads (e.g. ovaries, testes). It has a vital role in both preventing pregnancy and maintaining the uterus during pregnancy.

For the purposes of this course, POPs refer to drospirenone, levonorgestrel, and norethisterone. Where differences exist, the medicine(s) will be referred to individually.

Adherence, and subsequent efficacy and potential contraceptive failure should be emphasised and addressed. The teach-back method should be employed to verify the patient's understanding. Counselling should be provided at initial and subsequent repeat prescription dispensing to assess and address adherence and concerns and to ensure efficacy and best patient outcomes

Course Objectives

After completing this activity, pharmacists should be able to:

- describe the mechanism of action, clinical use, advantages, and disadvantages of progestogen- only oral contraceptives;
- compare commonly available progestogen-only oral contraceptives with drospirenone;
- counsel patients on the safe and efficacious use of progestogen-only oral contraceptives.

The morning after pill

It is estimated that almost half of all pregnancies are unplanned. Even when a contraceptive strategy is employed by the couple, no method is 100% effective. While some methods may have high technical efficacy in clinical trials of 'perfect use', efficacy rates may fall under 'typical use' conditions, when factoring in human error. The World Health Organisation estimates that if every couple used contraception perfectly every single time they had sex, there would still be six million unplanned pregnancies each year worldwide. It is therefore not surprising that women will seek emergency contraception from primary healthcare professionals, with pharmacists regularly receiving requests to dispense a post-coital (emergency) contraceptive 'pill' (also known as the "morning after pill") over the counter, on request.

Objectives

After completing this activity, pharmacists should be able to:

- describe the appropriate counselling points for emergency contraceptive medicines;
- identify referral points for customers requesting an emergency contraceptive.

Stem cell transplant in children

This course describes the pharmacist's role during haematopoietic stem cell transplant in children and actions of the multidisciplinary team, specifically highlighting those of the pharmacist.

Objectives

- Describe the process prior to admission
- Provide an overview of the medicines, administration, excipients, transplant protocol and admission
- Describe the most common complications and their management
- Describe discharge planning and beyond

Treatment of Fungal Skin Infections

Fungal skin infections are common, particularly in warm, humid conditions. The main groups of fungi causing superficial fungal infections are dermatophytes, yeasts (*Candida*) and moulds.¹ Recent onset fungal skin infections can be treated with topical preparations. This course discusses the manifestations of tinea and napkin dermatitis (nappy rash) and their treatment including the appropriate use of combination corticosteroid/antifungal preparations.

Objectives

- describe the signs and symptoms of fungal skin infections;
- describe the treatment of mixed fungal and bacterial infections;
- describe the correct use of topical antifungal and antifungal/steroid combination products to treat fungal skin infections.

Urinary Incontinence

Urinary incontinence is a common condition which, in most cases, can be managed in primary care by conservative measures, with additional pharmacotherapy if required. Pharmacists can have an important role in the diagnostic process, as well as providing patient education and support, and assisting with a referral.

Objectives

After completing this activity, pharmacists should be able to:

- Describe the different types of urinary incontinence;
- Describe the risk factors for urinary incontinence;
- Demonstrate the ability to perform an assessment of the patient's symptoms including risk factors;
- Counsel a patient on conservative measures for managing urinary incontinence;
- List the medications commonly used for the management of urinary incontinence.

2021 Courses

Acute and chronic lymphoid leukaemia

Acute lymphoblastic leukaemia (ALL) and chronic lymphocytic leukaemia (CLL) are haematological malignancies that arise from the clonal proliferation of blood cells of the lymphoid lineage. Despite this element of commonality, the two diseases are markedly different in terms of presentation, natural history and treatment. In both diseases, there have been significant developments in drug treatments over the past two decades, which will be discussed in this article.

Objectives

By the end of this course participants should be able to:

- Explain the difference between acute and chronic ALL and CLL
- Describe the presentation and diagnosis of ALL and CLL
- Provide an overview of treatment for ALL and CLL

Acute coronary syndrome: diagnosis and treatment

This course describes the different management options for acute coronary syndrome and the role of the pharmacists in supporting patients with acute coronary syndrome. Acute coronary syndrome (ACS) is a term that encompasses a range of coronary artery diseases from acute myocardial ischaemia to myocardial infarction (MI), depending on the degree and location of the obstruction.

Objectives

By the end of this course, participants will be able to describe in terms of acute coronary syndrome:

- Pathophysiology
- Risk factors
- Symptoms
- Diagnosis
- Management
- Rehabilitation, and
- Secondary prevention

Anaphylaxis, symptoms, causes and diagnosis

Anaphylaxis normally develops suddenly and can be fatal if not correctly identified and managed. Pharmacists across all sectors will need to counsel patients who are diagnosed with anaphylaxis about the use of their medicine, as well as provide advice on trigger avoidance. For those who are not diagnosed, pharmacists can provide information about the tests that are undertaken to determine allergy status. This course will discuss the main symptoms and risk factors for anaphylaxis, and how it is diagnosed.

Objectives

By the end of this course participants should be able to:

- Explain the mechanisms of an allergic reaction
- List the signs and symptoms of an allergic reaction
- Describe the causes of an allergic reaction
- Explain the risk factors of an allergic reaction, and
- Describe the diagnosis of an allergic reaction

Anaphylaxis management

Anaphylaxis is potentially life-threatening; therefore, pharmacists must be able to immediately recognise symptoms and know how to treat patients. This course will outline different treatment options with a focus on the use of adrenaline in patients with anaphylaxis and prevention strategies.

Objectives

By the end of this course participants will be able to:

- Explain the management of anaphylaxis in community pharmacy or primary care
- Explain the administration of adrenaline
- Explain the management of anaphylaxis in hospital
- Describe the prevention of anaphylactic reactions

Benzodiazepine Misuse

Benzodiazepines are a class of medicines that have anxiolytic, hypnotic, muscle-relaxing, and anticonvulsive properties. Sometimes referred to as 'benzos', they are most often prescribed for their anxiolytic and hypnotic effects. Besides a revision of this class of medicine, this course will also cover their misuse.

Objectives

By the end of this course participants will be able to:

- Explain the mechanism of action of benzodiazepines
- Describe the indications of benzodiazepines
- List common short and long term side effects
- Explain why benzodiazepines are misused
- Describe the diagnosis of "benzodiazepine use disorder"
- How to withdraw from long-term benzodiazepine use

Common Foot Conditions

Maintaining good foot health can help people remain active and prevent the complications of conditions such as diabetes and rheumatoid arthritis.^{1,2} Keeping active can reduce the risk of peripheral arterial disease and therefore the associated risk of cardiovascular disease.³ This module covers a selection of the most common musculoskeletal, dermatological and diabetes-related conditions affecting the feet.

Objectives

After completion of this course participants should:

- Be able to identify some of the most common foot conditions
- Recognise 'red flags' when assessing diabetic patients
- Know how to suggest appropriate self-care treatment and when to refer to a GP or podiatrist.

Colorectal Cancer

Community pharmacists can make a significant contribution to decreasing colorectal cancer morbidity and mortality by encouraging screening, encouraging their customers to discuss signs and symptoms with their GP, and by providing advice on modifiable diet and lifestyle risk factors.

Objectives

After completing this activity, pharmacists should be able to:

- describe the epidemiology of colorectal cancer; list modifiable and non-modifiable risk factors for colorectal cancer;
- outline signs and symptoms, screening and diagnosis, and stages of colorectal cancer;
- provide an overview of the treatments used for colorectal cancer;
- describe the role of pharmacists in bowel cancer awareness, and in counselling individuals receiving

Diabetes & Mental Health

Pharmacists can contribute to the psychological and emotional wellbeing of people living with diabetes by helping to identify those who have mental wellbeing needs, optimising treatment and minimising risk factors.

Objectives

By the end of this course, participants will be able to:

- Provide screening and referral in the pharmacy setting
- Discuss mental healthcare planning
- Address eating disorders

Eating Disorders

Eating disorders are a group of psychological disorders typically characterised by pathological disturbances associated with attitudes and behaviours related to food, body weight control, and a severe concern with body weight or shape.

Objectives

By the end of this course, participants should be able to

- identify what is meant by eating disorders;
- describe the differences between the eight eating disorders listed by DSM-5;
- describe some of the treatments utilised in eating disorders;
- describe some of the treatments utilised in eating disorders;

Diagnosing gastrointestinal infections

Gastrointestinal (GI) infections are associated with an array of symptoms, with many causing diarrhoea and vomiting. Transmission of infectious material can occur through various routes such as food, person to person contact, faecal-oral, or through the air/environment. Transmission is affected by the causative organism and therefore the advice given to patients should be assessed on a case-to-case basis.

Objectives

From this pharmacy CPD module participants will learn:

- Which patient groups are most at risk of gastrointestinal (GI) infections
- When patients should be excluded from work/school following a GI infection
- Symptoms and common clinical features of common GI infections
- What advice to give patients for managing their symptoms

Gonorrhoea infection- diagnosis and treatment

Gonorrhoea is a sexually transmitted infection (STI) caused by the Gram-negative bacterium *Neisseria gonorrhoeae* (*N. gonorrhoeae*) that primarily affects the urogenital tract and rectum, as well as extragenital sites, such as the pharynx, endocervix and conjunctiva. Pharmacy teams can help prevent transmission and promote good sexual health practices by identifying patients at risk.

Objectives

By the end of this course participants should be able to:

- Identify the signs and symptoms of gonorrhoea
- The diagnosis and treatment of gonorrhoea and
- Opportunities for pharmacy

Haemorrhoids: causes, evaluation and management

Haemorrhoids are common in the Western world, although incidence is difficult to quantify as only a minority of sufferers seek treatment.

Although most cases are straightforward to treat, complications can occur. Careful evaluation is important to rule out other causes. This course covers haemorrhoid risk factors and symptoms, identifying 'red flags' and the latest guidance on management.

Objectives

After studying this module you should:

- Understand the risk factors for haemorrhoids
- Be able to ask key questions to guide treatment or referral
- Gain confidence in giving advice to sufferers to help manage symptoms

Impetigo - causes, symptoms and diagnosis

Impetigo is a contagious bacterial skin infection. It can affect people of any age, however, it is most common in children.

Objectives

After studying this module you should:

- The types and causes of impetigo
- The typical symptoms of impetigo and how it is diagnosed
- How impetigo is treated
- Advice to give to patients to prevent the recurrence and spread of impetigo

Insomnia Diagnosis

Broadly defined as a difficulty initiating or maintaining sleep, insomnia disorder (or insomnia), is an often neglected diagnosis. At least one in three people will experience insomnia that can cause sleeplessness or waking without feeling refreshed, during their lifetime. This ultimately impairs daytime function causing tiredness, impaired concentration and mood disturbance.

Objectives:

By the end of this course, the participant should be able to

- provide an overview of sleep and the disorders associated with it,
- consider how pharmacists and other healthcare professionals can recognise, diagnose and potentially prevent this disorder.

