



Indian Health Service National Pharmacy and Therapeutics Committee



NPTC Updates September 2011

The IHS National Pharmacy and Therapeutics Committee (NPTC) met in the Billings Area, September 7-8, 2011. This meeting had representation from 10 of our 12 IHS Areas. The IHS Immunization Program Manager and the IHS National Anticoagulation Training Program Coordinator served as subject matter experts at the meeting and provided valuable insight into the therapeutic management for our topics. The meeting also included a PHS Officer representing the DoD Pharmacoeconomic Center (PEC). The VA also connected via teleconference. The DoD and VA each reviewed items that they are working on to keep us updated on formulary proceedings and provided valuable input as their agencies have reviewed some of the topics discussed. The NPTC continues to appreciate the relationship and opportunities to collaborate with the VA and DoD-PEC,

This meeting discussed various topics relevant to the IHS patient population. Topics included: anticoagulant update, outpatient venous thromboembolism (VTE) prophylaxis, follow-up of ophthalmic prostaglandin class utilization, follow-up of inhaled anticholinergics for chronic obstructive pulmonary disease and a discussion of the Advisory Committee for Immunization Practices (ACIP) recommended adult vaccines.

The resulting action from the meeting was as follows:

1. From the anticoagulant update discussion, no modifications were made to the NCF. However, the committee requested a "1-pager" to be developed to discuss the place in therapy for dabigatran.
2. The discussion of outpatient VTE prophylaxis included a clinical and pharmacoeconomic discussion of the available agents. The committee **ADDED** a low-molecular weight heparin (any) to the NCF due to its clinical benefit in preventing VTE and the multiple indications for which LMWHs can be used. The committee also requested a "1-pager" to be developed to discuss the place in therapy for the other available agents.
3. Utilization data for the ophthalmic prostaglandin class of agents was reviewed at this meeting. These agents have been deemed clinically equivalent. In April 2011, NPTC removed the closed-class status for these agents. There has been increased utilization of the generic latanoprost product and travoprost still maintains substantial use. Based upon the clinical equivalency between agents, the increased utilization of latanoprost and the pharmacoeconomic advantages of the travoprost and latanoprost generic, the committee modified the NCF to **ADD** an ophthalmic prostaglandin analogue (any) to the NCF.
4. The inhaled anticholinergic agents for COPD were again discussed with a brief clinical introduction based upon the clinical review in July and also included pharmacoeconomic data. Because of the safety, clinical and pharmacoeconomic data, the NPTC **REMOVED** salmeterol from the NCF and **ADDED** tiotropium to the NCF. A "1-pager" will be developed and disseminated addressing these modifications.
5. The IHS Immunization Program Manager provided a clinical presentation over the ACIP recommended vaccines for adults. Because these agents are deemed standard of care and core to the provision of public health, the NPTC **ADDED** all ACIP recommended vaccines for routine use (children and adults) in accordance with ACIP guidelines to the NCF.

The next meeting will be a teleconference December 15, 2011. The anticipated agenda will include area cost avoidance analysis, area and leadership reports and a follow-up discussion over the progestin containing intrauterine device.

If you would like to recommend a topic for future NPTC discussion, please send an email at IHSNPTC1@ihs.gov. For more information about the NPTC, please visit the [NPTC website](#).