



PHARMACY BULLETIN

EDITION 16 ISSUE 1







PPUKM

2015








RESULTS OF JKTU 4/2014 MEETING

JKTU 4/2014 meeting was recently conducted on 22nd December 2014. Results of the meeting will be implemented on **1st January 2015** for **Add-On Drugs**; while the **NEWLY** approved drugs will start on **1st February 2015**.

No	Drugs	Indication & Dose	PPUKM Policy
1	Lignocaine 8MG lozenges (TRACHISAN®)	Indication: Short term local treatment of pain associated with sore throat in non-purulent infections Dose : One tab 2 hourly. Max: SIX lozenges per day for 3 days only.	Prescriber: B: Medical Officers & above 
2	Apixaban 2.5mg & 5mg tab (ELIQUIS®) 	Indication: Prevention of stroke and systemic embolism in adult patients with non-valvular atrial fibrillation, with one or more risk factors (prior stroke or transient ischaemic attack (TIA); age >75 years; hypertension; diabetes mellitus; symptomatic heart failure). Dose: 5mg orally TWICE daily	Prescriber: A*: Cardiologists & Neurologists only. Using Coupon System in Kedai Farmasi. Patient to pay flat rate RM100/month similarly like Dabigatran and Rivaroxaban 15mg & 20mg tab. Maximum usage: Additional 150 coupons on top of the existing 150 coupons [Total of 300 coupons for Novel Oral Anticoagulants (NOACs) : Pradaxa, Xarelto & Eliquis].
3	Tacrolimus 0.1% Ointment (PROTOPIC®) 	Indication: For Short term and intermittent long term therapy in moderate to severe atopic dermatitis (eczema) in patients who are not adequately responsive to conventional therapies Dose: Restricted to Facial and flexural eczema. ONE time application per NIGHT	Prescriber: A*: Dermatologists only Maximum usage : 100 patients per year. Supply : 1 tube of Protopic 0.1% Oint per month. Maximum usage : 4 months only. If patient requires more, patient has to buy from Kedai Farmasi. <i>*Betamethasone plus Neomycin Cream is taken out from the formulary.</i>
4	Infliximab 100mg vial for IV infusion (REMICADE®) 	Current indication: Rheumatoid Arthritis NEWLY added indications: i. Rheumatoid Arthritis: Induction 3mg/kg at week 0, 2 & 6. Then maintenance 3mg/kg every 8 weeks. After 22 weeks, dose can be increased to 10mg/kg ii. Moderate to severe crohn's disease: 5mg/kg as a single IV Infusion over 2 hrs at 0, 2, 6 wk. Maintenance : 5mg/kg 8 wkly thereafter. May be increased to 10mg/kg iii. Fistulizing Crohn's disease: 5mg/kg IV over 2 hrs, followed by 5mg/kg doses at 2 & 6 wk after the 1 st infusion iv. Ulcerative Colitis: 5mg/kg IV infusion over 2 hr, followed by 5mg/kg at 2 & 6 wk after 1 st infusion, then 6-8 wkly thereafter.	Prescriber: A*: Rheumatologist & Gastroenterologists only Maximum usage: Rheumatology : 4 patients/year (RM180,000/year) Gastroenterology: 4 patients/year (RM250,000/year)
5	(a) Linagliptin 5mg (TRAJENTA®) (b) Linagliptin/ Metformin 2.5/500mg, 2.5/850mg, 2.5/1000mg (TRAJENTA DUO®)	Indication: For adult patients with type 2 diabetes mellitus (T2DM) to improve glycaemic control in conjunction with diet and exercise, as monotherapy or as add on to metformin, sulphonylureas, or metformin plus sulphonylureas Dose: (a) Trajenta : 5mg orally ONCE daily (b) Trajenta-DUO: 5mg orally TWICE daily	Prescriber: Endocrinologists only Maximum usage: RM500,000 per year. Share existing budget with Sitagliptin, Saxagliptin and Vildagliptin. (a)  (b) 