Insomnia Management

In a previous course 'Insomnia disorder: diagnosis, naturalistic sleep was examined as a physiological process and insomnia was discussed as a pathophysiological disordering of this, influenced by psychiatric, somatic and environmental factors. This course focuses on the clinical management of insomnia, presenting pharmacological and psychological strategies as different, yet not necessarily mutually exclusive, means of treating the disorder. As a frontline profession, it is important that pharmacists understand how sleep disturbances should be managed and how to best counsel patients in this regard.

Objectives

By the end of this course, the participant will be able to explain

- Cognitive-behavioral therapy for insomnia
- Pharmacotherapy of insomnia
- The safe prescribing of hypnotics

Management of prediabetes

Non-diabetic hyperglycaemia (NDH) or prediabetes refers to blood glucose levels above the normal range but not sufficiently high for a diagnosis of diabetes. Every year 5-10 per cent of these patients will progress to diabetes but there is a lot pharmacists can do to help prevent or delay this.

Objectives

By the end of this course, participants will be able to

- describe the extent of the problem,
- identify patients with risk factors for prediabetes develop individualised plans to support patients to reduce their risk of being diagnosed with type 2 diabetes.
- develop individualised plans to support patients to reduce their risk of being diagnosed with type 2 diabetes

Managing hypertension - Non Drug Treatment

There are several lifestyle factors that increase a person's risk of hypertension, which are detailed below. This course will discuss the evidence base for how diet and exercise could support patients in the self-management of their condition, and how pharmacists and their teams can deliver this healthy living advice.

Objectives

By the end of this course, participants will be able to:

- Explain the causes and risks of hypertension.
- Describe modifiable risk factors
- Describe the symptoms, diagnosis and non-pharmacological management of hypertension
- Describe the transtheoretical model of behavioural change
- The role of pharmacy.

Panic Disorder and Panic Attacks

A panic attack can be described as a sudden onset of intense apprehension and fearfulness in the absence of actual danger, accompanied by the presence of physical symptoms such as heart palpitations, difficulty in breathing, chest pain or discomfort, choking or smothering sensations, sweating and dizziness. Panic disorder is characterised by frequent panic attacks that are unrelated to specific situations, and the worry about having more panic attacks. Patients with panic disorder frequently present to emergency departments with chest pain or dyspnoea, fearing they are dying of a heart attack.

Objectives

After completing this course, pharmacists should be able to:

- describe panic disorder;
- describe symptoms of a panic attack;
- discuss the use of cognitive behaviour therapy (CBT) in assisting people with panic disorder;
- describe the psychological treatment of panic disorder;
- describe the pharmacological treatment of panic disorder.

Perinatal mental health

Perinatal mental illness is a major public health issue that can have devastating effects on women and their families. Around half of all cases of perinatal depression and anxiety go undetected, with many mothers feeling unable to ask for help. Improved awareness and detection of mental health problems by midwives, GPs, and pharmacists will enable more women to access appropriate and timely care.

Objectives

- Have an understanding of perinatal mental health problems and their effects on mum and baby.
- Be aware of the risk factors for perinatal mental illness.
- Know when to refer women for specialist or emergency assessment.

Polypharmacy

There are several tools pharmacists can use when assessing a patient's medicines; however, patient input and appropriate questions can have a profound impact in ensuring medicines optimisation.

Objectives

By the end of this course participants will be able to:

- Describe why polypharmacy is important
- Describe the role of the pharmacist in tackling polypharmacy
- Describe increasing patient engagement

Preconception planning

Key foetal developmental milestones occur in the first few weeks of pregnancy before many women know they are pregnant. These include the development of organs, which are completely formed by the 12th week of pregnancy (10 weeks after fertilisation). This is also the 'danger zone' of pregnancy, with the majority of malformations occurring during this period. Pharmacists can support all women of childbearing age regarding preconception health, including assessment of medication safety, and supplementation needs.

Objectives

- recognise the role of pharmacists in preconception planning;
- recognise key adjustments to chronic disease management suggested in pregnancy;
- recognise the influence of pharmacogenomics on medication management in pregnancy;
- recognise medication classes that require discussion during preconception planning.

Schizophrenia: recognition and management

Common medicines used to manage schizophrenia have many side effects that can cause significant morbidity. Regular monitoring and support can ensure patients improve outcomes.

Objectives

By the end of this course participants should be able to explain:

- The etiology of schizophrenia
- Diagnosis and symptoms of schizophrenia
- Symptoms that overlap with other psychotic disorders
- Children and younger people
- Pharmacological treatment
- Psychological treatment

Sports injuries- causes and treatment

Regular exercise can improve health and reduce the risk of disease. However, sports and exercise can also lead to injuries, which can range from minor to traumatic. The type and extent of these injuries are vast.

Objectives

By the end of this course, participants will have learned about

- different types of common sports injuries and their causes
- symptoms and treatment options
- likely outcomes and when to refer for medical attention
- practical advice about prevention of sports injuries

Tetanus

Although most people in SA will be vaccinated against tetanus as a child, immunity does not always persist into adulthood. It is important that pharmacists can recognise the symptoms and know the treatments available for this disease.

Objectives

By the end of this course participants should be able to:

- Describe the causes and transmission
- Provide an overview of the symptoms of various types of tetanus.
- Explain the diagnosis of tetanus
- Describe treatment for patients with or without symptoms
- Provide an overview of vaccination in SA

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Chronic complications of diabetes

Chronic hyperglycaemia in poorly controlled diabetes is associated with damage, dysfunction and failure of many organ systems. Consistently raised blood glucose levels can result in damage to blood vessels throughout the body. Even mildly raised levels that do not result in symptoms can have lasting, damaging effects on blood vessels, nerves and organs.

Course Objectives:

By the end of this course participants should be able to explain:

- The main chronic complications of diabetes
- Prevention strategies
- How complications are treated
- Practical advice to help patients manage these

COPD risk factors and diagnosis

COPD is a long-term respiratory condition where the flow of air into the lungs is restricted (obstructed). This common condition is both preventable and amenable to symptomatic treatment.

Course Objectives:

By the end of this course participants should be able to explain:

- Who is commonly affected by chronic obstructive pulmonary disease (COPD)
- Risk factors for the development of COPD
- How it is diagnosed and common differential diagnoses
- How to assess the prognosis for patients

COPD Treatment and Management

Treatment of chronic obstructive pulmonary disease (COPD) is aimed at preventing and controlling symptoms, reducing the severity and number of exacerbations, increasing exercise tolerance and reducing mortality. The approach to treatment should involve an appropriate assessment of the disease state, pharmacological and non-pharmacological measures, patient education, reduction in risk-factor exposure, and the prevention and treatment of acute exacerbations. A multidisciplinary approach is needed, as this has been shown to increase the patient's quality of life and reduce the number of hospital admissions.

Course Objectives:

By the end of this course participants should be able to explain:

- Treatment options for stable COPD
- Treatment options for exacerbations
- Non-pharmacological management
- Advice and information pharmacists can offer patients

Dementia – Update

Dementia is the umbrella term for a number of neurological conditions, of which the major symptom includes a global decline in brain function. Dementia was a relatively rare occurrence before the 20th century as fewer people lived to old age in pre-industrial society. It was not until the mid-1970s that dementia began to be described as we know it today.

Course Objectives:

By the end of this course participants should be able to:

- describe what is meant by dementia;
- discuss the prevalence of dementia;
- identify risk factors for dementia;
- describe therapy options and practical tips to help minimise risk;
- discuss the role of carers;
- identify multimodal management strategies, including non-drug approaches.

Diabetic Foot

Foot problems are a significant cause of morbidity in patients with diabetes mellitus. The lifetime incidence of foot ulcers has previously been estimated to be 15–25% among persons with diabetes, but when additional data is considered, between 19% and 34% of persons with diabetes are likely to be affected.

Course Objectives:

By the end of this course participants should be able to:

- list common diabetic complications affecting the foot;
- describe the pathophysiology and presentation of common diabetic foot complications;
- discuss the treatment options for diabetic foot ulcers.

Diagnosis and management of type 2 diabetes mellitus

More than a third of people who require kidney dialysis or a kidney transplant have diabetes^[6]. Patients who effectively control their blood glucose levels and blood pressure are less likely to experience complications of diabetes.

Course Objectives:

By the end of this course participants should be able to explain:

- Causes
- Pathophysiology
- Risk factors
- Symptoms
- Diagnosis
- Management
- Pharmacy Interventions

Dry Eye Syndrome

Dry eye, also known as keratoconjunctivitis sicca, is a common complaint with about one in 10 people affected by this condition.¹ Dry eye syndrome can have a significant impact on quality of life. While most patients have mild disease, in rare cases, dry eye can be severe enough to progress to corneal ulceration.

Course Objectives

By the end of this course participants should be able to:

- outline the causes of dry eye syndromes;
- list the risk factors for the development of dry eye;
- list the symptoms of dry eye.

Endometriosis: symptoms, diagnosis and management

Endometriosis can be a chronic and debilitating condition. It is often difficult to diagnose, taking an average of 7.5 years for a complete diagnosis to be made, owing to the non-specificity of presenting symptoms. This delay can result in decreased quality of life for patients. Healthcare professionals, including pharmacists, have an important role to play in identifying the signs and symptoms of endometriosis to support diagnosis at the earliest possible opportunity.

Course Objectives

By the end of this course participants should be able to describe endometriosis in terms of:

- signs and symptoms
- pathophysiology
- risk factors
- diagnosis
- pharmacological and non-pharmacological management
- complications and prognosis and the
- role of the pharmacist

Fat-soluble vitamin deficiency

Vitamins are organic compounds necessary for growth and nutrition; however, they cannot be synthesised in the body. Each vitamin has a particular function in the body, with some needed in larger quantities than others.

Course Objectives

By the end of this course participants should be able to explain:

- Fat-soluble vitamins and their role in physiology
- Food sources and symptoms of deficiency
- Interactions between vitamins and medication
- Patient groups vulnerable to deficiency and advice pharmacists can offer about diet and supplementation

Headache

Headache is among the most common adverse health conditions, affecting four fifths of women and two thirds of men each year. Over 90 per cent of people will experience a headache at some point during their life time, with tension-type headaches (TTH) accounting for half of all headaches experienced.

Course Objectives

By the end of this course participants should be able to explain:

- The key distinguishing features of common types of headache and migraine
- Symptoms to look out for other than head pain
- How different patient groups may be affected
- Management approaches, including current recommendations

Heart failure, older people and frailty

Despite extensive research defining prevalence and outcomes for frail patients in a heart failure population, there is little in-depth knowledge about the treatment and management of this cohort to improve outcomes.

This course will discuss the diagnostic criteria and the treatment options available, including the pharmacokinetic and pharmacodynamic considerations in older, frail people with heart failure.

