



Monograph Volume 26 Issue 2

Featured in this issue
Puzzles, Recipes,
RxFails, Clubs & More!



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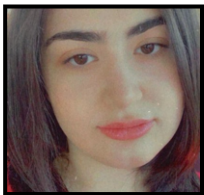
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EDITOR'S ADDRESS

Welcome to the Christmas edition of the Monograph! We're thrilled to present Vol. 26, Issue 2, packed with a variety of content to get you into the festive spirit!

This issue features a RANGE of articles including fun winter activities, cozy recipes to try with friends, and creative songs and heartfelt poems.

If you're interested in learning more about different clubs, you can read up about exciting club events, including the upcoming PDW!

Winter is the prime time for people to get sick so read up on tips to stay healthy and safe during the chilly winter months.

December can be a hectic time with exams just around the corner. We wish you all the best of luck and remember to take breaks and care for yourself. Hang in there, phamily; we're almost at the finish line!

A heartfelt thank you to everyone who contributed to this issue and to our amazing layout team. The Monograph would not be possible without your continued support.

We're looking forward to bringing you even more exciting publications next semester. If you'd like to share recipes, stories, tips, or join our layout team to showcase your creativity, reach out to your class reps—we'd love to have you on board!

Happy reading phriends and phamily!

Sincerely,

Purvi Mahida and Vivian Hang
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Address

On behalf of the **Undergraduate Pharmacy Society (UPS)**, we want to take a moment to celebrate and congratulate everyone on making it through your midterms!

First Years, you did it! Your hard work has carried you through your very first set of midterms in the pharmacy program. We know how challenging it can be, but you've tackled this milestone with resilience. Be proud of yourselves—you're one step closer to becoming amazing healthcare professionals!

Second Years, how does it feel to be one step closer to finishing the first semester of second year? You're learning all kinds of new knowledge, from clinical concepts to patient care skills, all things that you can apply not only in your MTM but also in your upcoming rotations. It's amazing to see how your skills are growing and preparing you for real-world applications. Keep up the fantastic work, you're building an incredible foundation!

Third Years, congratulations on completing your last fall semester midterms! This is a HUGE achievement, and we couldn't be prouder of you. An extra shout-out for finishing

your very last MTM ever! This is a big milestone (no pun intended) on your journey through the program—way to go!

As we enter December, it's important to remember to take care of yourselves. While exam season can feel overwhelming, don't forget to take breaks, destress, and refuel your mind and body. Small moments of self-care between study sessions can make all the difference.

Good luck on your exams, everyone! Let's finish this semester strong. And as the holiday season approaches, we hope you're enjoying all the festive preparations!

Wishing you all success and some well-deserved rest.

Mona Mollaeizadeh and Rehan Saeed
2024-2025 President and Vice-President
Undergraduate Pharmacy Society (UPS)
Leslie Dan Faculty of Pharmacy
University of Toronto

STUDENT COUNCIL FALL EVENTS: SWEET SALES AND BOARD GAMES

By: Sara Rokni Abjari, 2T7



The Student Council has been keeping very busy this term with exciting events! Let's take a dive into the council events that have happened since the last monograph issue. From sweet sales to an exciting game filled evening we are happy to report on our successes in the past months and hopes for the future.



Cookie Sales

Cookie sales were a huge success! We sold cookies to the student body to raise funds for our graduation. Not only did our first cookie sale of the year meet our fundraising goal but it was so successful that we decided to have a second one a month after. Thanks to the generosity of our peers, we sold all of our delicious chocolate chip cookies and have raised funds for our class.

Game Night at Twilight Café

In a change of pace from all our successful sales, we hosted a game night at the cozy Twilight Cafe in downtown Toronto. The venue was filled with laughter and friendly competition as the 2T7s enjoyed an evening of board games. From strategic rivalry to fun guessing games the evening was a fantastic reminder of the strong bonds within our Phamily. We had a wonderful turnout at this event and hope that everyone is able to rejoin us in future events.



Future Events?

With such enthusiastic participation and support, we are excited to plan even more events in the future and to raise more funds for our cohort. We're very grateful to everyone who joined us this term, and we look forward to creating more memories together! Keep an eye out on the student council socials to stay up to date with our plans and we hope to see you all at our future events!

Special thanks to student council for the pictures

Does the Cold Cause Colds?

What Pharmacy Students Should Know

By: Radhika Thakkar, 2T6

THE AGE-OLD DEBATE -

does cold weather really cause the common cold?

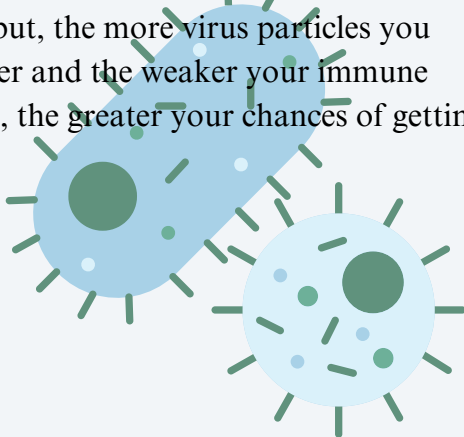
I thought it did since my mom was always telling me to dress warm or I'll be sick. But as I was scrolling through TikTok, I heard that's not really the case. While it's not the cold itself that directly gives you a runny nose, research shows that chilly temperatures may play a role in making us more vulnerable to viruses lurking in the air. A Yale University study confirms this connection, giving insight into how winter might increase the risk of catching a cold.



COLD WEATHER & VIRAL SUSCEPTIBILITY

For years, the prevailing medical consensus has been that cold weather doesn't directly cause colds. In fact, colder temperatures can kill some viruses. However, some viruses, like the rhinovirus (a major cause of the common cold), thrive in cooler conditions. Add to that the fact that winter pushes people indoors into crowded spaces, increasing exposure to airborne droplets, and it's easy to see why colds are more common in the colder months.

Simply put, the more virus particles you encounter and the weaker your immune defenses, the greater your chances of getting sick.



THE YALE STUDY: WHY COLD TEMPS MATTER

The Yale study, published in the Proceedings of the National Academy of Sciences, provides evidence that cold temperatures can impair our body's defenses. In mice, cells in the nasal passages showed reduced activity of the immune molecule interferon at 33°C (cooler conditions) compared to 37°C (body temperature). Interferon is a key player in fighting viruses. When its activity is dampened, rhinoviruses are more likely to thrive.

Does the Cold Cause Colds? - cont'd

PRACTICAL TIPS FOR PHARMACY STUDENTS

As future pharmacists, it's important to educate patients on reducing their risk of catching a cold, especially in winter. Here are some evidence-based tips:

1

Stay Warm

Keeping your body warm, especially your nasal passages, might help your immune system function optimally. So yes, wearing a scarf isn't just mom's advice—it's science-backed!



Practice Hand Hygiene

Dr. Wetmore emphasizes frequent handwashing or using hand sanitizer. Rhinoviruses can survive on surfaces, and touching your face can transfer the virus into your system.

2

3

Cough and Sneeze Properly

Encourage patients to cough or sneeze into their elbows, not into the open air. This minimizes droplet spread.



Prioritize Rest and Self-Care

A strong immune system needs rest. Stress, fatigue, and late nights (hello, exam cramming!) can lower immunity, making it easier for viruses to take hold.

4

THE BOTTOM LINE

Cold weather doesn't directly cause colds, but it creates conditions that make us more susceptible to infection. Dress warm, wash your hands, get enough sleep, and educate others about these preventive measures. It's the perfect way to put your pharmacy knowledge to good use this winter!

Essential Winter Care Tips from a Pharmacist's Perspective

By: Vivian Hang, 2T7

Winter brings joy, cozy vibes, and festive celebrations, but it also comes with dry skin, flu season, and other challenges. Here is a pharmacist-approved guide to keep you healthy and thriving during the chilly months.

Hydration: Inside and Out

Drink Up: It's easy to forget water when it's cold, but your body still needs hydration. Keep a water bottle handy or opt for warm herbal teas to stay cozy and hydrated.



Moisturize: Combat dry skin by using a moisturizer with ingredients like glycerin or hyaluronic acid. Apply it right after a shower when your skin is still damp for maximum effectiveness.

Protect Your Skin

Sunscreen Is a Must: UV rays don't take a winter break! Use a broad-spectrum sunscreen with SPF 30 or higher, especially if you're outdoors or around reflective surfaces like snow.



Lip Care Matters: Prevent chapped lips by using a hydrating lip balm with SPF. Remember to reapply throughout the day, especially if you're outside in the cold.

Be Prepared for Winter Illnesses

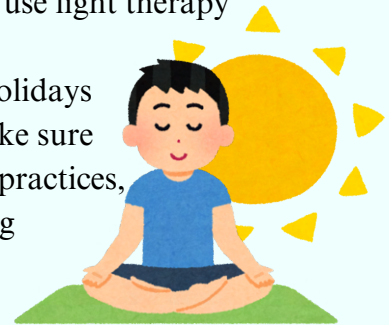
Stock Your Medicine Cabinet: Keep essentials like decongestants, throat lozenges, and fever reducers on hand. Before combining medications, always consult your pharmacist.

Hand Hygiene: Carry an alcohol-based hand sanitizer for those moments when soap and water aren't available.

Care for Your Mental Health

Combat Seasonal Affective Disorder (SAD): Try to spend more time outside to increase your exposure to natural light or use light therapy lamps

Relax and De-Stress: The holidays can be stressful times so make sure to incorporate mindfulness practices, like meditation or journaling



Be Travel-Ready

Pack Wisely: If you plan to travel this winter break, make sure you have a well-stocked travel kit with medications, hand sanitizer, and hydration essentials.

Prescription Safety: Before you leave for a long trip, ensure to check if you need refills, and keep medications in their original packaging for customs.



I hope you'll find some of this advice helpful! It's easy to implement and it ensures you'll have a happy and healthy winter season. Stay warm and take care!



3 Magical Activities to Enjoy ✨ IN TORONTO

Yasmeen Ameeriar, 2T6

1. EXPLORE THE TORONTO CHRISTMAS MARKET AT THE DISTILLERY DISTRICT

The historic cobblestone streets of the Distillery District come alive with twinkling lights, festive music, and the scent of mulled wine during the annual Christmas Market. Visitors can shop for unique gifts from local vendors, enjoy seasonal treats like roasted chestnuts, and take photos by the iconic giant Christmas tree. Don't miss live performances or the magical holiday carousel, making it the perfect spot for families, friends, and couples alike.



Whether you're shopping for gifts, enjoying outdoor activities, or soaking in the beauty of holiday lights, Toronto offers plenty of ways to create unforgettable Christmas memories.

2. SKATE UNDER THE LIGHTS AT NATHAN PHILLIPS SQUARE

Lace up your skates and glide under the twinkling canopy of lights at Nathan Phillips Square's outdoor skating rink. The City Hall backdrop and illuminated Toronto sign create an enchanting atmosphere. Warm up afterward with a cup of hot chocolate from nearby vendors, and enjoy the festive decorations that surround this downtown hotspot.



