



**Indian Health Service**  
**National Pharmacy and Therapeutics Committee**  
**NPTC Winter Meeting Update**  
**-February 2017-**



The Indian Health Service (IHS) National Pharmacy and Therapeutics Committee (NPTC) held its winter meeting on February 7-8<sup>th</sup>, 2017 in Phoenix, AZ. Eleven of the 12 IHS Areas were represented. Two IHS endocrinologists (Michael Bryer-Ash, MD and Richard Arakaki, MD) were invited to serve as subject matter experts and both delivered presentations to the NPTC. Affiliates from the Department of Defense, Department of Veterans Affairs and Federal Bureau of Prisons provided information on their respective formulary updates, clinical experiences and future meeting topics. The NPTC continues to value the relationships with experts from the field and with our federal partners. Additionally, the NPTC appreciated the opportunity to host the meeting from the Phoenix Area IHS Office.

The NPTC received five presentations focusing on the management of Metabolic Syndrome and associated conditions including an overview of Metabolic Syndrome, insulin resistance and prediabetes, hyperlipidemia, non-alcoholic fatty liver disease and polycystic ovary syndrome. The NPTC also received a therapeutic class review of the sodium-glucose cotransporter 2 (SGLT2) inhibitors.

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

1. An introductory overview of Metabolic Syndrome was provided, detailing the NPTC on the defining criteria and epidemiology of metabolic syndrome along with its association with cardiovascular disease. Medication-specific treatment, preventive measures and limitations of metabolic syndrome as a disorder in clinical use were also thoroughly presented.
2. A clinical review of Insulin Resistance and Prediabetes was given describing the role of insulin resistance and risk factors associated with prediabetes. Medications used to manage prediabetes were reviewed, referencing literature and guidelines from the American Diabetes Association, American College of Cardiology/American Heart Association/The Obesity Society, the Cochrane Database and Diabetes Prevention Program. Relevant IHS medication utilization and procurement trends were also discussed. **Based on the NPTC review, no modifications were made to the National Core Formulary (NCF).** A formulary brief will be developed and disseminated, providing a review of guideline recommendations and literature findings.
3. A clinical review of Hyperlipidemia associated with metabolic syndrome was presented evaluating the evidence of statin and non-statin lipid lowering agents in patients with metabolic syndrome. Key clinical information from published literature (JAMA, NEJM, Cochrane Database) and current cholesterol management guidelines from the American College of Cardiology/American Heart Association and European Society of Cardiology/European Atherosclerosis Society were reviewed. Data trends on IHS medication utilization and procurement were also shared. As a result of the NPTC clinical and utilization analysis, **the NPTC (1.) added rosuvastatin, (2.) removed “fibrin acid derivative” and (3.) removed niacin extended release (Niaspan®) from the NCF.** A formulary brief describing the clinical recommendations and decision points resulting in the NCF modification will be developed and disseminated.

4. A clinical review of Non-alcoholic Fatty Liver Disease was delivered in concert with IHS data on relevant medication procurement and utilization. Diagnostic criteria, risk factors, epidemiologic data and selected pharmacotherapy were also presented. Reviews from the American College of Gastroenterology, American Gastroenterological Association, Cochrane Database, various randomized controlled trials and meta-analyses were evaluated. Based on clinical findings and NPTC discussion, **no modifications were made to the NCF**. A formulary brief detailing study outcomes and guideline recommendations will be developed and distributed.
5. A clinical review of Polycystic Ovary Syndrome was provided, addressing risk factors, diagnostic criteria and current therapies (mostly off-label). Available literature for review included numerous systematic reviews from the Cochrane Database. Recommendations from the Endocrine Society practice guidelines and the American College of Gynecology were systematically detailed. Agency utilization/procurement trends in conjunction with data from the IHS National Data Warehouse were also reviewed. As a result of the clinical review and NPTC discussion, **the NPTC added oral medroxyprogesterone to the NCF**. As is customary, a NPTC formulary brief will be developed and disseminated to the field.
6. A therapeutic class review of SGLT2 inhibitors (canagliflozin, dapagliflozin, empagliflozin) in the treatment of Type 2 diabetes mellitus was presented. Study outcomes and key clinical data on the safety and efficacy of SGLT2 inhibitors from published clinical trials were evaluated. Guideline recommendations covered in the discussion included those primarily from the 2017 American Diabetes Association (ADA). Recent meta-analyses exploring cardiovascular outcomes and additional safety and efficacy measures were also discussed. Currently, the NCF does not contain a SGLT2 inhibitor. Based on the NPTC evaluation, this review raised awareness of the need to conduct reviews of other classes of medications addressed in current ADA guidelines. The NPTC plans to conduct these reviews later in the year and reconsider potential changes to the NCF to meet the needs of our patient population. Regarding the class review of SGLT2 inhibitors, **no modifications were made to the NCF**. The NPTC will draft and distribute a formulary brief, defining key decisional points identified during the review.

\*The next NPTC meeting is scheduled for May 2-4<sup>th</sup>, 2017 in Portland, OR. The agenda will include comprehensive therapeutic reviews focusing on guidelines and pharmacotherapy for patients with heart failure. The NPTC will also receive an educational session during this meeting on Evidence-Based Medicine and Formulary Management principles provided by the Oregon Health & Sciences University.

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*If you would like to recommend a topic for future NPTC discussion, please go to the NPTC website and complete the [Formulary Request Form](#) or send an email at [IHSNPTC1@ihs.gov](mailto:IHSNPTC1@ihs.gov).*

*For more information about the NPTC, please visit the [NPTC website](#).*