

# Pharmacy Newsletter

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SUNY Downstate Medical Center

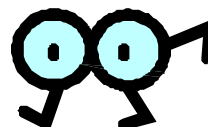
The Pharmacy and Therapeutics Committee has approved and has recommended for approval to the Executive Committee of the Medical Board the following drugs:

DRUG NAME	THERAPEUTIC CATEGORY
Ziprasidone (Geodon®) caps	Atypical Antipsychotic
Lansoprazole (Prevacid®) caps	Proton Pump Inhibitor
Rofecoxib (Vioxx®) tabs	COX II Inhibitor

Lansoprazole has been approved only for use in feeding tubes or naso-gastric tubes because of its ability to be crushed. The other proton pump inhibitors, such as Prilosec® or Protonix® cannot be crushed and put down a tube.



Joint Commission is Coming  
January 28-30th



We begin the New Year a little under the gun. Joint Commission was supposed to make an appearance just before Thanksgiving but because of the events of September 11th, 2001, their review of Downstate was postponed until the end of January, 2002. The Hospital is prepared and we should do just fine.



*The Department of Pharmacy has a website!*

By the end of January, 2002, the Department of Pharmacy will have a website up that will be accessible to all staff members. You can access the site via the Hospital's webpage in the "Services and Associations" section. Some of the content that will be available is an up-to-date edition of the Hospital Formulary, the Pharmacy Newsletter, updates about drug shortages and recalls, Micromedex and other information we think everyone will find useful.

Speaking of drug shortages, there is a current nationwide shortage of the following injectable forms of drugs: prochlorperazine, Aramine, chlordiazepoxide, hydralazine and Prevnar.

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As a reminder: the old New York State Triplicate form for Schedule II drugs has been phased out. All prescribers must now use the new New York State Prescription Form. The new form is no longer a Triplicate, but it comes equipped with a number of security features that will make it difficult to copy or counterfeit.

## FDA NEWS

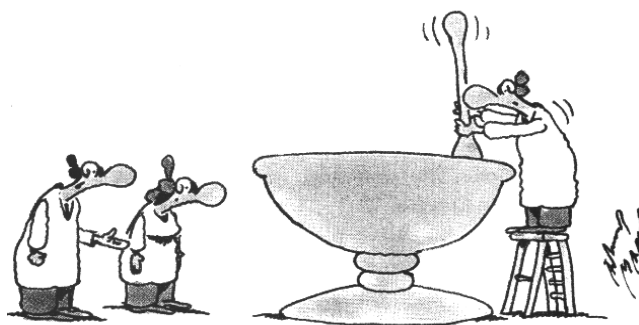
The FDA has strengthened its warning for droperidol. Changes to the labeling include a “black box” warning to focus attention on the drug’s ability to cause fatal cardiac arrhythmias. All patients should have a 12-lead ECG prior to administration of the drug. If there is evidence of a prolonged QT interval (QTc greater than 440 msec for males or 450 msec for females) droperidol should **NOT** be administered.

The FDA is warning consumers not to use the dietary supplement Lipokinetix®. This product has been implicated as a possible cause for a number of liver injuries. The product is marketed for weight loss and contains phenylpropanolamine (which the FDA withdrew from the market a while back), caffeine, yohimbine, diiodothyronine and sodium usniate. Liver injury occurred in persons between 20 and 32 years of age after as little as two weeks of use. No other possible cause of liver injury was found in these individuals.

Another dietary supplement that has been implicated in causing liver toxicity is kava. German authorities are considering removing all products containing kava from the market.

The FDA has also issued a drug warning regarding the use of Remicade® (infliximab) in patients with CHF. Preliminary results of an ongoing phase II trial in patients with moderate to severe (NYHA class III-IV) CHF showed a higher rate of mortality and worsening heart failure in patients treated with Remicade® (especially those treated with the higher dose of 10mg/kg) than those treated with placebo. There were no reported deaths among those patients on placebo. Remicade® is used in the treatment of rheumatoid arthritis and Crohn’s disease.

On a brighter note, the FDA has approved Arixtra™ (fondaparinux) injection for reducing the risk of blood clots after orthopedic surgery for hip fracture, hip replacement and knee replacement. The drug works by inhibiting Factor Xa. As with other injectable anticoagulants, Arixtra™ is not to be used when spinal anesthesia or spinal puncture is involved.



*"Johnson is predicting a rough flu season."*