

# **RESULTS OF JKTU MEETING 1/2019**

Drugs & Therapeutics Committee (DTC) of the hospital aims to optimize rational use of medicines by evaluating the clinical use of pharmaceuticals, developing policies to manage medicine use and administration to ensure optimal costeffectiveness. The committee has broad responsibilities in determining which medicines will be made available, at what cost, and how they will be used. The first Drugs & Therapeutics Committee meeting in 2019 was held on 30th of January 2019 and results are as follows. Effective from 1st March 2019.

NEWLY APPROVED DRUGS IN PPUKM FORMULARY						
No.	Drugs	Indication/Dose	PPUKM Approved Policy			
1.	Fycompa® 4mg Perampanel 28 ten control table	Indication:  ◆ For adjunctive treatment of partial onset seizures with/ without secondary generalised seizures in patients with epilepsy aged 12 years and older. (Effective dose generally at 4mg-12mg/day).  ◆ For adjunctive treatment of primary generalised tonic-clonic seizures with idiopathic generalised epilepsy in patients from 12 years and older. (Effective dose generally up to 8mg/day)	A*: Neurologist only. (For 10 patients/year only)			
2.	TOPICAL 1% PIMECROLIMUS CREAM (ELIDEL®)	<ul> <li>▶ Dose: 4mg – 12mg. Once daily before bedtime</li> <li>Indication:</li> <li>◆ Treatment of mild to moderate atopic dermatitis (particularly in vulnerable areas of face and flexural areas in adults and children &gt; 2 years)</li> <li>Dose:</li> <li>◆ Twice daily application</li> </ul>	A* Dermatologist only.  (For 50 patients/year)			

	CREAM (ELIDEL®)	▼ Twice daily application					
NEWLY ADDED INDICATION/QUOTA							
No.	Drugs	Existing Indication	Add-on	PPUKM Policy			
1.	CLOSTRIDIUM BOTULINUM TOXIN TYPE A 100 IU (BOTOX ®)	Prescribers: ENT Specialists, Paediatricians, Orthopaedic, Neurologists and Dermatologists.  Indication:  Strabismus Bleopharospasm Spasmodic torticollis Focal spasticity Hyperhidrosis of axilla	New Indication:	Add On Prescriber:  A* Gastroenterologist only.  (For 4 patients/year only)  Gastroenterology Unit needs to present all case reports in which Botox is used and attach the evidence of efficacy and side effects experienced in JKTU 1/2020.			
2	EMTRICITABINE 200MG + TENOFOVIR FUMARATE 300MG TAB (TENOF-EM ®)	Indication: Chronic Hepatitis B & HIV coinfection PPUKM Policy: A* Infectious Disease Specialist only (For 150 patients/year)	Add On: 150 patients/year  TOTAL: 250 patients/year	Non Malaysian citizen need to purchase from Kedai Farmasi .			

# HYDROCHLOROTHIAZIDE (HCTZ) SAFETY UPDATES

Non-Melanoma Skin Cancer ( NMSC) : a) Basal Cell Carcinoma (BCC) & Squamous Cell Carcinoma ( SCC)



European Medicines Agency alerts on HCTZ skin cancer risks

From the Danish Cancer Registry (70,000 patients with BCC and 8000 patients with SCC), it was found that the risk to get BCC and SCC is 1.29 and 3.98 times more for cumulative dose of 50,000 mg of HCTZ (equivalent to 125mg daily of HCTZ for 11 years).



Gender

Difference in associations according to gender may be related to differences in skin thickness (ie, women have a thinner layer of both epidermis and dermis than men) and sun habits (ie, women are more frequent tanners than men), which may confer a difference in susceptibility to the effects of photosensitizing exposure.



Situation in Malaysia

Out of the 60 products containing HCTZ registered in Malaysia, NPRA has received 1,886 adverse reaction reports involving HCTZ. 33 reports related to photosensitivity reaction, 2 photosensitive dermatitis, 1 photosensitive rash

#### References:

Pederson et al. "Hydrochlorothiazide use and risk of non-melanoma skin cancer: A nationwide case-control study from Denmark" J Am Acad Dermatology 2018; 78: 673-81

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Increased NMSC risk associated with HCTZ use could be mediated through photosensitizing effect Cumulative UV exposure plays a larger role in etiology of SCC than of BCC photosensitizing effect Hence SCC is more strongly associated with HCTZ use than is BCC.



The associations with HCTZ use also varied according to age, with the highest ORs for both BCC (1.91) and SCC (4285) observed among persons younger than 50 years.



- a) Inform patients on NMSC risk: observe the condition of the skin (new wounds or changes in existing wounds)
- b) Check the dubious wounds and potentially skin cancer carefully including biopsy and histological examination.
- c) Advise patients to **reduce exposure to sunlight** and UV radiation by using protection to prevent skin cancer risk.
- d) Cautious use of HCTZ in skin cancer patients.

## A publication of Drug Information Centre

PDF version available at https://www.ppukm.ukm.my/farmasi/

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