

The Black Apothecary

The Tradeoff: From Cocaine to Concerta, a look at the racial implications in the emerging and current crisis of opioid abuse

Sade Thesier, First-year Student Pharmacist



According to the CDC, on average 91 Americans die at the hand of opioid prescription overdoses a day. In the span of 15 years, from the turn of the century to 2015, more than 500,000 Americans lost their lives to opioid overdoses. An emerging "crisis" since 1999, the number of overdose deaths

involving prescription opioids has quadrupled in rate. It deems plausible in comparison, for a record number of prescription opioid sales to increase; as the CDC has also recorded a quadruple rate of opioids sold from 1999 to 2010 from pharmacies to hospitals, and every health care providing center in between.

Interestingly enough, while the rates of opioid abuse and deaths are on a significant rise, reports of opioid related overdose leading to cause of death puts at the forefront the racial & health disparities between whites and blacks in the United States. As recently as 2015, 27,056 white (non-hispanic) people died of opioid overdoses, compared to 2,741 people of African American (non hispanic) descent.

Yes, instinctively, it is can be considered a "plus" putting into perspective all adversities persons of color have encountered in the past and continue to face, in regards to our health, that we are not dying at the same alarming rates. (*Although, even one death, should be considered one too many.*) Surely enough, however, we are not less susceptible to



drug addiction whether it is in a powder or pill. Why aren't we affected at alarming rates? How does this correlate to the standard of healthcare people of color receive in this country?

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The Chance Howard University Took on Me PG. 9-11 The answer, is denoted in United States extensive history of drug use, abuse, and biased legislation. In relation to people of color, dating back to a period of about 38 years ago, the "crack epidemic" of the 1980s directly impacts and correlates to not only the treatment of people of color as

it concerns drug addiction and treatment, it sets the contrasting precedent to the present day opioid crisis as well. President Nixon declared a "War on Drugs" in June of 1971, although the main "drug target" of crack cocaine did not hit the streets until the mid 1980s. President Ronald Reagan further implemented rhetoric and legislation targeting illicit drug use by reiterating the focus on the War on Drugs in the early 1980s, confusing and receiving push back from law enforcement due to the low rates of drug use and abuse at the time.

" In 1986, Congress passed The Anti-Drug Abuse Act, which established extremely long mandatory minimum prison terms for low-level drug dealing and possession of crack cocaine [Lower sentences were attached to powder cocaine, which was the predominate dosage form choice of white communities]. The typical mandatory sentence for a first-time drug offense in federal court is five or ten years....Human Rights Watch reported in 2000 that, in seven states, African Americans constitute 80 to 90 percent of all drug offenders sent to prison. Drug use, once considered a private, public-health matter, was reframed through political rhetoric and media imagery as a grave threat to the national order." - The New Jim Crow, 2012

Fast forward to about 40 years later, New Jersey Governor Chris Christie gives a sympathetic and compassionate speech during a 2015 town hall conference discussing the harsh realities of prescription opioid drug abus¹e affecting the "everyday man"; such as his successful former law school classmate



who died of an overdose at 52 after a 10 year addiction battle. The governor also calls for mandatory on going education for doctors to recognize prescription drug abuse. Recently many Congressmen, similar to Chris Christie also share similar "close to home" stories advocating compassion and treatment centers. A stark contrast to the previous rhetoric surrounding drug addiction, prescription drug abuse is now considered a public health crisis in reference to the predominate audience it affects, as opposed to the previous narrative of the War on Drugs in the 1970s and 80s.

Howard University recently hosted the Interdisciplinary Policy Symposium addressing the Opioid Epidemic in November of last year in a panel composed of health care providers, FDA regulators, and drug abuse specialist. In an extensive look at the opioid crisis, several issues and factors were discussed. Poignantly, race, plays a factor, in just the distribution alone of regulated prescription drugs. Several panelist agreed that many prescribers are less likely to prescribe opioids to African Americans,

^{1.} Opioid Overdose. (2017, July 18). Retrieved January 20, 2018, from https://www.cdc.gov/drugoverdose/data/index.html

^{2.} Opioid Overdose Deaths by Race/Ethnicity. (2017, August 03)

^{3.} Alexander, M. (2012). The New Jim Crow: Mass incarceration in an age of colorblindness. New York, NY: New Press.

^{4.} Gov. Chris Christie visits Indianapolis to talk about nation's opioid crisis. (2017, October 30). Retrieved January 20, 2018, from http://fox59.com/2017/10/30/new-jersey-gov-chris-christie-visits-indianapolis-to-talk-about-nations-opioidcrisis/

as preconceived notions founded on unjust history can serve to display health biases. Presumptions are placed in relation to the likelihood of people color to abuse or sell opioids or narcotics. Along with being less likely to receive a prescription, African Americans face the issue of pharmacies/pharmacists, of resolution to health ailments such as recent injuries, surgeries, or a newly diagnosed chronic illness.

