



Indian Health Service
National Pharmacy and Therapeutics Committee
2018 NPTC Spring Meeting (UPDATE)
-May 2018-



The Indian Health Service (IHS) National Pharmacy and Therapeutics Committee (NPTC) held its spring meeting on May 8-9th, 2018 in Portland, OR. All 12 IHS Areas were represented. Dr. Lawrence Fine, MD, Chief, Clinical Applications and Prevention Branch at the National Institute of Health, served as a subject matter expert and clinical speaker during the meeting. Affiliates from the Veterans Administration, Department of Defense, Federal Bureau of Prisons and U.S. Coast Guard provided information on formulary updates, clinical experiences and future meeting topics from their respective agencies. The NPTC values the relationships with field experts and federal partners and appreciates the opportunity to host the meeting from the Portland Area IHS Office.

The NPTC presentations consisted of comprehensive reviews of treatment(s) for Gastroparesis, Gastroesophageal Reflux Disease & Peptic Ulcer Disease, Inflammatory Bowel Disease (Crohn's and Ulcerative Colitis), and Irritable Bowel Syndrome. A review of recent Hypertension Guidelines was also provided, along with a drug class review of Pancreatic Enzymes in Chronic Pancreatitis.

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

1. A therapeutic review of Gastroparesis and associated pharmacotherapy for both treatment (*prokinetics*) and symptom control (*antiemetics, tricyclic antidepressants*) was presented. Medication-specific studies, meta-analyses, and clinical practices guidelines from the American College of Gastroenterology (ACG), American Diabetes Association, American Association of Clinical Endocrinologists/American College of Endocrinology, and National Institute for Health and Care Excellence (NICE) were evaluated. Agency-specific pharmacoeconomic and pharmacoepidemiologic analyses were also provided. **Ultimately, the NPTC made no modifications to the IHS National Core Formulary (NCF).** More information and decisional details can be found in the upcoming NPTC Formulary Brief.
2. A therapeutic review of Gastroesophageal Reflux Disease (GERD) & Peptic Ulcer Disease (PUD) and their respective treatment(s) was given, with particular focus on proton pump inhibitors and histamine-2 receptor antagonists. Meta-analyses and guidelines from the NICE, ACG, World Gastroenterology Organization, and American Gastroenterology Association (AGA) formed the basis of the clinical review. Notable adverse events and drug-drug interactions with both classes of medications were analyzed in detail. Current data trends on IHS drug procurement & utilization as well as information from the National Data Warehouse (NDW) was added for perspective. **Ultimately, the NPTC made no modifications to the IHS NCF.** More information and decisional details can be found in the upcoming NPTC Formulary Brief.
3. A therapeutic review of Inflammatory Bowel Disease (Crohn's Disease and/or Ulcerative Colitis) and relevant pharmacotherapy for both induction and maintenance of remission was provided. Practice guidelines from the ACG and numerous Cochrane Reviews were evaluated in depth. Additional insight was gained through review of IHS-specific procurement and NDW data. Of note, clinical studies of the various, available biosimilar agents for Crohn's Disease were also explored. **Ultimately, the NPTC made no modifications to the IHS NCF.** More information and key decisional details can be found in the upcoming NPTC Formulary Brief.

4. A therapeutic review of Irritable Bowel Syndrome (IBS) and its symptomatic treatment (constipation, diarrhea and abdominal pain) was delivered to the NPTC. Pharmacologic options reviewed for the management of IBS-*diarrhea* included loperamide, bile acid sequestrants, serotonergic agents, opioid receptor agonists, and various classes of both antidepressants and antibiotics. Pharmacologic options for the management of IBS-*constipation* review included laxatives, guanylate cyclase-C agonists, chloride channel activators and the 5-HT4 receptor agonist, tegaserod. Cochrane Reviews, meta-analyses and guidelines from the NICE and AGA were scrutinized. Pharmacoeconomic and pharmacoepidemiologic data paralleled with NPTC provider experiences offered considerable perspective in the NCF decision. **The NPTC voted to ADD the following: (1) Loperamide, (2) “Polyethylene glycol, any” and (3) Dicyclomine to the IHS NCF.** More information and details can be found in the upcoming NPTC Formulary Brief.

5. A therapeutic overview of the 2017 Hypertension guidelines from the American Heart Association and American College of Cardiology was given, comparing recent clinical recommendations to other published, organizational practice guidelines. Findings and recommendations from the SPRINT trial, the JNC 8 and the 2017 American College of Physicians and the American Academy of Family Physicians guidelines were detailed. The comprehensive overview focused on foundational data establishing the various blood pressure goals, the importance of correctly measuring blood pressure and subsequent adverse events. **The NPTC made no modifications to the IHS NCF.** More information and decisional details can be found in the upcoming NPTC Formulary Brief.

6. A drug class review of Pancreatic Enzymes for chronic pancreatitis was presented. Multiple formulations (*Creon*®, *Pancreaze*®, *Pertzye*®, *Viokace*® and *Zenpep*®) were compared for potential safety, efficacy and cost advantages. Data on IHS procurement and utilization, in concert with NDW data, and findings from partnering federal agencies were considered in the decision. Literature reviews from several, recent meta-analyses and Cochrane Reviews provided limited value. **Ultimately, the NPTC made no modifications to the IHS NCF.** More information and decisional details can be found in the upcoming NPTC Formulary Brief.

7. A pharmaco-economic presentation was presented regarding the current NCF branded estrogen vaginal cream, Premarin®. The current availability of other branded and generic products offers improved cost avoidance to the IHS. Following the review, **the NPTC voted to: (1) REMOVE the branded Premarin® estrogen vaginal cream and (2) ADD “estrogen vaginal cream, any” to the IHS NCF.**

***The next NPTC meeting will be the 2018 Summer Meeting, scheduled for July 31-August 1, 2018 in Rockville, MD. The agenda will include four (4) therapeutic reviews including Treatments for Opioid Use Disorder, Seasonal Allergic Rhinitis, Treatments for Obesity and HIV Pre-exposure prophylaxis. A drug class review of the Phosphodiesterase-5 inhibitors will also be provided.*

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