



CHAPTER 2

Knowing
YOUR MEDICATIONS

MEDICATION

Prescription medications help your heart get better and protect you from more harm. People who take their medications over the long term, as prescribed, have fewer additional attacks or heart events and lower their risk of dying from heart disease. If you stop taking your medication without being told by your heart doctor, you will be giving up those benefits.

MEDICATIONS IN THE HOSPITAL

If you are in the hospital, you are probably taking several medications for your heart. If you arrived at the hospital by ambulance, you might have been given some medications by the paramedics before you even reached the hospital.

- You may have been asked to chew and swallow one or more tablets of ASA (Aspirin®) to make your blood less sticky (an “antiplatelet” effect). That helps if a clot has formed in your heart arteries. You may also have been given a stronger antiplatelet medication later.
- Fast-acting nitroglycerin given as a spray or tablet under the tongue opens your heart arteries. You may have been given several doses.
- Blood thinners (anticoagulants) treat any clot that has formed in your heart arteries and keep the clot from getting worse. Blood thinners are injected with a needle into a vein (intravenously) or under the skin (subcutaneously).
- Some kinds of heart attack are treated with a clot-busting drug (thrombolytic), which can dissolve a clot in a heart artery. A clot buster is usually only given when an X-ray of the heart (coronary angiogram procedure) cannot be done right away.
- If you are having a coronary angiogram procedure, you will be given medication to help you relax. It may make you feel sleepy, but you will still be able to wake up easily.

Talk to your pharmacist, nurse practitioner or doctor if you have questions or concerns about any of the medications you have been given in the hospital.

MEDICATIONS WHEN YOU LEAVE THE HOSPITAL

Some of the medications you are prescribed when you leave the hospital must be taken for the rest of your life. It is important to take them exactly as you were told. Stopping your heart medications without being told by your doctor will increase your risk of having another cardiac event and dying. Talk to your pharmacist, nurse practitioner or doctor if you have questions or worries about any medications.

MAIN MEDICATIONS USED TO TREAT AND PREVENT CORONARY ARTERY DISEASE

This chart lists the most commonly prescribed heart medications. Here are some tips to help you use the chart:

- Each “class” has many different drugs within it
- Within each class, the generic drug names are listed first
- Following the generic name — in brackets — are the most commonly prescribed brand names in Canada. The list doesn’t include every brand name. If your prescription medication isn’t on the list, your healthcare provider or pharmacist are the best sources for more information

Medication Class	Effects
Antiplatelet medications ASA (Aspirin®, Asaphen®, Entrophen®, Novasen®) Clopidogrel (Plavix®) Prasugrel (Effient®) Ticagrelor (Brilinta®)	<ul style="list-style-type: none"> • Makes blood less sticky to protect blood vessels and stents from clots. • If stents* are placed in an artery, or you have a heart attack (with or without stents) you will take ASA plus another antiplatelet medication (clopidogrel, prasugrel, or ticagrelor) for a period of time. • Make sure you know how to take your antiplatelet medications and how long you are supposed to take them (ASA is usually taken for the rest of your life). <p>Do not stop taking your antiplatelet medications unless you are told to do so by your heart doctor.</p>
Cholesterol-lowering medications (“statins”) Atorvastatin (Lipitor®) Fluvastatin (Lescol®) Lovastatin (Mevacor®) Pravastatin (Pravachol®) Rosuvastatin (Crestor®) Simvastatin (Zocor®)	<ul style="list-style-type: none"> • Slows or stops plaque formation inside blood vessels and stops existing plaques from getting worse. Their effect on plaques is powerful but slow so these drugs must be taken long-term. • Usually continued for the rest of your life, regardless of blood cholesterol levels since the effects of statins on plaque formation do not depend only on blood cholesterol levels. • Side effects are uncommon and usually minor. People may experience muscle aches or cramps. Talk to your healthcare provider if this happens to you. Muscle aches or cramps from statins usually get better after lowering your statin dose or by taking a different statin medication.
Beta-blockers Acebutolol (Sectral®) Atenolol (Tenormin®) Bisoprolol (Monacor®) Carvedilol (Coreg®) Labetalol (Trandate®) Metoprolol (Lopressor®, Betaloc®) Nadolol (Corgard®) Pindolol (Viskazine®) Propranolol (Inderal®) Timolol (Blocadren®)	<ul style="list-style-type: none"> • Protects the heart from stress and abnormal heartbeats, protects a weakened heart muscle, prevents angina. • Will lower blood pressure and slow your pulse — watch for dizziness or feeling faint. • May make you feel more tired or fatigued, but this usually gets better with time. • Talk to your healthcare professional if you develop trouble breathing, swelling of the feet or ankles, depression or nightmares.