3. DISCOVER CASA LOMA'S WINTER WONDERLAND

Toronto's famous castle, Casa Loma, transforms into a winter wonderland during the holiday season. Walk through stunning light displays in the castle gardens, explore beautifully decorated rooms, and enjoy holiday performances and activities for the whole family. The festive ambiance and breathtaking views make this a truly magical experience.



The Joy of Watching Christmas Movies

By: Purvi Mahida, 2T6

There's something magical about watching Christmas movies during the holiday season. Whether you're curled up on the couch with a warm blanket or enjoying a movie marathon with family and friends, these films bring a special kind of joy. Christmas movies have a way of making us laugh, feel warm inside, and remind us of the best parts of the season: love, togetherness, and a little bit of holiday magic.

The fun begins when you gather with loved ones, grab some popcorn, and settle in for a cozy movie night. Classic movies like *Home Alone*, *Elf*, and *The Grinch Who Stole Christmas* are always a hit. For those who love a heartwarming story, *It's a Wonderful Life* or *The Polar Express* never fail to bring out the holiday spirit.



These movies are more than just entertainment. Watching them together is a chance to create memories and traditions that last a lifetime. They bring people together, spark conversations about favorite scenes, and even inspire a few laughs and silly debates about which movie is the best. The laughter and joy shared during these moments are what make the holidays feel so special.



Spending Christmas with friends and family can be as simple as enjoying these movies together. Whether you're at home, in a cozy cabin, or even virtually through a movie night on Zoom, it's the time spent with those you care about that truly makes the season bright. Make hot chocolate, bake some cookies, and let the movie marathon begin!

This holiday season, make it a tradition to watch a Christmas movie or two (or three!) with the people you love. You'll be building lasting memories, sharing joy, and enjoying the simple pleasure of togetherness that makes Christmas so magical.

Happy holidays, and happy movie watching!



Winter BREAK CRAFTS! DIY TOTE BAGS

BY: SALENA JAFFER, 2T8

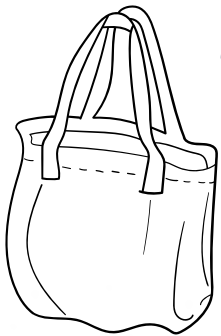
IF YOU'RE LOOKING FOR A FUN AND CREATIVE WAY TO DE-STRESS AFTER YOUR FINALS, WHY NOT TRY MAKING YOUR OWN DIY TOTE BAGS ???

THIS SIMPLE YET REWARDING CRAFT IS PERFECT FOR LETTING YOUR IMAGINATION RUN WILD WHILE CREATING SOMETHING PRACTICAL AND STYLISH.

WHETHER YOU WANT TO DESIGN SOMETHING BOLD AND COLORFUL OR KEEP IT MINIMAL AND CHIC, THE POSSIBILITIES ARE ENDLESS; IT'S A GREAT ACTIVITY TO UNWIND, EXPRESS YOURSELF, AND EVEN MAKE PERSONALIZED GIFTS FOR FRIENDS OR FAMILY.

10/10 WOULD RECOMMEND GIVING IT A TRY...

ALL YOU NEED ARE A FEW BASIC SUPPLIES:



- PLAIN TOTE BAGS
- SOME ACRYLIC PAINT AND PAINT BRUSHES, OR PAINT MARKERS



and a little
INSPIRATION

PERFECT Chocolate Mug Cake RECIPE



BY: RACHEL KURUVILLA, 2T5

Ingredients:

- 3 tablespoons unbleached all-purpose flour
- 2 tablespoons brown sugar
- 2 teaspoons cocoa powder
- 1/4 teaspoon baking powder
- 3 tablespoons (1.52 fluid ounces) milk
- 1 tablespoon (15 mL) canola oil
- Medium dash of salt
- 1 gtt of vanilla extract



Instructions:

1. Spray the bottom of a microwave-safe mug lightly with cooking spray.
2. Add in the flour, sugar, cocoa powder, baking powder, and salt and stir together.
3. Add milk, canola oil, and vanilla extract and stir until the mixture is smooth.
4. Cook in the microwave for 72 seconds then check if the cake has set. Add an additional 15-25 seconds if needed.
5. Allow the cake to take a break in the microwave for 1 minute before consuming.



Notes:

- A good mug cake should be solid on the outside but soft and gooey on the inside.
- This recipe should yield approximately 1 serving.
- If you want some additional sweetness, add in a small scoop of Nutella, peanut butter, or chocolate chips.
- If you want you can replace the oil with coconut oil.
- This recipe should contain approximately 183 mg of potassium and 2 mg of iron.

Buche De Noel

By: Silas Taylor, 2T7

Filling Ingredients:

- 2 cups heavy cream
- ½ cup icing sugar
- ½ cup cocoa powder
- 1 teaspoon vanilla

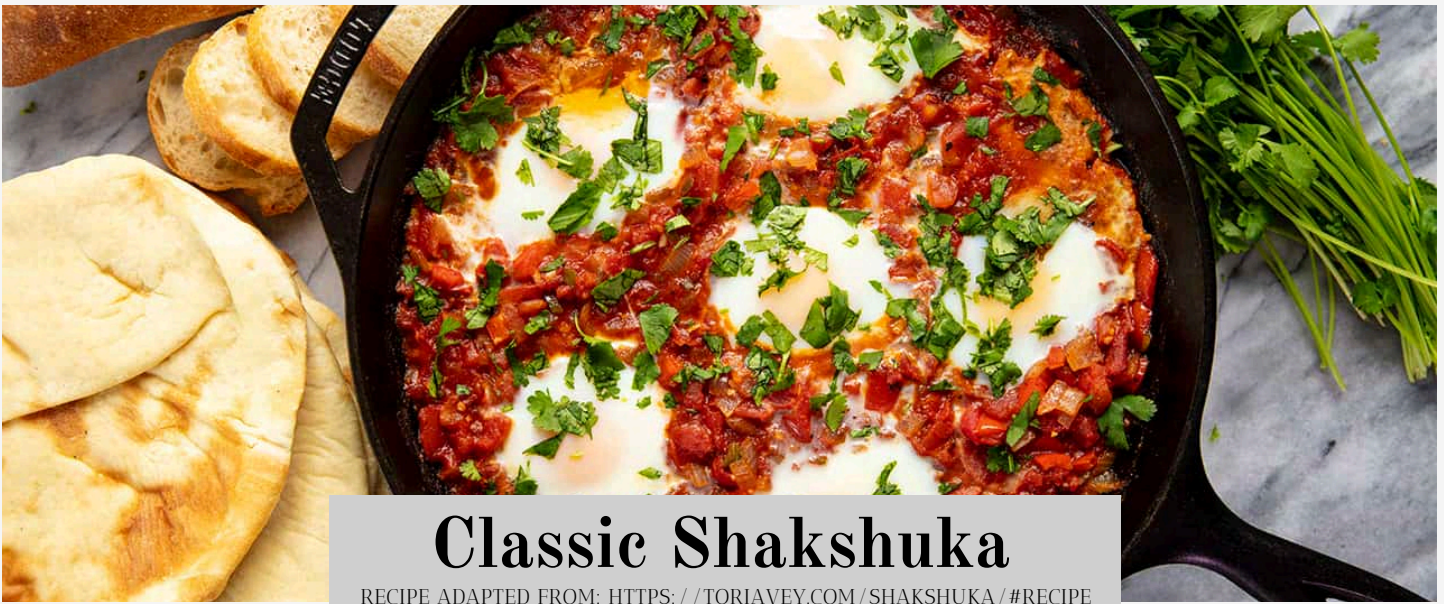
Cake Ingredients:

- 6 egg yolks
- ½ cup sugar
- ⅓ cup cocoa powder
- 1 and ½ teaspoons vanilla
- A pinch of salt
- 6 egg whites
- ¼ cup sugar

Steps:

1. Preheat the oven to 375 degrees. Line a 10x15 inch jelly roll pan with parchment paper
2. In a large bowl whip filling ingredients until thick and stiff. Refrigerate.
3. In a large bowl, use an electric mixer to beat egg yolks with ½ cup sugar until thick and pale. Blend in cocoa powder, vanilla and salt.
4. In a large bowl, with clean beaters, whip egg whites to soft peaks. Gradually add ¼ cup sugar + beat until stiff peaks form. Immediately fold yolk mixture into the whites. Spread batter evenly into pan.
5. Bake for 12-15 minutes. Dust a clean kitchen towel with icing sugar. Run a knife around the edge of the pan, and turn warm cake out onto a towel. Remove parchment paper starting at the short edge of the cake. Roll the cake up with the towel and let it cool for 30 minutes.
6. Unroll cake and spread filling. Roll cake up, place seam side down on serving plate and refrigerate.
7. Decorate cake with chocolate buttercream and dusting of icing sugar.





Classic Shakshuka

RECIPE ADAPTED FROM: [HTTPS://TORIAVEY.COM/SHAKSHUKA/#RECIPE](https://TORIAVEY.COM/SHAKSHUKA/#RECIPE)
 BY: SARAH SYEDA, 2T7

SERVINGS: 6

COST: \$2 PER SERVING

PREPPING TIME: 8 MIN

COOKING TIME: 25 MIN

Ingredients

- | | |
|---------------------------------|--------------------------|
| 1/2 ONION, PEELED & DICED | 1 TSP CHILI POWDER |
| 1 CLOVE GARLIC, MINCED | 1 TSP GROUND CUMIN |
| 6 EGGS | 1 TSP PAPRIKA |
| 1 TBS CANOLA OIL | PINCH OF CAYENNE |
| 4 CUPS DICED OR CANNED TOMATOES | 1/2 TBSP CHOPPED PARSLEY |
| KOSHER SALT&PEPPER TO TASTE | OR CILANTRO |



Serve with soft matzo bread for Passover!

Directions

1. HEAT OIL IN LARGE SKILLET ON MEDIUM. ADD CHOPPED ONION, SAUTÉ FOR A FEW MINUTES
2. UNTIL IT BEGINS TO SOFTEN.
3. ADD GARLIC AND SAUTÉ TILL MIXTURE IS FRAGRANT.
4. ADD TOMATOES, STIR UNTIL BLENDED. ADD SPICES AND STIR. SIMMER OVER MEDIUM HEAT
5. FOR 5-7 MINUTES.
6. ADD SALT AND PEPPER TO TASTE, OR MORE CAYENNE PEPPER FOR A SPICIER SHAKSHUKA.
7. CRACK THE EGGS, DIRECTLY OVER THE TOMATO MIXTURE, MAKING SURE TO SPACE THEM
8. EVENLY OVER THE SAUCE.
9. COVER THE PAN WITH A LID.
10. ALLOW TO SIMMER FOR 10-15 MINUTES, OR UNTIL THE EGGS ARE COOKED AND THE SAUCE
11. HAS SLIGHTLY REDUCED.
12. MAKE SURE THAT THE SAUCE DOESN'T REDUCE TOO MUCH, WHICH CAN LEAD TO BURNING.



