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**Marci Wood, Editor**

## Vermont News

### Vermont Pharmacists Day 2014

**By Marty Irons, RPh**

Representatives of the **Vermont Pharmacists Association**, Vermont Retail Druggists and Albany College of Pharmacy & Health Sciences gathered, Wednesday, February 19th at the Statehouse in Montpelier. Students from the college performed blood pressure screenings and showcased the educational requirements of earning a PharmD. Members of the two pharmacists groups testified at committee hearings of the House Health Committee and the House Judiciary Committee. Testimony was given for several bills that could potentially impact pharmacists. Legislation that touches on refill synchronization, filling CII prescriptions from out of state doctors, the VPMS, and many other topics were covered. The event ended after the group was formally recognized at a gathering of all the House legislators.

This year marks the fourth time that the **Vermont Pharmacists Day** has been held at the Statehouse. Our increased presence in Montpelier has helped to raise the awareness of both the profession and the issues facing us and our patients. We look forward to returning in 2015.



*ACPHS-VT Student Pharmacists at Vermont Pharmacists Day 2014*

### Save the Date – VPA Spring Conference!

The VPA Spring CE Conference will be held on Sunday, April 27 at the Holiday Inn on Route 7 in Rutland. Watch your mail for more details to follow!

### Upcoming Board of Pharmacy Meeting

The next meeting of the Board of Pharmacy is scheduled for March 26th at 9 AM. The meeting will be held on the 3rd floor of the City Center, 89 Main Street in Montpelier. There will also be a public comments session at 1 PM on March 26th for the Administrative Rules.

### Online Registration for Vermont Prescription Monitoring System now Available

The Vermont Prescription Monitoring System (VPMS) is pleased to announce that online registration is now available for pharmacists and prescribers. You can [register online](#) for the VPMS. Detailed online registration instructions specifically for pharmacists can be found on the registration page by scrolling down. Please note that the online registration systems for delegates and residents are in the final stages of development. The VPMS will provide notification when they are available.

### Upcoming National Prescription Drug Take-Back Day

The next National prescription drug take-back day is scheduled for April 26th. Collection sites will be [posted online](#) on April 1st.

### Recent Robberies at Barre's Medicine Shoppe

The Medicine Shoppe pharmacy in Barre City was robbed on January 21st and February 17th. The suspect of the February robbery is described as 5'10" tall with a medium build, and was wearing a dark grey or black hooded sweatshirt and glasses with round frames. The suspect demanded OxyContin and ordered all employees to the floor, according to police. The suspect of the January robbery has a similar description, but covered his face in blue duct tape. No one was injured in either robbery. Anyone with information is asked to contact the Barre police department, at (802) 476-6613.

### Robbery at Kinney Drugs

The Kinney Drugs in South Burlington on Williston Road was robbed on February 25th. The suspect is a white male, about 6-foot-1, and 150-pounds. Investigators say the suspect entered the store around 6:30 p.m. on Tuesday and told the clerk he had a gun, but never showed it. He demanded cash, and once given the cash he fled.



Police say he was wearing a dark sweatshirt and disguised his face with a scarf. If you have any information about the robbery, contact South Burlington police at (802) 846-4111.

## National Pharmacy News

### CVS to Ban Tobacco Sales

In early February, CVS Caremark announced its plan to remove cigarette sales from its more than 7,600 stores nationwide by October 1st of this year. The announcement came after the US Surgeon General issued a renewed warning of the dangers of tobacco use. 50 years after the landmark report that linked smoking to adverse health events was released. Tobacco use is the leading cause of preventable deaths in the US, with more than 480,000 deaths linked to tobacco every year. Approximately 18% of adults are current tobacco users, down from 42% in 1995, but continued decrease in the prevalence of tobacco use has stalled in the past 10 years. CVS Caremark also plans to launch a national smoking cessation program this spring.