Medication Class	Effects
<p>Angiotensin converting enzyme (ACE) inhibitors</p> <ul style="list-style-type: none"> Benazepril (Lotensin[®]) Captopril (Capoten[®]) Cilazapril (Inhibace[®]) Enalapril (Vasotec[®]) Fosinopril (Monopril[®]) Lisinopril (Prinivil[®], Zestril[®]) Perindopril (Coversyl[®]) Quinapril (Accupril[®]) Ramipril (Altace[®]) Trandolapril (Mavik[®]) 	<ul style="list-style-type: none"> • Makes it easier for the heart to pump blood, lower blood pressure, protect a weakened heart muscle. • Protects the kidneys in people with diabetes or kidney disease. • Usually continued for the rest of your life if you have coronary artery disease for protection of the heart and blood vessels. • Will lower blood pressure — watch for dizziness or feeling faint. • Talk to your healthcare professional if you develop a dry cough or tickle in the throat after starting an ACE inhibitor. • Seek medical attention right away if you develop swelling of the face, mouth, or throat • You will need blood tests after starting an ACE inhibitor to check your kidney function and potassium. Avoid potassium supplements and salt substitutes unless prescribed by your healthcare provider.
<p>Angiotensin receptor blockers (ARBs)</p> <ul style="list-style-type: none"> Azilsartan (Edarbi[®]) Candesartan (Atacand[®]) Eprosartan (Teveten[®]) Irbesartan (Avapro[®]) Losartan (Cozaar[®]) Olmesartan (Olmetec[®]) Telmisartan (Micardis[®]) Valsartan (Diovan[®]) 	<ul style="list-style-type: none"> • Makes it easier for the heart to pump blood, lower blood pressure, protect a weakened heart muscle. • Protects the kidneys in people with diabetes or kidney disease. • Usually taken for the rest of your life if you have coronary artery disease, for protection of the heart and blood vessels. • Will lower blood pressure — watch for dizziness or feeling faint. • You will need blood tests after starting an ARB to check your kidney function and potassium. Avoid potassium supplements and salt substitutes unless prescribed by your healthcare provider.
<p>Nitroglycerin/nitrates</p> <ul style="list-style-type: none"> spray (Nitrolingual[®]) Nitroglycerin tablets (Nitrostat[®]) Nitroglycerin patch (Nitro-Dur[®]) Isosorbide dinitrate (Isordil[®]) Isosorbide mononitrate (Imdur[®]) 	<ul style="list-style-type: none"> • Opens heart arteries to prevent or treat heart pain. • Make sure you know how to use your fast-acting nitroglycerin and always keep it handy. Turn to page 27 for more information on how and when to take nitroglycerin. • Nitroglycerin patch, isosorbide dinitrate, and isosorbide mononitrate provide a more long-lasting nitroglycerin effect than fast-acting spray or tablets. • Nitroglycerin and nitrates interact with drugs like sildenafil (Viagra[®]), vardenafil (Levitra[®]), and tadalafil (Cialis[®]). Do not take any of these drugs without first talking to your healthcare provider.

* Stent is a small structure used to open up blood vessels in the heart that have been narrowed by plaque buildup.

WHEN AND HOW TO TAKE NITROGLYCERIN (tablets or spray)

Nitroglycerin is used to relieve chest pain from **angina** that you may experience as a result of blockages in your heart arteries.

If you have chest pain or discomfort that you think is due to your heart, **STOP** whatever you are doing and sit or lie down.

Place one tablet or give 1 spray **UNDER** the tongue, and leave it there.

- **DO NOT** chew or swallow the tablet, or inhale or swallow the spray.
 - If the pain or discomfort is NOT relieved after 5 minutes, repeat the dose.
 - If the pain or discomfort continues after 2 doses (10 minutes), use a third dose and IMMEDIATELY call your local emergency number to take you to the nearest hospital. DO NOT drive yourself and **DO NOT** delay.
-

Carry a supply of nitroglycerin with you **AT ALL TIMES**. Make sure a family member knows where the nitroglycerin is stored. If you forget or lose your nitroglycerin, it can be purchased at any pharmacy without a prescription.

