The Prudent Prescriber

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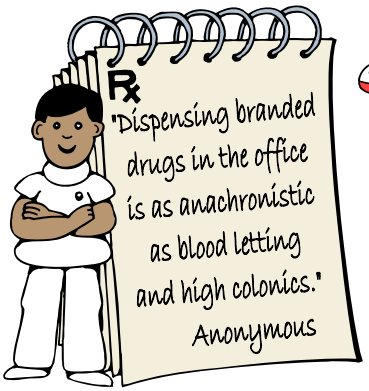


Pharm Reps ≠ Rational Prescribing
(PR) (RP)

Big Pharma Producing only a Dribble….

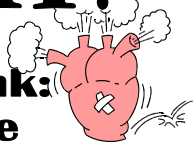
and mostly Me Toos

1. Change the salt

Nexium goes generic →
PPIs go Radioactive

- Nexium goes generic next month.
- Using a loophole in a patent, pharmaceutical company Amneal gained FDA approval for esomeprazole strontium last year.
- In the original 1994 patent for Nexium (magnesium salt), AstraZeneca listed six cations, sodium, magnesium, lithium, potassium, calcium and ammonium.
- Sorry, no strontium salt listed and therein, work for lawyers on both sides of the conflict. Meanwhile Amneal allowed to market both generic and branded (no name yet) products.
- Strontium found in environment. We are exposed to 3.3 mg daily from breathing air and eating fruits and vegetables.
- Generally, strontium not toxic, but similar chemically to calcium, and in high doses might suppress vitamin D metabolism and intestinal calcium absorption.
- Strontium can bind to hydroxyapatite crystals in bone and interfere with bone metabolism.
- FDA: no approval in infants and kids.

CHF?



Think:
Ace
Aldactone
B-blocker
Dig
Diuretic

Avoid these expensive "me-too" drugs:

Intermezzo
Vimovo
Livalo
Pristiq
Viibyrd
Edarbi
Daliresp

Treat diabetics BP to 130/80

Antibiotics do NOT

help acute bronchitis

ß-blockers in post-MI save lives

Pill splitters save BIG

NOW AVAILABLE ON THE GENERIC MARQUEE

Plavix→clopidogrel
Avapro→irbesartan
Tricor→fenofibrate micronized
Arthrotec→diclofenac/misoprostol
Diovan HCT→valsartan/HCTZ
Atacand HCT→candesartan/HCTZ
Maxalt→rizatriptan

- Esomeprazole strontium is Pregnancy Category C (not well studied) and esomeprazole magnesium is Pregnancy Class B.
- Same indications as other PPIs
- All PPIs have short half-lives (1-2 hrs.) and take 5-7 days to block the proton pumps.
- Same risks as other PPIs
    - Increased risk of C.diff
    - Decreased bone density and risk increased for fractures
    - Vitamin B12 deficiency
    - Fe deficiency anemia
    - Increased risk of community acquired pneumonia

PPI	Cost/Month
Nexium	$196
Esomeprazole strontium	$150
omeprazole	$15
Famotidine 20 mg	$6.20

AVOID ACID REBOUND
Taper PPIs s l o w l y.
Omit PPI every other day, fill in with ranitidine, famotidine, then space PPI farther apart
May take several weeks, particularly if high dose PPI.

2. XRs and ERs and LAs, etc.

Namenda XR

- Namenda XR has been in Forest Pharmaceuticals pipeline since FDA approval in 2010.
- Namenda XR coming to a pharmacy near you soon, as Forest will suddenly stop making the short acting product, Namenda.
- This will force existing patients to the long acting product before the short acting generics move into the market later this year.
- Forest Pharmaceuticals is a strong contender for the Pharmaceutical Outrage of the Year Award.

Facts about memantine / ACHI

- Neither the cholinesterase inhibitors nor memantine are very effective.
- There is no good evidence that these drugs delay nursing home admission.
- There are no data to support using these drugs together.
- Memantine has NO role in mild disease.
- "Start these drugs only if the family insists and point out that only one in 12 patients will see any positive effect." (Prescriber's Letter May 2012) and one in 12 will have serious side effects.
- Stop the drugs if there is no discernable effect in 3-6 months or if patient is bedridden, nonverbal, etc.
- Taper the drugs over 4 weeks to avoid discontinuation syndrome.
- Namenda $240/month; donepezil <$10/month.

3. Splitting old combos

Zohydro ER (hydrocodone bitartrate)

- First single agent, long acting hydrocodone product in US.
- Zohydro ER (available as 10mg, 15mg, 20mg, 30mg, 40mg and 50mg capsules) releases hydrocodone over 12 hours.
- It does not have abuse deterrent properties as some of the products in the pipeline do. Teva has a q12 hr hydrocodone called TD (Tamper Resistant) hydrocodone and Purdue, a once daily hydrocodone that will be tamper resistant.
- At max dose of 100mg BID, $960/month. Range is $450-$960/month. Generic MS Contin costs $0.89/tab (15mg ER) to $4.30 (200mg ER).
- The FDA's panel of outside advisors gave the drug an overwhelming negative review last year.

4. Mini-size the dose

Zorvolex (diclofenac) capsules

- First low dose NSAID, uses Solumatrix Fine Particle Technology which produces NSAIDs as submicron particles that are less than one-20th of their original size.
- This technology increases the surface area so that particles dissolve faster and its doses are 20% lower than other diclofenac products.
- Studies: In treating pain, post bunionectomy, both doses of Zorvolex (18mg and 35 mg) work better than placebo when given TID, but not better when given BID. Compared with celecoxib, overall reductions in pain intensity were greater with diclofenac 35 mg and similar with diclofenac 18 mg.

Diclofenac

Not the best NSAID because of:

- more liver toxicity than most NSAIDs
- more G.I. toxicity than celecoxib, etodolac and meloxicam
- increases the risk of cardiac events as much as high dose celecoxib

Not ready for prime time:

- clinical trials did not establish a safety advantage over other NSAIDs
- no evidence of an efficacy advantage over diclofenac 50 mg
- Zorvolex costs $3/cap compared to ~$0.60/tab diclofenac potassium

You may access previous issues at http://www.rmhp.org/providers/prudent-prescriber.

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