Course Objectives

By the end of this course participants should be able to describe the following in terms of heart failure, older people and frailty:

- Diagnosis, signs and symptoms
- Investigations
- Treatment
- Pharmacokinetics and Pharmacodynamics
- Holistic care and palliation

Hospital Prevention of Venous Thromboembolism

Hospitalisation is known to increase the risk of developing venous thromboembolism (VTE) – a condition that most commonly includes deep vein thrombosis (DVT) or pulmonary embolism (PE). Hospital-acquired VTE, also known as hospital-associated or hospital-acquired thrombosis (HAT), causes a significant number of deaths, is the leading cause of preventable hospital mortality and includes any VTE that develops while a patient is in hospital or within 90 days of their discharge. This article summarises some of the changes made regarding the use of pharmacological thromboprophylaxis (TP) and, where available, briefly discusses the evidence base from which the recommendations were made.

Course Objectives

By the end of this course participants should be able to explain:

- Assessment of risk of venous thromboembolism
- Dosing of pharmacological thromboprophylaxis
- Interventions for different population groups.
- Role of the pharmacist

Joint Pain

Although osteo-arthritis (OA) is the most common musculoskeletal condition causing chronic peripheral joint pain, other potentially serious causes of joint or bone pain include gout, other inflammatory arthritides, infection, fractures, malignancy, and radicular or neuropathic pain.

Course Objectives

By the end of this course participants should be able to describe:

- Core treatments for peripheral joint pain
- Adjunctive treatment
- Alternative treatment

Malabsorption syndrome: causes, symptoms, diagnosis and management

When certain nutrients and fluids are not absorbed correctly by the small intestine, it is referred to as malabsorption syndrome. These nutrients may be macronutrients (proteins, carbohydrates and fats), micronutrients (vitamins and minerals) or both. The overall outcome of malabsorption syndrome is malnutrition.

Course Objectives

By the end of this course participants should be able to explain:

- What malabsorption syndrome is and the main causes of this disorder
- Symptoms suggestive of malabsorption syndrome and tests used for diagnosis
- Impact of the disorder on people's lives and how it can be treated
- Practical advice pharmacists can offer patients

Management of acute upper gastrointestinal bleeding

Acute upper gastrointestinal bleeding (AUGIB) is defined as bleeding from the upper gastrointestinal tract, normally from the oesophagus, stomach or duodenum. Its underlying causes most commonly include peptic ulcer disease and oesophageal or gastric varices. The majority of patients with AUGIB will present to hospital; therefore, this article focuses on hospital assessment and provides an overview of the available treatments.

Course Objectives

By the end of this course participants should be able to explain:

- Risk factors for acute upper gastrointestinal bleeding (AUGB)
- Presentation and diagnosis of AUGB
- Pre-endoscopic management
- Pre-endoscopic pharmacological agents
- Endoscopic therapy
- Failure of endoscopic therapy
- Post-endoscopic management

Management of anaemia in adults with chronic kidney disease

Anaemia (a low haemoglobin [Hb] level) is a complication of chronic kidney disease (CKD) that becomes more prevalent with advancing kidney dysfunction and is one of the most characteristic manifestations of CKD. This course provides an overview of the treatments for anaemia in chronic kidney disease and the tests needed to prescribe and assess their effectiveness.

Course Objectives

By the end of this course participants should be able to explain the:

- Prognosis of chronic kidney disease by glomerular filtration rate and albuminuria
- Pathophysiology of Anaemia in Chronic Kidney Disease (ACKD)
- Diagnosis of anaemia of ACKD
- Management ACKD
- Risks of treatment

Management of post-operative nausea and vomiting in adults

Post-operative nausea and vomiting (PONV) is an umbrella term that covers nausea and vomiting following any surgical procedures. Nausea and vomiting in combination are reflexes designed to protect against the absorption of toxins, but olfactory, visual, vestibular and psychogenic triggers also exist, which have implications for hospital ward environments where PONV can spread around the bay.

This course describes the extent of PONV in adults, the risk prediction tools used and the interventions that reduce baseline risk. The importance of optimal management and prevention strategies are discussed in the context of the evidence base supporting pharmacological and non-pharmacological interventions in this field.

Course Objectives

By the end of this course participants should be able to:

- The physiology of post-operative nausea and vomiting in adults.
- Patient Risk for PONV
- Anti-emetic prophylaxis
- Administering prophylactic anti-emetic therapy to children
- Ensure PONV prevention and treatment is implemented in the clinical setting

Neuropathic pain

Neuropathic pain is a type of chronic pain that results from damage to the nerves. It can present as sensory, motor and autonomic changes. It is defined as pain caused by a lesion or disease of the somatosensory nervous system – the part of the sensory system involved with the conscious perception of touch, pain, temperature, pressure, position and movement, which comes from the muscles, joints and skin. Neuropathic pain can be classified as peripheral or central, depending on whether it is the central or peripheral somatosensory nervous system that is affected.

Course Objectives

By the end of this course participants should be able to:

- The causes, risk factors and symptoms of neuropathic pain
- How the condition is diagnosed and managed, including non-pharmacological options
- Self-care advice that pharmacists and their teams can offer to patients

Pain Management

Given that most complex pain syndromes and palliative symptom management involve a wide range of medicines alone or combined for purposes of pain management and other comorbid conditions, it is incumbent on pharmacists to seek professional advancement in pain management and secure a comprehensive role as interdisciplinary healthcare team members in all practice settings.

Opportunities for medication therapy management, responsibilities for the pharmacist provider, and the key role that pharmacists can provide for quality pain management outcomes are identified in this CPD activity.

Course Objectives

By the end of this course participants should be able to:

- Describe the differences between acute and chronic pain.
- Describe the classification of pain and its presentation/symptoms
- Describe the different types of drug treatment for pain
- Discuss the role of the pharmacists in assessing and monitoring pain

Palliative management in end-stage liver disease

Patients with end-stage liver disease (ESLD) experience reduced quality of life owing to a variety of symptoms, but with the possibility of alleviation of symptoms following a liver transplant. However, there can be a long waiting time for transplantation, with patients eventually becoming too ill for a major surgical procedure.

This course will discuss the main symptoms that affect quality of life in patients with ESLD and how these can be managed pharmacologically.

Course Objectives

By the end of this course participants should be able to:

- Alcohol withdrawal assessment and management
- Management of varices, encephalopathy, muscle cramps, and pain
- Medical and interventional management of Ascites and
- Pruritis management.

Palpitations, Arrhythmias and QT Prolongation

Palpitations are an unpleasant pounding or racing of the heart. They are associated with normal emotional responses and heart disorders. Some people may complain of pounding of the heart and display no evidence of heart disease, whereas others with serious heart disorders may not detect associated abnormal palpitations.

Palpitations are the perceived abnormality of the heartbeat characterised by awareness of cardiac muscle contractions in the chest, which is further characterised by the hard, fast and/or irregular beatings of the heart.

Course Objectives

By the end of this course participants should be able to:

- define palpitations;
- describe the symptoms of palpitations;
- describe the various types of arrhythmias;
- describe what QT-interval is and its causes;
- recognise the drugs that may cause prolongation of QT-interval;
- counsel patients exhibiting symptoms of palpitations as to their course of action.

Smoking and potential drug interactions

From a treatment perspective, smoking behaviour has a pharmacological impact on several commonly used drugs. This impact can be clinically significant; therefore, the pharmacokinetic and pharmacodynamic impact of smoking should be considered in medicine selection, as well as the introduction and cessation of other therapies. This article aims to outline the considerations pharmacists and other healthcare professionals should be aware of in this context, including the impact of smoking cessation on a drug's pharmacology and what should be done in practice to avoid the associated effects.

Course Objectives:

By the end of this course participants should be able to explain:

- Nicotine pharmacology
- Pharmacokinetic and pharmacodynamic interactions
- Pharmacotherapies used to support smoking cessation
- E-cigarettes

Testosterone deficiency: diagnosis, assessment and treatment

Male hypogonadism can significantly affect health and quality of life; however, diagnosis and management can be challenging.

For a diagnosis of testosterone deficiency (TD) – or male hypogonadism – to be made, a male patient should present with evidence of a reduction in serum testosterone levels, as well as sexual, psychological and physical symptoms affecting their physical and mental wellbeing.

This article will discuss the signs and symptoms associated with TD, as well as the available management options.

Course Objectives

- By the end of this course participants should be able to explain:
- The main chronic complications of diabetes
- Prevention strategies
- How complications are treated
- Practical advice to help patients manage these

Vitamin deficiency: water-soluble vitamins

Vitamins are organic compounds essential for growth and nutrition, and each have a different role within the body. Some vitamins are needed in larger quantities than others and most vitamins needed come from dietary sources – this is because they cannot be synthesised in the body.

It is important to understand the benefits and risks associated with vitamin supplementation in order to provide pharmacy customers with accurate information.

Course Objectives:

By the end of this course participants should be able to explain:

- Water-soluble vitamins and their role in physiology
- Food sources and symptoms of deficiency
- Interactions between vitamins and medication
- Groups vulnerable to deficiency and advice pharmacists can offer about diet and supplementation

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Aftercare for patients with acute coronary syndromes

Cardiovascular disease is still a leading causes of death worldwide. However, implementation of prevention measures has contributed to significantly reduced mortality rates and ischaemic event reoccurrence.

Course Objectives:

By the end of this course participants should be able to explain:

- Strategies to prevent acute coronary syndromes
- Different medicines used for managing unstable angina, NSTEMI and STEMI
- The role of the pharmacist in preventing these conditions
- Concerns patients may have about their condition and how you can help

Assessment & management of psoriasis in adults in primary care

Psoriasis is a complex, multifactorial, inflammatory disease associated with a significantly impaired quality of life. Around 80% of patients with plaque psoriasis have mild-to-moderate disease that is amenable to treatment in primary care, particularly through pharmacy, with topical therapies. This article will focus on the management of adult patients with plaque psoriasis in primary care.

Course Objectives:

By the end of this course participants should be able to explain:

- Different types of psoriasis
- Pathophysiology, diagnosis and symptoms of psoriasis
- Management of psoriasis in primary care
- How pharmacists can help patients with psoriasis

Bronchiectasis: diagnosis, treatment and management

Bronchiectasis is a common chronic disease where the airways of the lungs become abnormally widened. Patients present with recurrent cough, sputum production and are at risk of respiratory tract infections. Pharmacists and healthcare professionals need to be aware of the latest management strategies.

Course Objectives:

By the end of this course participants should be able to explain:

- The main aetiologies of bronchiectasis
- The epidemiology, diagnosis and microbiology of bronchiectasis,
- The goals of treatment of bronchiectasis
- The pharmacotherapy of bronchiectasis

Cervical cancer and HPV

Cervical cancer is characterised by the development of abnormal cells in the lining of the cervix. Diagnosis is usually between the ages of 25 and 29 years. Research shows that 99.8% of cervical cancer cases are preventable. In light of this pharmacists should be aware of the warning signs as outlined in this module.

Course Objectives:

By the end of this course participants should be able to explain:

- The risk factors associated with cervical cancer
- The symptoms and screening process
- What treatments are available and the prognosis
- The role of vaccination in prevention

Chickenpox symptoms and treatment

Chickenpox is caused by a virus called varicella zoster. Varicella is known to be very infectious and the WHO estimates that upwards of 90% of susceptible people will develop chickenpox if they come into contact with it.