You may experience a headache or dizziness after taking your nitroglycerin. This is a common side effect and will only last for a short time.

Do not store nitroglycerin in your car or in another place that may get very hot or very cold. Nitroglycerin will not work if it has gotten too hot or too cold.

SPECIAL instructions for nitroglycerin **TABLETS**

- Keep the tablets in the original small brown glass bottle and keep the lid closed tightly. When you get a new bottle, remove the seal and cotton so the tablets will be ready to use when you need them.
 - Store the tablets in a cool dry place, NOT in the bathroom medicine cabinet or on top of the refrigerator.
 - When away from home, carry a small number of tablets in a brown glass bottle in your pocket or purse (but only use bottles made for carrying nitroglycerin tablets).
 - When you use a nitroglycerin tablet, place it under your tongue. **DO NOT** swallow the tablet, or it will not work.
 - If you have moved some tablets to a different container, replace them after 3 months.
 - Only use bottles specially made for storing nitroglycerin tablets.
 - A tingling or burning sensation does NOT mean that the tablet is working.
-

SPECIAL instructions for nitroglycerin **SPRAY**

- Make sure you 'prime' the spray by spraying into the air as directed when you purchase it or when it has not been used for several days or more.
 - Do not shake the canister before using or you may not get a full dose.
 - **DO NOT** inhale or swallow the spray, or it will not work.
 - Most people find nitroglycerin spray easier to use than tablets. However, people who have trouble pushing the button on the spray bottle may prefer to use tablets.
-

Some people have angina whenever they are **active or exercise**. A small number of people with angina are told by their doctor to take nitroglycerin 5-10 minutes before they start each exercise session. Speak with your pharmacist or other healthcare provider if using nitroglycerin before exercising is right for you

DO NOT take sildenafil (Viagra® or Revatio®), vardenafil (Levitra®), or tadalafil (Cialis® or Adcirca®) without talking to your healthcare provider first. **DO NOT** use nitroglycerin (tablet, spray or patch) for 24 hours after taking sildenafil or vardenafil and do not use nitroglycerin for 48 hours after taking tadalafil. Talk to your pharmacist or other healthcare provider for more information.

OTHER MEDICATIONS THAT MAY BE PRESCRIBED FOR PEOPLE WITH CORONARY ARTERY DISEASE

The following medications are only prescribed for some people, for certain conditions.

Medication Class	Effects
Calcium channel blockers Amlodipine (Norvasc®) Diltiazem (Cardiazem®, Tiazac®, Tiazac® XC) Felodipine (Plendil®) Nifedipine XL (Adalat XL®) Verapamil (Isoptin®, Isoptin® SR, Verelan®)	Lowers blood pressure, prevents heart pain. Some will slow the heart rate (pulse)
Diuretics (water pills) Chlorthalidone Ethacrynic acid (Edecrin®) Furosemide (Lasix®) Hydrochlorothiazide Indapamide (Lozide®) Metolazone (Zaroxolyn®)	Helps the kidneys make more urine. Some will lower blood pressure. Some will help with ankle swelling and water in the lungs.
Aldosterone antagonists Eplerenone (Inspra®) Spironolactone (Aldactone®)	Protects a weakened heart
Other cholesterol-lowering medications Bezafibrate (Bezalip®) Ezetimibe (Ezetrol®) Fenofibrate (Lipidil®) Gemfibrozil (Lopid®) Niacin	Helps to improve your lipid levels
Cardiac glycosides Digoxin (Lanoxin®, Toloxin®)	Controls heart rate (pulse), helps with symptoms of heart failure (weakened heart)
Antiarrhythmics Amiodarone (Cordarone®) Sotalol	Prevents and treats abnormal heart beats
Anticoagulants Apixaban (Eliquis®) Dabigatran (Pradaxa®) Rivaroxaban (Xarelto®) Warfarin (Coumadin®)	Prevents clot formation and treats abnormal clots

* Commonly prescribed examples of each class are listed in the chart. Not all examples are included. May be subject to change.

Talk to your pharmacist, nurse practitioner or doctor if you have questions or concerns about any medications.

