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# RHO<sup>Rx</sup>CHI *post*

St. John's University College of Pharmacy & Health Sciences



## THIS ISSUE'S FEATURED ARTICLE:

TIRZEPATIDE FOR THE  
TREATMENT OF MODERATE-  
TO-SEVERE OBSTRUCTIVE  
SLEEP APNEA (OSA) IN  
ADULTS WITH OBESITY

THE OVERUSE OF ANTIPSYCHOTICS IN ALZHEIMER'S  
AND DEMENTIA PATIENTS

ADEL-Y01: AN EMERGING THERAPEUTIC APPROACH IN  
ALZHEIMER'S DISEASE

6<sup>TH</sup> YEAR PERSPECTIVE: HOW TO APPROACH YOUR 6<sup>TH</sup>  
YEAR OF PHARMACY

## About the Rho Chi Post

The Rho Chi Post was developed by the St. John's University Rho Chi Beta Delta Chapter in October 2011 as an electronic, student-operated newsletter publication with a team of three student editors and one Editor-in-Chief. Today, our newsletter boasts 12 volumes, over 90 published issues, and more than 600 unique articles to date with an editorial team of first to sixth year student pharmacists, as well as returning PharmD graduates.

The newsletter is distributed by St. John's University College of Pharmacy and Health Sciences to more than 1,500 students and faculty members. Our monthly electronic mailing list continues to extend readership far beyond campus.

## Mission

The Rho Chi Post is an award-winning, electronic, student-operated, faculty-approved publication that aims to promote the pharmacy profession through creativity and effective communication. Our publication is a profound platform for integrating ideas, opinions, and innovations from students and faculty.

## Vision

The Rho Chi Post aims to become the most creative and informative student-operated newsletter within St. John's University College of Pharmacy and Health Sciences. Our newsletter continues to be known for its relatable and useful content. Our editorial team continues to be known for its excellence and professionalism. The Rho Chi Post sets the stage for the development of individual writing skills, collaborative team work, and leadership.

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## **A Message from the Editors-in-Chief, Nivaj Haque!**

I'm excited to share the second issue of the 15th volume of The Rho Chi Post. This issue brings together a dynamic collection of advanced student perspectives, practical advice, and clinically focused articles that reflect the ever-evolving landscape of pharmacy. From thoughtful insights on professional development to in-depth clinical discussions, each piece was selected to inform, challenge, and inspire our readers. I want to extend my sincere gratitude to our Editorial Team, Executive Board, advisors, and contributors for their hard work and dedication in making this issue possible. Thank you as well to our readers for your continued support. I hope this edition offers valuable takeaways, sparks curiosity, and provides guidance that supports your growth throughout the coming semester and beyond.

## **Frequently Asked Questions**

### **Who can write for the Rho Chi Post Newsletter?**

Anyone can write for the Rho Chi Post! Our newsletter is not exclusive to St. John's University students. The Rho Chi Post accepts articles on a daily basis!

### **How do I submit an article?**

You can submit an article by creating an account on our website! Go to [www.rhochistj.org/RhoChiPost](http://www.rhochistj.org/RhoChiPost), click the login button from the upper menu bar, and click register. Upon making an account, you will be able to submit articles to our author inbox.

### **Who determines article topics?**

You are free to choose an article topic of your choice. Take a look at our Author Guidelines for ideas.

### **What happens after I upload my draft article on the Rho Chi Post website?**

Our Editor-In-Chief (EIC) will either edit the article directly or assign the article to a staff editor. If any revisions are needed, the editor will upload the article back to the portal, notifying the author via email. The author can then download the edited article, make the suggested revisions, and reupload the draft back to the portal. Additional drafts will be reevaluated by our copy editors and then EIC, repeating this process. Once no further revisions are needed, the article is accepted for publication.

### **Is there a deadline for authors to send revisions?**

There is no deadline to submit revisions for an article. However, the quicker revisions are made, the quicker the article can move through our editing process. Once an article is accepted for publication, it will be moved into a queue to be placed into an upcoming issue.

## The Overuse of Antipsychotics in Alzheimer's and Dementia Patients

By: Armanda Dervishi, PharmD Candidate c/o 2027

### Introduction

Dementia is a progressive syndrome characterized by a decline in memory, reasoning, and daily functioning. Symptoms often include changes in personality, mood, and behavior, alongside cognitive decline. The most common form is Alzheimer's disease, which accounts for approximately 60-80% of all dementia cases.<sup>1</sup> Other subtypes include vascular dementia, Lewy body dementia, and frontotemporal dementia. Alzheimer's disease currently affects approximately 7 million Americans, with nearly 1 in 3 older adults dying with Alzheimer's disease or another dementia.<sup>2</sup> The cost of care in the U.S. exceeds \$360 billion annually, most of which is borne by unpaid family caregivers.<sup>2</sup>

Despite being common, dementia is not a normal part of aging, and risk is influenced by factors such as the APOE ε4 allele, cardiovascular health, and lifestyle.<sup>3</sup> In addition to memory impairment and language difficulties, patients frequently develop behavioral and psychological symptoms of dementia (BPSD), including agitation, aggression, delusions, hallucinations, depression, and sundowning.<sup>4</sup> These symptoms are often the most distressing aspect of dementia for families and a major reason for nursing home placement. In clinical practice, antipsychotics are often prescribed off label to manage behavioral and psychological symptoms of dementia. However, their widespread use raises significant safety concerns.