Ultimately, the tradeoff between illicit drug use and the emerging crisis of prescription drug abuse is one of the same, putting into consideration the lives lost and families destroyed in relation to drug addiction.

refusing to fill and dispense their Schedule regulated drugs. A practice that many pharmacies base on whether or not a patient has an history of filling Schedule

"the tradeoff between illicit drug use and the emerging crisis of prescription drug abuse is one of the same" However, there should not be a discussion of opioid drug addiction without including the discussion of minority bias. In hindsight, the attainment of the most desirable

drugs at their location, often result in turning away patients who are more than likely in need outcome of patient health is at the forefront of the current opioid crisis.

Greetings from your HU Senate Reps

Montrell Taylor, First-year Student Pharmacist

Greetings Future Pharmacists,



Gabriel Msengi (P1), HUCOP Senate Rep

First, we want to thank everyone who participated in the 2017 fall elections and blessed us with the opportunity to represent the college of pharmacy. It is truly an honor and privilege to serve as the representatives of Howard University College of Pharmacy for the entire senate.

Having representatives up the hill for the College of Pharmacy gives senators the privilege of being the voice of the school to the rest of the university. We have presented issues and concerns of fellow student leaders to



Montrell Taylor (P1), HUCOP Senate Rep

the university senate. We have also worked vigorously with leaders to draft a proposal to advocate for educational necessities within the College of Pharmacy.

In the upcoming semester we plan on establishing an effective safety procedure on behalf of the entire college. We are looking forward to continuing working with other student leaders to tailor effective proposals to be passed. Lastly, we are also in the process of collaborating with the council members of the state of Maryland to provide healthcare opportunities for students to practice, and for the community to benefit.

If you are interested in learning more about Howard University Student Association Senate, keep an eye out for senate week this upcoming semester which will include an open forum, interactive panel, community service, and a mixer event. We are here to serve you all and we are always open to hearing your concerns and acting upon them to the best of our abilities.



From Douala to The Marcy Project

Patrick Fotso, Second-year Student Pharmacist

"Why would an African even listen to Hip Hop?", a stranger asked a few years back. Her friend quickly jumped in agreeing, "Yea, why are they passionate about it?". I had been in Marcy Project at Brooklyn NY just to visit. That place felt so peaceful, the folks I saw there were hospitable, and the city gave birth to a masterpiece of human kind. A guy who is not afraid to challenge and beat the status quo. A guy who sold drugs in the street, shot his brother, read and studied the dictionary for rhymes,

magically penned his own crafts, and redefined the history of Hip Hop by his mental agility, powerfully spoken words and radical ideas. A guy by the name of Sean "Jay-Z" Carter. I'm just a little child from Douala, Cameroon, and I found in him inspiration to overcome my obstacles in this country which greatly welcomed me, but yet refused to believe to its own values. People who surround me on a daily basis might think I'm crazy for going hype anytime Jay-Z's name is mentioned but I can't help it because he changed my life in a way nobody that I know on Earth



will ever understand. We are mostly distracted by social media jokes, people's opinions, and society's evil activities, so we end up being insecure and dressing other people up in those insecurities. We sadly refuse to be inspired and consistently educate the youth about kindness, accountability, and greatness. With everything that is going on in the world, we have the responsibility to stand up for ourselves, lead without fear, and prosper. We do not have to follow specific groups or affiliate ourselves to gangs. Why don't we try to dictate like Jay, be kind like Jay, and inspire like Jay everyday? Look around and inspire beautiful and heartfelt people who surround you every single day, and believe me GOD will always reward your efforts even if you fail along the way. Don't be afraid to be a leader and stop being a follower. Our everyday lives should consist of challenges to make us grow inspirationally, intellectually and spiritually.

Seeing the FDA in Action

Ashley Crumitie III, Fourth-year Student Pharmacist

During my 4th Year Advanced Pharmacy Practice Experience (APPE) rotation at the United States Food and Drug Administration (FDA) I had the opportunity to rotate in the Office of New Drugs, Office of Antiviral Products. While rotating at the FDA, I attended meetings, lectures, and engaged in



many educational activities. One of the largest meetings I attended was an Advisory Committee Meeting. Advisory committees provide the FDA with independent advice from outside experts on issues related to human and veterinary drugs, vaccines and other biological products, medical devices, and food. In general, advisory committees include a chair, several members, plus a consumer, industry, and sometimes a patient representative. Additional experts with special knowledge may be added for individual committee meetings as needed. Although the committees provide advice to the agency, the FDA makes the final decisions.