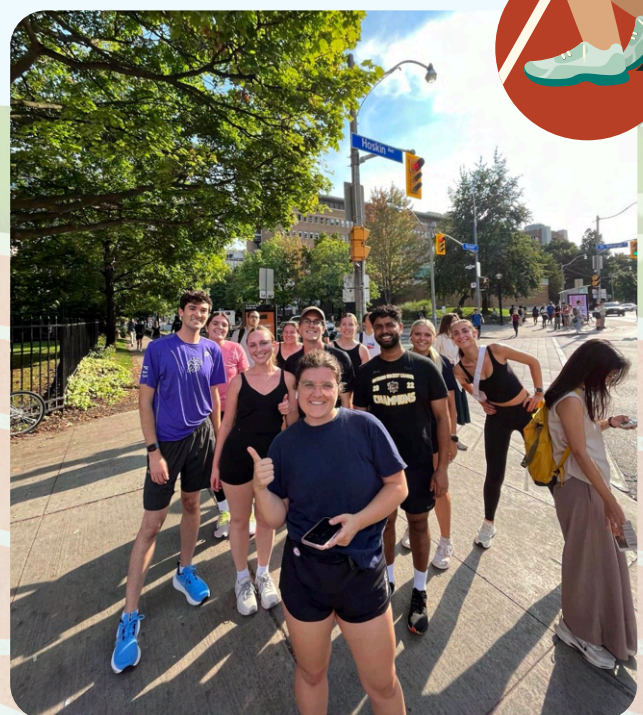
By: Madeleine Yee, 2T6

LACE UP AND JOIN RxRUNNERS

Lace up and hit the pavement with us! We are Rx Runners, UPS' newest club, where runners of all levels come together to enjoy the simple yet exhilarating joy of running. Whether you're a seasoned marathoner or lacing up your sneakers for the first time, Rx Runners welcomes you with open arms and fast (or not-so-fast) feet. Joining our club might just be the best prescription for managing stress and staying active during the hustle of student life!

My name is Madeleine, and I am one of the co-presidents of Rx Runners, alongside Tryston. Our club Rx Runners was started in March of last year and was born from a shared passion for running and a desire to create a supportive, stress-relieving community for students. Running is a big passion of ours and we really wanted to share that with the rest of our classmates and friends. We both believe that school/exercise balance is very important and think that exercise in general but also running is one of the best stress relievers.

When we started, we had no idea what to expect as most of UPS' clubs are all academically oriented so we weren't sure if anyone would want to join. What started as a small group of six runners has grown into a thriving community of approximately 15 runners meeting consistently every week. Rx Runners has quickly become a staple in some student's weeks as we've got a bunch of regular runners who rarely miss Tuesday run days. Some people might be a little afraid to take the first step into running but what is great about this Rx Runners group that we've started is that it's for people of all skill levels and paces. There's absolutely no pressure to get across a finish line and walking breaks are totally valid, we're just here to have fun!



By: Madeleine Yee, 2T6

Why Join RX Runners?

1. **Stress Relief:** Let's face it, pharmacy school is demanding. Running is a proven way to boost mental clarity and reduce stress and doing it with a group makes it even better!
2. **Community:** Rx Runners has quickly become a tight-knit group. Many of the runners are now regulars, showing up every Tuesday for what has become an energizing weekly tradition.
3. **Health Benefits:** Physical activity is an excellent way to stay healthy and improve your energy levels. A consistent running routine can do wonders for both your body and mind.
4. **Fun Memories:** Each run ends with a group photo outside the pharmacy building. These snapshots are not just a fun tradition but they're a reminder of the supportive community you're part of.

Rx Runners is wrapping up this fall semester with our final run on Tuesday, December 3rd, at 3:15 PM. Our 5K route starts and ends at the pharmacy building, and everyone is invited to join. After the break for exams, Rx Runners will be back next semester with even more opportunities to hit the ground running!

So, whether you're chasing a runner's high, looking to de-stress, or simply want to meet new people, Rx Runners is the club for you. Stay tuned for next semester's schedule, and don't miss the chance to take part in a club that's changing the way students see fitness and balance.

Remember: The hardest part is taking the first step—but we promise, it's worth it. See you on the pavement!



<PSASS> <AMS WEEK 2024>



By: Yasmeen Ameeriar, PSASS 2024-2025 President

Antimicrobial Stewardship (AMS) Week, organized by the Pharmaceutical Students' Association for Student Success (PSASS), was an exciting celebration that emphasized the critical role of responsible antimicrobial use in healthcare. The week featured a variety of activities designed to educate and engage pharmacy students, with a special spotlight on projects from the PHM383: Antimicrobial Stewardship course.

Daily Activities and Insights

One of the week's standout events was the PHM383 Project Showcase, where pharmacy students presented their innovative AMS initiatives. These projects demonstrated the practical application of stewardship principles, including optimizing antibiotic prescribing, raising public awareness, and implementing tools to improve antimicrobial use in diverse settings. The showcase highlighted the creativity and commitment of students working to address antimicrobial resistance (AMR).

To further engage participants, PSASS introduced an interactive component throughout the week. Social media posts featuring AMS facts, challenges, and project highlights encouraged pharmacy students to participate by liking, commenting, or sharing their insights. Each interaction gave participants a chance to win gift cards, promoting both engagement and learning about AMS.

How does pollution impact AMR?

- Antimicrobial pollution from manufacturing is generally uncontrolled
- Quality assurance criteria does not often consider environmental emissions
- Environmental pollution with antimicrobials may contribute to the development of AMR
- Antimicrobial residues in wastewater from pharmaceutical manufacturing may exert selection pressure for the development of AMR

ROLE OF POLLUTION

NEW ZEALAND

SWEDEN & NORWAY

REFERENCES

WORLD ANTIMICROBIAL AWARENESS WEEK NOVEMBER 18-24



Educate

- Antimicrobial resistance is when certain microorganisms learn to resist the effects of antimicrobials, making them resistant
- Every time we misuse antibiotics, we're weakening their effects, allowing resistance
- By 2050, AMR could cause 10 million deaths globally (Mcintyre, 2024).



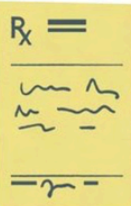
Advocate

- Speak with your healthcare provider about proper use of antimicrobials
- Support antimicrobial stewardship in hospitals and clinics
- **Be a voice that leads to positive change, we're in this together**



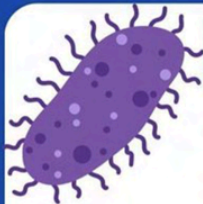
Act Now

- Take antibiotics only when prescribed
- Never share antibiotics with others or save your own "just in case"
- Always finish your course of treatment completely



What health care providers can do

- Give the shortest duration of antibiotics possible
- Give the narrowest spectrum antibiotic
- Try not to prescribe unless there's a clear diagnosis
- Follow guidelines for treatment regimens
- Source: (Marr, 2024)



What health care providers should avoid

- Giving very broad spectrum antibiotics
- Prescribing for non-bacterial illnesses (virus)
- Giving patients antibiotics that a pathogen has resistance against
- Prescribing antibiotics without a clear diagnosis



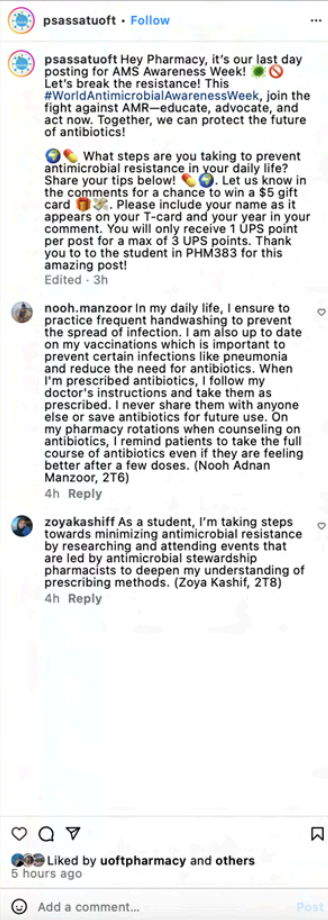
What's the Point?

- Rates of antimicrobial resistance are rising fast
- Together, we can tackle antimicrobial resistance if we take the necessary steps

8.6 per 10,000 c. Difficile rates in 2022

Source:
[https://www.publichealthontario.ca/en/About/News/2024/02/Antimicrobial-Resistance-Survey-Results-2022#:~:text=The%20rate%20of%20CPO%20in,2022%20\(8.6%20per%2010%20C000\).](https://www.publichealthontario.ca/en/About/News/2024/02/Antimicrobial-Resistance-Survey-Results-2022#:~:text=The%20rate%20of%20CPO%20in,2022%20(8.6%20per%2010%20C000).)

<https://www.who.int/campaigns/world-amr-awareness-week/2024#:~:text=WAAW%20is%20celebrated%20from%2018%2D24%20November%20every%20year.>



RESIST THE RESISTANCE

A POEM FOR WORLD ANTIMICROBIAL AWARENESS WEEK 2024

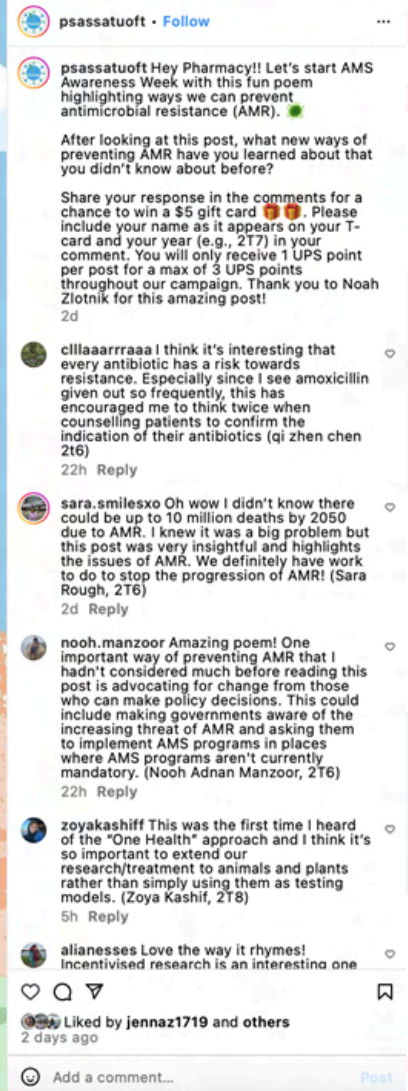
SEE LINK FOR MORE INFORMATION:

[HTTPS://WWW.WHO.INT/CAMPAIGNS/WORLD-AMR-AWARENESS-WEEK/2024](https://www.who.int/campaigns/world-amr-awareness-week/2024)

Educate. Another week, but what is new.
World AMR Awareness Week, have you heard about it too?
This year's is the largest campaign by the W.H.O.
But what is AMR? It's a pressing issue, you know.
When your doctor decides you have a bacterial infection,
From a list of antibiotics, they make their selection.
Every antibiotic has a risk of causing future resistance.
With each one taken, bacteria develop increasing persistence.
Eventually our current medications won't suffice.
A once treatable infection will become our greatest vice.
Antimicrobial resistance is inevitable and increasing.
Ten million deaths in 2050, AMR will not be ceasing.