### Antipsychotic Use in Alzheimer's and Dementia

Second-generation (atypical) antipsychotics such as risperidone, olanzapine, and quetiapine are among the most commonly prescribed medications for Alzheimer's and dementia patients. Although partial symptom relief may occur, benefits are often outweighed by clinically significant risks. In 2005, the FDA issued a black box warning that all antipsychotics increase mortality in elderly patients with dementia-related psychosis, with causes of death most commonly linked to cardiovascular events and infections.<sup>5</sup> In addition to increased mortality, antipsychotics are associated with sedation, orthostatic hypotension, falls, extrapyramidal symptoms, and metabolic complications. For patients with Alzheimer's disease who already face progressive cognitive decline and frailty, these adverse effects can further accelerate loss of function and reduce quality of life.

### Guideline Recommendations

The American Geriatrics Society (AGS) Beers Criteria strongly recommends avoiding antipsychotics for behavioral problems of dementia unless nonpharmacologic strategies have failed and the patient poses a serious risk of harm to themselves or others.<sup>6</sup> When antipsychotic use is deemed necessary, clinicians should use the lowest effective dose for the shortest possible duration.

# THE OVERUSE OF ANTIPSYCHOTICS

Similarly, the Centers for Medicare & Medicaid Services (CMS) requires that nursing facilities document attempted non-pharmacologic interventions and perform gradual dose reductions at least twice a year, unless contraindicated.<sup>7</sup> Preferred alternatives include non-drug strategies such as caregiver education, consistent routines, structured activities, environmental modifications, and the use of music or aromatherapy.<sup>4</sup> These interventions may require more time and effort than medication, but they avoid the substantial harms associated with antipsychotics.

## The Pharmacist's Role

Pharmacists play a critical role in preventing unnecessary antipsychotic use. During medication reviews, pharmacists should identify patients with Alzheimer's or dementia who are prescribed antipsychotics and assess whether nonpharmacologic interventions have been adequately attempted.

### Case Example:

Mrs. Green, an 82-year-old woman with Alzheimer's disease, was started on quetiapine 25 mg nightly for agitation. Within a few weeks, she became excessively drowsy and had two near-falls. The pharmacist reviewed her medications and identified quetiapine as a likely contributor. The pharmacist communicated these concerns to the prescribing physician and recommended considering a gradual taper while implementing nonpharmacologic approaches such as structured evening activities and environmental modifications. In collaboration with the prescriber, the medication was tapered, and Mrs. Green's alertness improved. This scenario underscores the essential role of pharmacists in identifying risks and collaborating with prescribers to optimize patient safety and outcomes.

## Conclusion

Antipsychotics remain widely used in Alzheimer's disease and dementia despite their modest benefits and well-documented risks. Evidence consistently shows an increased risk of mortality, stroke, sedation, and falls in this vulnerable population. Current guidelines stress prioritizing non-drug interventions and limiting pharmacologic therapy to patients with severe, dangerous behavioral symptoms. Pharmacists play a crucial role in this process. By identifying inappropriate use, educating caregivers, and collaborating with prescribers, pharmacists can reduce unnecessary antipsychotic exposure and promote safer, evidence-based care. Through deprescribing efforts and patient-centered education, pharmacists help protect quality of life for patients with Alzheimer's disease and related dementias.

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## ADEL-Y01: An Emerging Therapeutic Approach in Alzheimer's Disease

By: Archana Murugan, PharmD Candidate c/o 2029

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### Introduction

Alzheimer's disease (AD) refers to a progressive neurodegenerative form of dementia, affecting a person's memory, cognitive function, and ability to perform daily activities worldwide. Presently, more than 6 million Americans aged 65 years and older are living with Alzheimer's disease, indicating that as the population continues to age, disease prevalence is expected to rise.<sup>1</sup>

The accumulation of abnormal protein masses, called amyloid plaques and neurofibrillary tau tangles, disrupts the normal functioning of brain cells. Initially, this causes memory impairment, followed by affecting areas responsible for language, reasoning, and social behavior; eventually, many other regions of the brain are affected.<sup>1</sup> With no absolute cure for Alzheimer's disease, it remains the seventh leading cause of death in the United States.

### The Role of Tau in Alzheimer's Disease

Tau is a microtubule-associated protein which, in a healthy adult, regulates the assembly and maintenance of microtubules, contributing to neuronal structural stability.<sup>2</sup> Simply put, tau stabilizes a neuron's internal structure allowing the cell to function properly. However, in individuals diagnosed with AD, tau becomes hyperphosphorylated, leading to microtubule disassembly and aggregation into paired helical filaments forming neurofibrillary tangles.

Essentially, instead of stabilizing, tau becomes pathologically clumped within neurons, impairing neuron-to-neuron communication. This effect is triggered by accumulation of beta-amyloid particles outside neurons which disrupt normal cellular signaling leading to abnormal tau protein modifications inside the neurons.<sup>2</sup> Due to tau's central role in disease progression, targeting pathological tau through therapeutic intervention represents a promising strategy for Alzheimer's disease treatment.

### ADEL-Y01

ADEL-Y01 is an emerging therapeutic approach aimed at slowing the progression of Alzheimer's disease, currently in Phase Ia/Ib first-in-human clinical trials. ADEL-Y01 is a novel monoclonal antibody therapy which targets the abnormal tau protein responsible for neuron death in the brain.<sup>3</sup>

Specifically, the drug is aimed to bind acetylated tau, inhibit its aggregation, and promote clearance, distinguishing it from existing therapies that are largely limited to symptomatic improvement in cognition or alertness. The following outlines the current clinical trial design conducted by Sanofi, a French biopharmaceutical company, in collaboration with South Korea-based ADEL:

# ADEL-Y01: ALZHEIMER'S DISEASE

## Part 1 - Single Ascending Dose

- Enrolling up to 40 healthy adults aged 18-65 divided into five groups of eight participants each (six receiving ADEL-Y01 and two receiving placebo)
- Participants receive a single intravenous dose of ADEL-Y01 or placebo
- Dose start at 2.5 mg/kg up to 100 mg/kg
- Safety, tolerability and pharmacokinetics are assessed over 12 weeks

## Part 2 – Multiple Ascending Dose

- Enrolling 33 adults aged 50-80 years with mild cognitive impairment due to AD
- Participants receive a total of six doses of ADEL-Y01 or placebo every two weeks (7.5 – 50 mg/kg)
- Safety, tolerability and pharmacokinetics are assessed over 22 weeks

The phase Ia/Ib trials aims to determine whether ADEL-Y01 is truly safe, tolerable, and effective in the body.<sup>3</sup> This study represents the first evaluation of ADEL-Y01 in human subjects and provides critical insight into its effects on pathological tau.

