



National Pharmacy and Therapeutics Committee
NPTC Meeting Update
-August 2014-



The IHS National Pharmacy and Therapeutics Committee (NPTC) held its summer meeting August 5-6th, 2014 at the Oklahoma City Area IHS in Oklahoma City, OK. Representatives from 11 of the 12 IHS Areas were in attendance for this meeting. The DoD-PEB representative was unable to attend the meeting, however, the VA-PBM staff participated in Areas of their expertise. The NPTC continues to appreciate the relationships with experts from the field and with other government agencies. Additionally, the committee appreciated the opportunity to hold its meeting at the Oklahoma City Area Indian Health Service Office in Oklahoma City, OK.

The meeting had discussions on a variety of topics including a review of contemporary practice guidelines in the pharmacologic treatment of hypertension, erectile dysfunction and the role of phosphodiesterase-4 enzyme inhibitors in chronic obstructive pulmonary disease (COPD). The NPTC reviewed the use of angiotensin-converting enzyme inhibitors, angiotensin II receptor antagonists, calcium channel blocking agents, diuretics, beta-adrenergic blocking agents, phosphodiesterase-4 enzyme inhibitors and phosphodiesterase-5 enzyme inhibitors.

The resulting actions from the meeting were as follows:

1. A clinical presentation on the 2013 ESH/ESC, 2014 JNC 8, 2014 ASH/ISH, 2014 CHEP and 2013 AHA/ACC/CDC guidelines in the treatment of hypertension was provided. A utilization and procurement discussion was provided with IHS specific data. The medication classes reviewed included the guideline-preferred ACEIs, ARBs, CCBs, diuretics and BBs. A formulary brief will be developed and disseminated, providing updated guideline recommendations in the treatment of hypertension.
2. A clinical presentation on the use of angiotensin-converting enzyme inhibitors (ACEIs) in the treatment of hypertension was provided. A utilization and procurement discussion was provided with IHS specific data. All medications within the class were reviewed. Consensus among the guidelines supports that agents in this class are equally effective in the treatment of hypertension and are considered one of the first-line treatments. No specific modifications were made to the IHS NCF in this class. **Lisinopril remains the sole ACEI on the NCF.** Based on IHS specific data, a formulary brief will be developed and disseminated, providing guidance on the use of ACEIs in pregnant and women of child-bearing age in hypertension.
3. A clinical presentation on the use of angiotensin II receptor antagonists (ARBs) in the treatment of hypertension was provided. A utilization and procurement discussion was provided with IHS specific data. All medications within the class were reviewed. Consensus among the guidelines supports that agents in this class are equally effective in the treatment of hypertension and are considered one of the first-line treatments. No specific modifications were made to the IHS NCF in this class. **Losartan remains the sole ARB on the NCF.** A formulary brief will be developed and disseminated, providing recommendations on the use of ARBs in hypertension.
4. A clinical presentation on the use of calcium channel blocking agents (CCB) in the treatment of hypertension was provided. A utilization and procurement discussion was provided with IHS specific data. All medications within the class were reviewed. Consensus among the guidelines

supports that agents in this class are equally effective in the treatment of hypertension and are

considered one of the first-line treatments. Based on IHS specific utilization and procurement data, the NPTC **REMOVED nifedipine SA and REMOVED verapamil** from the NCF. Adverse events, current utilization, cost, drug-drug interactions and therapeutic duplicity contributed to the Committee's decision to remove the two agents. **With these changes, amlodipine and diltiazem remain on the NCF.** A formulary brief will be developed and disseminated, providing recommendations on CCBs in the treatment of hypertension.

5. A clinical presentation on the use of diuretic agents in the treatment of hypertension was provided. A utilization and procurement discussion was provided with IHS specific data. All medications within the class were reviewed. Although the thiazide diuretic class is recognized in all guidelines as first-line therapy for hypertension, there is no consensus on which agent is preferred. No specific modifications were made to the IHS NCF in this class. **Chlorthalidone, furosemide, hydrochlorothiazide and spironolactone remain on the NCF.** A formulary brief will be developed and disseminated, providing recommendations on the use of diuretics in hypertension.
6. A clinical class-review presentation on the use of beta-adrenergic blocking agents was provided in the treatment of hypertension and other various indications. A utilization and procurement discussion was provided with IHS specific data. All medications within the class were reviewed. The majority of current hypertensive guidelines support beta-adrenergic blocking agents in the treatment of hypertension as second-line treatments. Based on IHS utilization and procurement data, the NPTC **ADDED propranolol** to the NCF. Current IHS utilization and broad application of propranolol contributed to the Committee's decision. **With these changes, atenolol, carvedilol IR, metoprolol and propranolol remain on the NCF.** A formulary brief will be developed and disseminated, providing recommendations and specific emphasis on the second-line use of beta-adrenergic blocking agents in hypertension.
7. A clinical presentation on the use of phosphodiesterase-5 enzyme inhibitors (PDE5Is) in the treatment of erectile dysfunction was provided. A utilization and procurement discussion was provided with IHS specific data. All medications within the class were reviewed. No specific modifications were made to the IHS NCF in this class. A formulary brief will be developed and disseminated, providing recommendations for PDE5Is in the treatment of erectile dysfunction.
8. A clinical presentation over the use of phosphodiesterase-4 enzyme inhibitors (PDE4Is) in the treatment of COPD was provided. A utilization and procurement discussion was provided with IHS specific data. Medications reviewed in this class included roflumilast and cilomilast. No specific modifications were made to the IHS NCF in this class. A formulary brief will be developed and disseminated, providing recommendations for PDE4Is in the treatment of COPD.

The next meeting will be held via teleconference on November 13th, 2014. The agenda topics will include a review of the classification, diagnosis and treatment of epilepsy and the use of anti-epileptic medications in the management of epilepsy.

If you would like to recommend a topic for future NPTC discussion, please fill out the "[NPTC Formulary Review Request Form](#)" on the NPTC website or send an email at IHSNPTC1@ihs.gov. For more information about the NPTC, please visit the [NPTC website](#).