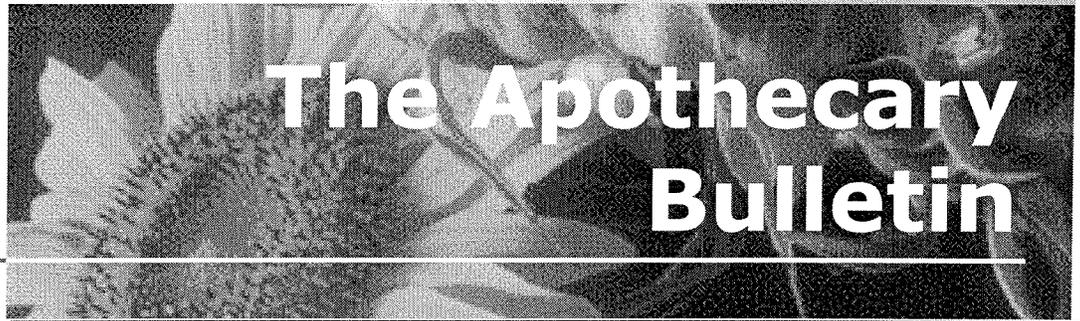


Jo Vickers, Pharm D  
MAJ S Ford, Pharm D  
Connie Stroll, CPhT

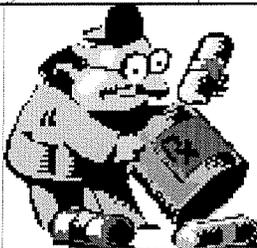
July/August 2003



# The Apothecary Bulletin

Inside this issue:

Formulary Committee News  
New Drug Requests  
New FDA Approvals  
Non-Approved Abbreviations  
Herb (Ephedra)  
West Nile Virus  
Policy on Pharmaceutical Reprs.



**Future Apothecary Bulletin will be published by electronic means**

## NEW DRUG REQUESTS

All New Drug Requests (DD form 2081) submitted for a patient require a **adequate justification** for need of the medication. Please include, indication for use, previous therapy/treatment failures, adverse events with formulary agents, etc. Examples of inappropriate justification that have been received include: "topical therapy", "increased cholesterol", "allergies". Forms can be submitted to pharmacy via distribution or CHCS e-mail to special guy. Questions can be directed to 526-7896

## FORMULARY CHANGES

The Pikes Peak Region Formulary Committee met in July and added the following medications to the Formulary:

- +Gatifloxacin (*Tequin*®)
- + Loratadine (*Alavert*®) this is an OTC product formerly know as *Claritin*®
- + Poly vitamins with iron (*Poly-Vi-Sol*®) for breast fed infants
- +Azelastine (*Optivar*®)

The following medications were **added** to the **Basic Core Formulary (BCF)** by the DOD Formulary Committee:

- +Estradiol transdermal System (*Esclim*®) -to replace *Estraderm* once all refill are complete
- +Risperidone (*Risperdal*®) (already on Evans Formulary)
- +Rosiglitazone/Metformin
- +Queriapine (*Seroquel*®) (already on Evans Formulary)
- +Pimecrolimus (*Elidel*®)
- +Nitroglycerin patches (*NitroDur*®) (already on Evans Formulary)
- +Isosorbide mononitrate SR

The Following medications were **deleted** from the formulary:

- Salmeterol MDI (*Serevent*®) discontinued by manufacture
- Prednisone 5mg/5ml oral solution
- Prednisolone 5mg/5ml (*Pediapred*®)
- Maalox XS*®

## NOVALOG VERUS HUMALOG

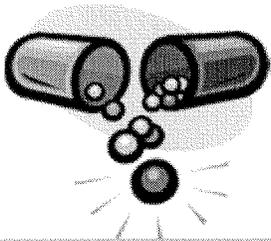
The July 2003 Pikes Peak Regional Formulary discussed the difference between Lispro insulin (*Humalog*®) and Aspart Insulin (*Novalog*®) and an automatic change was approved for all military providers. All patients with civilian providers will be given written information informing them of the change and encouraging them to discuss this change with their providers. This change will save the pharmacy \$8.71 per vial. Difference between the two rapid acting insulins.