## Conclusion

By understanding the role of tau in neuron communication, targeted treatment strategies addressing underlying disease mechanisms can be developed. Though still in clinical trials, the development of ADEL-Y01 is a breakthrough as a potential cure for a common disease among the increasing aging population. It serves as a shift in Alzheimer's disease research. Clinical evaluation is essentially in determining the drug's safety and efficacy. Now, it is up to student pharmacists and pharmacists to keep our community updated and educated on future treatment strategies.

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## **Tirzepatide for the treatment of moderate-to-severe obstructive sleep Apnea (OSA) in adults with obesity**

By: Asmaa Hassanin, PharmD Candidate c/o 2026, Muskan Basra, PharmD Candidate c/o 2027, Madelyn Lombardo, PharmD Candidate c/o 2027, Aine Chen, PharmD Candidate c/o 2028

Obstructive sleep apnea (OSA) is a sleep-related breathing disorder characterised by repeated episodes of partial (hypopnea) or complete (apnea) upper airway blockage while sleeping. These repeated episodes lead to abrupt decreases in oxygen saturation and frequent arousal from sleep to restore normal breathing.<sup>1</sup> OSA can impact quality of life by causing fragmented sleep, often marked by loud, frequent snoring, choking or gasping sounds upon airway opening, excessive daytime sleepiness, poor concentration, and an increased risk of cardiovascular and metabolic disorders.<sup>1</sup> Obesity is a major risk factor for OSA, as excess body weight increases pressure on the airways, making them more susceptible to collapse. Fat deposits accumulate in the upper respiratory tract, particularly around the neck and throat, narrowing the airway.<sup>2</sup> Additionally, obesity reduces lung volume, further compromising the ability to maintain an open airway.<sup>2</sup> These combined factors contribute to the development and progression of OSA.

Currently, several treatment options are available for obese patients dealing with OSA, ranging from behavioural, dietary, and lifestyle modifications to surgical intervention. Obesity plays a significant role in the increased risk of developing OSA, and having OSA can contribute to further weight gain, thus weight loss is a major treatment goal. Having a patient on a more conservative approach to treatment may look like addressing any underlying psychological conditions such as eating disorders, encouraging the patient to be active to combat living a sedentary lifestyle, having the patient on a reduced calorie diet, changing their sleeping position, and so on <sup>(2)(4)</sup>. In a ten-year sleep study known as the “AHEAD Study”, two groups followed two different conservative regimens, the Intensive Lifestyle Intervention (ILT) and the Diabetes Support and Education (DSE) in order to compare their long-term efficacy. Those in the ILT group demonstrated a higher probability of remission from OSA after 10 years of treatment, with ILT having a 34.4% remission rate compared to 22.2% in the DSE group.<sup>9</sup> A study titled “Improvement in Obstructive Sleep Apnea With Weight Loss is Dependent on Body Position During Sleep” observed that patients who still suffered OSA after weight loss benefited greatly by simply sleeping in a non-supine position, with 22% of these patients being able to resolve their OSA.

Though these conservative strategies of targeting obesity and making lifestyle changes may have some beneficial outcomes in the short term, behavioural and dietary regimens have been found to be difficult to uphold in the long run, with only 10% of patients being effectively treated via one of these conservative methods.<sup>9</sup> The gold standard non-invasive therapy for OSA involves the use of continuous positive airway pressure, CPAP for short, which utilizes a continuous flow of air to the patient's airway via a nasal or oral appliance to maintain airway patency while asleep. CPAP treatment has been shown to improve the cardiometabolic changes and proinflammatory biomarkers associated with OSA and obesity, as well as improve symptoms such as daytime sleepiness, lowering of blood pressure, and overall improved quality of life. The only limitation to CPAP therapy is the fact that it can only be as efficacious as the patient's adherence.<sup>6</sup> There is speculation that CPAP may cause weight gain via a mechanism that is still unclear. A study conducted by Kyoto University demonstrated CPAP therapy significantly decreasing basal metabolic rate with no difference in physical activity, total caloric intake, and nutrition intake during the study.<sup>6</sup> For patients intolerant to CPAP therapy or are unwilling to participate, the American Academy of Sleep Medicine (AASM) and American Academy of Dental Sleep Medicine (AADSM) suggest the use of custom made titratable mandibular repositioning oral appliances to curb snoring and reduce hypoxia. Though use of oral appliance therapy (OAT) is a viable option for patients with obesity, they are less likely to effectively respond to this kind of therapy, thus it is not recommended as a primary treatment option.<sup>7</sup>

The last alternative to the above treatment options would be various kinds of surgical interventions for those unaccepting of CPAP therapy or are at a particular BMI. The AASM recommends referral to a bariatric surgeon for obese patients with a BMI  $\geq 35$  kg/m<sup>2</sup> who are intolerant or unwilling to undergo CPAP therapy. In December of 2024, Zepbound (tirzepatide) was approved as the first drug for OSA patients with obesity. The drug is used in combination with a reduced calorie diet and increased physical activity.<sup>8</sup>

