



**Indian Health Service**  
**National Pharmacy and Therapeutics Committee**  
***NPTC Winter Meeting Update***  
**-February 2015-**



The IHS National Pharmacy and Therapeutics Committee (NPTC) held its winter meeting on February 3-4<sup>th</sup>, 2015 in Dallas, Texas. Ten of the 12 IHS Area members were in attendance. Dr. Jonathan Iralu, MD, IHS Chief Clinical Consultant for Infectious Disease, and LCDR Amy Nguyen, PharmD joined via teleconference as invited guests and discussed Hepatitis C guidelines and treatment. Affiliates from the Department of Defense, the Department of Veterans Affairs, the Federal Bureau of Prisons and the United States Coast Guard provided input and updates on future meeting topics and class reviews. The NPTC continues to appreciate the relationships with experts from the field and with other governmental agencies. Additionally, the committee appreciated the opportunity to host the meeting from the U.S. DHHS Federal Building in Dallas, TX.

The meeting focused primarily on hepatic conditions but had discussions on a variety of topics including Hepatitis C treatment, alcohol use disorders, acute alcohol withdrawal, cirrhosis complications and management, medical marijuana and a review of the IHS National proton pump inhibitor medication use evaluation (MUE).

The resulting actions from the meeting were as follows:

1. Comprehensive clinical presentations on hepatitis C virus (HCV) guidelines and treatment were provided, referencing recommendations from the Centers for Disease Control and Prevention and outcomes from primary literature which support the use of the newer HCV medications due to high efficacy. Alternative methods for procurement of newer HCV medications (i.e. patient assistance programs) within the IHS were also discussed. A medication utilization and procurement presentation, incorporating IHS-specific data on HCV medication use, and metrics from the IHS National Data Warehouse (NDW) were also presented. The IHS National Core Formulary (NCF) currently includes no medications specific for the treatment of HCV. Given the availability of proven, successful procurement avenues currently utilized in the IHS and, in concert with recommendations provided by IHS subject matter experts, **no modifications were made** to the NCF. A formulary brief will be developed and disseminated, providing direction for treatment of HCV.
2. A clinical presentation on alcohol use disorders (AUD) was provided. Outcomes from FDA-approved medications along with various non-approved agents (unlabeled use) in the treatment of AUDs were reviewed. Systematic reviews and recommendations from the Cochrane Library, the NICE guidelines and the U.S. DHHS/SAMHSA Treatment Improvement Protocol support oral naltrexone or acamprosate in the treatment of AUD. Agency-specific data (e.g. NDW, drug procurement/utilization) was also presented for review. Based on these discussions, **the NPTC added naltrexone** to the NCF. A formulary brief will be developed and disseminated regarding the treatment of AUDs.
3. A clinical presentation was provided on the management of acute alcohol withdrawal. Three Cochrane reviews, the NICE guidelines and practice guidelines from the American Society of Addiction Medicine, U.S. DHHS/SAMHSA and the DoD/VA concluded that benzodiazepines were the best studied and most commonly recommended agents in acute alcohol withdrawal.

However, studies found no particular benzodiazepine to be routinely superior to any other. Agency-specific data (e.g. NDW, drug procurement/utilization) was also presented for review. **No modifications were made to the NCF**; a formulary brief will be developed and disseminated regarding the treatment of acute alcohol withdrawal.

4. A comprehensive clinical review of cirrhosis, associated complications and treatment options was presented. Cochrane reviews and meta-analyses were provided on cirrhotic complications including gastroesophageal varices, antibiotic prophylaxis, spontaneous bacterial peritonitis, hepatorenal syndrome and hepatic encephalopathy. Current NCF medications involved in the management of cirrhosis complications include propranolol, spironolactone and furosemide. Agency-specific data (e.g. NDW, drug procurement / utilization) was also presented for review. Based on IHS-specific data and expert recommendation, **the NPTC added lactulose** to the NCF.
5. A clinical presentation and review of medical marijuana was provided, including historical uses and legislation directing its status as a medicinal. Synthetic prescription cannabinoids were also detailed. Legal implications of state-based medical marijuana laws were discussed as well as recent legislative Amendments and Acts including the DOJ's 2014 memorandum on Tribal entitlement for growing and selling marijuana on sovereign lands. Literature and systematic reviews of marijuana (and synthetic cannabinoids) in the treatment of pain, nausea, weight loss/appetite, epilepsy, dementia, Tourette's Syndrome, schizophrenia and various neurological disorders all demonstrated little benefit (if any) with studies suffering from small sample sizes, poor quality or at significant risk for bias. Based on these discussions, **no modifications were made to the NCF**. The NPTC will assist with updated Agency guidance regarding the status and views of medical marijuana in the IHS.
6. A review of the final results from the proton pump inhibitor MUE was presented. Comparisons to NDW data and published literature were included. A final summary report will be prepared and disseminated with recommendations based on MUE findings.

\*The next meeting will be held in Oklahoma City, OK on May 5-6<sup>th</sup>, 2015. The agenda topics will include a class review of antiplatelet agents, sulfonyleureas, testosterone and –like products and antibiotic stewardship.

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*If you would like to recommend a topic for future NPTC discussion, please fill out the "[NPTC Formulary Review Request Form](#)" on the NPTC website or send an email at [IHSNPTC1@ihs.gov](mailto:IHSNPTC1@ihs.gov).*

*For more information about the NPTC, please visit the [NPTC website](#).*