Aspart Insulin	<u>Production Organism</u>	Lispro Insulin
Saccharomyces cerevisiae (baker's yeast)		Escherichia coli – nonpathogenic strain

### Amino Acid Differences from human regular insulin

Aspartic acid in position B28	Lysine (B28) Proline (B29) reversed
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Continued on page 4



## Recent FDA Approvals

### TO Report an ADR

- Complete the **Adverse Drug Reaction Form** and turn it in to Pharmacy
- Use **CHCS** e-mail and send to mail group G.ADR
- Use the Evans Website
- Phone **I-ITCH (4-4824)**
- Phone Inpatient Pharmacy at 4-4400

Please include the patient's name and SSN, date of occurrence, suspected drug, signs/symptoms of event, any changes or additions to current medication therapy.

Infanrix (Diphtheria and Tetanus Toxoids and Acellular Pertussis Adsorbed) recommended by the Centers for Disease Control as a fifth consecutive DTaP vaccine dose for children between the ages of 4 and 6 years

Crestor (rosuvastatin calcium) as an adjunct to diet for the treatment of various lipid disorders including hypercholesterolemia, mixed dyslipidemia and isolated hypertriglyceridemia

Zyprexa (olanzapine) for use in combination with lithium or valproate (Depakote, Abbott) for the treatment of acute manic episodes associated with bipolar I disorder

Keppra® (levetiracetam) oral solution (100 mg/mL), (grape-flavored, dye-free) providing a new option for patients with epilepsy who prefer a liquid or cannot swallow tablets

Aloxi (palonosetron) for the treatment of chemotherapy related nausea and vomiting

Climara (estradiol transdermal system) two new strengths 0.0375 mg or 0.06 mg of estradiol per day in convenient, once-a-week patches



## Herb of the (every other) Month EPHEDRA

Ephedra (Ma-Huang, Sea Grape, yellow horse, squaw tea, and various other names) has along history of use as a stimulant and "supplement" as an energy booster, performance enhancer, body builder, and fat 'burner'.

The Department of Health and Human Services (HHS) reported on new evidence, including a study by the RAND Corporation, suggesting that dietary supplements containing ephedra may present significant or unreasonable risks as currently marketed.

The RAND study, commissioned by the National Institutes of Health reviewed recent evidence on the risks and benefits of ephedra and ephedrine. The study found limited evidence of an effect of ephedra on short-term weight loss, and minimal evidence of an effect on performance enhancement in certain physical activities. It also concluded that ephedra is associated with higher risks of mild to moderate side effects such as heart palpitations, psychiatric and upper gastrointestinal effects, and symptoms of autonomic hyperactivity such as tremor and insomnia, especially when it is taken with other stimulants. The study reviewed over 16,000 adverse events reported after ephedra use and found about 20 "sentinel events" including heart attack, stroke, and death that occurred in the absence of other contributing factors. In conjunction with other recent studies of serious adverse events involving persons taking ephedra, the RAND study adds significantly to the evidence suggesting that ephedra as currently marketed may be associated with unreasonable safety risks.