I attended the Antimicrobial Drugs Advisory Committee meeting on November 16, 2017. The



committee discussed new drug application (NDA) 209367, ciprofloxacin inhalation powder, sponsored by Bayer HealthCare Pharmaceuticals, Inc., for the proposed indication of reducing exacerbations in non-cystic fibrosis bronchiectasis (NCFB) in adult patients (≥18 years of age) with respiratory bacterial pathogens. The meeting was an all-day event that was intellectually engaging throughout the duration. It began with the sponsor discussing their reasoning behind the NDA submission. Next, the FDA experts discussed the clinical data submitted to the agency and lastly patients who are diagnosed with NCFB testified why there is a need for the new indication to be approved. It was one of the most structured meetings I have ever attended. I would strongly urge any student rotating at the FDA to attend one of these meetings to enrich their learning and experience in regards to everything that the FDA encompasses.

Fun Things to do in D.C.

Nneka Okafor, First-year Student Pharmacist

It's twelve o'clock on a Saturday and you just got done with your weekend obligations. You want to find something to do; but your pockets are tight and you really do not want to spend a lot of money. You've been searching the web and have yet to find something interesting or fun. Well you're in luck! Here are a few fun things to do, that won't put a dent in your wallet.

If you are looking for a calm, serene environment, that is filled with rich nature and exotic plants; try visiting the United States Botanic Garden. It is located on 100 Maryland Ave SW, Washington DC. This gem is filled with a fortress of trees, colorful flowers, plants and a beautiful greenhouse that is beautiful beyond photograph skills. The facility is divided into different environments, climates and primeval paradises. The Botanic Garden is an enriching outdoor learning experience that encourages one to utilize their observation skills to take in all the landscape and beautiful scenery. Each alluring plant is followed by a brief description of its origination and purpose, so you can learn something new in the process. Being that this museum is free, it may not be a bad idea for a first date option! If you are not into nature and you want something more active, go ice skating! This fun activity has been an increasingly popular way to workout during the winter months. Not only does ice skating build leg muscles, this activity is also considered as a good way to get your cardio in.



The U.S Botanic Garden

work that was put into building this huge exhibit. If you are unable to get the free early timed entry passes, they do offer same day online entry passes (weekdays only). However, those passes do go quickly, so I suggest logging onto their website at the start time of their release (6:30am). This museum's purpose is to take one on the journey

of life, from the prosperity before

There are many ice skating rinks in DC; however, I would recommend the Silver Spring Outdoor Ice Skating Rink located on 8523 Fenton St, Silver Spring MD. The location of this rink is perfect, being that it is surrounded by a movie theatre, restaurants and a shopping mall. Once you are done skating you can get a quick bite to eat and head over to see a good movie.

Now this last activity is definitely a must! If you are looking to be embraced by the life, art, history and culture of African Americans, then I suggest you take a visit to the Smithsonian's National African American Museum located on 1400 Constitution Ave NW, Washington DC. For those who have visited this museum already, I know they can vouch on the authenticity and remarkable the beginning of the slave trade all the way to the lack of humanity during and after slavery. This emotional experience will allow you to intellectually learn about the culture and history that you may not have been taught during school. Although entry is hard, this is a definite must see!

I really hope that you are able to try one of these activities during a free weekend. They are inexpensive and fun filled and way better than binge watching tv. This is a great way to recharge or a good study break. Washington DC is such an amazing city and it has a lot to offer. Take the time out to explore and share your experiences with others so that they can get in on the enjoyment as well.

Crossword Puzzle



Find and circle the words from the WORD LIST below, looking down, across, up, backwards, and diagonally.