Announcement from Pharmacy Department

Newly Added Indication/Strength/Prescriber

No	Drugs	Indication & Dose	PPUKM Policy
1	Ranibizumab 10mg/ml (LUCENTIS®)	Add On Patients : 2 patients Dose: a) Age-related macular degeneration : 12 injections per year b) Diabetic macular edema (DME): 6-9 inj/year	Patients must be referred to the Social Welfare Department first to ensure patient genuinely cant afford to pay. 
2	Elemental Iron 105mg + Vitamin C 500mg + Vitamin B-complex + Folic Acid (Iberet –Folic 500®)	Add On Prescriber: B : Nephrology Medical Officers and above Existing prescriber: O&G Medical Officers only Dose : 1 tab daily	Allocation increased from RM 45,000 to RM 75,000. 
3	Tramadol 37.5 + Paracetamol 325 tablet (ULTRACET®)	Add On: Duration Dose: 3-6 tabs daily 	Prescriber: A* : Cardiothoracic Surgeons, Anesthesiologists, Pain Specialists/Anesthetists, Palliative Care Specialist, Otorhinolaryngologists, Orthopedic Specialists, Surgeons & O&G Specialists. Inpatient : Maximum supply of 1 week (FOC) Discharge : Maximum supply of 1 week (FOC)
4	Fentanyl Transdermal 12mcg/hr, 25mcg/hr, 50mcg/hr Patch (DUROGESIC®)	Add On : Budget Dose: 1 patch every 72 hours. 	Maximum usage: Increased from RM205,000 to RM250,000.00
5	Asenapine 5mg & 10mg Sublingual Tablet (SAPHRIS®)	Add On : 50 new patients. Dose: Bipolar disorder, acute mixed or manic episodes: <i>monotherapy</i> , 10 mg SUBLINGUALLY twice daily; <i>adjunctive therapy</i> , 5 mg SUBLINGUALLY BD with either lithium or valproate. Schizophrenia, acute treatment: 5 mg SUBLINGUALLY BD; Max: 10mg twice daily	Prescriber: A* : Psychiatrists only Additional 50 coupons (Total coupons: 80) 
6	Tab Quetiapine 25mg, 100mg & 200mg IR (SEROQUEL-G)	Add on : Formulation (Immediate release). Dose: Treatment of recurrent Major Depressive Disorder (MDD) in patients who are intolerant or who have an inadequate response to alternative therapies : maximum 800mg/day	Prescriber: A* : Psychiatrists only

SHORT EXPIRY DRUGS IN PHARMACY

Dear Professors/ Specialists/ Doctors,

Please be informed that drugs below will be expiring soon. Kindly assist usage where deemed necessary. Thank you.

No	Drugs	Expiry Date & Quantity	Prescriber	Indication/Dose
1	Mesalazine Enema 2g/30 mL (Salofalk)	May 2015 (497 each)	Gastroenterologists only	Treatment of ulcerative colitis in patients who are intolerant or who do not respond to sulphasalazine : Per rectal : 2 enemas (60 mL) once daily rectally before retiring
2	Inj Paricalcitol 5ug/mL (Zemplar)	April 2015 (450 amp)	Nephrologists only	Prevention and treatment of secondary hyperparathyroidism in patients with chronic renal failure undergoing hemodialysis: IV bolus : Initial dose (in mcg) is iPTH (pg/mL)/80 3 times/week, dose maybe increased by 2-4 mcg at 2-4 weekly. Max dose is 40 mcg
3	Inj Alfacalcidol 2ug/mL, 0.5mL Inj (One Alpha)	May 2015 (77 amp)	Endocrinologists, Nephrologists, O&G Specialists, Orthopaedic Specialists, Rheumatologists, Surgery (Post thyroidectomy) and Paediatrics	Renal osteodystrophy, hypoparathyroidism, adjunct in tertiary hyperparathyroidism management, neonatal hypocalcemia, Rickets, calcium malabsorption, osteoporosis, osteomalacia: IV bolus : Over 30 sec. Hemodialysis patient: IV inj administered following each HD into the return line from HD machine at the end of each HD, initial dose 1mcg/HD, max 6mcg/HD & 12 mcg/wk.