<http://www.fda.gov/bbs/topics/NEWS/ephedra/whitepaper.html>

### WebSites of Interest

<http://evans.amedd.army.mil> - Evans Home Page

<http://evans.amedd.army.mil/Pharmnew/default.htm> - Evans Pharmacy

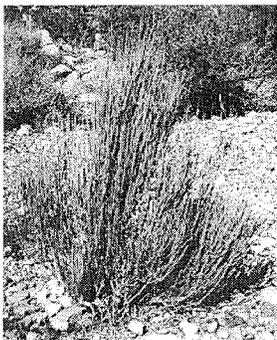
<http://www.pec.ha.osd.mil/> - DoD Pharmacoeconomic Center

<http://www.fda.gov/> - U.S. Food and Drug Administration

<http://www.cdc.gov/> - Center for Disease Control and Prevention

<http://www.cdc.gov/ncidod/dvbid/westnile/index.htm> - CDC West Nile Virus

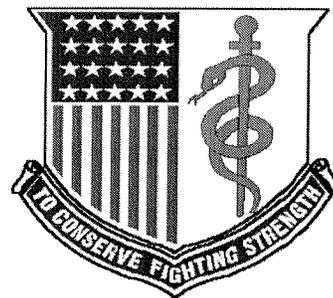
■ He who has so little  
 ■ knowledge of human  
 ■ nature as to seek happi-  
 ■ ness by changing any-  
 ■ thing but his own disposi-  
 ■ tion will waste his life in  
 ■ fruitless efforts  
 ■ Samuel Johnson



An Ephedra is an evergreen shrub growing 2 to 3 feet high with no leaves. Stems are green, smooth, woody, branching, and very jointed.

## Non-Approved Abbreviations - Unauthorized/Dangerous Abbreviations

submitted by  
Stan Illich



The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) has established six National Patient Safety Goals for 2003. Goal #2 is to “Improve the effectiveness of communication among caregivers.” Recommendation 2.b. states that each hospital must “standardize abbreviations, acronyms and symbols used throughout the organization, including a list of those (abbreviations) *not to be used*.”

In order to comply with this requirement the Medical Records Department, in consultation with the Pharmacy Department and Patient Safety have developed a list of abbreviations, not to be used at Evans Army Community Hospital (EACH). This list has been reviewed and approved by the MEDDAC Patient safety Committee, the Executive Committee of the Medical Staff and the Quality Management Board (QMB).

These abbreviations are not to be used in *written* communication at EACH. Written communication includes prescriptions, orders and the medical record.

Abbreviation	Intended Meaning	Misinterpretation	Safer way to write
HCT	Hydrocortisone	Hydrochlorothiazide or Hematocrit	Write Hydrocortisone or HC
TIW	Three times a week	Three times a day or Twice a week	Write three times a week or specific days
MTX	Methotrexate	Read as mitoxantrone	Write methotrexate
µg	Microgram	Mistaken for mg	Write microgram OR
Zero after decimal	1 mg	Misread as 10mg	Write 1mg not 1.0 mg
No Zero before decimal point (.5mg)	0.5 mg	Misread as 5mg or 15mg depending on legibility	Write 0.5mg not .5mg
ss	Half	Misread as 55 or other issues in various con-	Write one half or 0.5
q.d.	Every day	Misread as four times a	Write every day or Q

**America is not like a blanket— one piece of unbroken cloth, the same color and texture, the same size. America is more like a quilt— many patches, many pieces, many colors, many sizes, all woven and held together by a common thread**

**Henry M. Jackson**



**WEST NILE VIRUS**

West Nile virus (WNV) is a virus that is spread by infected mosquitoes. The virus usually infects birds, but it can be spread to humans by mosquitoes that feed on infected birds and then bite humans. The virus was identified in the United States for the first time during 1999. Most people infected with the West Nile virus have no symptoms of illness, but some may become ill three to 15 days after the bite of an infected mosquito. Based on preliminary evidence, about one in four infected persons will have mild illness with fever, headache and body aches, sometimes with skin rash and swollen glands. In a few cases, mostly among the elderly, death may occur.

While there is no human vaccine for West Nile encephalitis, there are many ways to reduce the risk of becoming infected. They include:

- Avoid shaded areas where mosquitoes may be resting

- Limit evening outdoor activity when mosquitoes are most active

- Applying insect repellent that contains the active ingredient DEET to exposed skin or clothing, always following the manufacturer’s directions for use on the label.