Advocate for change from leaders near and far.
A collaborative approach will keep the world on par.
All levels of government can help save the day,
By making bold commitments and paving the way.
Luckily, there's a lot we can do to change the pace,
So we can come out on top and win the race.
A One Health approach is how to succeed.
Targeting humans, animals, and the environment, we will not concede.
WHO's Global Action Plan explains what we must do,
Like research, change behaviors, prevent infections, to name a few.
AMR is now a top 10 global threat.
Commitments to fighting AMR you will surely not regret.

Act now. Let us respond to the call.
We may yet cause resistance to fall.
Antimicrobial stewardship is one sure way
To change prescribing behaviors and keep resistance at bay.
We must globally surveil and track our progress,
To ensure we move forward and not regress.
There are few new medications to target bacterial invasion.
We must incentivize research and foster innovation.
Preventing infections can certainly help too.
Staying home when sick, washing hands, anyone can do.
There are many ways to help, this is only a sneak peak
Educate, advocate, and act now starting this week!



Why AMS Matters

AMS Week served as a powerful reminder of the pharmacist's role in combating AMR. Through initiatives like the PHM383 showcase and interactive social media activities, PSASS inspired students to incorporate stewardship practices into their future careers, ensuring the responsible use of antimicrobials for generations to come.

GET TO KNOW PAMA

By: Marina Azzawi, 2T7

The **Pharmacy Awareness of Minor Ailments Club** is dedicated to empowering pharmacy students with the knowledge to excel in managing minor ailments. Our club is dedicated to empowering pharmacy students through:

Comprehensive Understanding:

Dive deep into symptoms, treatment options, and the critical role of pharmacists in addressing minor ailments.

Skill Enhancement:

Develop your professional expertise, empathy, and communication through workshops and real-world applications.

Hands-On Learning:

Connect theory with practice through interactive events like Trivia Night and guest speakers.

Wellness & Community:

Boost morale, academic success, and overall well-being with our fun social events and inclusive environment.

Your Voice Matters:

Help shape our events and initiatives while fostering a supportive and welcoming community for all.



What is CAPSI really about? What is PDW?

By: Anica Shafiq, 2T7



The Canadian Association of Pharmacy Students and Interns (CAPSI) is a dynamic organization dedicated to empowering pharmacy students across Canada. With a mission to advocate for the interests and needs of pharmacy students while promoting excellence in education and professional development, CAPSI plays a pivotal role in shaping the future of pharmacy. The organization provides a national platform for students to connect, collaborate, and contribute to advancing the pharmacy profession.

CAPSI's goals are multifaceted, including fostering leadership, promoting public health awareness, and facilitating access to resources that enhance academic and professional success. Through initiatives like professional development conferences, skills competitions, and educational campaigns, CAPSI equips pharmacy students with the tools they need to excel in their studies and future careers. The organization also serves as a bridge between students and the broader pharmacy community, advocating for policies and practices that support the next generation of pharmacists.

One of CAPSI's greatest strengths is its ability to bring together a diverse network of pharmacy students, encouraging collaboration and the exchange of ideas. This sense of community not only helps students navigate the challenges of pharmacy school but also inspires them to become active contributors to the profession. By fostering a culture of innovation and service, CAPSI ensures that pharmacy students are well prepared to meet the evolving needs of healthcare.

As a Toronto Junior Representative for CAPSI, I am proud to contribute to this mission by serving as a liaison between the national organization and my peers at the University of Toronto. In this role, I help coordinate events, disseminate important information, and represent the interests of our local pharmacy students on a national stage. From organizing educational workshops to promoting awareness campaigns, I strive to ensure that students at our university have access to the myriad opportunities CAPSI offers.

Through my involvement, I've seen firsthand how CAPSI's initiatives empower students to grow both personally and professionally. Whether it's through networking opportunities, leadership training, or community outreach projects, CAPSI's impact is profound and far-reaching. By actively engaging with CAPSI's goals, I aim to inspire my peers to take full advantage of the

resources available to them and to contribute to the ongoing evolution of the pharmacy profession.

CAPSI's commitment to its members is unwavering, and its influence continues to shape the trajectory of pharmacy education and practice in Canada. As a Junior Representative, I am honoured to be part of this journey, working to ensure that pharmacy students are supported, empowered, and prepared to lead in their future roles as healthcare professionals.

So far this year we have just finished organizing and hosting our written competitions and the in-person competitions for the year. Our winners are going on to compete in the Professional Development Week (PDW) in Halifax, Nova Scotia.

Professional Development Week (PDW) is an annual conference organized by the Canadian Association of Pharmacy Students and Interns (CAPSI). Each year, a different Canadian pharmacy school hosts this four-day event, bringing together pharmacy students from across the country to network, enhance their practical skills, and expand their knowledge on various healthcare topics.



PDW 2025, themed “Waves of Change,” will be hosted by Dalhousie University’s College of Pharmacy in Halifax, Nova Scotia, from January 8th to 12th, 2025. This theme reflects the rapidly evolving profession of pharmacy

and invites the next generation of future pharmacy leaders to come together, network, and expand their knowledge.

The conference offers a variety of opportunities for pharmacy students, including educational sessions led by professionals in the field, networking events, and competitions such as the Patient Interview Competition, Student Literacy Challenge, Compounding Competition, Advice for Life Competition, and OTC competition. These activities allow students to apply their knowledge, gain insights from experts, and establish connections with peers and industry professionals.

Attending PDW is a memorable experience for students, as it provides learning opportunities outside the classroom, the chance to establish professional relationships with other future pharmacists, and enrichment through the culture of the host city. By participating in PDW, pharmacy students can foster new connections and gain experiences that will aid in their future careers. We hope to see most of our students from Leslie Dan Faculty of Pharmacy there at the conference.

Antioxidants and Chemotherapy

By: Sheena Yee, 2T6

J.S., a 55-year-old female, presented to her oncology clinic for her third cycle of chemotherapy. During a routine consultation, she mentioned that she had been taking antioxidant supplements (Vitamin C 1000 mg, Vitamin E 400 IU) daily, recommended by a friend, to "boost her immune system" and combat any chemotherapy side effects.

While antioxidant vitamins such as Vitamin C and Vitamin E are generally considered safe, their use during chemotherapy raised concerns for J.S.'s oncology team.

What is chemotherapy?

Chemotherapy is a commonly used term for cancer treatments that do not involve surgery or radiation. Many chemotherapy drugs can be described as "cytotoxic" which translates directly to "toxic to living cells". Cancer is a disease in which cells of the body undergo uncontrolled growth, harming the body. In cancer treatment, cytotoxic agents are used for their toxicity to kill these fast growing cells. However, non-cancerous or "normal" cells are also at risk of experiencing toxicity, which can be manifested as side effects of chemotherapy. These side effects include hair loss, vomiting, diarrhea, and the development of mouth sores (1). Non-cytotoxic agents are drugs that are not directly toxic to cells, whether they are normal or cancerous. Some examples of cytotoxic agents used in cancer treatment include methotrexate, mercaptopurine, and doxorubicin. Some examples of non-cytotoxic agents include blinatumomab, tacrolimus, and

mycophenolate (acid and mofetil) (2).

What are antioxidants?

Antioxidants are nutrients that help fight damage to our cells. The way cells process oxygen results in the production of unstable molecules, called free radicals, which can damage our cells and DNA. Over time, a buildup of free radicals can lead to diseases such as cancer (3).

The body's cells can repair or prevent free radical damage by naturally making antioxidant enzymes and consuming antioxidants from a variety of food sources. Some of these common antioxidants include Vitamin C, E, and selenium. Overall, antioxidants help protect our cells from the daily damages they face. (4) However, in terms of cancer treatment specifically, current research shows that the action of antioxidants may not translate into long term benefits during cancer treatment. The side effects of antioxidants, including interactions, can be difficult to predict as there is no standardized dose or specific type of antioxidant recommended alongside cancer management therapies (5).



What are the interactions between chemotherapy and antioxidants?

When cancer cells develop, the presence of free radicals can help fight their growth alongside cytotoxic chemotherapy. As a result, the use of antioxidants could potentially block the cytotoxic effects of chemotherapy agents by reducing the amount of free radicals in the body. This could translate to a less effective cancer treatment.

Additionally, not all interactions with antioxidants involve cytotoxic drugs. For example, Bortezomib, an anticancer drug, interacts with antioxidants found in green tea. Although Bortezomib is not cytotoxic, its activity is specifically inhibited by the antioxidant components of green tea, which may lead to ineffective treatment. (6)



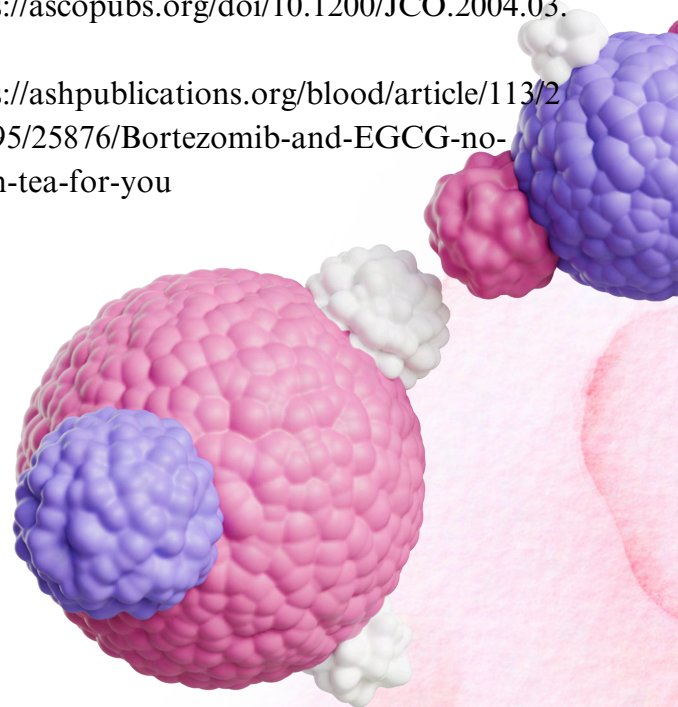
How can patients avoid these interactions? Do I have to worry about vitamin C/E etc in food?

Dietary levels of antioxidants are considered safe during chemotherapy and cancer treatment. It is important to maintain a healthy and diverse diet during this time. Talking to your pharmacist or other healthcare provider about ALL your vitamins, supplements, and natural health products can help them identify potential interactions and manage them appropriately. This ensures you get the best possible effect from your cancer treatment.

With regards to J.S., the healthcare team educated her on the possible interaction between high-dose antioxidants and chemotherapy. They advised her to stop the supplements and instead focus on a balanced diet rich in natural antioxidants from fruits and vegetables, which provide a safer, more moderate level of antioxidant activity without interfering with treatment.

