Vermont Pharmacist Association
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Building One Voice for Pharmacy!

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Marci Wood, Editor

Vermont News

VPA Immunization Program – Do You Have Your CE Credits?

The VPA will hold a CE event on Saturday, October 22nd from 8 AM to 1:30 PM. Cost is $100 for pharmacists, $35 for technicians, and free for student members. VPA members and non-members are welcome. Please see below for the full agenda. More information and online registration is available on the VPA website.

PROGRAM AGENDA
Saturday, October 22, 2016

8:00 – 9:00 AM	**Registration, Continental Breakfast, Exhibits, Welcome**
9:00 – 10:30 AM	**Blood Borne Pathogens and Universal Precautions** Monica Raymond, RN, MPH, MS Infection Preventionist I University of Vermont Medical Center ***At the completion of this activity, the participant will be able to:*** 1. Define universal precautions. 2. Identify at least 3 components of a blood borne pathogen exposure control plan. 3. Describe at least 2 engineering controls for preventing blood borne pathogen exposure. 4. List at least 3 steps to be taken after a BBP exposure has occurred.
10:30 – 11:00 AM	**Break and Exhibits**
11:00 AM – 12:30 PM	**Update on ACIP Recommendations and Immunization Controversies** Emily Sutton, PharmD Assistant Professor, Department of Pharmacy Practice Albany College of Pharmacy and Health Sciences – Colchester, VT ***At the completion of this activity, the participant will be able to:*** 1. Recognize the 2016-2017 flu season recommendations and other recent vaccine recommendations from the Advisory Committee on Immunization Practices (ACIP) 2. Identify the recent controversies associated with immunizations, including intranasal flu vaccine and reports of HPV vaccine syndrome 3. Describe how to use of the Vaccine Adverse Event Reporting System (VAERS) 4. Explain how to communicate with parents who have concerns about childhood vaccines
12:30 – 1:30 PM	**Business Meeting**
1:30PM	**Adjourn**

VPA Fall Social Event

Vermont pharmacists and Albany College of Pharmacy students gathered at Idletyme Brewery in Stowe. The evening was filled with good food, drinks, and conversation. Watch for future social events to be held by the VPA in the future. Thanks to all who attended and made the event a success.

Pharmacy Business on the Rise in Vermont

A recent news story by WCAX highlighted increasing pharmacy business in Vermont, highlighting VPA Board member Lynne Verzina who discussed the role of independent pharmacies and potential competition from larger chains. The full article and video of the news story can be found on the WCAX website.

Colchester Rite Aid Pharmacy Robbed

The Rite Aid on Prim Road was robbed on September 12th by a man who entered the pharmacy and demanded narcotics. The suspect was described as a white male, 5'8"-5'10", and was wearing a Switchback baseball cap, dark shorts, and a gray pullover.

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Pharmacies and the VT Immunization Registry

Did you know that 34% of Vermont pharmacies are now reporting immunizations to the Vermont Immunization Registry? We have just released a data brief describing the Registry's experience with pharmacy administered immunizations, and we enclose a link to it here for your convenience. You can also find it on the Vermont Immunization Registry home page.

Remember that the Immunization Registry can provide useful information about immunizations that your patient may have already received elsewhere. Pharmacists, like other VT health care providers, may apply for secure access to the Registry.
For more information about accessing the Registry, call our support line at (888) 688-4667, or email us at IMR@vermont.gov.
For more information about reporting requirements, or sending data to us, please contact me.

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Upcoming Board of Pharmacy Meeting

The next meeting of the Board of Pharmacy will be held at 9 AM on Wednesday, October 26th. The meeting will be held on the 3rd floor of the City Center, 89 Main Street in Montpelier.

National Pharmacy News

Legislation to Ban DIR Fees Introduced in House and Senate

Legislation introduced with the goal of increasing transparency and accuracy of Medicare Part D spending and reporting, and also banning direct and indirect remuneration (DIR) fees after pharmacies fill prescriptions, has received bi-partisan support in both the House and Senate. The house bill, titled “Improving Transparency and Accuracy in Medicare Part D Spending Act”, was introduced nine republican and democrat representatives, including Peter Welch. Four senators introduced companion legislation to this bill. This legislation represents a step in banning DIR fees and improving transparency, and would additionally lower beneficiary cost-sharing when prescriptions are filled without increasing Medicare Part D costs.

FDA Bans Certain Antibacterial Soaps

Soaps with certain active ingredients used as antiseptics can no longer be marketed, according to the FDA. The ruling applies to products containing triclosan, triclocarban, and 17 other active ingredients due to lack of evidence these products are safe for long-term daily use or more effective than plain soap and water in preventing illness or spread of infections. The FDA notes this rule doesn’t apply to use of antibacterial products used in the healthcare setting. Manufacturers have one year to comply with the FDA’s final rule by removing products from the market or reformulating them to remove antibacterial active ingredients.

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Drug Linked to Recent Overdoses Poses Risk of Fatality in Very Low Doses

Lacing drugs of abuse with synthetic drugs is leading to increased risk of overdose nationwide. Carfentanil, which is often used to tranquilize livestock and elephants, but has no use in humans, has been linked to recent overdose deaths in Ohio, Indiana, Kentucky, and West Virginia. The drug is as much as 100 times more potent than fentanyl, leading to death in exposures to amounts smaller than a snowflake. Toxicology and drug abuse specialists believe carfentanil is being manufactured in China or Mexico, making its way in heroin shipments to areas where it has been linked to overdoses. Due to the potency of this drug and risk of overdose for law enforcement if exposed to very small amounts, field testing powders at overdose scenes has stopped in some areas and law enforcement are carrying naloxone to use themselves in the event of an exposure.

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Oxycodone with Abuse-Deterrent Properties Approved

Troxyca ER (oxycodone and naltrexone, Pfizer) has received approval from the FDA to treat severe around-the-clock pain. This is the first oxycodone formulation approved with abuse-deterrent properties described in the product’s labeling. The extended release capsules of oxycodone which surround sequestered naltrexone. When taken as directed, the naltrexone remains sequestered however if the pellets are crushed, the naltrexone is released and counters the effects of oxycodone.

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FDA Grants Accelerated Approval to First Drug for DMD

The FDA has approved Exondys 51 (eteplirsen, Sarepta Therapeutics) injection, the first drug to receive approval for treatment of Duchenne muscular dystrophy (DMD). DMD is a rare genetic disorder that causes progressive muscle deterioration and weakness, with symptoms usually seen between three and five years of age. It primarily affects people with a known family history and is most often seen in males, occurring in approximately one out of every 3,600 male infants worldwide. Life expectancy and disease severity vary, however patients usually live to be in their 20s or 30s.

Exondys 51 is indicated for patients who have a confirmed mutation of the dystrophin gene with exon 51 skipping, which affects about 13 percent of the population with DMD. It was approved via the FDA's accelerated pathway for drugs that treat serious or life-threatening diseases. The FDA determined that data submitted demonstrated an increase in dystrophin production that is reasonably likely to predict clinical benefit in some patients with DMD who have a confirmed mutation of the dystrophin gene. However, some controversy has existed over this approval, as the FDA previously decided against approval earlier this year based on questions of the drug's efficacy. The study used to determine the drug's approval included only 12 male patients, but the FDA is requiring the drug manufacturer to conduct a larger study to further study the drug's efficacy in improving movement and function.

Read more

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