Vermont Pharmacist Association
877.483.2646
Building One Voice for Pharmacy!

July/August 2017

Volume VII, Issue VII

Madeline Ciccone, Editor

Vermont Pharmacy News

Vermont's Medicaid Spending On Target With Budget

The state's Medicaid spending is in line with the amount of money allocated in the

Read more

Remembering Weybridge Pharmacist

Edward A. Zawistowski of Weybridge, VT passed away this June. Among being a

Read more

Albany College of Pharmacy and Health Sciences Teams Up with Age Well

Age Well, formerly the Champlain Valley Agency on Aging, is partnering with Vermont-campus pharmacy students during their second professional year pharmacy practice experience. Students will practice interprofessionalism by working within a health care team, traveling to patients' homes with Age Well Care Coordinators, providing medication reconciliation and information to patients. With the growing pharmacy profession, team-based experiential education is imperative to the training of new pharmacists. "With collaborations of this nature, we can help reduce inefficiencies in patient care," states Age Well's Directer of Care

Coordination, Debra Gaylord, RN. "Patient outcomes, quality of care and cost of care delivery are all optimized when disciplines work together toward a shared goal."

Read more

2015 DYP Winner, Stephanie Buffum, PharmD. (Colchester, VT)

Know an outstanding young pharmacist? Here is an opportunity to have them recognized!

Marion Merrell Dow created the “Distinguished Young Pharmacist Award” to be given annually to an outstanding young pharmacist.The young pharmacist receiving this award has been out of pharmacy school less than 10 years and has demonstrated his or her leadership in the profession. Pharmacists Mutual Companies currently sponsors the award.

The Criteria:
1. Degree in Pharmacy received within the last 10 years ago; 2007 graduation date or later. **(Required)**
2. Licensed and in good standing to practice in state where selected. **(Required)**
3. Current membership and participation in the Vermont Pharmacist Association. **(Desired)**
4. Participation in national pharmacy associations, professional programs, and/or community service. **(Fulfilling at least one aspect of the three is desired)**

Send your nomination by **August 15th, 2017** to Marty Irons at ironsrx@aol.com.

Vermont Board of Pharmacy Meeting

August 23rd, 9:00am to 3:00pm

89 Main St., Montpelier, VT
Large Conference Room A

Mark Your Calendar! Important VPA Dates:

- *VPA Fall Meeting:* Sunday, Oct 15, 2017 at The Leahy Center at Rutland Regional Medical Center in Rutland
- *Vermont Pharmacists Day:* Friday, January 26, 2018 at the Statehouse in Montpelier
- *VPA Spring Meeting:* Sunday, February 25, 2018; Location TBD
- *VPA Fall Meeting:* Sunday, September 23, 2018; Location TBD

National Pharmacy News

FDA Requests Removal of Opana ER From Market

Opana ER (oxymorphone hydrochloride) was reformulated in 2012 in an attempt to reduce abuse potential sparked by the opioid epidemic. The manufacturer, Endo
Read more

FDA Approves Sickle Cell Treatment

Endari (L-glutamine oral powder) has just been approved by the Food and Drug Administration as a treatment for sickle cell disease in patients five years of age and older. Endari will reduce acute complications associated with the disease. Safety and efficacy were established in a randomized trial of patients, ages 5 to 58 years old, with sickle cell disease who had two or more painful crises within 12 months prior to enrollment in the trial. Patients were randomly assigned to control or treatment group with Endari and were evaluated over 48 weeks. Patients treated with Endari experienced fewer hospital visits for pain on average and fewer days in the hospital when compared to those receiving placebo. Patients on Endari also had fewer occurances of acute chest syndrome, a complication of sickle cell disease, compared to patients taking the placebo (8.6% vs 23.1%.) Common side effects of Endari include constipation, nausea, headache, abdominal pain, cough, pain in the extremities, back pain, and chest pain. Endari received Orphan Drug designation for this use and was in part supported by the FDA Orphan Products Grants Program, which provides incentives to encourage the development of studies on products to be used in rare diseases or conditions.

Read more

Trial of Cannabidiol for Drug-Resistant Seizures in the Dravet Syndrome

The Dravet Syndrome is a rare, genetic epileptic dysfunction of the brain that occurs in children. It is characterized by drug-resistant seizures and a high mortality rate. Cannabidiol, or CBD, is an active compound identified in cannabis. In a double-blind, placebo-controlled trial of 120 children and young adults with

Read more

Levocetirizine and Prednisone Are Not Superior to Levocetirizine Alone for the Treatment of Hives

A double-blind, randomized clinical trial evaluated the efficacy of a 4-day course of prednisone added to levocetirizine for the management of acute urticarial, or hives, in an emergency department. Patients, 18 years or older, with acute urticarial of no more than 24 hours duration were eligible for inclusion. Exclusions included patients with anaphylactic reactions or patients who had received antihistamines or glucocorticoids during the previous five days. 100 patients were included and split evenly in two groups, 5mg levocetirizine by mouth for 5 days and placebo, or 5mg levocetirizine and 40mg prednisone by mouth for 4 days. The primary endpoint of study was relief of pruritus 2 days after treatment, rated on a 0 to 10 scale. Secondary endpoints were rash resolution, relapses, and adverse events.

Results showed that of 50 patients in prednisone group, 7 discontinued treatment and of 50 patients in the placebo group, 8 discontinued treatment. Both treatments proved to be effective, with cessation of symptoms within 2 days in the majority of patients. At follow-up, 62% of patients in prednisone group had an itch score of 0 versus 76% in the placebo group. Additionally, the rash resolved in 70% of patients in the prednisone group versus 78% of those in the placebo group. The addition of a 4-day prednisone boost to levocetirizine did not increase or accelerate the rate of resolution observed with the antihistamine alone. Data suggests that prednisone does not increase the effectiveness of a first-line treatment with antihistamine in patients without anaphylaxis presenting to the emergency department.

*Read more*30264-0/fulltext)

New Drug Application For Antihistamine Ophthalmic Solution Approved by the FDA

The U.S. Food and Drug Administration has approved the New Drug Application

Read more

Contact Information:

Mailing Address:

Vermont Pharmacists Association
P.O. Box 267
St. Albans, VT 05478

Visit our website, and like the VPA Page on Facebook!