Resources:

1. <https://www.ncbi.nlm.nih.gov/myaccess.library.utoronto.ca/books/NBK564367/>
2. <https://www.eviq.org.au/clinical-resources/administration-of-anti-cancer-drugs/909-hazardous-drugs-table#hazardous-drugs-tables>
3. <https://www.sciencedirect.com/myaccess.library.utoronto.ca/topics/medicine-and-dentistry/free-radical-damage>
4. <https://www.mayoclinic.org/healthy-lifestyle/nutrition-and-healthy-eating/in-depth/add-antioxidants-to-your-diet/art-20546814>
5. <https://ascopubs.org/doi/10.1200/JCO.2004.03.086>
6. <https://ashpublications.org/blood/article/113/23/5695/25876/Bortezomib-and-EGCG-no-green-tea-for-you>



BY: HILA AKBARI, 2T6

HOW TO IDENTIFY AND ADDRESS INTIMATE PARTNER VIOLENCE AS A COMMUNITY HEALTHCARE WORKER

T rigger warning: This article discusses themes of intimate partner violence (IPV), including descriptions of physical and emotional abuse. Please exercise caution if you find such topics distressing and consider your well-being before reading further. Support resources are available at the end of the article; please do not hesitate to seek help if you or someone you know is in need of help.

In the pivotal role of bridging healthcare services, Community Health Workers (CHWs) are often the first point of contact for individuals seeking care. CHWs are accessible and trusted within their communities. Studies indicate that CHWs are more likely than clinicians to have direct, repeated contact with patients, placing them in a crucial position to recognize signs of intimate partner violence (IPV) and provide essential support [1,2]. Despite the critical nature of their position, many CHWs lack readiness for IPV identification and prevention, impairing their ability to effectively intervene [3]. Given the frequency and gravity of IPV encounters in community settings, there is a pressing need for CHWs to be equipped, ready, and responsible for identifying and addressing IPV with the right tools and knowledge at their disposal.

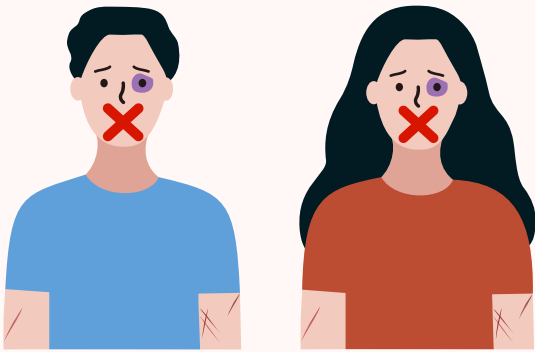
“‘Community health worker’ is an umbrella term and includes community health representatives, promoters, peers, and other workforce members who are frontline public health professionals that share life experience, trust, compassion, [and] cultural and value alignment with the communities where they live and serve.” —National Association of Community Health Workers [4]



Understanding IPV

IPV is a pervasive issue within romantic relationships, encompassing a range of abusive behaviors that have profound and lasting impacts. About 25% of women and 10% of men experience physical violence, sexual violence and/or stalking while enduring an IPV-related impact during their lifetime [1]. This violence can manifest in various forms, from isolated incidents to persistent and severe patterns spanning years.

The persuasiveness of IPV is not just an isolated challenge; it is influenced by broader social determinants of health which include non-medical factors such as income, social status, education, and employment conditions. These determinants play a critical role in shaping the risk factors associated with IPV by impacting individuals' vulnerability to and capacity for addressing violence. The intersectionality of IPV further complicates its nature, where factors such as state violence, institutional abuse, and the violence of social exclusion intersect, rendering certain populations more susceptible to IPV [5].



Signs & Symptoms

CHWs occupy a unique and pivotal role within communities, placing them in a distinctive position to identify IPV due to their close and trusted relationships with individuals they serve. CHWs are often seen as confidantes, making them more likely to be approached by potential IPV survivors. Their regular interactions with patients allow them to notice changes in behavior, signs of physical abuse, or emotional distress [6].

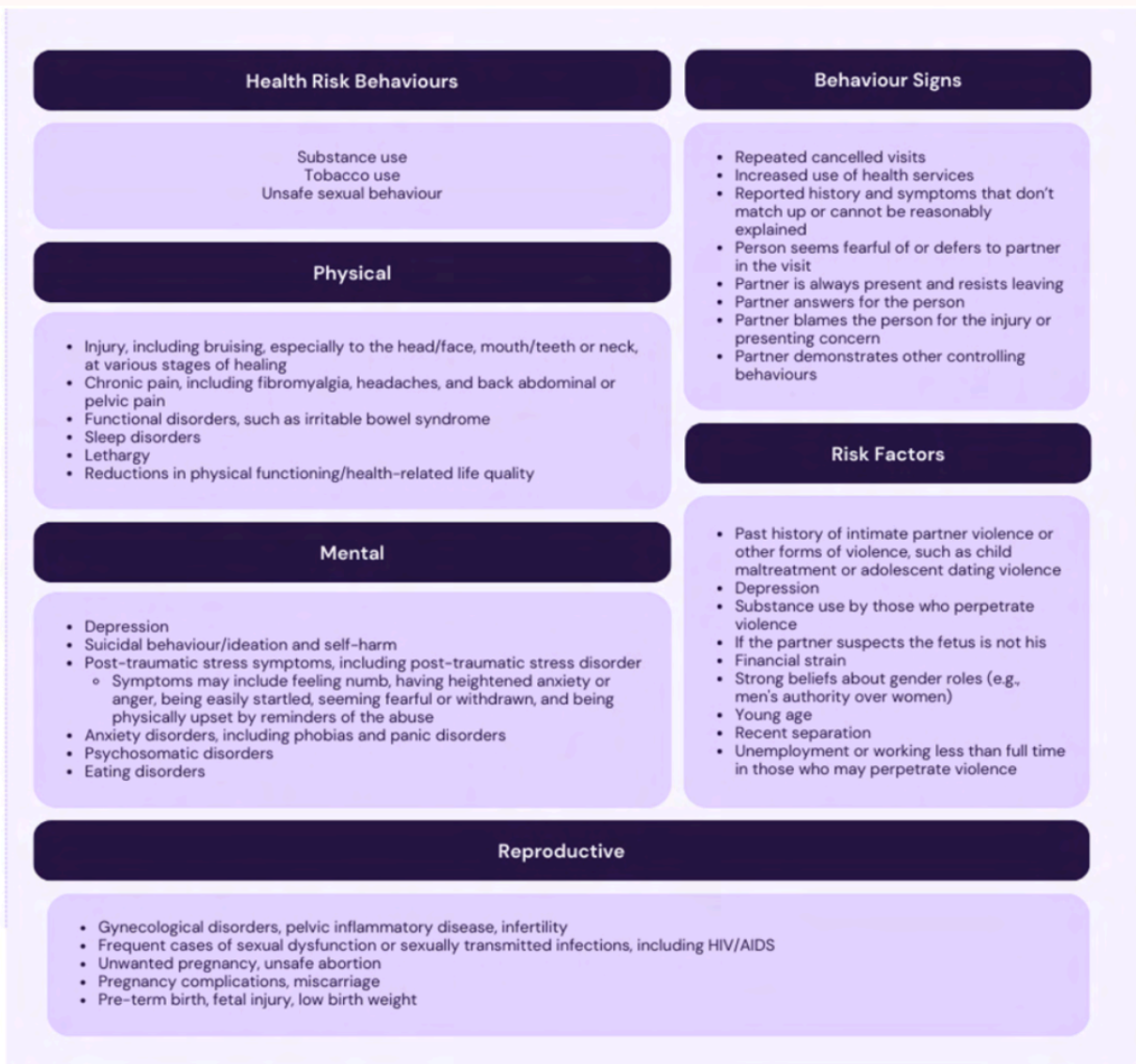
The signs and symptoms of IPV are varied and complex, encompassing physical, emotional, and behavioral indicators. Survivors of IPV may present with physical injuries on several locations of the body such as cuts, bruises,

fractures, and sprains. The accessibility of the face makes it a common area for injury. When reviewing a patient's medical history, recurrent physical injuries can be a strong indicator of IPV. It is also crucial to listen carefully to patients' explanation of their injuries, as the details provided may not align with the injury's type or location. For female patients, a history of frequent urinary tract and genital infections, sexually transmitted diseases, unwanted pregnancies, and terminations of pregnancy are indicators for IPV [6].

Emotional symptoms can be subtle and manifest as changes in mood or personality. Victims often struggle with their mental health; they can exhibit signs of depression, anxiety, low self-esteem, symptoms of post-traumatic stress disorder (PTSD), or sleep disorders. Both physical and psychological trauma can result in cognitive difficulties where patients have difficulty concentrating, recalling information as well as presenting with hearing and vision problems. Through conversation with patients, signs of emotional distress including persistent sadness, fearfulness, or excessive worry, especially about pleasing, or not upsetting their partner can indicate IPV. Additionally, there is a high prevalence of alcohol and substance abuse amongst IPV survivors [6].



Indicators & Risk Factors



Survivors will often depict a combination of the signs and symptoms as discussed above. CHWs need to be attentive to these signs and approach the situation with empathy and without judgment. Developing a trusting relationship with survivors of IPV is the necessary key that allows for safe conversations regarding available resources and support to occur naturally.

Initiating the Conversation

To ensure safe inquiries, the initial step involves treating the conditions necessary for a private conversation space. This foundational measure

sets the stage for effective communication strategies. Amongst these, motivational interviewing (MI) strategies have been shown to be an effective method to engage with survivors of IPV to establish trust between them and CHWs while also encouraging them to take initiative towards positive change. This approach centers around the individual with the goal of inducing behavioral change by strengthening self-esteem and self-motivation. MI can aid survivors in overcoming denial and to begin their journey by taking the necessary steps to address their circumstances regarding IPV [7].

It is important to recognize that survivors of IPV can be in different places mentally and emotionally depending on the current situation of their relationship. These relationships typically depict a pattern where tension builds up followed by an acute violent event which is then proceeded by a honeymoon phase. Due to this fluctuating pattern, IPV survivors find themselves at various places in their relationship where they may feel ecstatic and in love and other times hurt from the abuse [6]. This is a crucial factor to consider when approaching IPV survivors as it can affect their willingness to discuss their situation and seek help. The key is for CHWs to establish trust with IPV survivors so that eventually when they are ready, they can be guided towards the necessary resources to aid them in making small steps towards change.



8 steps to use MI techniques to engage with survivors of IPV:

1

Establish Trust:

- Create a safe environment for interactions,
- Assure confidentiality and safety, and
- Approach the individual in a non-confrontational and nonjudgmental way.

2

Ask open ended questions and inquire in phases about IPV and safety:

- Questions to prompt a discussion regarding IPV [6]:
 - i. *“How are things at home?”*
 - ii. *How do you and your partner get along?”*
- Questions about the patient’s safety [6]:
 - iii. *“Do you feel safe at home?”*
 - iv. *“Does your partner control or try to control the things you do?”*
 - v. *“Has your partner harmed or threatened to harm you?”*

3

Reflect upon the feelings of the IPV survivor [7]:

- Show genuine empathy and compassion for the patient’s experiences and challenges related to their given situation.

4

Avoid putting the survivor on the spot or under pressure.

