



INDIAN HEALTH SERVICE
National Pharmacy & Therapeutics Committee
****Summer 2026 NPTC Meeting Update****
=August 2026=



The Indian Health Service (IHS) National Pharmacy and Therapeutics Committee (NPTC) held its Summer 2026 meeting on August 4-5th, 2026 in Albuquerque, NM. Ten IHS Areas were represented. CDR Tina Pattara-Lau, MD, IHS Maternal Child Health Consultant, provided subject matter expertise during the meeting. Affiliates from the United States Bureau of Prisons, Department of War and Coast Guard provided information on formulary updates, clinical experiences, and meeting topics from their respective agencies. The NPTC values the relationships with federal colleagues, field experts, and subject matter experts and appreciates the opportunity to host this formulary management meeting in the Albuquerque IHS Area Office.

The Summer 2026 Meeting agenda included clinical reviews of (1) Allergic Rhinitis, (2) Chronic Obstructive Pulmonary Disease (COPD) Guidelines, (3) Disorders of Menstruation, (4) Hospice and Palliative Care, (5) Glucagon-Like Peptide-1 (GLP-1) Receptor Agonists, and (6) Gabapentinoids.

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

1. A pharmacotherapeutic review of Allergic Rhinitis was provided. *Medication(s) listed on the IHS National Core Formulary (NCF) relevant to this review include(s) any intranasal corticosteroid, any long-acting oral second-generation H2 antagonist, and montelukast.* Guidelines from both the American Academy of Allergy, Asthma & Immunology and the American College of Allergy, Asthma, & Immunology were detailed. Published outcomes from multiple network meta-analyses were central to this clinical analysis. Agency procurement were also shared. Following review and deliberation, the NPTC voted to **REMOVE montelukast** from the NCF.
2. The Committee also reviewed updates to evidence-based COPD Management Guidelines, including recommendations for diagnosis, pharmacologic treatment, exacerbation prevention, and appropriate selection of inhaled therapies. *Medication(s) listed on the NCF relevant to this review include(s) budesonide/formoterol, fluticasone/salmeterol, tiotropium, and umeclidinium/vilanterol.* Discussion emphasized individualized treatment, optimization of inhaler selection and technique, smoking cessation, vaccination, and non-pharmacologic interventions. The Committee also reviewed Agency utilization trends and value-based pharmacoeconomic opportunities, in relation to guideline recommendations. As a result of the guideline and formulary review, the NPTC voted to **ADD budesonide, glycopyrrolate, formoterol (triple combination inhaler)** to the NCF.
3. A pharmacotherapeutic review of Disorders of Menstruation, with emphasis on abnormal uterine bleeding, was presented. *Medication(s) listed on the NCF relevant to this review include(s) combined hormonal contraceptives, levonorgestrel intrauterine devices, medroxyprogesterone, progestin-only formulations, and various nonsteroidal anti-inflammatory drugs.* Current guidance from the American College of Obstetricians and Gynecologists and the FIGO PALM-COEIN classification system was reviewed, emphasizing evidence-based diagnosis and both acute and chronic treatment strategies. Agency utilization and therapeutic considerations were also discussed. Following deliberation, the NPTC made **no modifications** to the NCF.

4. The Committee reviewed pharmacologic management strategies for Hospice and Palliative Care, with focus on aligning pharmacotherapy with patient-centered goals of comfort, symptom relief, and quality of life. The NPTC further reviewed the role of non-pharmacologic interventions, deprescribing of medications no longer providing meaningful benefit, and medications with alternative routes when oral administration is no longer feasible. Following review of available evidence and current formulary options, the Committee concluded that the NCF adequately supports the pharmacologic management of hospice and palliative care patients. Accordingly, the NPTC made **no modifications** to the NCF.
5. A pharmacotherapeutic review of the GLP-1 Receptor Agonists was also delivered. *Medication(s) listed on the NCF relevant to this review include(s) specific subcutaneous semaglutide and tirzepatide formulations.* Recently approved and emerging oral GLP-1 therapies, including oral semaglutide and orforglipron, together with expanding indications for obesity, cardiovascular disease, chronic kidney disease, and metabolic dysfunction-associated steatohepatitis were reviewed. Agency utilization and procurement data provided value to the review. Following deliberation, the NPTC voted to (1) **REMOVE semaglutide and tirzepatide branded names**, (2) **MODIFY guidance language on semaglutide and tirzepatide** to now read as “When used for weight management, recommend local adoption of use criteria”, and (3) **ADD orforglipron** (with the same “weight management” guidance language above) to the NCF.
6. Lastly, a drug class review of the Gabapentinoids (i.e., gabapentin and pregabalin) was presented. *Medication(s) listed on the NCF relevant to this review include(s) gabapentin only.* Comparative evidence for gabapentin and pregabalin, current guideline recommendations, safety concerns, misuse potential, and prescribing considerations were evaluated. Federal and State controlled substance scheduling status and risks associated with concomitant opioid use were detailed. IHS pharmacoeconomic data added scope. Following deliberation, the NPTC voted to **REMOVE gabapentin** from the NCF.

**The next scheduled NPTC meeting will be the Fall 2026 Meeting on November 3-4th, 2026 in Oklahoma City, OK. The meeting agenda will include reviews of (1) Cardio-Kidney-Metabolic Syndrome, (2) Critical Literature Appraisal, (3) Gout Management, (4) Lipid Guidelines & PCSK9s, (5) Novel Antibiotic Agents, and (6) Venous Thromboembolism.*

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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](#).