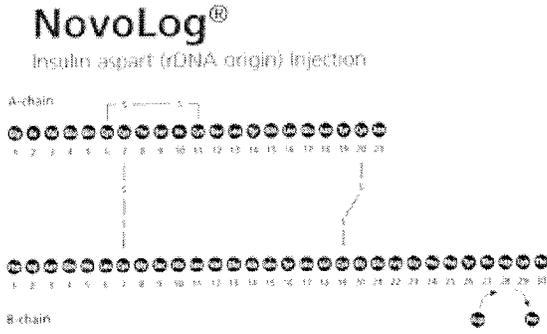
- Avoid applying repellent to children under 2 years of age, and to the hands of older children because repellents may be transferred to the eyes or mouth potentially causing irritation or adverse health effects.

- Maintaining window and door screening to keep mosquitoes out of buildings.

- Draining standing water in the yard. Empty water from mosquito breeding sites, such as flower pots, pet bowls, clogged rain gutters, swimming pool covers, discarded tires, buckets, barrels, cans and similar sites in which mosquitoes can lay eggs.

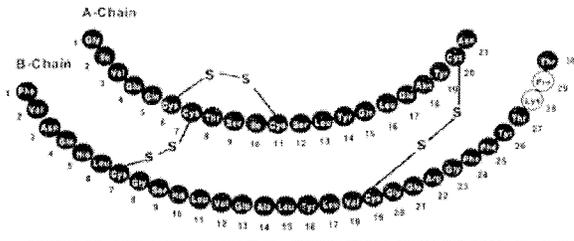
- Wearing long-sleeved shirts and long pants when outdoors.

NOVALOG VERUS HUMALOG continued from pg 1



<u>Insulin Type</u>	<u>Peak Time</u>	<u>Duration of Effect</u>
Endogenous insulin	< 1 hr after meals	return to baseline by 4 hours
Regular insulin	1 ½ - 2 hours	5 – 10 hours
Aspart insulin	40 – 50 minutes	154 minutes (50% of maximum)
Lispro insulin	40 minutes	113 minutes (50% of maximum)

**HUMALOG®**  
INSULIN LISPRO INJECTION  
(rDNA ORIGIN)



When we remember we are all mad, the mysteries of life disappear and life stands explained.  
---Mark Twain

**MEDDAC Policy Governing Visits by Pharmaceutical Representatives**

The following is a synopsis of rules governing visits by pharmaceutical representatives to any Fort Carson medical treatment facility. Readers are referred to MEDDAC Regulation 715-10 for additional information.

1. Appointments with Providers: Representatives will not visit patient care areas without prior approval of the provider being visited. **Appointments to these areas must be scheduled during non-patient appointment times to avoid disruption of patient care (before and after clinic hours only).** Non-formulary medications may be discussed at these appointments at the provider's request.
2. Samples: **No** pharmaceutical samples are allowed at any medical treatment facility on Fort Carson.
3. Pharmaceutical representatives **will not** bring in or provide food or beverages at the hospital, or any of its outlying clinics or services.
4. Preprinted Prescription Blanks: Army Regulation prohibits the use of preprinted prescription blanks furnished by drug companies in a military treatment facility. Representatives should not offer these blanks to anyone or honor a request for them while at Fort Carson.
5. **No items (coffee mugs, bags, etc.) displaying pharmaceutical company logos will be permitted in patient care areas.** These items are allowed in private offices or locker room areas but not in clinics, waiting areas, or in patient care rooms.
6. No gifts displaying pharmaceutical company logos will be distributed at EACH-sanctioned functions (e.g. Organization Day).
7. DoD employees may accept unsolicited gifts with a market value of \$20.00 or less per occasion, so long as the total value of all gifts received from a single source during a year does not exceed \$50.00. All DoD employees must avoid situations, which could undermine government integrity. This includes accepting gifts that may give the appearance that influence is being bought.