- The main goal is to establish trust between CHW and survivors and avoid pushing patients to act right away if they are not ready.
 - i. Avoid a confrontational approach as it can lead to defensiveness, and
 - ii. Respect patient's readiness for change.

5

Make sure to take a validating approach. Show recognition for the survivors' strength for speaking up and take steps to make them feel empowered [6]:

- Use self-motivating statements to elicit patients' own motivation for wanting to address their IPV situation and have them articulate their own reasons as to what they envision changing for their future [7],
- Reinforce patient's sense of autonomy by highlighting their resilience and strength,
- Avoid asking "why" questions, as they can come off as judgmental and victim blaming, and
- Avoid asking suggestive questions where you imply a certain answer rather than leave space open to the survivor's true perspective.

6

By assessing patients' readiness for change, collaborate with them in identifying small achievable steps which can be taken to increase their well-being and safety [7].

7

Offer resources:

- CHWs should have a list of local and national resources readily accessible. The end of the article lists a **fillable PDF** that you can modify and there is also a list of provincial to national resources available to IPV survivors at the end of the article.

8

End the conversation by establishing trust and openness to future conversations.



CHWs hold a pivotal role in identifying and addressing IPV. Their unique position enables them to engage with individuals at the community level, offering a frontline response to this pervasive issue. By cultivating an environment of trust and confidentiality, vigilantly recognizing signs of IPV, and employing a trauma-informed approach, they offer meaningful support to survivors. Their proactive involvement not only aids in immediate intervention but also contributes to the larger goal of preventing IPV. As CHWs continue to educate themselves and raise awareness within their communities, they reinforce the collective effort needed to combat IPV. It is imperative that they, along with the wider community, unite in this cause, striving towards a future where every individual can live free from fear and violence. Together, significant strides can be made in the lives of those affected by IPV.



Additional Training

1. [The VEGA Family Violence Education Resources](#): VEGA (Violence, Evidence, Guidance, and Action) Project pan-Canadian, evidence-based guidance and education resources to assist healthcare and social service providers in recognizing and responding safely to family violence.
2. [Canadian Midwives Recognize and Respond to Family Violence Resource Toolkit](#): The toolkit includes tip sheets, tools, backgrounders, and scenarios to support learning and practice of trauma-informed care. The information can be used as stand-alone resources or with other related resources in the toolkit.

Resources

1. [VEGA IPV Resources Template](#) (printable): This template is fillable so that each CHW can enter resources and support for their specific location.
2. [VEGA IPV Documentation Guide](#) (printable): This template offers a step-by-step pathway for documenting IPV.
3. [Government of Canada Resources](#): Contains national, provincial, and virtual resources.

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SAID'S CINEMATIC REVIEWS: HOME ALONE

Exploring the Darker Side of Everyone's Favourite Feel-Good Christmas Film

By: Said Aoude, 2T5

What better way to kick off the holiday season than with a deep dive into one of my favourite Christmas classics: *Home Alone*. With a timeless score by master composer John Williams and John Hughes's darkly humorous script, this film has cemented itself as a holiday must-watch. There's plenty to love about *Home Alone*. Its jokes are witty and cleverly constructed, punctuated by heartwarming moments that make the movie enjoyable again and again. But what truly drives the film is the story itself, which at its heart is a textbook underdog tale. Kevin McCallister embodies a large portion of the film's target audience—children—particularly those who, because of their young age, feel powerless within their surroundings and excluded by their elders. By depicting the tale of an eight-year-old boy who outwits two adult burglars solely using his own cunning and determination, we are allowed to empathize with Kevin's struggles and rejoice at his ultimate victory.

At first glance, Macaulay Culkin perfectly portrays this side of Kevin as an adorable, innocent child who is unwittingly forced into a terrifying situation. Though it is easy to argue that Kevin is simply a scared little boy acting out of self-defence, I propose a slightly darker theory about the mindset of one of North America's most beloved pop-culture characters. While the film clearly tries to depict Kevin's fear, the true horror may lie not in the danger he faces, but in the cruelty he inflicts when left to his own devices. After re-watching this film multiple times, I am now convinced that *Home Alone* depicts the story of an emotionally abused child whose repressed rage manifests itself in the cruel, torturous treatment of two small-time crooks.

This article will take you through Kevin's treatment by his family, his time spent in solitude, and the aftermath of his horrific mutilation of the two intruders, Marv Merchants and Harry Lime, to demonstrate the true sociopathic nature of *Home Alone's* supposedly lovable protagonist.

To delve deeper into Kevin's character, we must first examine his thoughts and feelings at the film's beginning. Amid the chaos of the McCallister family's vacation preparations, we get our first glimpse into Kevin's life. In the opening fifteen minutes, Kevin is repeatedly ignored by his parents, bullied by his cousins and brother, and publicly humiliated by his uncle. During this sequence, the eight-year-old is told to pack his own suitcase for an extended vacation and is forced to sleep next to a known bed-wetter by parents who appear completely indifferent. This callous attitude is underscored by the fact that Kevin's absence is noticed only once the McCallisters reach the airport terminal...in France. From the last-minute rush to leave the house, the drive to the airport, the walk to the gate, and the entire flight from Illinois to France, not a single family member realizes he's missing. This negligence goes beyond the typical frenzy of oversleeping before a flight. It reveals how isolated Kevin is within his own family. From the moment he's sent to the attic the night before to the moment his family lands in Paris, no one has made any effort to check on him, speak to him, or even acknowledge his presence. His absence is finally noticed only when someone would need to hand him his suitcase in France. This sequence, though humorous, highlights the extent of the family's disregard for Kevin. Notice, for instance, how they haphazardly pass his bag from one person to another without so much as a glance.

This is more than a mere gag; it's an indirect look at how disconnected Kevin is from his relatives. Kevin's resentment toward his extended family becomes even clearer when he wishes for them to disappear—and the joy he expresses when that wish appears to be granted. His desire for isolation seems rooted in how often he is made to feel unwanted by both the adults and children in his home. Kevin's troubled upbringing could potentially explain the sadistic actions taken by the young boy during the night of the infamous home invasion.

After the events of December 23, 1990, Kevin is officially left “home alone,” and his behaviour during this time in isolation offers further insight into his neglectful upbringing. Kevin acts unlike the typical eight-year-old who wakes up to find his family missing; he shows no confusion or concern. Instead, he appears overjoyed by their absence. Rather than attempting to contact his parents, the local police, or even a neighbour, Kevin occupies himself by watching gangster movies, playing with his brother's BB gun, and even going shopping—despite being alone for no more than two days. These activities are all notably adult-themed, possibly because his desire to act “grown-up” stems from the feeling of belittlement and being treated “like a baby” as he mentions at the beginning of the film. For Kevin, adults wield the power that isolates and excludes him, as such he aspires to become more independent and mature. This desire is evident in scenes like the toothbrush purchase. It also explains why he goes so far as to use his father's soap and apply aftershave in the iconic bathroom scene.

As we've seen, the first half of *Home Alone* highlights the emotional and psychological toll Kevin endures as a result of his family's neglect. However, it isn't until the second half of the film that this trauma begins to manifest as violent

behaviour. The first hint of Kevin's aggression appears well before his encounters with Harry and Marv, during the pizza delivery scene. Here, Kevin unnecessarily torments an innocent delivery boy by tricking him into believing he's being threatened by a crazed gunman, all while Kevin laughs gleefully from the comfort of his home. At first glance, this prank might seem harmless, but it significantly deviates from Kevin's usual “grown-up” behaviour and serves as an early indicator of his desire for power and the enjoyment he derives from instilling fear in others.

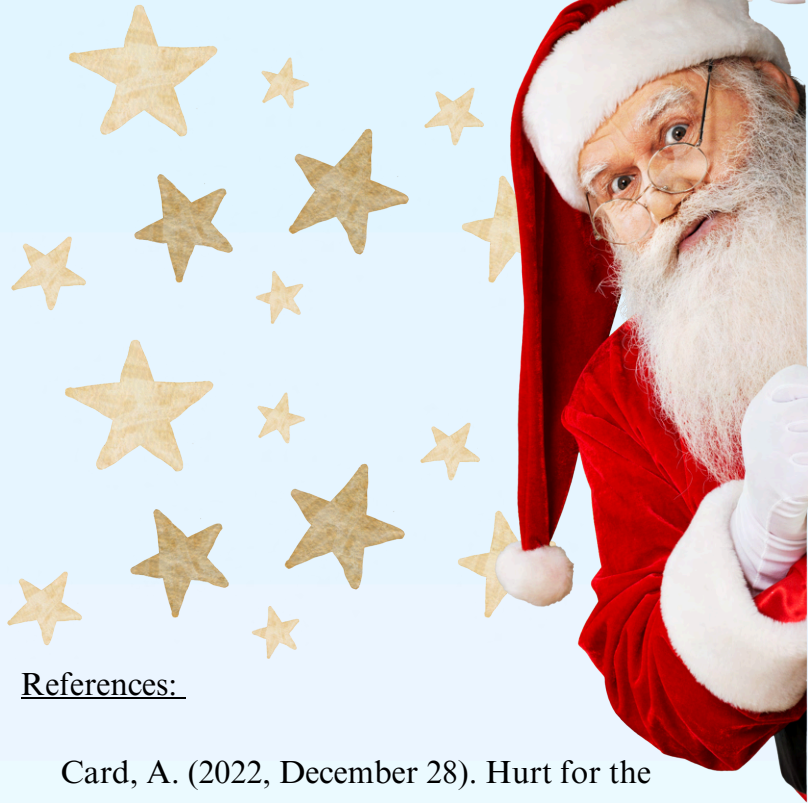
Kevin's opportunity to fully indulge these violent urges arises when he discovers that the “Wet Bandits” plan to rob his house. Admittedly, Kevin's targets are now adult criminals rather than a blameless *Little Nero's* delivery boy, making it easier to frame his actions as self-defence. However, it is essential to remember that Kevin knows the exact time and location of the impending break-in. He could have easily avoided danger by leaving the house and contacting the authorities. Instead, he chooses to stay and sets up a series of elaborate and potentially lethal traps, seemingly designed to maximize the pain inflicted on the intruders. These traps include shooting Harry and Marv in the face and groin with a BB gun, dropping a heated iron onto Harry's face, embedding nails into Marv's bare feet, scorching Harry's hand on a red-hot doorknob, setting Marv's head ablaze with a blowtorch, repeatedly hitting them with swinging paint cans, and leading them to a zip-line that he ultimately severs, causing them to fall multiple stories. Although these sequences might seem exaggerated, media outlets such as *The Week*, *The Daily Mail*, and *Definitive Healthcare* have consulted medical professionals who confirm the severity of the injuries Kevin's traps could inflict. These injuries, they report, could range from severe facial fractures to spinal trauma.

Dr. Ryan St. Clair of Weill Cornell Medical College notes that by the time Marv's hand is seared on the heated doorknob, "Kevin [had] moved from 'defending his house' into sheer malice."