OTHER PRESCRIPTION MEDICATIONS, NATURAL AND ALTERNATIVE THERAPIES, AND NON-PRESCRIPTION (OVER-THE-COUNTER) MEDICATIONS

What if I am taking medications not listed here?

Some medicines and treatments can stop your heart medications from working properly and can cause other health problems. Tell your doctor and pharmacist about all the medications you are taking to make sure they are all safe for you. This includes:

- Prescription medications for other conditions or illnesses
- Medications for any purpose that you buy without a prescription (non-prescription or over-the-counter medications)
- Vitamins or mineral supplements
- Sample medicines a doctor might have given to you for free
- Inhalers
- Creams and ointments
- Herbal and natural health products
- Traditional medicines
- Alternative therapies

If you have questions or concerns about any of your medications, talk to your pharmacist, nurse practitioner or doctor.

What do I need to know about non-prescription (over-the-counter) medications?

Medicines you can buy without a prescription include painkillers, allergy medications, antacids, cold and flu products, vitamins and mineral supplements. Some of these can cause serious problems for people with heart disease.

What do I need to know about alternative therapies?

Some examples of alternative therapies include:

- Herbal medicine
- Natural health products
- Traditional medicines and therapies

The government does not control or regulate alternative medicines and therapies as strictly as prescription medications. So we don't always know if they are safe or useful for you — or if they are changing the effectiveness of your heart medications.

Safety tip

Some non-prescription products and therapies can cause serious problems for people with heart disease. Always check with your doctor, nurse practitioner or pharmacist before taking any non-prescription medications or alternative therapies.

MANAGING YOUR MEDICATIONS

FILLING YOUR PRESCRIPTIONS

Here are some tips to make sure you do not miss any doses:

- Fill the prescriptions you have been given at your local pharmacy right away. Sometimes, the hospital can fax your prescription to your pharmacy, so you can pick up your medications on the way home.
- Order all your prescriptions from the same pharmacy so that the pharmacist knows all the medications you are taking.
- Order your refills a few days early to make sure the pharmacy has your medications when you need them. Some prescriptions can be renewed by a phone call from your pharmacy to your doctor or nurse practitioner.
- Know how many refills are left on your prescriptions so you don't run out. Follow up with your doctor or nurse practitioner to get new prescriptions when you need them.

TAKING YOUR MEDICATIONS AS PRESCRIBED

Your healthcare team has chosen your heart medications and set the doses carefully to treat your coronary artery disease, protect your heart muscle and prevent serious problems in the future. Most people need to take their heart medications for the rest of their lives. If you stop taking them

without your doctor knowing, you risk serious damage to your heart and health. It is very important to take your medications exactly as you have been told.

This means:

- Take each medication at the same time(s) each day, at the dose you have been prescribed
- Never share your medications with anyone else
- DO NOT change how you take your medications on your own. Talk to your doctor, nurse practitioner or pharmacist first.



Image: iStock.com/PamelaMoore

If you have trouble remembering to take your medications, there are several things you can do:

- Buy a pill organizer from your pharmacy. They have a separate spot for you to put your pills for each day. Some have spots for different times of the day. A quick look can tell you if you have forgotten a pill or need to take one.
- Ask your pharmacy if you can get your medication in blister packs, also called bubble packs. Some pharmacies prepare these with enough medication for a week or more. Each pill is placed in a bubble, which is marked for a certain time of day. Just push the pill out of its bubble when you need to take it. Make sure you know how to push it out of the bubble and make sure you are strong enough to do it.
- Keep your medications out in the open where you can see them to remind you to take them (but away from children and pets).
- Set a reminder on your watch or phone or use a smartphone app. Text messaging services like **ohdontforget.com** can send you a reminder.

DEALING WITH SIDE EFFECTS

Medications can cause side effects. Some side effects are mild, but others can be more serious. You need to learn the most common side effects of each medication you take so you will know if they happen. If you take a medication that makes you sleepy or dizzy, don't drive or do other activities that may not be safe. If you are having a problem with side effects, talk to your pharmacist, nurse practitioner or doctor.

WATCHING OUT FOR INTERACTIONS WITH FOOD AND ALCOHOL

Ask your pharmacist about the effect of alcohol and food on your medications.

- Grapefruit and grapefruit juice change the way some medications work, including some statins.
- Make sure you know which medications need to be taken with food and which should be taken on an empty stomach.
- Don't drink alcohol if you have problems with dizziness or light-headedness or if your medication makes you sleepy. It is usually safe to drink a small amount of alcohol with most medications, but check with your pharmacist first if you are not sure.