N	С	Ρ	м	R	L	F	L	Y	N	Q	Ι	н	ର	н	G
Y	0	D	R	0	0	Ι	Y	0	0	Ν	R	G	R	Т	Ε
Т	G	I	В	Е	Y	Т	Ι	Y	т	0	х	Ν	Z	С	Ν
I	F	S	Т	Y	S	S	Ι	R	Е	С	х	J	F	Ε	Ε
L	Ι	Ε	С	A	Ι	С	A	В	J	Y	Y	A	Z	F	R
I	Ν	Ζ	Ρ	С	С	V	R	A	Ι	Т	С	S	M	F	I
В	L	Т	Ε	R	Е	Ι	Ν	Ι	G	н	M	G	L	Ε	С
Α	н	R	Μ	Ν	Ι	G	D	F	Ρ	С	Ν	D	D	Ε	D
L	Ρ	В	0	R	Ν	V	L	Ν	D	Т	0	Ι	С	S	R
I	Μ	U	Ν	Ι	Ν	0	A	М	Ι	S	Ι	Ε	Y	R	U
Α	S	Α	С	С	U	R	A	С	Y	A	F	0	Q	Ε	G
V	I	В	D	Е	н	U	Ν	М	Y	F	R	Μ	N	V	С
Α	Ε	Х	С	Е	L	L	Е	Ν	С	Е	Κ	Т	U	D	0
0	F	A	Μ	Ε	Z	A	U	Ε	Ι	Т	С	W	N	A	Μ
I	R	Ε	В	M	U	Ν	Т	0	L	Y	Т	F	Ι	0	Q
В	X	S	Ρ	н	A	R	м	A	С	0	L	0	G	Y	С
Т	N	Ε	Ι	D	Е	R	G	N	Ι	Е	V	Ι	Т	С	A
ORD L	IST	ACCUR	ACTV		RIGA	JATI ARI		CEN	EDIC D	DIRC	LOT NI	IMRED		PDFSCP	IDTION

Ľ	VORD LIST	ACCURACY	BIOAVAILABILITY	GENERIC DRUG	LOT NUMBER	PRESCRIPTION
		ACTIVE INGREDIENT	CONTRAINDICATION	INHIBITOR	PHARMACOLOGY	PRIVACY
		ADVERSE EFFECT	EXCELLENCE	INTRAVENOUS	PRECISION	SAFETY

The Chance Howard University Took on Me

Johnny Yoko-Uzomah, Fourth-year Student Pharmacist

My journey to pharmacy school started the fall of 2006 at California State University, East Bay, a commuter school situated in the hills of Hayward, California. As a recent high school graduate, I didn't know what lay ahead of me, or if I as even ready for college, but I knew it was something that I had to do. I would be lying if I said pharmacy was always my first choice of a career path. Upon graduation from high school, I had ambitions to follow other ambitions, but before I knew it, I found myself registered as biology major. I almost immediately fell into the trap of going through the motions. I didn't care much for my academics and took a lot of things for granted.

I would show up to class for lecture but my mind would often be elsewhere. I'd go home and barely crack open a book to study, and things only got worse when I found out about this little thing called a

"curve". My motto became, "C's get degrees," and I became content with doing just enough to get by. Looking back, I wonder myself what I was thinking and what propelled me to make these mistakes.

Fast forward four years to 2010, after retaking classes over and over, I managed a way to just make it on by and graduate on time. Here I was, a recent graduate with little interest in the field I had spent four years obtaining a degree in, and I was not sure what to do next. I eventually decided to take a year off to focus on myself. I started working for a property management company, and felt like I was wasting time towards moving on in life. Towards the end of the summer of 2011 I started looking for options to go back to school, and pharmacy school was on the list of goals. I started researching requirements, and felt that I had

My motto became, "C's get degrees," and I became content with doing just enough to get by.

dug such a big hole for myself in undergrad just getting by with the bare minimum and doing nothing else. I contacted my undergrad academic advisor from undergrad, told him I was interested in pursuing a career in pharmacy, and explained my status of not being qualified to apply right away. He suggested I register for the Pre-Professional Post-Baccalaureate program, and in the fall of 2011, I found myself back on the campus where I had spent my undergrad days.

The purpose of the Pre-Professional Program was for students who wanted to apply to healthcare professional schools to

> take a full course load of upper division science classes to show schools that you were ready and capable for the rigors of professional school. Great! This was the fresh start that I needed, but it's true what they say,

"bad habits are hard to break". From day one of the program I fell back into my undergrad ways. I'd physically be at lecture, but my mind would be elsewhere. And as soon as class got out, I would tune out all academics. I was on the road to failure again, and by the end of the one-year in which I should have been done, I found myself in the program director's office. I had hit rock bottom. He pulled up my transcript and told me flat out that my GPA had fallen below the requirements for the program and that he was supposed to expel me from the program. I didn't know what to say or do. I had wasted my opportunity to correct my mistakes from undergrad. My heart sank. The program director then asked me, "do you really want to be here?" and my natural reply was yes, but it wasn't very convincing, well to myself at least. I think I had said it because it felt like the right thing to say, but what came next set in place the events that would serve as the