Tirzepatide is a synthetic polypeptide drug that acts as a dual GLP-1 and GIP agonist, which helps reduce high blood sugar levels and promotes weight loss. The drug enhances glycemic control by improving insulin secretion and sensitivity, suppresses glucagon secretion, and slows gastric emptying. For weight loss, tirzepatide reduces appetite by increasing feelings of satiety, contributing to significant body weight reduction at up to 22.4% over 72 weeks. It is mainly bound to plasma albumin, which allows it to remain in the bloodstream for a longer time. It is well-absorbed, with about 80% bioavailability, reaches its peak level within 8 to 72 hours after injection, and has a half-life of 5 days, allowing for weekly dosing. Tirzepatide is FDA-approved for type 2 diabetes mellitus and is also used off-label for obesity.<sup>11</sup>

In a study conducted by the New England Journal of Medicine, tirzepatide as evaluated for its potential use in treating OSA and obesity, two conditions that often occur together and are associated with significant cardiovascular risks. Overall, it was seen that tirzepatide improved symptoms associated with OSA, such as reduced hypoxic burden, while also contributing to significant weight loss in patients.

These findings suggest that tirzepatide, in addition to its primary indication for treating type 2 diabetes, offers a promising off-label treatment for obesity and obstructive sleep apnea. By targeting both excess weight and the underlying metabolic dysfunctions that exacerbate OSA, tirzepatide may provide a holistic treatment option that goes beyond traditional mechanical treatments like CPAP, which is often difficult for patients to adhere to. In this experiment, most of the adverse effects were mild to moderate, with gastrointestinal issues being the most common.<sup>12</sup>

“Adverse Events Related to Tirzepatide” by Mishra et al., published in the *Journal of the Endocrine Society*, presents a systematic review and meta-analysis of clinical trials evaluating the safety profile of tirzepatide. This systematic review assessed data from 10 clinical trials involving 6,836 participants to evaluate the rates of individual AEs across three doses of tirzepatide. The study found gastrointestinal (GI) AEs, particularly nausea and diarrhea, to be the most common and dose-dependent, with higher incidences observed at 10 mg and 15 mg doses. The analysis also stated that the incidence of serious AEs like severe hypoglycemia and pancreatitis remained low across all doses. Overall, the review provides important insights into the safety profile of tirzepatide.<sup>13</sup>

The impact of tirzepatide on moderate-to-severe OSA in adults with obesity was evaluated through two Phase 3, double-blind, randomized, controlled trials: SURMOUNT-OSA 1 and SURMOUNT-OSA 2.

In SURMOUNT-OSA 1, participants who were not using positive airway pressure (PAP) therapy at baseline were enrolled, while SURMOUNT-OSA 2 included individuals who were already on PAP therapy for at least three consecutive months before screening and planned to continue its use. Participants were randomly assigned in a 1:1 ratio to receive either tirzepatide (10 mg or 15 mg, based on maximum tolerated dose) or a placebo for 52 weeks.<sup>14</sup> The study population included adults diagnosed with moderate-to-severe OSA (AHI  $\geq 15$  events per hour) and obesity (BMI  $\geq 30$  kg/m<sup>2</sup>), but without type 1 or type 2 diabetes.<sup>15</sup> SURMOUNT-OSA 1 included 234 participants who were unable or unwilling to use PAP therapy. To qualify, the participants must not have used PAP for at least four weeks before screening. SURMOUNT-OSA 2, on the other hand, included 235 participants who had been on PAP therapy for at least three months prior to screening and planned to continue its use throughout the study.<sup>15</sup>

The primary endpoint in both trials was the change in the apnea-hypopnea index (AHI) from baseline. At the start of the study, the mean AHI was 51.5 events per hour in Trial 1 and 49.5 events per hour in Trial 2, with an average BMI of 39.1 and 38.7, respectively.<sup>15</sup> After 52 weeks of treatment, participants in Trial 1 who were not using PAP therapy and received tirzepatide experienced an improvement in their sleep apnea, with an average AHI reduction of 25.3 events per hour, compared to a 5.3 events per hour reduction in the placebo group.<sup>15</sup>

Similarly, in Trial 2, participants treated with tirzepatide who were already on PAP therapy showed an average reduction of 29.3 events per hour, compared to 5.5 events per hour in the placebo group.<sup>15</sup> These results demonstrate that tirzepatide significantly reduced the severity of OSA in adults with obesity, regardless of PAP therapy, supporting its use as a meaningful intervention for this high-risk population.

Tirzepatide represents a promising adjunctive treatment for OSA by targeting the metabolic and weight-related contributors to the disorder, potentially improving symptoms in patients with obesity-driven OSA. Unlike current traditional interventions such as CPAP that primarily address the mechanical aspects of OSA, tirzepatide treats OSA and improves symptoms by targeting the underlying pathophysiology through its weight-reducing effect. This makes it a valuable option for patients who have not achieved adequate symptom control with conventional therapies.

While tirzepatide offers a novel therapeutic option, it requires close monitoring. It is contraindicated in individuals with a personal or family history of medullary thyroid carcinoma or multiple endocrine neoplasia syndrome type 2, and should be used cautiously in those with a history of pancreatitis.<sup>16</sup> Common side effects include gastrointestinal symptoms such as nausea, vomiting, and diarrhea, which may lead to dehydration and renal impairment in severe cases. There is also an increased risk of gallbladder complications, including gallstones and cholecystitis. To minimize adverse effects, a gradual dose escalation is recommended, along with regular monitoring of glucose levels, heart rate, and kidney function.<sup>16</sup>

As the first approved medication for OSA, tirzepatide not only expands current treatment options but also shifts the focus toward addressing the root causes of the disease. Its long-term impact remains to be seen, but it holds great potential in improving quality of life and clinical outcomes for patients living with OSA.

