

Indian Health Service National Pharmacy and Therapeutics Committee <u>NPTC Fall 2017 Meeting Update</u> -November 2017-



The Indian Health Service (IHS) National Pharmacy and Therapeutics Committee (NPTC) held its Fall teleconference meeting on November 2nd, 2017. Eleven of 12 IHS Areas were represented and CDR Dena Wilson, MD, the IHS Chief Clinical Consultant for Cardiology also attended as an invited guest. Affiliates from the Veterans Administration, Department of Defense and Federal Bureau of Prisons provided information on formulary updates, clinical experiences and future meeting topics from their respective agencies. The NPTC values these relationships with field experts and federal partners and appreciates the opportunity to host the meeting from the Oklahoma City Area IHS Office.

The NPTC presentations focused on antithrombotic pharmacotherapy for patients with various arterial and venous thromboembolic conditions. A class review of the direct oral anticoagulants (DOACs) was divided into two sections, covering their role in <u>atrial fibrillation</u> and <u>venous thromboembolism</u>.

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

- 1. Two separate drug class reviews of the <u>DOACs (apixaban, dabigatran, edoxaban, rivaroxaban)</u> in <u>atrial fibrillation (AF)</u> and <u>venous thromboembolism</u> (VTE) were provided, with particular attention given to intra-class comparisons of safety, tolerability and efficacy/effectiveness outcomes. The role and place in therapy of DOACs within both AF and VTE clinical guidelines was also reviewed and safety concerns were described in detail. Critical analysis of trial findings and critique of supplementary data helped the NPTC draw conclusions on specific agents within the class. Pharmacoeconomic data, including procurement trends and utilization, were also included for added perspective. Numerous systematic reviews and safety analyses comparing the net benefit(s) of DOACs led to the NPTC's decision to ADD apixaban to the NCF. A NPTC formulary brief describing literature findings, guideline recommendations and practice guidance will be developed and disseminated.
- 2. A brief summary of currently available <u>albuterol metered dose inhaler (MDI) products</u> was provided to the NPTC. Fluctuating products, availability and pricing have placed undue financial burden on IHS facilities currently utilizing the albuterol product (Proventil[®]) named to the National Core Formulary. A review of albuterol product availability, equivalency and cost parity within the agency dictated a change in the albuterol product on the National Core Formulary. The committee REMOVED the branded albuterol product (Proventil[®]) and ADDED "albuterol metered dose inhaler (MDI), any" to the National Core Formulary.

**The Winter 2018 NPTC meeting is scheduled for February 6-7th, 2017 in Phoenix, AZ. Agenda topics currently include an overview of <u>Chronic Kidney Disease-Mineral and Bone Disorder</u>, a class review of <u>Phosphate Binders</u>, treatment of <u>Diabetic Neuropathy</u>, an overview of <u>Glaucoma</u>, a class review of the <u>Ophthalmic Prostaglandin Analogues</u> and treatment/management of <u>Psoriasis</u>.

If you would like to recommend a topic for future NPTC discussion, please send an email to <u>IHSNPTC1@ihs.gov</u>.