### Northera Approved for Hypotension

The FDA has approved droxidopa (Northera) to treat neurogenic orthostatic hypotension, a rare disease that causes a patient's blood pressure to drop upon trying to stand up. Droxidopa is a pro-drug for norepinephrine, which acts as a vasoconstrictor, and it will be available in 100 mg, 200 mg, and 300 mg capsules. The FDA did not approve Northera 2 years ago due to lack of adequate clinical trial data. The approval is based on additional data from two, 2-week long clinical trials in which patients given droxidopa reported less dizziness, lightheadedness, and feeling faint than those given placebo. The drug was approved under the FDA's accelerated approval program, which allows the drug to be on the market with the indication for short-term relief of dizziness. Long-term benefit of the drug in symptom relief must be demonstrated in post-approval clinical trials. In the two clinical trials conducted, the most common side effects reported were headache, dizziness, nausea, high blood pressure, and fatigue. Droxidopa will have a boxed warning that increased blood pressure while lying down may cause stroke. The FDA also highlighted the importance of reminding patients to sleep with their head and upper body elevated, and to monitor blood pressure while laying down before and during treatment.

### New OTC Options Available for Allergies and Overactive Bladder

Nasacort Allergy 24 hour nasal spray and Oxytrol For Women transdermal system, two products previously available only as prescription products, will be available for patients to purchase OTC. Nasacort Allergy 24 hour for the treatment of seasonal or year-round nasal allergy symptoms is expected to be available for purchase this Spring, while Oxytrol for the management of overactive bladder symptoms in women is already available for purchase.

### Tretten Approved for Rare Blood Clotting Disorder

The FDA has approved Catridecacog, or coagulation factor XIII A-subunit recombinant (Tretten, Novo Nordisk), a blood coagulation factor that is the first drug approved to treat congenital factor XIII A-subunit deficiency. The efficacy of Catridecacog in treating this rare genetic disorder was evaluated in 77 patients with the disorder, and was shown to effectively prevent bleeding in 90% of patients given the recommended dose of 35 IU/kg. The most common side effects included headache, pain in extremities or at injection site, and increase in nonneutralizing antibodies.

Factor XIII in the last enzyme in the blood coagulation cascade that promotes clotting. The A-subunit has enzymatic activity and is carried by the B-subunit. When these subunits dissociate during coagulation, Factor A-subunit is activated and promotes cross-linking of fibrin. Deficiencies in Factor A-subunit results in patients having low levels of the active subunit, and therefore less stable clotting in injured tissue. Cartridecacog binds to free XIII factor B-subunit as a factor XIII A-subunit to strengthen clotting, prevent fibrinolysis, and enhance platelet adhesion.

### Pharmacist Involvement Improves Medication Reconciliation

Involving pharmacists in medication reconciliation was shown to improve the success of two programs according to recent studies presented at the American Society of Health-Systems Pharmacists 2013 Midyear meeting. In the first study, pharmacists interviewed patients admitted to the emergency department from September 2012 to March 2013 about their medication use. The pharmacists often checked this information with the patient's outpatient pharmacy, family members, and/or physician, then updated the patient's medical record to reflect medication changes and recommendations for further changes in therapy. This study found that when pharmacists completed these tasks, 94.2% of medication lists at admission were accurate with 0.07 errors per patient, compared to 32.3% accuracy and 2.94 errors per patient before the study was conducted. For discharge medication lists, 25% were accurate when completed by a pharmacist compared to 16.7% prior to the study.

The second study compared medication reconciliation by pharmacists in a hospital where nurses normally complete this task. The study found improvements when pharmacists completed the reconciliation, with 50 errors found and an average of 3.3 medication adjustments per patient. The most common errors were incorrect dose, route and formulation, accounting for 68% of errors. Missing medication accounted for 18% of errors. The two pharmacists completing the medication adherence spent an average of 39 minutes per patient completing the task.

The results from both studies highlight the important role pharmacists can play in improving medication reconciliation programs.

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