Course Objectives:

By the end of this course participants should be able to explain:

- How chickenpox is linked to shingles
- Common symptoms seen in chickenpox
- Over-the-counter treatments used to manage these symptoms
- How to manage at-risk individuals exposed to the virus

Concussion symptoms and management

Concussion or mild traumatic brain injury is the most common, but least serious, type of brain injury that can occur. It results from a bump, blow or jolt to the head that causes the temporary loss of mental function. Patients may not immediately realise they have concussion, because symptoms can take minutes or hours to appear, or they may only become noticeable a few days later. With pharmacists potentially being the first port of call for patients hoping to deal with their symptoms, it is vital to learn to recognise them, to be able to treat them and know when to refer.

Course Objectives:

By the end of this course participants should be able to explain:

- Common causes and prevalence of concussion
- What symptoms should be expected
- How concussion is diagnosed
- Treatment options available and when patients need to be referred

Corticosteroids- side effects and counselling

Corticosteroids are used to treat inflammation in a range of conditions. Fear of side effects may cause patients to stop their treatment too soon, or to not use their medicine as prescribed. By providing patients with effective counselling on how to use their medicine and the duration of treatment, you can help to ensure adherence.

Course Objectives:

By the end of this course participants should be able to explain:

- The side effects that can occur with corticosteroids
- How pharmacists can help patients manage and prevent these side effects
- Advice for using inhaled, intranasal and injectable corticosteroids

Continuing Professional Development: An Introduction

The primary aim of the CPD process is to improve the quality of the services we provide as a pharmacist's assistants. This course provides an overview of the CPD cycle of lifelong learning and explains how CPD differed from the traditional continuing education approach.

Course Objectives

By the end of this course participants should be able to

- Define continuing professional development (CPD)
- Describe the CPD cycle using examples to demonstrate each step in the process
- Explain the difference between CPD and CE

Depression in children and young people

Depression is one of the most common paediatric psychiatric disorders. Pharmacists and healthcare professionals need to be aware of the symptoms of depression and be able to assess patients who may be at risk.

Course Objectives:

By the end of this course participants should be able to explain:

- Four Tier Framework
- When to refer
- Diagnostic Criteria – Signs and Symptoms
- Treatment
- Psychotherapies
- Pharmacological treatments
- The role of the pharmacy team

Diagnosis and management of hospital-acquired pneumonia

This article will focus on the diagnosis and management of HAP episodes in older adults. It aims to support pharmacists and healthcare professionals in appropriately diagnosing and managing the condition.

Course Objectives:

By the end of this course participants should be able to explain:

- The etiology and epidemiology of hospital acquired pneumonia (HAP)
- The risk factors for HAP
- The symptoms and diagnosis of HAP
- The treatment and prevention of HAP

Disorders of the inner ear

This CPD module, the second of two on ear problems, looks at the inner ear. By completing these modules, you will be equipped to provide advice on conditions involving the ears, counsel patients on the management of these conditions (including any self-help measures that may be beneficial) and be able to identify those who need referring on for more expert advice.

Course Objectives:

By the end of this module, you will have a better understanding of:

- Common disorders of the inner ear,
- How to summarise the distinguishing features of each condition,
- Management options and any potential complications that could arise.
- Be more prepared when patients and customers approach you for advice and management options for these inner ear problems.

Disorders of the outer and middle ear

Medical knowledge and skills have developed so much over the past few decades that doctors have by necessity become ever more specialised. Twenty to 30 years ago, a patient with an ear problem that couldn't be managed by a GP would have been referred to an ENT specialist, but nowadays the GP will check that the otolaryngologist has a sub-specialism in otology, or perhaps even neurotology if the condition is deep in the middle or inner ear and more closely linked to the brain.

Course Objectives:

This module will help you understand

- disorders of the outer and middle ear.
- the features of each condition,
- the management options and possible complications if the problem is left unchecked and continues to worsen.
- How to counsel patients who present a prescription, ask for an OTC recommendation or seek advice for any of these problems.

Erectile dysfunction – Update

Erectile dysfunction (ED), sometimes still referred to as impotence, is defined as: “The inability to achieve or maintain an erection sufficient for satisfactory sexual performance”. Treatment is usually indicated in those with more persistent symptoms. Because of the association of ED with hypertension, diabetes and cardiovascular disease, pharmacists should advise patients to consult their doctor within six months of starting to use sildenafil for a clinical review of potential underlying conditions and risk factors

Course Objectives:

By the end of this course participants should be able to explain:

- the nature of ED and be able to identify when referral to a doctor may be indicated.
- You will know the appropriate way to supply sildenafil and advise patients on its use.
- You will also be able to give guidance on lifestyle changes to improve the overall health of men with ED.

Hyperhidrosis: treating excessive sweating

Sweating is an essential body function used to regulate body temperature, but it can also occur during times of anxiety. If sweating is excessive it is known as hyperhidrosis.

Course Objectives:

By the end of this course participants should be able to explain:

- The different forms of hyperhidrosis and how it is diagnosed
- What over-the-counter and prescription treatments are available
- The advice and support pharmacists can give to patients

Lower back pain

Last year, the respected medical journal, The Lancet, decide to dedicate a series to what many regard as a relatively minor complaint. Why? The answer is simple. lower back pain has increased by more than half since 1990 across the globe, giving the condition the dubious honour of being the leading cause of disability worldwide.

Course Objectives:

By the end of this course participants should be able to:

- Understand lower back pain and
- Understand sciatica, and
- Understand the management options for each.
- Counsel patients who seek advice for these problems, whether they are asking for coping strategies, an OTC product recommendation, or present a prescription for dispensing.

Lung cancer: advances in management and therapy

There have been major advances in the treatment of lung cancer, particularly non–small–cell lung cancer (NSCLC), in recent years. This article discusses clinically relevant advances in the treatment of lung cancer over the past two decades, with particular focus on the role of immunotherapy.

Course Objectives:

By the end of this course participants should be able to explain:

- Lung cancer epidemiology
- Treatment algorithm
- Surgery, radiotherapy and chemotherapy
- Emerging treatments
- Mechanisms of action
- Side effects
- Patient selection
- Pharmacists role

Management of type 1 diabetes mellitus – Update

This article outlines the pathogenesis and diagnosis of T1DM, the types of insulin, insulin regimens and strengths available for its day-to-day management, and how to adjust doses. Reference is also made to the role and importance of both carbohydrate (CHO) counting and blood glucose monitoring. Discussion of diabetic emergencies lies outside the scope of this piece and has therefore been omitted.

Course Objectives:

By the end of this course participants should be able to explain:

- Pathogenesis and diagnosis and management of T1DM
- Types of insulin and insulin regimens and strengths
- Insulin devices and storage
- Continuous subcutaneous insulin infusion
- Carbohydrate counting
- Adjusting insulin doses
- Blood glucose monitoring
- Acute & chronic complications

Managing diabetes in women during preconception & pregnancy

This article will focus on the potential adverse pregnancy outcomes associated with diabetes; contraceptive advice for women with diabetes; pre-conceptual advice for women with diabetes; lifestyle management in women of childbearing age; importance of retinal screening before and during pregnancy and GDM to include diagnosis, management and post-natal follow-up.

Course Objectives:

By the end of this course participants should be able to explain:

- Pregnancy planning and pre-conception advice
- Medication requirements
- Early referral to antenatal clinic
- Postnatal management

Pancreatic cancer

This module will help you to understand the key role you can play as a pharmacist in spotting symptoms of pancreatic cancer for early diagnosis, which can significantly improve survival rates. Course

Objectives:

By the end of this course participants should be able to:

- Understand where the pancreas is and its functions in the body
- Identify the risk factors associated with pancreatic cancer and explore its impact on sufferers
- Recognise the symptoms that may indicate pancreatic cancer and require urgent referral to a GP
- Emphasise the importance of medicines use reviews in spotting potential signs of pancreatic cancer
- Demonstrate communication skills needed when speaking to customers who are suffering from pancreatic cancer

Pregnancy- use of medicines in managing complications

The need for drug therapy during pregnancy may arise from pre-existing medical conditions or as a result of pregnancy-related complications such as diabetes, pre-eclampsia and venous thromboembolism (VTE). As all drugs have the potential to cause harm in pregnancy, any decisions to use medication are made on a balance of risk versus benefit to the mother and the unborn foetus, with the mother, where possible, actively involved in making a fully informed choice.

Course Objectives:

By the end of this course participants should be able to explain:

- The physiological changes associated with pregnancy
- Factors to consider when prescribing in pregnancy
- Complications of pregnancy and treatment

Parkinson's disease: management and guidance - Update

Owing to population growth and an increasing ageing population, the estimated prevalence of PD is expected to increase by 23.2% by 2025. This module provides an overview of Parkinson's disease management, including discussion of the latest guidelines.

Course Objectives:

By the end of this course participants should be able to explain:

- Aetiology
- Pathophysiology and presenting features
- Diagnosis
- Management
- Initiating treatment
- Importance of multi-disciplinary team
- Role of the pharmacist
- Palliative Care

Suncare and recognising skin cancer in the pharmacy

Sun exposure can be beneficial for our bodies – direct sunlight promotes vitamin D synthesis, an essential vitamin for healthy bones, and can produce feelings of general wellbeing. However, these benefits must be weighed against the dangers of sun damage and the associated skin problems that may occur.

Course Objectives:

- How ultraviolet radiation affects the skin
- The consequences of sun exposure
- The advice pharmacists can give to patients about sun protection
- How to recognise potentially cancerous lesions caused by sun exposure and when to refer patients to their GP

The Management of Asthma – A refresher

Empowering patients to remain symptom-free through lifestyle and pharmacological management is an important role of the pharmacist. Promoting good inhaler technique and ensuring the patient knows what to do when having an asthma attack are crucial to ensure effective patient care. This module provides an overview of the management of asthma and how patient outcomes can be improved through pharmacy clinical services.

Course Objectives:

By the end of this course participants should be able to explain:

- The treatment pathways associated with asthma and
- Be able to identify ways in which you can maximise treatment benefits.

Transient ischaemic attack and stroke

From a community pharmacy perspective, the pharmacy team can highlight what to do if someone experiences symptoms of a stroke or transient ischaemic attack (TIA), and can also support patients who have had a stroke previously with treatment advice and secondary prevention information.

Course Objectives:

By the end of this course participants should be able to explain:

- How common transient ischaemic attack, ischaemic stroke and haemorrhagic stroke are and how to recognise their symptoms
- The treatments available for the acute management of these conditions and secondary prevention
- The long-term consequences of stroke and how they can be managed

Understanding HIV treatments and interactions

Over 20 years have passed since effective life-saving antiretroviral therapy (ART) became available. Due to this availability, HIV prognosis has changed from a death sentence to a treatable chronic disease and – if medications are taken correctly – it is a manageable long-term condition. Community pharmacists are ideally positioned to intervene regarding common drug interactions, and it is important you are aware of potential interactions when discussing medicines with patients.