STORING AND GETTING RID OF MEDICATIONS

- Keep all medications in safe containers, out of reach of children and pets.
- Do not store medications in warm or humid places, such as the bathroom or on top of the refrigerator.
- Take your old and unused medications back to the pharmacist. Do not put them in the garbage or down the sink or toilet.

TRAVELLING WITH MEDICATIONS

- Check with your healthcare provider before you travel. You may need to get prescription refills or tests before you leave or while you are away.
- Make sure you have enough medication for the whole trip with some extra doses in case you are late getting home.
- Keep your medications in their original labeled containers. Ask your pharmacist for smaller containers if you need them.
- If you are flying or taking a train, keep your medications together in a clear plastic bag in your carry-on luggage (the bag you keep with you).
- If you are driving, keep your medications cool and dry. Do not leave them in the glove compartment or in a hot car.
- Refilling your prescriptions while you are away:
 - **In Canada:** ask for your refill to be switched or transferred from your home pharmacy or go to a walk-in clinic for a new prescription. Your medications may cost more if you are not in your home province.
 - **Outside Canada:** it can be hard to fill a prescription. Plan ahead to avoid this problem.



Image: Shutterstock.com/happyphoto

YOUR MEDICATION LIST

Make a list of all your medications and always carry the list with you. Your pharmacy can print a list for you or use the chart on page 33. A full list includes your prescription and non-prescription medications, vitamins, supplements and herbal and alternative products. This is especially important if you take antiplatelet or anticoagulant medications, since they may affect whether certain medical procedures can be done safely.

Make sure all your healthcare providers — doctors, dentists, pharmacists, massage therapists, physiotherapists, nurse practitioners and naturopaths — know all the medications you take. Also, a MedicAlert ID bracelet will list your illnesses or conditions if you are hurt and can't speak.

Travel tip

Planning a trip? Check your insurance. It may be hard to get travel insurance after a cardiac event. Travelling without insurance can be very costly if you need medical care during the trip.

MY MEDICATIONS

List all your medications in the chart — following the example below.

Take this chart to your doctor’s appointments in case your prescriptions are changed.

Name	Medication class	What is it for?	When to take, how to take and how many?	What are the side effects (when do I call the doctor)?
<i>Example: Lipitor</i>	<i>Cholesterol-lowering medication (“statin”)</i>	<i>Slows or stops plaque formation inside blood vessels and stops existing plaques from getting worse.</i>	<i>Evening (9pm), every day. 1 pill with water, on empty stomach.</i>	<i>Muscle cramps or aches — uncommon</i>

Pharmacy name: _____

Telephone: _____

Ask your pharmacist for a list of your medications. Or take a picture of your pill bottles on your cell phone, print it out and leave copies in handy places.



HOW TO MAKE HEALTHY LIFESTYLE CHANGES

Ask yourself: “Is there anything I would like to do for my health? Is there anything I can do to improve my quality of life with heart disease?”

The key to making lifestyle changes is developing healthy habits that stick. The change will become a habit that you do every day without thinking, like brushing your teeth. Here are seven tips to help you plan for change:

“I have learnt how to manage my new life and I have rolled with it. I had to change my lifestyle.” ~ Chad

1. SET A SMARTER GOAL

Your healthcare team can help you decide which lifestyle change would have the greatest impact on your overall health and heart disease. Make sure it is a change that you feel confident about.

When you have your goal, make it into a SMARTER goal:

- **S**pecific: Vague goals produce vague results. Know what the goal is, and the when, where and how of the goal.
- **M**easurable: Putting a number in your goal makes it easier to measure your progress towards the goal.
- **A**ttainable: You have to be able to achieve the goal. An extremely difficult goal will set you up for failure.
- **R**ealistic: Is this something that you are willing and able to work towards?
- **T**imely: Set a time to achieve your goal.

Try to choose one goal that you can achieve in a short period. For example, “I will walk around the block once a day for a week.” Make the goal specific and realistic. Set yourself up to succeed!

2. FIGURE OUT HOW YOU WILL ACHIEVE YOUR GOAL

Planning is one of the most important steps to success. Ask yourself, “What do I need to do to reach my goal?”

