**Pharmacovigilance**

**Introduction:-**

**Pharmacovigilance** (**PV** or **PhV**), also known as **drug safety**, is the [pharmacological](https://en.wikipedia.org/wiki/Pharmacology) [science](https://en.wikipedia.org/wiki/Science) relating to the *collection, detection, assessment, monitoring, and prevention* of adverse with [pharmaceutical products](https://en.wikipedia.org/wiki/Pharmaceutical_drug).

 The [etymological](https://en.wikipedia.org/wiki/Etymological) roots for the word "pharmacovigilance" are: *pharmakon* (Greek for drug) and *vigilare* (Latin for to keep watch). As such, pharmacovigilance heavily focuses on [adverse drug reactions](https://en.wikipedia.org/wiki/Adverse_drug_reaction), or ADRs, which are defined as any response to a drug which is noxious and unintended, including lack of efficacy (the condition that this definition only applies with the doses normally used for the [prophylaxis](https://en.wikipedia.org/wiki/Prophylaxis), diagnosis or therapy of disease, or for the modification of physiological disorder function was excluded with the latest amendment of the applicable legislation.

Information received from patients and healthcare providers via pharmacovigilance agreements (PVAs), as well as other sources such as the [medical literature](https://en.wikipedia.org/wiki/Medical_literature), plays a critical role in providing the data necessary for pharmacovigilance to take place.

In fact, in order to market or to test a pharmaceutical product in most countries, adverse event data received by the license holder (usually a pharmaceutical company) must be submitted to the local drug regulatory authority.

Pharmacovigilance means keeping eye on the drugs in pharma market and their safety profile.   
  
Pharmacovigilance was novel field in 2006-2007 in India and those who entered this field at that time are earning handsomely. But nowadays, it is becoming more saturated. There are different field in pharmacovigilance like:  
  
ICSR's, Individual Case safety reports  
PSUR Periodic Safety update reports  
Signal detection  
Risk Management  
Medical coding  
Medical writing  
Literature search  
  
Each field had its own time of boom. Presently ICSR's are saturated and much competition is there in market and easily people are available to do the work at lesser pay. Hence, experienced people in ICSR are finding it difficult to get jobs.  
  
PSURs are new field slowly gaining popularity. Also monetary wise PSUR skilled person are paid more.  
  
Same is scenario with Signal detection and Risk Benefit Assessment.  
  
Hence pharmacovigilance field is up coming but u need to see future in which branch of pharmacovigilance ur work is associated.   
  
You constantly need to be updated every year to see scope in pharmacovigilance and every branch which is upcoming.  
  
First [B.Sc](http://b.sc/" \t "_blank) and [M.Sc](http://m.sc/" \t "_blank) people were hired for Pharmacovigilance. Soon companies started getting B.Pharm people in same pay scale as [B.Sc](http://b.sc/" \t "_blank) n [M.Sc](http://m.sc/). hence companies started hiring Pharmacy graduated and post graduates. Now, BDS (Dentist) are available in sand pay of pharma students, so companies hiring Dental students more.  
  
Scope of pharmacovigilance after 5 years is nice if u fore see what's required and skills getting good pay in near future.  
  
Other countries like Philippines and China are giving tough competition to Indian outsourcing pharmacovigilance work.