Course Objectives:

By the end of this course participants should be able to explain:

- The range of treatment strategies and classes of antiretroviral therapy available
- The aims of these treatments
- Side effects associated with the medicines used to treat HIV
- Drug interactions that occur with antiretroviral therapies

Previous Courses

Acne

This short course contains information for pharmacists about acne including its causes and a description of the types of lesions, and treatments available, along with advice that pharmacists can give to patients.

Course Objectives:

By the end of this course participants should be able to explain:

- The incidence, symptoms and causes of acne vulgaris
- Conditions that present with similar symptoms
- Treatment, side effects and contraindications
- Self--care and lifestyle advice for acne patients

Allergic Rhinitis

This course aims to provide pharmacists and other healthcare professionals with an understanding of the impact of undiagnosed allergic rhinitis and how to diagnose and treat it effectively.

Course Objectives:

By the end of this module, you will have a better understanding of the:

- Pathological and psychological effects of untreated allergic rhinitis.
- Mechanisms of allergic rhinitis.
- Diagnosis of allergic rhinitis by pharmacists.
- Taking of history from the patient
- Selection of the correct treatment and management of allergic rhinitis

Alopecia

This course describes the different types of alopecia and includes information about male and female pattern baldness, telogen effluvium, alopecia areata and other causes such as chemical and physical damage and infection.

Course Objectives:

By the end of this course participants should be able to explain:

- Common causes of hair loss in both men and women
- The treatments available to help reduce alopecia
- The key advice pharmacists can offer sufferers
- Practical tips on how to mask hair loss

Antibiotic Stewardship: Introduction

Antimicrobial resistance is a major public health problem throughout the world and is attributed largely to excessive and inappropriate use of antimicrobial agents. The purpose of this course is to train pharmacists to identify interventions and strategies to improve antimicrobial stewardship activities in pharmacy practice.

Course Objectives:

After completion of this module participants should be able to:

- Describe the goals and components of antimicrobial stewardship programs.
- Discuss recent trends in ASPs in health systems.
- Identify and discuss barriers to the implementation of ASPs in health systems
- Develop strategies for overcoming these barriers

Appraising Evidence

This course contains guidance for pharmacists on evaluating evidence about medicines. It includes information about evidence available, how to access it, as well as advice about appraising clinical trials.

Course Objectives:

By the end of this course participants should be able to :

- Find reliable sources of drug information
- Find free--to--access and paid--for resources
- Use local medical information services

Arrhythmia

Arrhythmias are an important risk factor for developing severe comorbidities such as acute coronary syndromes, heart failure and stroke; moreover, they frequently lead to attendance at accident and emergency or hospital admission. The most serious consequence can be sudden cardiac death, which is a complication of ventricular arrhythmias. Unfortunately, it is not uncommon for stroke or sudden cardiac death to be the initial presentation of the arrhythmia. Atrial fibrillation is the most common rhythm disorder, affecting up to per 1 cent of the general population.

Course Objectives:

By the end of this course participants should be able to explain:

- Normal heart rhythm and disorders that may develop
- The causes, risk factors and symptoms of arrhythmia
- The effectiveness of anti-arrhythmic drugs and the use of devices such as pacemakers and defibrillators
- How pharmacists can help support patients with arrhythmia

Asthma: Pathophysiology, Causes and Diagnosis

According to a recent report by the Global Initiative for Asthma (GINA), South Africa has the world's fourth highest asthma death rate among five to 35 year olds. Of the estimated 3.9 million South Africans with asthma, 1.5% die of this condition annually. This number has remained stable over the past few years despite raised awareness.

Course Objectives:

By the end of this course participants should gain a better understanding of:

- Explain the pathophysiology of asthma
- Describe the causes and clinical features of asthma
- The diagnosis of asthma in terms of clinical features that increase or lower the probability of asthma lower
- the probability of asthma including spirometry testing
- Assessing asthma control in terms of achieving and maintaining complete control of the disease

Asthma: long-term management

Many people with asthma do not have their condition well controlled. A survey of 8,000 people with asthma in Europe between July 2012 and October 2012 found that despite 91% of patients considering themselves as having well controlled asthma, only 20% of cases were controlled according to standards set out by national and international guidance.

Course Objectives:

By the end of this course participants should gain a better understanding of:

- The stepwise guidelines for the treatment of Asthma in Adults
- Medicines used in the treatment of asthma
- Side effects of medicines used in asthma treatment
- Beclomethasone dipropionate equivalence ratio of inhaled steroids
- Maintenance and reliever therapy
- Severe and difficult asthma
- Inhaler technique

Attention deficit hyperactivity disorder (ADHD)

Attention deficit hyperactivity disorder (ADHD) is a behavioural syndrome characterised by the core symptoms of hyperactivity, impulsivity and inattention. Symptoms most often emerge during childhood, and it is thought to affect 3-9% of school-age children and young people ADHD can have serious consequences for a child and their family, as it can lead to low self-esteem, social and emotional problems, and underachievement at school. It can continue into adulthood, which may lead to ongoing social problems.

Course Objectives:

By the end of this course participants should be able to explain:

- What ADHD is and who it affects
- The signs and symptoms of ADHD
- How ADHD is diagnosed
- What the drug and non-drug treatment options are

Autism symptoms and diagnoses

Autism, or autism spectrum disorder (ASD) is a persistent, lifelong, neurodevelopmental disorder which affects communication, social interaction and behaviour.

Course Objectives:

By the end of this course participants should be able to explain:

- What autism is and how it can be described
- The causes of this disorder, and the misconception of a link with the MMR vaccine
- Some of the varied symptoms seen in autism
- How autism is typically recognised and diagnosed.

Benign Prostatic Hyperplasia

This course describes the symptoms and diagnosis of BPH and includes information about treatment options such as alpha-blockers and 5-alpha-reductase inhibitors. Lifestyle advice and prostate cancer are also discussed.

Course Objectives:

By the end of this course participants should be able to explain:

- The prevalence of benign prostatic hyperplasia and associated problems
- The symptoms and clinical assessment of patients with benign prostatic hyperplasia
- The latest treatment options, both on prescription and over the counter, for benign prostatic hyperplasia
- Red-flag symptoms for prostate cancer

Bipolar Depression

Bipolar disorder, or manic depression, causes severe mood swings, usually lasting several weeks or months. These involve intense depression and despair interspersed with feelings of extreme happiness and elation. This course describes ways in which pharmacists can help patients manage all stages of this challenging mental condition.

Course Objectives:

By the end of this course participants should be able to explain:

- The classification of bipolar disorder
- The symptoms of mania and depression
- The main comorbidities?
- The treatment, monitoring, the challenges bipolar
- The role of the pharmacist in helping patients with bipolar disorder

Bipolar disorder with a focus on women of childbearing age

This course provides a timely consideration of the use of valproate in the treatment of bipolar disorder and, with reference to the current evidence base, will discuss: what it is licensed for, what it is used for in clinical practice, and why it is used long-term in female patients. The course will investigate safety issues, risks and benefits associated with valproate use and assess how these compare with alternative treatments. It will also highlight what information patients and healthcare professionals need to know about valproate use in bipolar disorder.

Course Objectives:

By the end of this course participants should be able to:

- Describe the symptoms and diagnosis of bipolar depression
- Outline the treatment of bipolar depression, mania and hypomania
- Explain lithium, carbamazepine, lamotrigine, valproate and antipsychotic maintenance treatment
- Place in perspective the risks of treatment versus no treatment or sub therapeutic treatment in pregnancy.

Body dysmorphic disorder

It's common for people to feel unhappy about how they look sometimes. However, when a person becomes abnormally preoccupied by either an imagined physical defect, or shows marked concern about a slight defect in their physical appearance, this is known as body dysmorphic disorder (BDD).

Course Objectives:

By the end of this course participants should be able to explain:

- That body dysmorphic disorder (BDD) is a commonly misdiagnosed condition, usually occurring in adolescents
- There are a variety of symptoms and presentations of BDD, and they can vary from person to person
- How diagnosis of BDD is different from obsessive compulsive disorder and other anxiety disorders

Breast & Ovarian Cancer

Breast cancer has a high prevalence among those aged over 50, with as many as eight in 10 women in this cohort affected. Over the past 25 years, reported incidences of breast cancer have been rising steadily. Ovarian cancer – which is often diagnosed at a late stage – is the fifth most common cancer in women. Although it can occur at any age, it is more common in postmenopausal women.

Course Objectives:

By the end of this course participants should be able to explain:

- What the main risk factors are for developing breast and ovarian cancer
- Common signs and symptoms that pharmacists can look out for
- What recommendations pharmacists can make to patients
- The screening methods available

Burns: assessment and treatment

For all burns, basic first aid should be carried out immediately. In most cases, a health professional will not be present when the burn is sustained. Anyone responding to a burn incident must first ensure his or her own personal safety, before checking the patient's airways, breathing and circulation (i.e. the ABC of first aid). Patients should be stabilised before a burn is treated. Initial action depends on the type of burn sustained.

Course Objectives:

By the end of this course participants should gain a better understanding of:

- The initial steps when managing a burn
- How to assess a burn's severity, and
- Signs that may suggest a burn is non-accidental

Cardiovascular Disease: Pharmaceutical Management

The World Health Organization (WHO) describes CVD as a major cause of disability and premature death throughout the world. CVD is often described as a 'silent killer', whereby underlying atherosclerosis develops over a period of years remains asymptomatic until it reaches an advanced stage. Community pharmacists in particular are key in the management of CVD and minimisation of risk factors, due in part to the high degree of contact pharmacists have with their patients.

Course Objectives:

By the end of this course participants should be able to:

- Describe the risk factors for cardiovascular disease (CVD)
- Recognise modifiable risk factors
- Discuss opportunities to help improve adherence to lifestyle changes and medications in patients with CVD
- Define patient adherence objectives, with regard to lifestyle modifications for patients with CVD
- Describe effective strategies to enhance patient adherence to and persistence with CVD treatment

Chemotherapy Management of Side Effects

This course discusses the management of side effects of anticancer treatments and the advice that pharmacists can give to patients. It includes information about fatigue, gastro-intestinal problems, skin toxicity, alopecia and eye problems as well as OTC and herbal medicine interactions.

Course Objectives:

By the end of this course participants should be able to explain:

- The typical management of patients receiving anticancer therapy
- Advice on managing side effects
- Which OTC medicines should be avoided in patients receiving chemotherapy
- The key counselling points you should cover to help support patients.

Cholesterol: Update

Although healthy levels of cholesterol are vital for normal cellular functioning, high plasma concentrations increase the risk of developing serious cardiovascular complications. Cholesterol levels in SA are among the highest in the world, with two-thirds of patients having a total cholesterol that exceeds recommended limits

Course Objectives:

By the end of this course participants should gain a better understanding of:

- Recommended cholesterol levels
- The mechanism of action of statins
- Therapeutic alternatives to statins
- Common lifestyle questions asked by patients

Chronic Fatigue Syndrome (CFS)

CFS affects men and women of all races, classes and age groups. Like other immune dysfunction disorders, it affects more women than men – with women making up around 80% of all cases. It is estimated to affect 1% – 2% of the population in first world countries, like the USA and Australia.