If a trained medical professional's assessment isn't enough, the film itself makes it clear that Kevin is fully aware of the damage his traps can inflict. After Kevin finishes cruelly toying with his victims, he finally calls the police. But, as keen viewers may notice, Kevin disguises his voice during the call and directs the police to his neighbour's home, where he has planned to corner the dimwitted burglars until law enforcement arrives. Why do this? Could it be that the supposedly innocent, frightened little boy "acting purely in self-defence" realized how brutal his traps might appear to the outside world? I believe so. Kevin cunningly decides to draw both the police and the burglars to a different house, ensuring that his painful devices remain undetected. For further evidence, notice how Kevin meticulously cleans up his own house before his family returns, avoiding any mention of his harrowing encounter. This alone hints at the unhealthy dynamic between Kevin and his family. Any typical eight-year-old would be anxious to share the experience of surviving a break-in with his family. Instead, Kevin silently tidies up, concealing every trace of the night's events. Meanwhile, his parents, supposedly worried sick for two days, take only a couple of minutes to greet him before wandering off again, likely relegating him back to his isolated existence. Besides his mother, none of his immediate family members even apologize for leaving him alone and forgotten.

With this context, it's no surprise that Kevin's maniacal treatment of others continues in the sequel.

As viewers, we can only imagine his thoughts upon the family's return: "Oh well..." he seems to be thinking as they promptly disregard him once again. "I hear New York is a beautiful place for attempted murder this time of year."



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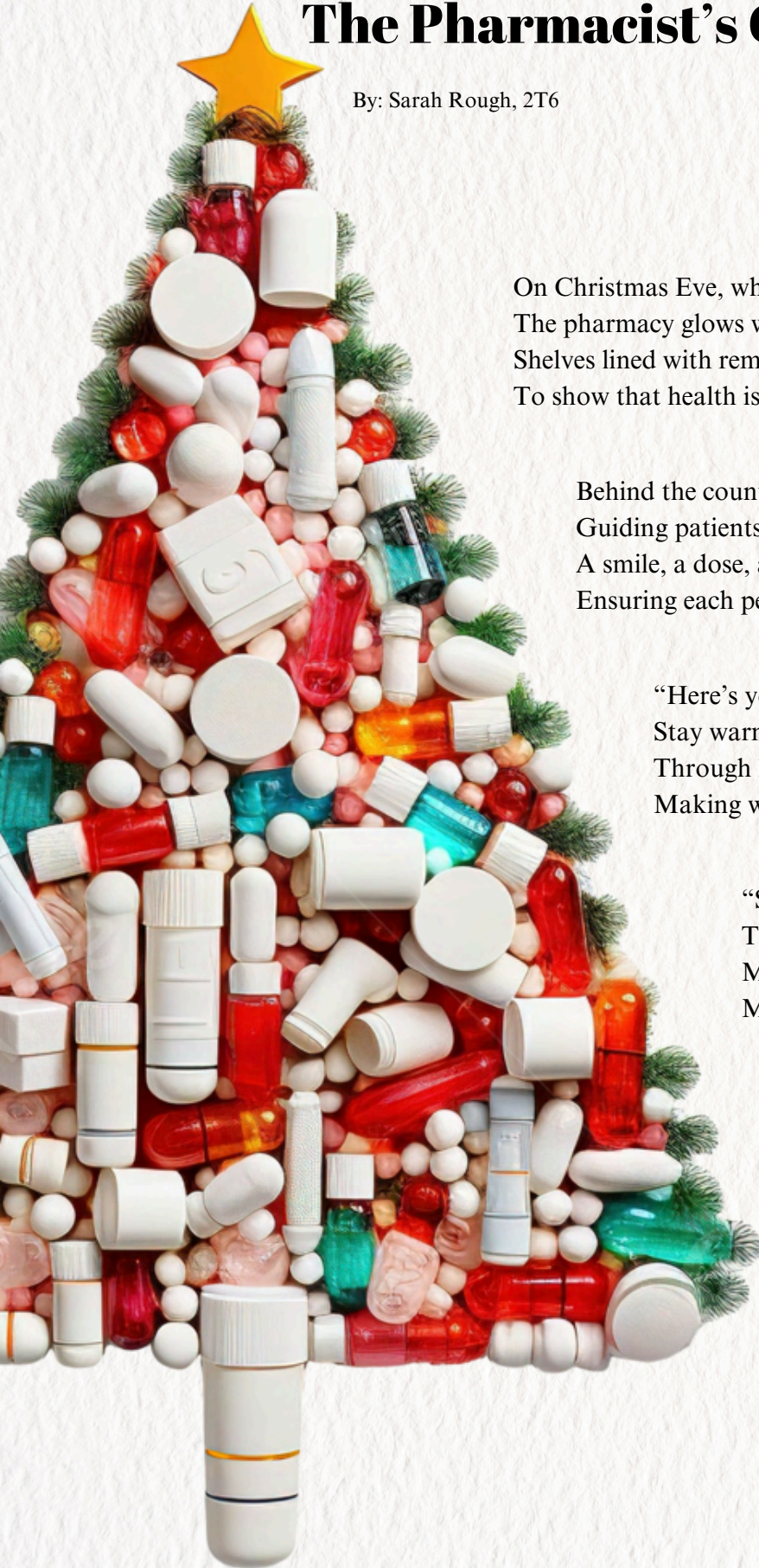
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The Pharmacist's Christmas Eve

By: Sarah Rough, 2T6



On Christmas Eve, when snowflakes dance,
The pharmacy glows with a festive stance.
Shelves lined with remedies, wrapped with care,
To show that health is the greatest gift to share.

Behind the counter, the pharmacist stands,
Guiding patients with gentle hands.
A smile, a dose, a kind little chat,
Ensuring each person feels better than that.

“Here’s your prescription, your vitamins too,
Stay warm this winter; we’re here for you!”
Through holiday rush, they give their time,
Making wellness the season’s rhyme.

“So raise a toast to the pharmacy team,
The unsung heroes of the healthcare dream.
May your holidays sparkle, your spirits be bright,
Merry Christmas to all, and to all a good night!

ODE TO THE SCARBOROUGH RT

By: Ayman Lakhani, 2T5



(sung to the tune of the carol 'O Christmas Tree')

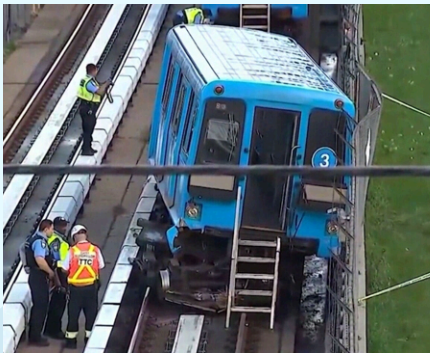
Oh S RT, Oh S RT
How you moved so rapidly!
Oh S RT, Oh S RT
Took me straight to STC!

From McCowan to Kennedy,
Soaring above Scarborough's streets!

Oh S RT, Oh S RT
How you roared so loudly!
Oh S RT, Oh S RT
We all love you Line 3!

Bright blue like the clearest skies,
Replaced by shuttle buses we all despise!

Oh S RT, Oh S RT
Taken from us far too early!
Oh S RT, Oh S RT
We will forever miss thee!



By: Hanan Abdul Selam, 2T8



Matari Coffee Co.

3465 Platinum Dr unit 97,
Mississauga, ON L5M 7N4

Yemeni Adeni Chai 9/10
Vibes 8/10

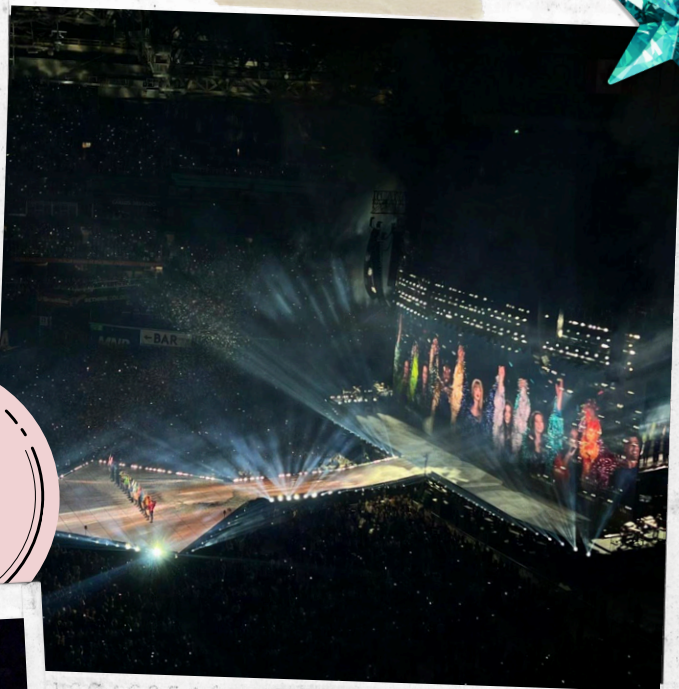


TAYLOR

SWIFT

The Eras Tour

Favorite moments



NOV, 21ST 2024

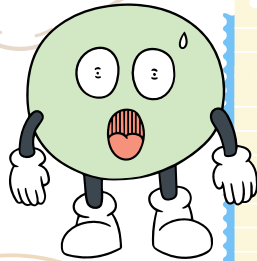
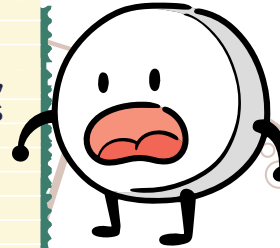


FIERUZ MOBARAK, 2TB

Surprise Songs:
Mr. Perfectly Fine x Better than Revenge
State of Grace x Labyrinth
Overall Experience: 10/10
One of the best concert experiences I have ever had <3

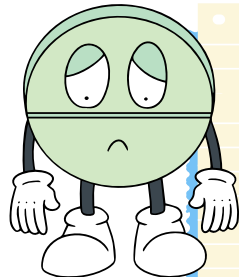
RxFails: Unplugged

Instead of asking for a transfer for 1 medication, I was transferred the entire patient file and it was half in French because the pharmacy was in Quebec



Patient asked to transfer just one drug, associate stepped in and told me how to transfer, and I transferred the full file but brought the full patient file in

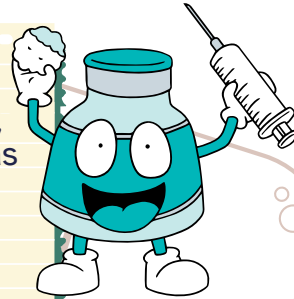
I once mixed up hydromorphone and hydrocodone at the pharmacy. Let's just say the patient's morphine milligram equivalents were a little high that day



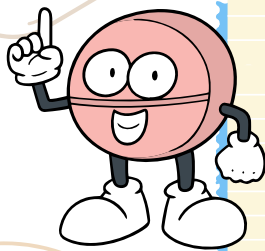
Skipping classes and telling myself I'll watch it when they are posted. It's been 8 weeks since I have seen the course lectures...