Then make a plan that sets out specific steps to success. For example, if your goal is to eat seven servings of vegetables and fruit every day, you could break it down this way:



How many servings of vegetables and fruit do I eat now?

- I eat four per day. I will need to add three to reach my goal.

Ideas to add servings each day

- Eat salad of colourful vegetables for lunch.
- Make vegetable soup for lunches.
- Have a piece of fruit for an afternoon snack.
- Choose a vegetable stir-fry when out for dinner.

What I can do to make it happen

- Plan my meals for the week.
- Shop with a list that includes extra fruit and vegetables.
- Wash and cut up fruit and vegetables ahead of time.
- Keep track of the fruit and vegetables I eat each day.

3. PREPARE FOR OBSTACLES

Try to think ahead about the challenges you might face. Develop a plan to meet them. For instance, you may have to miss a morning walk if you have a doctor's appointment. Plan to walk after lunch or dinner.

4. GET SUPPORT

Cardiac rehabilitation programs are run by people who are experts in helping you make lifestyle changes and get comfortable with life with heart disease. Programs are offered in person, over the phone and online.

Check with the Canadian Association of Cardiovascular Prevention and Rehabilitation at cacpr.ca to find a program near you. If you cannot find a centre near you, talk to your doctor.

You can also find support closer to home from your family and friends. If you have a partner, ask them to make the change with you. Here are some more tips on reaching out for support:

- Ask a family member, friend or neighbour to go for a walk with you.
- Ask for help to cut up vegetables and fruit.
- If you don't buy the groceries, ask whoever does to only buy healthy snacks.
- Ask the people in your house not to smoke at home or in your presence.
- Ask your healthcare team for information and coaching. For instance, your physiotherapist can give you a safe exercise routine. Your dietitian can help with healthier food choices.

5. TRACK YOUR PROGRESS

The more you track your progress, the greater your chances of achieving your goal. For example, if your goal is go outside for a walk after dinner four times a week, this simple log will track the time you spend walking for each day of the week.

You only need to track the changes until you feel that they have become a regular habit.

Date	Time spent walking
Sun	
Mon	
Tues	
Wed	
Thurs	
Fri	
Sat	

6. WHEN THINGS GO OFF PLAN, KEEP GOING

It can be hard to stick to a plan if you are tired, stressed, or not feeling well. Setbacks are a normal part of the process — they are not a failure. Don't give up. Here are some tips to help you turn a setback around:

- Remind yourself why you want to make the change. Think about how important it is.
- Look at what you've achieved so far. It is human nature to focus on the things we don't get right, but try instead to give yourself credit for what you have accomplished.
- Start keeping a log again.
- Look at what caused the setback. What can you do if it happens again?
- Look for support. Ask your family to help you get back on track.
- Check your goals again. Are they specific, realistic and measurable? Do you need to change them?
- Do you need to change your plan?

7. CELEBRATE SUCCESS!

Whenever you make a small step toward your goal, pat yourself on the back and congratulate yourself. Reward yourself with something you like — like reading your book after your walk. And, remember, focus on the small steps you have achieved. If your goal was to walk every day one week, and you only did it 5 times, don't focus on not quite making it to your goal. Focus on the fact that you accomplished walking 5 days in row!



Content REVIEWERS

CARDIAC SURVIVORS

Caroline Lavallée (Québec)
Vincent Daignault (Québec)
Louise Boivin (Québec)
Cendrine Mathews (Québec)
Linda Vardy (Ontario)
Hannah Wilansky (Ontario)
Hasnain Mawji (Ontario)
Shishir Lakhani (Ontario)
Anselm Fok (Ontario)
Sandra Thornton (Alberta)
Susan Burns (Saskatchewan)
Heather Eby (Saskatchewan)
Kevin Vinding (Saskatchewan)
Norm Normand Pearce (Nova Scotia)
Barbara Ellison (British Columbia)

MEDICATION CHAPTER

LEAD

Travis Warner, BSP, ACPR, BCPS, EPPh
Pharmacist
St. Boniface Hospital, Manitoba

Luc Poirier, B. Pharm. M.Sc.
Pharmacist
Département de pharmacie, CHU de Québec, et
Faculté de pharmacie, Université Laval (Québec)

Lucy Turri, R.N., B.Sc.N.
Clinical Drug Research Nurse (Cardiology)
Interior Clinical Research Consultants
Living with Stroke Coordinator (Volunteer)
Kelowna, British Columbia