wake up calls that brought me to Howard University in the fall of 2014. He told me he'd give me a quarter (we were on a academic quarter system) to get my grades up. I knew this was my last chance, and I didn't understand why I was getting it, but it lit a fire in me. I started taking my goal of making it to pharmacy school more serious. For the first time, I knew what it was like to properly study, attend tutorials, and spend extra time understanding the material. With the fear of the thought that this was my last chance lingering in the back of my head, I began finding a balance between social life and my academics. I began volunteering as a prescription assistance program administrator at Clinic by the Bay, a non-profit clinic in San Francisco that served lowincome families. By the fall of 2013 I had raised my GPA to where I needed it to apply, and was ready for PharmCAS, or at least I thought I was. My approach to applying was "throwing the kitchen sink". I applied to a long list of schools, but I soon found out that my bare minimum qualifications still were not enough. Had I dug a hole that I couldn't climb out of? I knew I was ready for pharmacy school, but my basic

qualifications didn't reflect this. I began receiving rejection after rejection, and I honestly didn't know

if I had it in me to go back to the drawing boards for another year. In March of 2014, a phone call came from an unknown 202 number. On the other line was Mr. Prince asking if I would be interested in coming to Howard for an interview. I jumped at it right away, and a week later I was on a flight to Washington D.C. for the first time since 8th grade.

As I stepped off my flight at DCA and turned on my phone, another rejection letter had been emailed to me. Rather than let it get me down, it only built more of an importance within me with regards to this interview. The next day, I was sitting in CCH 207 with some people who would later become my classmates, Irfan Memon and Andrieka Ore. I sat there as Dr. Wutoh gave us an introduction to Howard University College of Pharmacy. That introduction had me sold. I knew Howard was where I wanted to be. I went through the rest of the interview day feeling on point with every part of the process. I flew back to San Francisco, and waited anxiously to hear back. A week later the letter I was waiting on had come from Howard. The only problem was that I had been wait-listed. I was disappointed. I had flown all the way across the nation and thought it would be a for sure shot. There was no way they would make me fly to D.C. just to say no. That night I realized I had to shrug it off, and rather than let it affect me, I kept on with my volunteering and had registered for more classes. I looked at the positive rather than the negative. I didn't give up on myself. Never give up on yourself! Like they always say, it was just a minor setback for a big comeback. I had started

tapping into my potential and it felt good.

> After receiving that letter, I wouldn't hear back from Howard until August of 2014. The Monday of orientation week to be exact. I was at work and some

unknown number was calling, and I kept rejecting the phone call. Finally they left a message. It was Mr. Prince and he had good news for me. I immediately called him back and needless to say, that was my last day at work. I spent the next day packing and buying last minute things, and by Wednesday of orientation week, I was in DC. The only person I knew was my cousin who lived in NOMA, and whose couch I would be sleeping on for the first two weeks of school. It wasn't until that Thursday, my first day of orientation, that I had realized I was the last person to arrive as a part of the class of 2018. I always tell myself that Howard took a chance on me, and that has been one of my motivating

factors for a lot of what I have accomplished while being here. Howard was the perfect environment for me to fully tap into my potential and grow both personally and professionally. Every year Howard calls for its students to be leaders and from day one I was intrigued by what it took truly be to be respected as a leader. I had been at what I perceived as my rock bottom, and I only had one way to go, and that was up. Dr. Lassegue, our Structures and Functions professor told us many times, "shoot for the stars and even if you don't make it, at least you land on top of the world." As the CPSC

Executive Vice President two years later, I reiterated those same exact words to the class of 2020 at their white coat ceremony. Howard University gives its students the platform to excel, and its on you to fully tap into all the opportunities afforded to you.

See, I was always one of those people that teachers, family members,

and friends would say, "he has so much potential if he would only apply himself." Coming to Howard under my circumstances served as the platform for me to finally apply myself. Every position I held, every exam I ever took, every presentation I gave, I did it with the very thought that I had something to prove. I was on my last chance, so I had to give it my all. I'd done things the wrong way in undergrad, and post grad, but was able to turn that around. I always like telling my story to pharmacy school applicants and new students as a source of inspiration/ motivation. Some people have a streamlined and simple path to pharmacy school whereas others have to fight tooth and nail to get accepted. But no matter what your story, you're here now and the ultimate theme

> should be "Make the Most of It". You'll have your days when you're "burnt-out" and that is ok. Rest if you must, but don't you guit. If you stay up for countless nights to study for an exam and still fall short, take the time to grovel, come up with a game plan, and keep on pushing on. Never take an opportunity for granted and never pass up on an opportunity no matter how small. From the smallest seeds an entire garden can grow. My time at Howard is coming to an

end and it has been a great 4 years. It wasn't always a perfect harmony, but overall I can say that my experiences here have prepared me for much of what life has to offer.



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