Objectives

By the end of this course participants should be able to describe:

- The suspected prevalence of chronic fatigue syndrome, and theories about causes
- The wide range of symptoms patients may experience,
- The impact these can have on everyday life, and how healthcare professionals approach diagnosis
- How the condition is managed
- The likely prognosis

Chronic kidney disease

The kidneys are two bean-shaped organs, each about the size of a fist, that lie at the back of the abdomen at waist level and are connected to the bladder by ureters. Their structure includes a mass of tubular nephrons, each of which has an associated network of capillaries known as the renal glomerulus. Between them, these provide the key functions of filtering blood to remove waste products, salts and excess water from the blood stream to form urine, and then reabsorbing some of these, including water, glucose, amino acids and some urea.

Course Objectives:

By the end of this course, you will be able to describe:

- The structure and function of the kidney
- The common causes of chronic kidney disease (CKD) and its stages
- Symptoms and treatment of CKD
- OTC and prescription drugs that may not be suitable for patients with CKD

Chronic tic disorders

Tic disorders are hyperkinetic movement disorders characterised by the presence of tics (involuntary, sudden, rapid, recurrent, non-rhythmic movements or vocalisations). Tourette syndrome is the most complex and clinically relevant tic disorder and is no longer considered to be a rare medical condition. This article reviews current knowledge about the diagnosis and management of different types of tic disorders, with a focus on Tourette syndrome.

Course Objectives:

By the end of this course, you will be able to:

- Describe how different types of tic disorders are diagnosed
- Describe the pathophysiology, signs and symptoms and diagnosis of chronic tic disorders
- Explain appropriate therapeutic options for their management, with a focus on Tourette syndrome
- Outline specialist interventions specific to tic disorders

Chronic spontaneous urticaria- clinical features, diagnosis and management

Urticaria is one of the most common reasons people seek medical advice but it can take up to 18 months for a diagnosis because of diagnostic challenges and unclear referral pathways to a specialist. Where patients are managed in primary care, many do not experience appropriate escalation of treatment when first-line therapy fails, resulting in low patient aspirations for optimal control of their symptoms.

Course Objectives:

By the end of this course participants should be able to explain:

- The pathophysiology of chronic spontaneous urticaria
- Types of urticaria
- Risk factors for chronic spontaneous urticaria
- Diagnosis - Signs and symptoms
- Full medical history to identify significant aspects of the condition
- Assessing severity and impact
- Treatment and monitoring
- Omalizumab for previously treated chronic spontaneous urticaria
- Other immunosuppressant therapy
- The role of the pharmacist in management

Conducting Literature Reviews

This course discusses how pharmacists can review available information in order to provide answers to enquiries from patients and other health care professionals. It includes information about reliable resources as well as advice about how to present the answers found.

Course Objectives:

By the end of this course participants should be able to:

- Find reliable sources of drug information
- Find free-to-access and paid-for resources
- Use local medical information services
- Present answers to questions

Crohns disease

The first description of Crohn's was made in 1769 by Giovanni Morgagni, an Italian anatomist. But it wasn't until the 1930s that the disease was formally identified by Burrill Bernard Crohn and his colleagues. Dr Crohn refused to accept the accepted diagnosis at the time of intestinal tuberculosis for the condition. His research led to him, and his colleagues, publishing a landmark paper identifying Crohn's in 1932.

Course Objectives:

By the end of this course participants should be able to explain:

- Factors that cause Crohn's disease
- Symptoms of the condition and how it is diagnosed
- Primary medications used to manage this inflammatory disorder

Cystic Fibrosis: causes and symptoms

Cystic fibrosis (CF) is an inherited genetic disease that affects multiple organs, including those in the respiratory, digestive and reproductive systems. It occurs prevalently in the Caucasian population.

Course Objectives:

By the end of this course participants should be able to explain:

- What cystic fibrosis is and its genetic cause
- The various tests involved in its diagnosis
- How cystic fibrosis affects the respiratory, digestive and reproductive systems
- The complications of cystic fibrosis and how the condition is monitored

Cystic fibrosis- disease management

Slowing the progression of lung disease is a primary aim in the management of cystic fibrosis (CF). Alongside this, nutritional therapy is necessary to maintain adequate growth, as is the management of potential complications.

Course Objectives:

By the end of this course participants should be able to explain:

- The treatments available for the respiratory and digestive symptoms associated with cystic fibrosis
- Non-medicinal therapies used in cystic fibrosis
- Future research directions for cystic fibrosis
- The pharmacist's role in helping newly diagnosed patients and providing ongoing care

Dementia (Part1)

This course describes the causes, symptoms and diagnosis of dementia. Information about different types of dementia such as Alzheimer's disease, dementia and vascular dementia is included as well as the pharmacist's role in identifying patients.

Course Objectives:

By the end of this course participants should be able to explain:

- The incidence of dementia and its key clinical features
- The different types of dementia and their causes
- Diagnosis and typical progression of Alzheimer's
- The role of the pharmacist

Dementia (Part2)

This course describes the pharmacological management of dementia and includes information about drugs that improve cognitive function such as AChEIs and memantine.

Course Objectives:

By the end of this course participants should be able to explain:

- How drug therapy can improve cognitive function in dementia
- The possible behavioural and psychological symptoms of dementia, and the key treatment and management options
- How to put your knowledge into practice with a case study focusing on dementia.

Depression: Pharmaceutical Management

Worldwide, more than 150 million people suffer from depression and nearly 1 million commit suicide every year. Recent World Health Organization (WHO) data from 60 countries worldwide show that depression is associated with a larger decrement in health than the chronic diseases angina, arthritis, asthma and diabetes.

Course Objectives:

By the end of this course participants should be able to:

- Recognise opportunities to help improve medication adherence in patients with depressive disorders.
- Describe reasons for non-adherence, including intentional and non-intentional non-adherence and how pharmacists can influence patient behaviour.
- Describe the common challenges affecting patient adherence and persistence with psychotropic medications.
- Identify drug-drug interactions and advise on management or appropriate changes to pharmacotherapy.
- Explain prescribing requirements for special populations: older persons, patients with multiple morbidities, extensive and poor metabolisers.

Diabetes Type 1: Management

This course provides an overview of the management of diabetes Type 1, patient groups for which continuous subcutaneous insulin infusion is recommended, and advice, which should be given to patients about insulin.

Course Objectives:

By the end of this course participants should be able to

- The causes, diagnosis and management of type 1 diabetes
- Treatment aims for people with type 1 diabetes
- Insulin types used in the management of type 1 diabetes
- How pharmacists can help people manage their diabetes effectively

Diabetes Type 2: Management

According to the International Diabetes Federation in 2011, the estimated diabetes prevalence for South Africa is 6.46% for adults aged 20--79 years (approximately 1.9 million of 30 million adults). However, it must be noted that in SA, 50--85% of diabetes sufferers (especially in rural areas) remain undiagnosed. Type 2 (previously known as Non--Insulin Dependent Diabetes Mellitus) consists of 90-95% of the population who have diabetes. It is therefore essential that pharmacists are up to date with the treatment of Type 2 diabetes.

Course Objectives:

By the end of this course participants should be able to describe

- The definition of Type 2 Diabetes
- The mechanism of action of oral anti--diabetic medicines
- The signs of hypoglycaemia
- The meaning of HbA1c
- The side effects & drug interactions of oral anti--diabetic medicines

Eczema and Psoriasis

This course contains information for pharmacists about some forms of eczema and psoriasis, with images to aid identification. Descriptions, causes and treatments of guttate and scalp psoriasis, infected, discoid and fingertip eczema and superficial basal cell carcinoma are included.

Course Objectives:

By the end of this course participants should be able to explain:

- The key features and presentation of eczema and psoriatic conditions
- The treatments, including both emollients and drug therapy, to recommend when a patient presents with a skin condition
- When to suspect a lesion may be a basal cell carcinoma
- Signs of infection in eczematous lesions.

Endometriosis

Endometriosis affects 10 to 15 per cent of all menstruating women aged 25 to 44 years. The condition can range from mild to severe and can be both physically and emotionally debilitating. This course will help pharmacists answer common questions that patients have about endometriosis.

Course Objectives:

By the end of this course participants should be able to explain:

- The incidence, prevalence and symptoms of endometriosis
- How endometriosis is diagnosed and pain is managed
- The hormonal and surgical options available for treatment
- The answers to common questions on fertility

Erectile Dysfunction

This course discusses the causes, risk factors and management of erectile dysfunction. It also includes information about the treatments available and who they can be prescribed for.

Course Objectives:

By the end of this course participants should be able to explain:

- The link between ED coronary heart disease and diabetes
- The causes of erectile dysfunction
- The diagnosis of erectile dysfunction
- The management options for erectile dysfunction
- What options remain if treatment fails

Fibromyalgia

Fibromyalgia is one of the main chronic pain disorders affecting approximately 2% of people by the age of 20, increasing to 8% of people by age 70. It was not defined until the late 20th century but descriptions can be found as early as the 17th century. It is more common in women than men; in fact, it occurs 9 times more frequently women than men. Symptoms generally start to occur between the ages of 30 and 55. The condition affects connective tissues which include the muscles, ligaments and tendons. Myalgia, which means muscle pain, is the main symptom while debilitating fatigue, sleep disturbances, joint stiffness, headaches and mood disturbances can also occur. Fibromyalgia commonly co-exists with psychiatric conditions such as depression, anxiety and other stress related disorders. The cause, diagnosis and optimal treatment of fibromyalgia are still not clear.

Course Objectives

By the end of this course participants should be able to explain:

- The symptoms of Fibromyalgia
- The diagnosis of Fibromyalgia
- The treatment of Fibromyalgia
- The difference between Fibromyalgia and Chronic Fatigue Syndrome

Falls in older patients

This course discusses the prevention of falls in the elderly, including causes and risk factors such as motor problems, sensory impairment and medication. Information about the pharmacist's role in the management of those at risk and advice for patients and carers is also included.

Course Objectives:

By the end of this course participants should be able to explain:

- The incidence of falls and their effects, including common fractures
- The causes of falls in older people, including motor, sensory and neurological problems
- The drugs that increase the risk of falls in older patients
- The steps pharmacists can take to minimise falls risk

Generalised Anxiety Disorder (GAD)

This course describes generalised anxiety disorder (GAD) and contains useful information for pharmacists about how they can spot at-risk patients and provide support and advice.

Course Objectives:

By the end of this course participants should be able to explain:

- Causes, signs and symptoms of GAD
- Pharmacists' role in recognizing and referring patients who may have GAD
- Management, including psychological and pharmacological treatment of GAD
- Support and information for patients

Glaucoma

Most people have a broad understanding of what glaucoma is: an eye condition more common in older people that – if left untreated – can cause vision loss. While this is broadly correct, there is much more to glaucoma.

