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Rx Focus

Influenza Vaccination

According to the Centers for Disease Control (CDC), there is no early-season shortage of influenza (flu) vaccine for the 2003-2004 season. The optimal time to be vaccinated is October or November. Vaccination is recommended for high-risk patients of any age and their household contacts, health care workers, adults 50 years of age and older, and children 6-23 months old. Children 6 months through 8 years of age who are receiving flu vaccine for the first time should receive two doses at least 4 weeks apart with the second dose being given before December. Following vaccination, antibody levels in the body reach protective levels in about 2 weeks, and protection generally lasts for at least 6 months.

Two new formulations of flu vaccine are available this season: FluMist—a live virus vaccine that is administered nasally and is approved for use only in healthy individuals between the ages of 5 and 49, and a pediatric formulation of Fluzone that contains only a trace amount of the preservative thimerosal—it can be given to children 6-35 months old.

Apart from soreness at the injection site, adverse reactions to the injectable flu vaccine are uncommon but do include fever, muscle aches and pains and a general feeling of unwellness. FluMist adverse reactions include runny nose, nasal congestion, headache, sore throat, chills, and cough. In addition, because all flu vaccines are grown in eggs, people who have had an allergic reaction to eggs should not be vaccinated for influenza.

References:

1. Influenza Prevention 2003-2004, The Medical Letter®, Vol. 45 (Issue 1166), Sept. 29, 2003
2. Recommendations About the Timing of Influenza Vaccination, 2003-2004 Season, Pharmacist's Letter, Detail-Document #191013, October 2003



Industry Report

Serevent Inhalation Aerosol, Serevent Diskus, and Advair Diskus

On August 14, 2003, the FDA announced that GlaxoSmithKline will add new safety information and warnings to its salmeterol-containing products based on the results of a recently completed large safety study conducted in the United States. The new labeling will contain a boxed warning about a small, but significant, increased risk of life-threatening asthma episodes or asthma-related deaths seen in patients taking salmeterol.

Salmeterol is a long-acting bronchodilator used to treat asthma and chronic obstructive pulmonary disease (COPD). In addition, the FDA stresses the importance of asthma and COPD patients *not* stopping their salmeterol-containing medications without first talking to their physicians. (Abrupt stoppage can result in serious worsening of these diseases.)

Pyrazinamide plus Rifampin for Treatment of Latent Tuberculosis Infection

On August 8, 2003, the Centers for Disease Control and Prevention (CDC) notified healthcare professionals that, due to high rates of hospitalization and death from liver injury, they are no longer recommending the combination of rifampin and pyrazinamide for the treatment of latent tuberculosis infection. (This medication combination is still, however, important as part of a multidrug regimen option for the treatment of active tuberculosis.) New recommendations for the treatment of latent tuberculosis infection include Isoniazid for 6 or 9 months, or rifampin for 4 months.



State & Federal Updates

Pharmacy Education Aid Act of 2003

On March 18, 2003, a bill went before congress to amend the Public Health Service Act with respect to health professions programs regarding the practice of pharmacy. It is termed the Pharmacy Education Aid Act of 2003.

Back in December of 2000, the Secretary of Health and Human Services published a report entitled "The Pharmacist Workforce: A Study in Supply and Demand for Pharmacists." This study found that since 1998 there has been an increasing shortage of pharmacists. (Although the overall number of pharmacists has increased in the past decade, there has been an unprecedented demand for pharmacists and for pharmaceutical care services that has not been met.) Without fundamental changes in pharmacy practice and education, this situation will not improve. The study projects that by 2004, the number of prescriptions filled by community pharmacists will increase by 20%, whereas, the number of community pharmacists is expected to increase by only 6% by 2005. Of particular concern is the Institute of Medicine's findings that medication errors can be partially attributed to factors pointing to a shortage of pharmacists, that is, too many customers, numerous distractions, and staff shortages.

If passed, the Pharmacy Education Aid Act of 2003 will offer loan repayment programs to new pharmacy graduates who agree to serve as full-time pharmacists for a period of not less than 2 years at a health care facility with a critical shortage of pharmacists. In addition, a pharmacist faculty loan program will be established to increase the number of qualified pharmacy faculty.

Source: 108th Congress, 1st Session, S. 648



New Drug Approvals

Enablex™ Approved 10/03/2003

Chemical Name: Darifenacin Hydrobromide

Manufacturer: Novartis Pharmaceuticals Corporation

Therapeutic Class: Urinary Incontinence Medication

Approved Indications: Treatment of overactive bladder (urge incontinence).

Other Drugs in Class: Detrol, Detrol LA, Ditropan XL, Oxytrol

Uroxatral Approved 6/12/2003

Chemical Name: Alfuzosin

Manufacturer: Sanofi-Synthelabo Inc.

Therapeutic Class: Alpha1- Blocker

Approved Indication: Benign Prostatic Hyperplasia

Other Drugs in Class: Cardura, Flomax, Hytrin

Average Wholesale Price: \$1.86 per 10mg extended release tablet

Wellbutrin XL 150 mg and 300mg Tablets

Approved 8/28/03

Chemical Name: Bupropion Hydrochloride

Manufacturer: GlaxoSmithKline

Therapeutic Class: Antidepressant

Approved Indication: Treatment of major depressive

disorder in patients 18 years of age and older.

Average Wholesale Price: \$2.91 per tab for 150mg tablet

\$3.84 per tab for 300mg tablet

Special Notes: This is a once-a-day formulation.



New Generic Approvals

Junel™ 21 1/20 and Junel™ 21 1.5/30

Approved 9/18/03

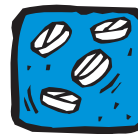
Brand Name Equivalent: Loestrin®

Manufacturer: Barr Laboratories, Inc.

Simvastatin Tablets USP - 5,10,20,40 and 80mg Approved 9/29/03

Brand Name Equivalent: Zocor®

Manufacturer: Ranbaxy Pharmaceuticals, Inc.



October Health Observances

Family Health Month – sponsored by American Academy of Family Physicians (www.familyhealth.org)

Healthy Lung Month – sponsored by American Lung Association (www.lungusa.com)

National Breast Cancer Awareness Month – sponsored by National Breast Cancer Awareness Board of Sponsors (www.nbcam.org)



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