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## 6th Year Perspective: How to Approach your 6th Year of Pharmacy

By: Maimuna Maula, PharmD Candidate c/o 2026

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Your sixth year of pharmacy is unlike any other. Although you are still technically a student, you no longer have routine classes. Instead, this is a year meant for you to explore pharmacy beyond the classroom before you graduate and commit to one specific area.

I had mixed feelings as APPEs were approaching. One side of me was relieved that the daily classes were ending, and the other side was very intimidated to begin working in a pharmacy full-time. I felt like I wasn't ready to bring classroom knowledge into the real pharmacy world yet. Pharmacy school is immensely rigorous, especially with the drugs and diseases (D&D) classes, where we learn massive amounts of information and quickly move onto the next topic. It was difficult for me to fully absorb material for long-term use. Because of this, I didn't feel confident that I would have a smooth time during APPEs.

But I soon realized that this isn't what APPEs are about. It is true that you are graded by your preceptors for your performance, but the concept of these rotations goes far beyond that. There are two different ways to look at your sixth year – just another hurdle to pass before you graduate, or a rare and invaluable opportunity to gain experiences that you may never receive again later in your career. The latter is the intended reason APPEs exist. The amount of exposure, networking, and knowledge you gain from this year is so impactful, and it is imperative that you maximize these opportunities as much as possible.

### How to Address Feeling Intimidated by APPEs

APPEs are not as difficult as they might sound. Some sites may sound intimidating based on what you may have heard from others' experiences, or you may feel that certain rotations expect higher than what your skill level can offer. But the truth is that you are ready. You do not have to know the answer to every question you are faced with. The key is that you need to show interest and effort when addressing situations.

For example, if your preceptor asks you about which drug is used for a certain disease and you do not know the answer, be honest about it. Admit you are not sure or take your best educated guess if you can. Then ask your preceptor follow-up questions about its side effects or other alternative therapies to this drug. Take initiative by researching it yourself on LexiDrug. Preceptors want to see that you're truly interested and following along with what they are trying to teach. They value your curiosity and desire to critically think about the material.

You can also suggest pharmacy topics to them that you are interested in. Preceptors are always willing to hear student perspectives. You can take it a step beyond therapeutics and ask about what their daily work routine is like, advantages and disadvantages of different pharmacy settings, and more. But remember to stay professional and always read the room. Preceptors vary from being firm and meticulous, to more lax and lenient. No matter how they are, always show each one the same amount of respect.

## 6TH YEAR PERSPECTIVE

Preceptors are taking time out of their schedules to help teach you alongside their numerous other responsibilities, so be sure to make each conversation feel productive and worth it. Turn it into an ongoing discussion instead of making it feel like a lecture. It's not simply for their satisfaction, but for your benefit as well. You are going to be in their position someday, so ask them as many questions as you can to build up your own knowledge. I was quite surprised when I realized how relevant D&D is in clinical practice outside of the classroom. There were so many topics that I thought I'd never see again, yet they still made an appearance. I would recommend keeping a notebook with you while you are onsite and writing down any new pharmacy fact you learn. I kept a notebook with me throughout each day at my inpatient care APPE, and many of those things still stick to me today because I experienced them in real life and manually wrote it down together. It was satisfying to see my classroom knowledge coming into full fruition in clinical practice. Find whatever method you can to help solidify information for you. Your preceptor will appreciate these efforts, and your future-self will too.

### **What Type of Mindset Should you Have When Choosing APPE Sites?**

After you start working as a full-fledged pharmacist, chances are that you'll be in one field for an extended period of time. It is possible to branch out and explore other outlets, but it's much more difficult to do compared to your intern days. During your APPE internships, you have nine whole opportunities to experience different areas that you likely have never seen before. If you dislike one rotation, you do not have to stress, as it'll be over in just four weeks.

You will not be stuck in that site for years. If you do like one, you can use it as a stepping-stone to propel you towards a field you might want to commit to full-time in the future.

For example, some of my classmates were considering a hospital pharmacy career - but after going through their inpatient care APPEs, they realized that this field isn't for them. As for me, I've never worked in a chain retail pharmacy before, so I decided to challenge myself and try an APPE there. Some people love it, but I learned that it's just not for me. I still enjoy community pharmacy though, and this experience helped me distinguish which aspects of it I care about the most.

My first APPE was an academic administration elective where we learned about the inner workings of what it takes to be a faculty member in a PharmD program. This rotation offered a behind-the-scenes look at how the whole pharmacy educational system works from the perspective of a faculty member, which was very fascinating to me. I was considering getting into academia beforehand, and this APPE helped me paint a better picture of what it takes to do it. This field is something that most students don't know about until they take this elective, and I'm very grateful to have had such an opportunity. I also have an upcoming APPE with the New York City Poison Control Center. It's a non-traditional field that offers exposure to toxicology and public health services. Although it's not a common field, I decided to try it out. Even if it doesn't line up with my career goals, at least I will have gained the exposure.

## 6TH YEAR PERSPECTIVE

APPE sites can be impactful even when it is least expected. Before starting my general inpatient APPE rotation at a rehabilitation center, I always thought it would not be an enjoyable experience for me. I previously had no interest in working in a hospital as a clinical pharmacist, so that rigid mindset damaged my impression of this site before even entering it. But after completing it, I have to admit that I actually enjoyed it. This field is still not the main priority for me, but I do consider it an actual option now. This rotation was much more influential than I had ever imagined it'd be.

