



INDIAN HEALTH SERVICE
National Pharmacy & Therapeutics Committee
****Spring 2025 NPTC Meeting Update****
=May 2025=



The Indian Health Service (IHS) National Pharmacy and Therapeutics Committee (NPTC) held its Spring 2025 meeting on April 29-30th, 2025 in Rockville, MD. Eleven IHS Areas were represented. Dr. Jonathan Iralu, MD, IHS Chief Clinical Consultant (CCC) for Infectious Diseases and LCDR Colin Smith, MD, IHS Deputy CCC for Psychiatry provided subject matter expertise during the meeting. Acting Director Smith and Acting Deputy Director Laroche also met with the committee. Affiliates from the U.S. Veterans Health Administration, Department of Defense, Federal Bureau of Prisons, and Coast Guard provided information on formulary updates, clinical experiences, and meeting topics from their respective agencies. The NPTC values the relationships with executive leadership, field experts and subject matter experts and appreciates the opportunity to host this formulary management meeting at IHS Headquarters.

The Spring 2025 Meeting agenda included clinical reviews of (1) Hepatitis C Infection & Elimination Efforts, (2) Adult ADHD, (3) Tuberculosis, (4) Parkinson's Disease, (5) Short-acting Atypical Antipsychotic Agents, and (6) Long-acting Injectable Atypical Antipsychotic Agents.

The resulting action(s) from the NPTC meeting were as follows:

1. A pharmacotherapeutic review of Chronic Hepatitis C Virus Infection & Elimination Efforts was provided. *Medication(s) listed on the IHS National Core Formulary (NCF) relevant to this review include(s) glecaprevir/pibrentasvir (Mavyret®), ledipasvir/sofosbuvir (Harvoni®), and sofosbuvir/velpatasvir (Epclusa®).* Guidelines from the American Association for the Study of Liver Disease & Infectious Diseases Society of America, University of Washington, and World Health Organization were detailed. Agency procurement and pharmacovigilance data were also shared, which provided significant insight on agency utilization. Following review and deliberation, the NPTC voted to **REMOVE ledipasvir/sofosbuvir (Harvoni®)** from the NCF.
2. A pharmacotherapeutic review of Adult ADHD was also delivered to the NPTC. *This was the initial review of this topic, and as such, there were no medication(s) listed on the IHS NCF for this condition. However, the NPTC previously reviewed ADHD in pediatric patients which resulted in NCF additions of dextroamphetamine/amphetamine and methylphenidate, in both immediate and extended-release formulations, and atomoxetine. These medications were designated for use in pediatric patients only.* Both U.S. and international guidance from the American Academy of Family Physicians, Veterans Health Administration, U.K. National Institute of Health and Care Excellence, and the Canadian ADHD Alliance were shared. IHS pharmacovigilance and drug procurement trends added scope to the review. As a result, the NPTC voted to **REMOVE the current guidance language "for pediatric use only" affiliated with ADHD medications** on the NCF.
3. A clinical update in the treatment of Tuberculosis (TB) was presented at the meeting. *Medication(s) listed on the NCF relevant to this review include(s) ethambutol, isoniazid, pyrazinamide, rifampin, and rifapentine.* The Committee last reviewed this topic in April 2024, and as such, focused on recent literature and treatment updates in latent and active TB disease. Outcomes from published studies treating drug-sensitive and resistance TB were also showcased. Agency data on pharmacovigilance and procurement were included. Ultimately, the NPTC voted to **ADD moxifloxacin "for TB treatment only, in consultation with a TB specialist"** to the NCF.

4. A pharmacotherapeutic review of Parkinson's Disease was also detailed. *Medication(s) listed on the NCF relevant to this review include(s) carbidopa/levodopa (immediate-release) and pramipexole.* Notable guidelines reviewed include those from the American Academy of Neurology and the U.K. National Institute for Health and Care Excellence. Clinical questions and study findings surrounding the use, timing, duration, etc. of established medications in Parkinson's Disease treatment served as the focus of the review. Analyses of IHS-wide pharmacovigilance and pharmacoeconomic utilization trends were insightful. As a result, the NPTC made **no modifications** to the NCF.

5. A drug class review of Short-acting Oral Atypical Antipsychotics was presented, with emphasis on second-generation medications used primarily in patients with schizophrenia and bipolar disorder. *Medication(s) listed on the NCF relevant to this review include(s) "any product" within the class of short-acting oral atypical antipsychotic agents.* Recent recommendations (safety and efficacy) from the American Psychiatric Association and U.S. Veterans Health Administration/Department of Defense, in concert with numerous international medical organizations were highlighted. Pharmacovigilance and pharmacoeconomic data trends relative to IHS were discussed in detail. Following review and deliberation, the NPTC made **no modifications** to the NCF.

6. Lastly, a drug class review of Long-acting Injectable Atypical Antipsychotics was provided to the Committee. *Medication(s) listed on the NCF relevant to this review include(s) aripiprazole lauroxil and haloperidol decanoate.* Guidelines from the American Psychiatric Association, together with randomized controlled trials (RCTs) evaluating safety and efficacy within the drug class were presented. Supplemental literature was shared which offered comparative, drug-specific data in terms of tolerability, monitoring, adverse effects, etc. Agency pharmacovigilance and pharmacoeconomic data were detailed and were particularly helpful in the review. Ultimately, the NPTC voted to (1) **MODIFY current NCF language to now read as "Injectable aripiprazole (any formulation) -OR- injectable paliperidone (any formulation)"** and (2) **REMOVE haloperidol decanoate** from the NCF.

**The next scheduled NPTC meeting will be the Summer 2025 Meeting on August 5-6th, 2025 in Minneapolis, MN. The meeting agenda will include reviews of (1) Infectious Vulvovaginitis, (2) Mineralocorticoid Receptor Antagonists, (3) Multiple Sclerosis, (4) Pneumococcal Vaccines (Adults), (5) RSV Monoclonal Antibodies, and (6) Zoonotic Infections (Avian Flu, Plague, Rabies)*

CLICK HERE --- >>> [Submit Feedback for upcoming NPTC Scheduled Meeting Topics:](#)

The purpose of this form is to collect feedback and/or recommendations regarding scheduled agenda topics for upcoming National Pharmacy and Therapeutics Committee meetings from Indian Health Service (IHS) clinicians working at Federal, Tribal or Urban Indian Organization programs/sites/facilities. Input on topics for upcoming review can include potential medications for addition or deletion from the IHS National Core Formulary (NCF).

 For more information about the NPTC or the National Core Formulary, please visit the [NPTC website](#).