Course Objectives:

By the end of this course participants should be able to explain:

- What glaucoma is, why it arises, and the risk factors for its development
- The various types of glaucoma and how they differ
- How the condition is managed and what happens if it is left untreated
- The role of pharmacists and their staff in helping patients who have glaucoma

High risk medicines

A single definition for 'high risk' appears to be lacking. But when attempts have been made to classify these medicines in the past, the following criteria are generally used:

- Has a narrow therapeutic index
- Poses a high risk of causing a patient significant harm or death when used in error.

Classifications have also looked at the number of hospitalisations associated with a medicine, as well as the consequences of missing doses or overdosing. In this course, we will look at methotrexate, lithium, theophylline and digoxin.

Course Objectives:

By the end of this course participants should be able to explain:

- Which medicines are classed as high risk
- The consequences of prescribing these medicines
- The role of the pharmacist and pharmacy staff in preventing adverse drug reactions caused by these medications

IBS

Of all the gastrointestinal (GI) disorders, the one that most lives up to its name is irritable bowel syndrome (IBS). Its symptoms are irritating, not only because they are often changeable, unpredictable and lifelong, but because the condition appears to have no discernible cause, and is therefore a source of intense annoyance to patients and healthcare professionals alike.

Course Objectives:

By the end of this course participants should be able to explain:

- What irritable bowel syndrome (IBS) is
- The typical symptoms and prevalence of IBS
- How the condition is diagnosed and managed
- How to distinguish IBS from similar conditions

Gout: Management and Prevention

Gout is a common type of inflammatory arthritis that causes severe pain, discomfort and damage to joints. Timely and effective treatment of gout is necessary to reduce the risk of flares, chronic polyarthritis and tophaceous disease. Pharmacists can promote lifestyle modification which can be effective in preventing further gout attacks.

Course Objectives:

By the end of this short course participants should gain a better understanding of:

- The key risk factors for the development of gout
- How to manage acute gout attacks
- When gout prophylaxis should be considered
- Lifestyle advice you should offer patients with gout

Heart Failure

Reducing mortality and delaying disease progression are two key aims of treating heart failure but, for many patients, controlling symptoms and improving quality of life are more important than longevity. Chronic heart failure can broadly be separated into heart failure with reduced ejection fraction (HFREF; also referred to as left-ventricular systolic dysfunction) and heart failure with preserved ejection fraction (HFPEF).

Course Objectives:

By the end of this short course participants should gain a better understanding of:

- How to reduce mortality, delay disease progression, control symptoms and improve quality of life
- Lifestyle changes
- Symptom control
- Treatment

Helicobacter pylori infections

Despite a better understanding of the pathogenesis and treatment of peptic ulcers, *Helicobacter pylori* infections and treatment remain an unsolved problem with around half of the world's population still infected. The prevalence ranges from >80% in many developing countries to around 10% in developed western countries.

Course Objectives:

By the end of this course participants should be able to explain:

- Recommended regimens for *Helicobacter pylori* therapy
- Triple therapies (susceptibility-based therapies)
- Non-bismuth-containing four-drug therapies
- Bismuth-containing four-drug therapies
- What to do after one or more treatment failures
- Patient education about *Helicobacter pylori* infections

Hepatitis A, B, C, D and E

Hepatitis means inflammation of the liver and refers to a group of viral infections that affect the liver. The most common types are hepatitis A virus (HAV), hepatitis B virus (HBV), and hepatitis C virus (HCV – mainly in the USA); however, D and E strains have also been identified. Chronic viral hepatitis is the leading cause of liver cancer (hepatocellular carcinoma [HCC]) and the most common reason for liver transplantation.

Course Objectives:

By the end of this short course participants should gain a better understanding of:

- The transmission and pathophysiology of the various hepatitis viruses.
- Describe the clinical course of hepatitis A, B, C, D, and E infections.
- Identify patients at risk for hepatitis and target groups for vaccination against hepatitis A and B viruses.
- Outline the current prevention and treatment options for hepatitis A, B, and C.

HIV Update

Since the release of the previous SA HIV/AIDS treatment guidelines, the scale up of antiretroviral therapy (ART) in Southern Africa has continued to grow. Although currently few in number, some patients in South Africa are failing protease inhibitor (PI)-based second-line regimens. To address this, guidelines on third-line (or 'salvage') therapy have been expanded and are included in the latest guidelines.

Course Objectives:

By the end of this short course participants should gain an updated understanding of:

- HIV transmission, pathophysiology and disease progression.
- Current first, second and third line treatment(s).
- New Pre and Post Exposure prophylaxis guidelines (PREP) and (PEP).
- Treatment of patients with comorbidities.
- Side effects/adverse reactions & medicine interactions of ARVs.
- HIV and the role of pharmacy personnel in ARV management.

Liver Disease

The liver is the largest solid organ inside the body. Involved in a number of vital processes associated with digestion and blood filtration, it is ideally positioned in the upper right portion of the abdomen, along with the gallbladder, pancreas and intestines.

Course Objectives:

By the end of this course participants should be able to explain:

- Functions of the liver
- The characteristics and symptoms of liver disease
- Causes and management of hepatitis, alcohol-related liver disease and cirrhosis
- Drugs that may exacerbate liver damage

Lung and Bowel Cancer

This course helps pharmacists recognise symptoms of lung and bowel cancer. It contains information about symptoms and risk factors, and about screening for bowel cancer.

Course Objectives:

By the end of this course participants should be able to explain:

- The signs of lung cancer all pharmacists must know
- When to refer patients, and the tests GPs may order
- The risk factors for bowel cancer
- How to keep a symptom diary to identify changes in bowel habit.

Introduction to Medicine Therapy Management (MTM)

The purpose of this course is aimed to introduce a common understanding of what MTM involves and to improve collaboration among pharmacists & doctors.

Course Objectives:

By the end of this course participants will be able to describe

- The basic framework for MTM services & Medicine Therapy Review
- Comprehensive personal medicine record
- Appropriate interventions, referrals, documentation and record keeping.

Lupus

Lupus is an autoimmune rheumatic condition and about 90 per cent of cases are in women. Pharmacists can help raise awareness of the condition, support patients with medicines and provide healthy lifestyle interventions to help prevent cardiovascular disease.

Course Objectives:

By the end of this course participants should be able to explain:

- The pattern of disease in lupus and the organs commonly affected
- The key diagnostic signs you should know
- The different treatment options considered in lupus
- Lifestyle and management advice pharmacists can offer patients.

Medicine Use Evaluation

Medicine Use Evaluation (MUE) programs play a key role in helping health care systems understand, interpret, evaluate and improve the prescribing, administration and use of medicines.

Course Objectives:

By the end of this course participants should be able to:

- Explain the concept of medicine use evaluation (MUE)
- Demonstrate the process for implementing and performing an MUE
- Discuss the use of an MUE program for improving prescribing and dispensing practice
- Prepare criteria and threshold values for an MUE
- Develop an MUE tool.
- Analyse the results of an MUE.
- Demonstrate the use of intervention strategies to improve medicine use.

Meningitis

In the public's consciousness, meningitis holds a level of fear reserved for a select few conditions. All too often, it summons up an image of a patient lying in a hospital bed with their life hanging in the balance. Although this is certainly one aspect of meningitis, there is much more to the condition.

Course Objectives:

By the end of this course participants should be able to explain:

- What meningitis is and what causes it
- How the condition presents and is treated
- The potential complications of infection
- Vaccinations that can provide protection against meningitis.

Menopause

Menopause is the stage in a woman's life signified by a loss of ovarian follicular activity and permanent cessation of menstruation. Menopause occurs after the final period and is clinically diagnosed after 12 months of absent periods. It occurs as part of the natural ageing process. Menopause typically begins between 45–55 years of age. The average age at which women reach menopause is 51, although some women may experience premature menopause before the age of 40.

Course Objectives:

By the end of this course participants should be able to explain:

- Hormone changes that occur between perimenopause & menopause
- The variety of symptoms experienced throughout menopause
- Available treatment options
- Risks and benefits associated with hormone replacement therapy

Menstrual Abnormalities

This course gives an overview of the menstrual cycle, examining the roles played by the different hormones involved. It discusses menstrual problems and how pharmacists can help sufferers manage their symptoms.

Course Objectives:

By the end of this course participants should be able to explain:

- The changes caused during the menstrual cycle
- The treatments for menorrhagia available in the pharmacy
- The causes of amenorrhoea
- Common drugs that can interfere with the menstrual cycle

Migraine management

Migraines occur in 15% of the adult population. They are painful and disabling, and typically present as a headache associated with gastrointestinal symptoms and a preference for a dark and quiet environment. Symptoms can be severe, preventing patients from carrying out normal daily activities, and can significantly affect quality of life. This course aims to provide a summary of migraine for pharmacists including evidence and practice-based treatments for their management in adults.

Course Objectives:

By the end of this course, you will be able to describe:

- Pathophysiology of migraine
- Symptoms and warning features of migraine
- Diagnosis of migraine
- Prevention of migraine
- Acute and prophylactic treatment of migraine

Myocardial Infarction (Part 1)

This course provides an overview of the management of myocardial infarction, and includes information about incidence and risk factors as well as symptoms, criteria for diagnosis and the drugs used in immediate treatment.

Course Objectives:

By the end of this course participants should be able to describe:

- The key risk factors for myocardial infarction, including ethnicity and gender, and incidence
- The possible presentations of MI and how a diagnosis is confirmed
- The initial treatment and management in secondary care

Myocardial Infarction (Part 2)

This course describes secondary prevention in myocardial infarction (MI) and includes information about risk factors for a second MI, lifestyle changes and secondary prevention treatment regimens. The role of the pharmacist in helping patients to understand and manage their treatments is also discussed.

Course Objectives:

By the end of this course participants should be able to describe:

- The risk of morbidity and mortality following a myocardial infarction
- The different treatment options that may be considered for secondary prevention of myocardial infarction
- The key lifestyle advice and medicines management tips you can offer patients who have experienced a myocardial infarction

Multiple sclerosis

It has been reported that MS is less common in sunny countries near the equator, and more common in areas further away from the equator such as the United Kingdom, Canada, United States of America, Scandinavia, southern Australia and New Zealand

Course Objectives:

By the end of this course participants should be able to explain:

- The symptoms and causes of multiple sclerosis (MS)
- The different types of MS and how it is diagnosed
- How MS is treated
- How pharmacists can support and advise patients with MS

Non-statin drugs for the management of dyslipidaemia in adults

In 2014, England's health technology assessment body, stated in its guidance on cardiovascular risk assessment and modification of blood lipids for the primary and secondary prevention of cardiovascular disease (CVD) that "fibrates should not be routinely offered, alone, or in combination with statins, for the primary or secondary prevention of CVD". However, this has led healthcare practitioners to question the role of the pharmacological alternatives to statins in clinical practice.

Course Objectives:

By the end of this course participants should be able to explain:

- The major lipoprotein classes
- Primary disorders of lipid metabolism
- Treatment of dyslipidaemias
- Side effects, drug interactions and monitoring of lipid-lowering drugs
- Alternative treatment options

Osteoarthritis: Management

A wide range of drug classes are used in treating osteoarthritis (OA). Pharmacological therapies are adjuncts in the management of OA but there are no specific prescribing patterns because of the heterogeneous nature of OA. There are no pharmacological treatments that are known to prevent or cure osteoarthritis. Pharmacists can play a role in recommending exercise regimens which include local muscle strengthening combined with general aerobic fitness.