I do not have any rotation located in a true hospital setting. I intentionally designed it that way because I was hesitant to work there. I recently realized that once I finish my APPEs, I will never have seen what that type of environment is like. I also wish I had picked at least one pharmaceutical industry site on my schedule. For all upcoming APPE students, aspects like these should really be taken into consideration. There are so many fields out there, and I urge all students to not approach these APPEs as just mere assignments to trudge through. Do not only pick the places you think are ideal fits for you. Think of each APPE as a preview to a full-time career. At the end, see which one you gravitate towards the most. One of those sites might define the rest of your professional life.

### **Networking during APPEs**

During my years of classes, I always kept a low-profile. I was a very quiet student, and I didn't understand what the benefit of networking really was. But now I can confidently say that I have a strong professional network with me.

Every student will get at least two faculty preceptors, which are professors that are part of St. John's University's pharmacy program. I chose to have five of them. Many students are hesitant to choose faculty preceptors due to the fear of difficulty, but the reality is that you will receive nothing but positive experiences from working with them. Every single preceptor I've had has been nothing short of helpful in teaching and answering any sort of question I have.

After your four weeks are over in their rotation, don't consider that as the end of your interaction with them. Stay in contact by emailing them - ask questions, notify them of something interesting that happened during your work, and congratulate them on their professional achievements. They value these connections more than you may realize. Don't restrict yourself to doing this with only your faculty preceptors though. Do it with all your preceptors, especially ones in areas you're really interested in. I have noticed that pharmacy is such a small world. Many of my preceptors know my other preceptors, even in the most unexpected areas. They're all somehow connected one way or another, which can really help you build valuable references. One of the tips I learned was to list every one of your preceptors' names on your CV, because there's a high chance the person reading it will recognize at least one of them. If you're interested in becoming a part of industrial pharmacy, networking is especially fundamental. Industrial pharmacy is a very competitive field, and while networking is not the sole path to getting there, it still serves as a powerful advantage. Leverage the connections you make during your rotations as much as possible no matter which path you are inclined towards, because no path is ever a straight line.

## 6TH YEAR PERSPECTIVE

### **Final Thoughts**

Your final year of pharmacy is a once-in-a-lifetime opportunity. It's not just about applying what you learned in school, but a chance to influence what the rest of your professional life could look like. You are offered nine glimpses of pharmacy careers, all of which could steer you in directions you may or may not have expected. Exposure is what matters the most. It might be an intimidating leap transitioning from classes to full-time APPEs, but your preceptors are there to guide you along the way. Choose each rotation very wisely and try your best to diversify them as much as you can. Approach each rotation with curiosity, effort, and an open mind.

# MEET THE TEAM

## Meet the 2025-2026 Team Members



### Editorial Team & Production



**Nivaj Haque**  
**Editor-in-Chief**

The Rho Chi Post stands as a reflection of our community's dedication to learning, growth, and leadership in pharmacy. Each issue is a chance to not only highlight important developments in healthcare, but also to showcase the voices and perspectives of our students and faculty. By engaging in research, writing, and discussion, we strengthen the skills that will carry us beyond the classroom and into our future roles as professionals. I am honored to be a part of the Rho Chi Post's Editorial Team and look forward to serving as this year's Editor-in-Chief!

**Muskan Basra**  
**Managing Editor**

The Rho Chi Post holds a special place for me as it's a platform where students and faculty can collaborate to share their knowledge with the pharmacy community. It provides a unique opportunity to translate academic knowledge into practical, well-written content that benefits the broader healthcare community, all while building the critical communication skills needed to influence professional discourse and contribute to the evolution of pharmacy practice. I am honored to serve as this year's Managing Editor.



**Reyaz Mussaleen**  
**Content-Focused Copy Editor**

As an Editor for the Rho Chi Post, I see this role as an opportunity to further elevate the voices and perspectives within our profession. By drawing on my experiences in pharmacy, regulatory affairs, and medical communications, I aim to highlight the evolving impact pharmacists have on patient care and healthcare innovation. I am passionate about making complex scientific and policy topics accessible while sparking meaningful dialogue among students and professionals alike. Through this platform, I hope to encourage curiosity, showcase the breadth of our field, and contribute to advancing pharmacy's role in society.



# MEET THE TEAM



**Alba Dona**

## **Content-Focused Copy Editor**

Joining the Rho Chi Post offers me the opportunity to participate in meaningful discussions within the field of pharmacy, follow current events and news, and continue evolving my skills as a future pharmacist. I view the Rho Chi Post as a creative outlet that produces factual and intriguing content. I am excited to bring my voice to the newsletter this year as a Staff Writer and Content-Focused Copy Editor!

**Vicki Kanellopoulos**

## **Content-Focused Copy Editor**

As a pharmacy student, I see strong communication as an essential part of our profession. In my role as a Content-Focused Copy Editor, I'm looking forward to helping ensure the Rho Chi Post delivers clear, accurate, and engaging content that reflects the voices and experiences of our community.



**Aymon Choudhury**

## **Graphics-Focused Copy Editor**

Being a part of the Rho Chi Post means having the opportunity, as a student, to contribute to the pharmacy profession with creativity, professionalism, and meaningful communication. I am excited to help develop content that informs and inspires our community! I look forward to collaborating with a team and using my skills to support the Rho Chi mission.



**Amanda Kastel**

## **Graphics-Focused Copy Editor**

In recent years, there has been growing distrust in the field of medicine, extending from the general public and even to political leadership. As a P3 pharmacy student, I feel a strong responsibility to counteract this widespread medical misinformation. Contributing to the Rho Chi Post- a team rooted in clinical knowledge and dedicated to unbiased research- is the ideal opportunity to support this mission.



# MEET THE TEAM



**Muskan Basra**  
**Senior Staff Editor**

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**Sean Persane**  
**Senior Staff Editor**

Being part of Rho Chi Post is an honor and responsibility that reflects my dedication for and growth in the field of pharmacy. It's a chance to grow alongside like-minded peers, to lead with integrity, and to give back through knowledge and collaboration to the public. Being a member reminds me to always push myself to do better, to stay curious, and to use what I've learned to help others in meaningful ways.