RxFails: Unplugged

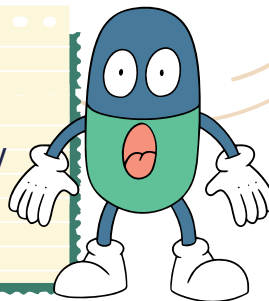
Patient comes in for her vaccine appointment, upon asking how she is doing she starts crying as her husband has been diagnosed with stage 4 cancer, in response I stood there in silence.



Recommending Hydrocortisone to every patient that comes in for skin related issues.



Instead of putting the prescription on hold, i completely refused it and now its permanently gone from their profile.



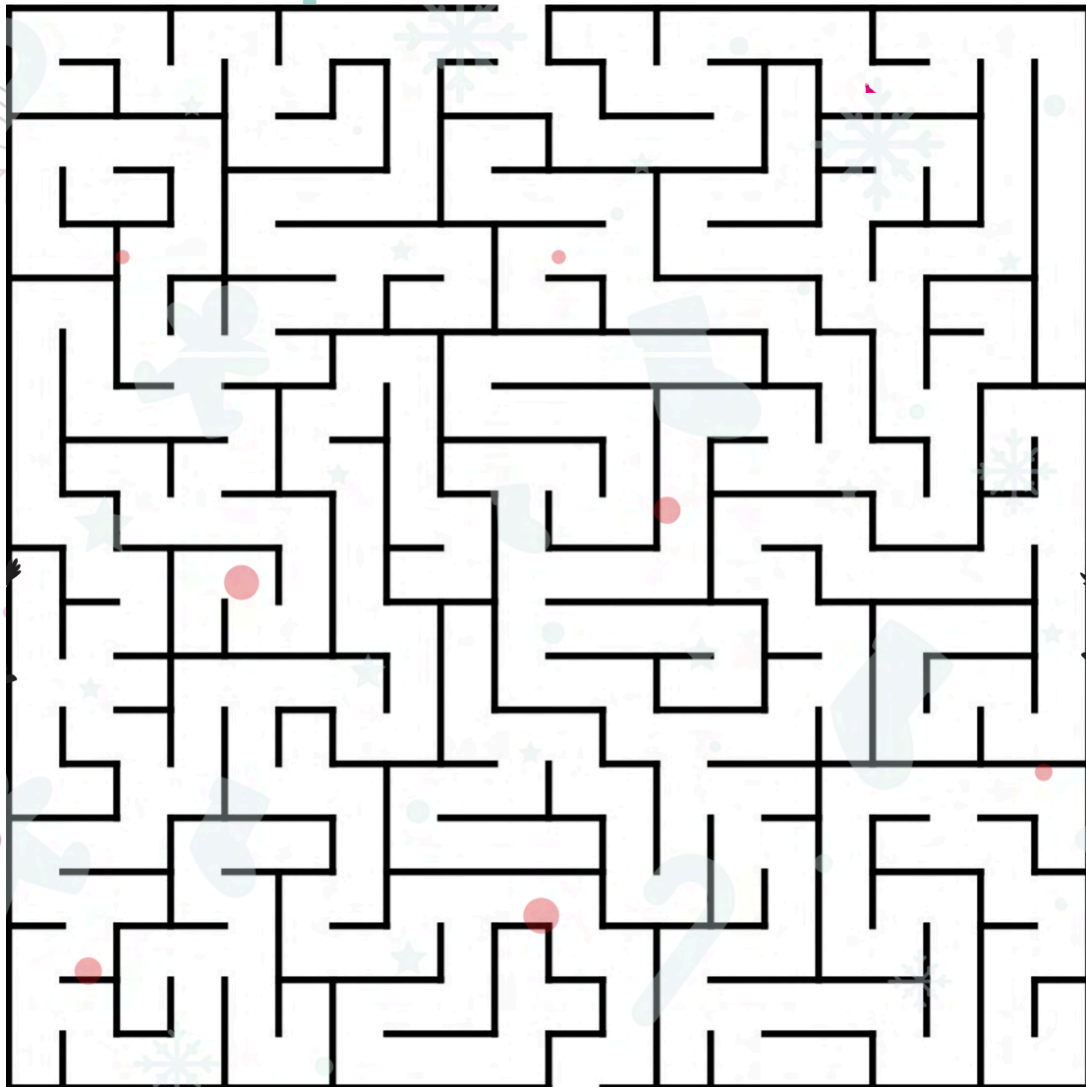
I may had accidentally thrown out a whole bottle of vyvance...I still don't know if it was actually me or not me



MERRY MAZE OF MEDS

By: Leeya Wilson, 2T5

Santa has eaten too many cookies and has a diabetic foot infection! Help him find his antibiotic!



uoft pharmacy

BINGO

By: Victoria Jamieson, 2T7

heard the
Dubins
suppository
song live

tried a
Cheong drink
from 18feet

played ping
pong in the
PB lounge

own a
pharmacy
sweater

never
skipped
a 9am class

taken a pic of
the pharmacy
pods lit up at
night

have 'uoft
pharmd' in
your insta bio

gotten your
flu shot
this year

been inside
the new
Discovery
Pharmacy

have said "PK
isn't even that
hard"
(I envy you)

are following
@ups.events
on insta ;)

didn't also
apply to
medical
school

been to a
compounding
event

researched
meds your
family/friends
take on Lexi

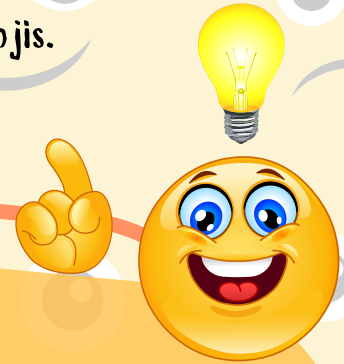
walked up 8
floors because
the elevator
took too long

finished a full
undergrad
before doing
pharmd

PHARMACY EMOJI

Guess the drug represented by the emojis.

By: Purvi Mahida, 2T6



1. -is- = _____
2. -co- = _____
3. - - = _____
4. - = _____
5. - - - = _____
6. - - = _____
7. - - = _____
8. -G- - = _____
9. -V- = _____
10. -O- = _____

Answers

1. Penicillin (pen-is-chillin)
2. Vancomycin (van-co-my-son)
3. Doxycycline (dogs-sea-cycling)
4. Flagyl (flag-ill)
5. Amlodipine (AM-load-eye-pine)
6. Candasartan (candies-art-tan)
7. Metformin (meting-four-minus)
8. Empaglifozin (Empire-G-float-zen)
9. Acyclovir (a cycle-v-ear)
10. Timolol (time-O-lol)



Christmas Sudoku



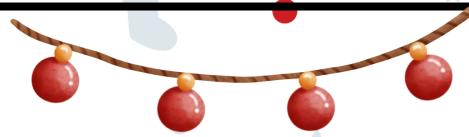
By: Purvi Mahida, 2T6

Each row across and column down needs one of each image.
There can't be more than one image in any row across or column down.



CHRISTMAS WORDSEARCH



See if you can find all the words in this puzzle

I	P	C	I	R	F	B	E	L	L	M	F
S	K	C	X	G	A	R	L	A	N	D	I
T	X	S	K	U	Y	S	N	O	W	O	R
A	S	N	S	A	N	T	A	H	S	E	E
R	T	C	H	R	I	S	T	M	A	S	P
I	O	H	B	G	X	E	S	H	H	U	L
Z	C	G	C	R	O	T	G	D	O	D	A
E	K	P	J	C	H	I	R	S	L	K	C
V	I	D	F	G	E	A	D	J	L	T	E
E	N	O	I	L	C	I	L	J	Y	R	D
S	G	L	S	S	F	X	C	O	J	E	Y
E	L	F	M	W	R	E	A	T	H	E	B

ELF
STOCKING
WREATH
FIREPLACE

SNOW
GARLAND
EVE
TREE

HOLLY
BELL
LIGHTS
SLEIGH

CARD
CHRISTMAS
STAR
SANTA

Vivian Hang, 2T7



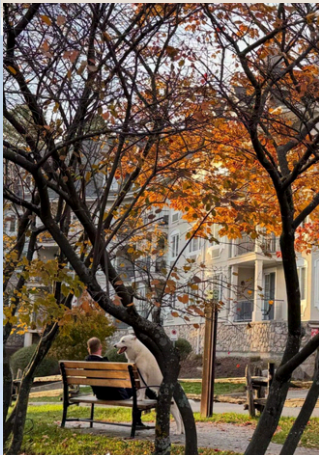
Aisha Ahmad, 2T7



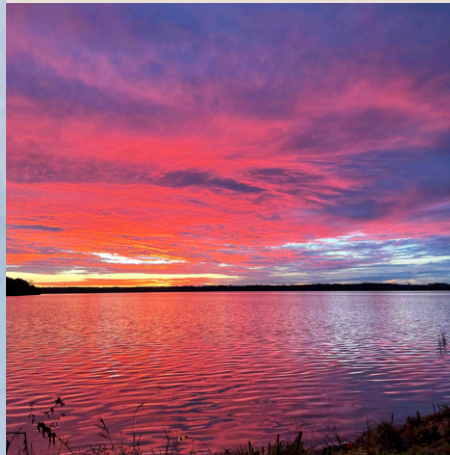
Purvi Mahida, 2T6



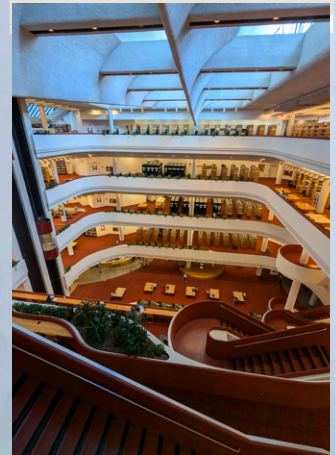
Lucas Nguyen, 2T8



Aisha Ahmad, 2T7



Deep Shah, 2T6



Eilene Su, 2T8



Aisha Ahmad, 2T7



Purvi Mahida, 2T6



Aasha Jawad, 2T6



Aasha Jawad, 2T6



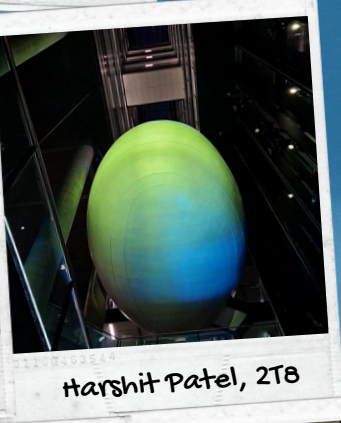
Aasha Jawad, 2T6



Deep Shah, 2T6



Christine Nguyen, 2T7



Harshit Patel, 2T8



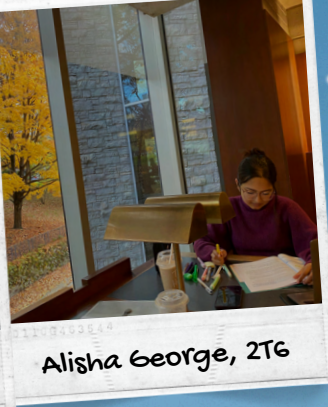
David Saccutelli, 2T7



Alex Su, 2T6



Jacqueline Cheung, 2T7



Alisha George, 2T6



Merry Christmas