Course Objectives:

By the end of this short course participants should gain a better understanding of:

- The non-pharmacological management of osteoarthritis
- The Initial pharmacological management
- Joint surgery

Pancreatitis

The pancreas is a large, flat gland – approximately 15cm long – located deep in the abdomen, sandwiched between the stomach and the spine. The gland itself is roughly pear-shaped and sits surrounded by several other organs including the small intestine, liver and spleen. The pancreas performs two key functions: exocrine and endocrine.

Course Objectives:

By the end of this course, you will be able to describe:

- The structure and function of the pancreas
- The incidence of acute and chronic pancreatitis
- Symptoms and drug management of pancreatitis
- Lifestyle changes pharmacists can advise to help patients manage their condition

Parkinson's disease

Parkinson's disease is a progressive neurodegenerative condition resulting from the death of the dopamine-containing cells of the substantia nigra. Its cause is unknown and there is currently no cure. Incidence increases with age, with around 1 per cent of the white population aged 55 years and older affected. It is the second most common neurodegenerative disorder after Alzheimer's disease. Treatment focuses on managing its symptoms, including bradykinesia, rigidity and rest tremor. Men are 1.5 times more likely to be affected than women, and rates are lower in patients of black and asian ethnicity.

Course Objectives:

By the end of this course participants should be able to explain:

- The incidence of Parkinson's disease
- The motor, neuropsychiatric and autonomic symptoms
- The drug treatment and management of Parkinson's disease
- The specialist help and surgical options available to patients

Postnatal depression

Postnatal depression can be defined as any non-psychotic depressive illness that occurs within a year of giving birth. Although relatively common, the condition still remains under-recognised for a variety of reasons. Some women may not be aware that they are depressed, while others can be wary of seeking help due to fear of being stigmatised. As with all depressive illnesses, the causes are complex and multifactorial and healthcare professionals need to be alert to possible signs and symptoms in all women who have recently given birth.

Course Objectives:

By the end of this course, you will be able to describe:

- The definition and impact of postnatal depression
- The causes, risk factors and symptoms
- Non-pharmacological and pharmacological treatments
- Advice and support that pharmacists can provide to patients

Parkinson's Disease

This course discusses the progressive neurodegenerative condition Parkinson's disease. It includes information about the motor, neuropsychiatric and autonomic symptoms as well as diagnosis, drug treatment and management.

Course Objectives:

By the end of this course participants should be able to explain:

- The incidence of Parkinson's disease
- The motor, neuropsychiatric and autonomic symptoms
- The drug treatment and management of Parkinson's disease
- The specialist help and surgical options available to patients

Pharmacovigilance: An Introduction

This course is aimed to promote a culture of medicine safety awareness amongst health care workers, facilitate the development of ADR reporting systems, and to provide the necessary clinical knowledge and tools to identify, diagnose, manage and report adverse medicine reactions (ADR's) in all facets of healthcare delivery services where medicines are used.

Course Objectives:

By the end of this course participants should be able to:

- Increase awareness and understanding of adverse drug reactions as an important and potentially preventable cause of disease
- Promote safe use of medicines
- Promote reporting of adverse medicine reactions
- Enable effective use of safety monitoring systems
- Provide guidance on where information relating to drug safety may be obtained.

Pregnancy Loss

Pregnancy is an emotional time. Once the shock or joy of a positive test result has passed, the following months are filled with a mixture of anticipation, excitement and anxiety. But for some, these feelings are overwhelmed by sadness if the pregnancy does not culminate in a birth, and instead ends abruptly in a miscarriage or stillbirth. This course provides some background information on unplanned pregnancy loss, with a focus on the aspects of care that you and your staff are most likely to be asked about.

Course Objectives:

By the end of this course participants should be able to explain:

- How miscarriages and stillbirths differ in their definitions and management
- What pharmacists can do to help parents experiencing pregnancy loss
- Where to signpost affected individuals for more information and support

Preventing transplant rejection

The aim of immunosuppressant therapy is to find the balance between preventing rejection and minimising adverse effects – including the risk of infection. Dosages – and therefore the risk of side effects and infection – are at their highest immediately after transplant surgery, but then reduce. Regular administration and monitoring are essential for the rest of the patient’s life, and pharmacists and their teams have a role in providing advice and support, particularly regarding side effects and adherence.

Course Objectives:

By the end of this course participants should be able to explain:

- Why immunosuppression is needed in patients who have had a solid organ transplant
- The drugs used in long-term anti-rejection regimens, how they work, and some of the problems they can cause
- The role of pharmacists and their staff in helping patients who have had transplant surgery

Principles of initiating antimicrobial therapy

Antimicrobial agents act by targeting specific sites in a wide range of organisms, including bacteria, viruses, fungal, protozoa and helminths; antibiotics are a subcategory of this large group and have the ability to kill or inhibit the growth of bacteria. With few new antibiotic agents currently in trials or development, the increase of antimicrobial resistance represents a major global health problem. Inappropriate use of antimicrobials and broad-spectrum antibiotics contributes to the selection pressure for the emergence of resistant pathogens.

Course Objectives:

By the end of this module, you will have a better understanding of:

- Misuse and overuse of antibiotics
- Empiric versus definitive therapy
- Bactericidal versus bacteriostatic agents
- Pharmacokinetics and pharmacodynamics of antibiotics

Prostate Cancer

Treatment of early-stage prostate cancer and locally advanced disease can involve surveillance, radical treatment or androgen deprivation therapy; however, as the disease progresses, these options change.

Course Objectives:

By the end of this short course participants should gain a better understanding of:

- When to consider each of the available treatment options for prostate cancer.
- The difference between watchful waiting and surveillance in prostate cancer.
- Radical treatment
- Androgen deprivation therapy
- Treatment of advanced disease, and
- Bone metastases

Reducing antipsychotic prescribing in people with learning disabilities

Pharmacists and healthcare professionals are ideally placed to review and reduce inappropriate prescribing of psychotropic medicines in people with learning disabilities (PwLD) safely and effectively. This article will focus primarily on the use of antipsychotics in PwLD.

Course Objectives:

By the end of this course participants should be able to explain:

- Current antipsychotic prescribing in PwLD
- Harmful effects of antipsychotics in PwLD
- Current prescribing guidance on antipsychotics in PwLD
- Review, reduction and withdrawal of antipsychotics in PwLD
- Tips on how to start a conversation around possible withdrawal of antipsychotics in people with learning disabilities (PwLD)
- Alternatives to antipsychotics
- Implications for pharmacists

Resurgent diseases

We live in a time of constant advances in healthcare, hygiene and nutrition. These developments have resulted in reduced morbidity for patients and increased life expectancy. Although this general trend is positive, with various diseases eradicated and many conditions easily managed, there are some lingering diseases that appear to be making a comeback. Many of these can be treated and easily avoided, but in some circumstances, there has been a resurgence.

Course Objectives:

By the end of this course participants should be able to explain:

- What symptoms are present in a variety of resurgent diseases
- How these diseases can be treated
- Why there appears to be an increase in the frequency of these diseases
- How to help prevent their spread

Setting staff targets

Whether you are a pharmacist, a store manager or a supervisor, making the best use of a pharmacy's team can be a delicate balancing act. One way to achieve this equilibrium is by setting staff targets focused on customer engagement, retail sales and service provision.

Course Objectives:

By the end of this course participants should be able to explain:

- Why pharmacies should set targets for staff
- How to set and review targets
- The benefits of targets for staff
- The benefits of targets for the business

Sickle cell disease

Sickle cell disease (SCD) is a genetic condition. The term sickle cell refers to the abnormal shape of an affected individual's red blood cells: instead of being flexible and ring doughnut like in appearance, they have the look of crescent moons and are rigid. This because the haemoglobin contains an abnormal beta-globin chain that polymerises when deoxygenated, pulling the erythrocyte out of shape.

Course Objectives:

By the end of this course participants should be able to explain:

- The definition, cause and incidence of sickle cell disease
- Common symptoms and diagnosis
- Management, particularly of sickle cell anaemia
- How you can help sickle cell disease patients

Skin Cancer

This course provides information about skin cancer and includes images for identification. It describes the causes, appearance and treatments for basal cell carcinoma, malignant melanoma, squamous cell carcinoma, Bowen's disease and seborrhoeic and actinic keratoses.

Course Objectives:

By the end of this short course participants should be able to explain:

- The visual appearance of different skin cancers and other lesions
- How to assess a mole that has changed appearance
- When to refer skin lesions for further treatment
- What medical and surgical options are available for skin cancers

Subfertility: treatment options in women

Subfertility is defined by the failure of a heterosexual couple to achieve a clinical pregnancy after 12 months or more of regular unprotected sexual intercourse. Women become less fertile as they get older, and age is associated with a gradual decrease in both the quantity and quality of oocytes. Around 95% of women aged 35 years who have regular sexual intercourse without contraception will get pregnant after three years of trying, compared with 75% of women aged 38 years. The effect of age upon men's fertility is less clear. This article will focus on the treatment of subfertility in women.

Course Objectives:

By the end of this module, you will have a better understanding of:

- The causes of subfertility
- How subfertility is diagnosed
- The pharmacological and surgical options available and when they are considered

Thrush and Cystitis

Vaginal thrush, or candidiasis, is a common type of fungal disease caused by a yeast infection in the vagina and surrounding areas. The form of yeast most commonly associated with thrush is *Candida albicans*, also known as *C. albicans* or *Candida*.

Course Objectives:

By the end of this course participants should be able to explain:

- What causes vaginal thrush and how to effectively treat it
- The other potential causes that need to be eliminated before initiating treatment
- What cystitis is and its common side effects
- When suspected cystitis should be referred

Ulcerative colitis

Inflammatory bowel disease (IBD) encompasses both Crohn's disease and ulcerative colitis (UC). The most common presentation is UC. It is a long-term condition which causes inflammation in the colon and rectum.

Course Objectives:

By the end of this course participants should be able to explain:

- Who is most likely to be affected by ulcerative colitis
- Typical symptoms that patients present with
- Treatments used to reduce these symptoms and maintain remission

Urinary tract infection management in elderly patients

Urinary tract infection (UTI) is one of the most common reasons for using antibiotics in both primary and secondary care. The annual incidence of UTIs in the general elderly population has been estimated at approximately 10%, rising to 30% for residents of old age homes or other care institutions. The increase in incidence is caused by a range of factors seen in older people, including higher intravaginal pH in postmenopausal women, increased residual volume in the bladder and a weakened immune system.

Course Objectives:

By the end of this course, you will be able to describe:

- How to recognise the clinical features of urinary tract infection, including typical and atypical symptoms
- The antimicrobials available for treatment and their optimisation in elderly patients
- How to assess patients with recurrent urinary tract infections to determine the appropriate treatment strategy