**Kharissa Seepersaud**  
**Staff Editor**

Being part of the Rho Chi Post is an exciting opportunity to collaborate with a team committed to educating others and highlighting meaningful developments in pharmacy. It allows me to engage with content that informs and inspires, while also connecting my passion for reading and writing with my professional interests. I look forward to supporting the Post's mission through thoughtful editorial work and continued learning.



**Gabriella Beharry**  
**Staff Editor**

Being a part of the Rho Chi Post gives me the opportunity to combine my passion for healthcare with my interest in writing and communication. I value having a platform where I can help share knowledge, highlight important issues in pharmacy, and contribute to meaningful discussions within our community.



# MEET THE TEAM



**Jeannette Pauline Ho**

**Staff Editor**

The Rho Chi Post is the esteemed publication of the Rho Chi Society at St. John's University, dedicated to showcasing the scholarship and professional achievements of our student pharmacists and faculty. It serves as a platform to share knowledge, foster dialogue, and inspire leadership within the pharmacy community. Through its pages, we honor the pursuit of excellence and the collective advancement of our profession.

**Ansha Hamid**

**Staff Editor**

Being a part of the Rho Chi Post allows for a great opportunity to engage with the ever-evolving world of pharmacy. It is a platform where I can dive deep into issues that directly impact our profession, from groundbreaking research on new drug therapies to the implications of political changes on the pharmaceutical industry. This role allows me to contribute to a well-informed community, connecting with students and faculty, by providing valuable insights and promoting a deeper understanding of the science and art of pharmacy.



**Maimuna Maula**

**Staff Editor**

When I entered pharmacy school, I have heard the name "Rho Chi Post" pop up a few times. I opened it once and I saw there were so many articles written by the same students that were walking amongst us all, both above and below my year. I wrote for a magazine club in high school, so a part of me wanted to join this newsletter as well. But I didn't feel like I was worthy enough, because my level of pharmacy knowledge wasn't expansive enough at the time. I had no idea what to write about, and all the articles written by those students felt intimidating to me. I just was not ready. Now in my sixth year, of course I am still not an absolute pro in pharmacy - but I have learned so much over the years, and even just in these short few months during my APPEs. I want to give back to the profession while I am still a student in any way I can.

# MEET THE TEAM



**Rebecca Sabzanov**  
**Senior Staff Writer**

Being part of Rho Chi Post is an exciting opportunity for me to merge my passions for writing and pharmacy in a prestigious organization. I'm enthusiastic to contribute to such a respectful organization and collaborate with other members of the Rho Chi Post to produce meaningful content that will impact others.

**Sariah Grant**  
**Senior Staff Writer**

Being part of the Rho Chi Post is a meaningful opportunity to enhance my writing skills and apply the medical knowledge I'm learning to educate my peers. I'm passionate about empowering others through information, and I aspire to continue sharing medical insights that help the public make more informed health decisions.



**Ameena Qadri**  
**Senior Staff Writer**

Being a member of the Rho Chi post means a great deal to me because it is the perfect outlet for me to write about pharmacy related topics that interest me the most. I feel that the Ro Chi post will also allow me to develop my writing skills both professionally and creatively.



**Michelle Flores**  
**Senior Staff Writer**

My name is Michelle Flores, and I am an incoming fifth-year pharmacy student. Being a Staff Writer for the Rho Chi Post is an exciting opportunity to contribute to the dissemination of relevant and evolving pharmacy news. In a field that is constantly advancing, staying informed is essential—not only for providing the best possible care to our patients, but also for growing as future healthcare professionals. I'm grateful for the chance to be part of a community that values knowledge, collaboration, and continuous learning.



# MEET THE TEAM



**Amanda Nakhul**  
Staff Writer

My name is Amanda Nakhul and I'm a junior biomedical sciences major on the pre-med track. I've been writing for Rho Chi Post for about a year, and it is an honor to be a part of a high-quality collaborative organization such as this. As a Staff Writer I am able to incorporate my passion for writing with my appreciation for Pharmacy and medicine. I can't wait for a successful and educational year.

**Amanda Kastel**  
Staff Writer

In recent years, there has been growing distrust in the field of medicine, extending from the general public and even to political leadership. As a P3 pharmacy student, I feel a strong responsibility to counteract this widespread medical misinformation. Contributing to the Rho Chi Post- a team rooted in clinical knowledge and dedicated to unbiased research- is the ideal opportunity to support this mission.



**Aymon Choudhury**  
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# MEET THE TEAM



**Armanda Dervishi**

**Staff Writer**

To me, being part of the Rho Chi Post is about more than just writing articles; it's about connecting with others, sharing ideas, and celebrating the amazing things happening in our community. As a Staff Writer, I'm excited to explore topics that matter to us as students and future pharmacists. And as Engagement & Outreach Coordinator, I'm really looking forward to helping more people feel included and involved in what we do. I'm grateful to be part of a team that values creativity, collaboration, and meaningful communication.

**Rabtah Jinan**

**Staff Writer**

Being a part of the Rho Chi Post offers an invaluable opportunity to connect with peers while advancing my skills as a writer and communicator. I look forward to enhancing my proficiency in scientific writing, navigating research databases, and staying informed on updates in pharmacy. In my roles as Staff Writer and Outreach Director, I am eager to foster networks with fellow students and contribute meaningfully to the pharmacy community.



**Ansha Hamid**

**Staff Writer**

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## MEET THE TEAM



**Archana Murugan**  
Staff Writer

Being a part of Rho Chi Post is a meaningful opportunity for me to grow as an aspiring pharmacist and an advocate for the profession. I'm truly excited to learn and work with my peers while giving back to the pharmacy community.

# MEET THE TEAM

## Social Media & Outreach



**Aymon Choudhury**  
**Engagement & Outreach Manager**

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**Armanda Dervishi**  
**Engagement & Outreach Manager**

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**Michelle Flores**  
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# MEET THE TEAM

## Advisors



**Dr. Ketan Patel**  
**MPharm, PhD**

It is an honor to serve as a faculty advisor of Beta Delta Chapter of a 100-year-old prestigious society of pharmaceutical professionals – The Rho Chi Society. With great enthusiasm, I am committed to assist the Rho Chi member's endeavors in: (1) disseminating the latest information/technology in healthcare system; (2) promoting pharmaceutical field & career propulsive networking of current students, alumni, and faculties; and (3) facilitating the scholastic activities and recognizing the scholars.

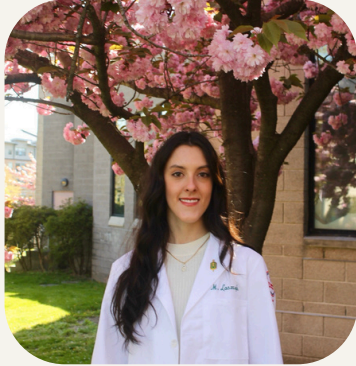
**Dr. Mohammad Rattu**  
**PharmD, BCOP, BCPS, BCGP**

I am thankful to have been the 2012 editor-in-chief of the Rho ChiPost newsletter, as well as on the 2019 alumni honor roll of the national Rho Chi organization. This is one of the most successful longitudinal projects at my alma mater, as evidenced by its decade-long persistence and teams of highly-motivated students. I remain available for professional support and assistance with the new year's initiatives.



# The Rho Chi Society

## Executive Board



**Michelle Laszczych**

### President

The Rho Chi Pharmacy Honor Society recognizes and celebrates academic excellence, leadership, and service in the pharmaceutical sciences. The mission of the Rho Chi Beta Delta Chapter is to provide students with opportunities to connect with faculty, alumni, and peers through programs that foster scholarship, professionalism, and lifelong learning. Through academic committees, mentorship initiatives, networking, and service events, Rho Chi empowers students to expand their knowledge, cultivate leadership skills, and prepare for successful careers in pharmacy. Membership in Rho Chi is not only an honor but also a commitment to advancing the profession and supporting the growth and success of fellow students.

**Reyaz Mussaleen**

### Vice President

The Rho Chi Society encourages a lifelong passion for learning while empowering students to grow as leaders and advocates in pharmacy. Throughout my journey, the opportunities and experiences provided by Rho Chi have strengthened my professionalism and fueled my determination to achieve my highest potential. Membership in Rho Chi represents more than academic recognition—it reflects a dedication to excellence and integrity in every facet of pharmacy practice. As Vice President, my goal is to motivate fellow members and future students to challenge themselves both academically and personally, while upholding the values of scholarship, leadership, and service that define our organization.



**Ida Lu**

### Secretary

The Rho Chi Society cultivates a community where students can learn from one another and grow together on their professional journeys. It serves as a platform to strengthen leadership, communication, and collaboration while inspiring members to strive for excellence in pharmacy. Beyond academics, it provides a supportive and inclusive space where every member can find their voice, explore their passions, and make a meaningful contribution to the field.



**Gjoana Gjoni**

### Treasurer

The Rho Chi Society represents a commitment to academic excellence, integrity, and leadership within the field of pharmacy. It's about using the knowledge and experiences we've gained to uplift others and pass that knowledge down to other pharmacy students.

As members, we lead by example and strive to make a meaningful impact within our school and profession. We are dedicated to fostering a supportive academic environment where collaboration and mentorship are valued. Rho Chi encourages us to continue growing not just as students, but as future pharmacists.



# The Rho Chi Society

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## Executive Board



**Noor-ul-ain Buksh**

**Historian**

Rho Chi's society honors the accomplishments of outstanding pharmacy students and gives them opportunities to branch out and connect with others. Through community-building events, such as the review sessions and coffee chats, students can learn from peers and professionals while developing a sense of belonging. There is a feeling of gratitude that comes with being in Rho Chi, whether it be when a student appreciates your guidance or genuinely benefits from the resources we offer. Rho Chi is more than just celebrating the "GPA", it is a meaningful way to give back and grow alongside others within the pharmacy community.

**Sarah El-Rowmeim**

**Academic Committee Chair**

The Rho Chi Society recognizes academic excellence while providing a space to grow as leaders, mentors, and future pharmacists. Membership creates opportunities to extend our impact beyond the classroom—through community service, peer support, and academic initiatives that strengthen our community. Rho Chi also emphasizes bridging the knowledge we gain in pharmacy school toward post-graduate goals and real-world application. It serves as both an honor and a responsibility to advance the profession, support one another, and shape the future of pharmacy.



**Basmalla Hussein**

**Academic Committee Chair**

The Rho Chi Society fosters an environment where students uplift one another and advance collectively in their pursuit of professionalism. It offers opportunities to build leadership, networking, and problem-solving skills while motivating members to pursue the highest standards in pharmacy. More than an academic honor, it represents a welcoming community that values inclusivity, encourages exploration, and empowers each member to leave a lasting impact on the profession.



**Paulina Maczko**

**Leads Mentorship Chair**

The Rho Chi Society stands for academic excellence, professionalism, and leadership in pharmacy. It's about using what we've learned to support and guide others, while continuing to challenge ourselves to grow. As members, we work to create an environment where collaboration, mentorship, and curiosity are valued, helping prepare us not just for success as students, but for our future roles as pharmacists.

