NEW DRUGS

Metronidazole for Rosacea

The U.S. Food and Drug Administration (FDA) has approved metronidazole 1% (MetroGel® Topical Gel) for the treatment of inflammatory lesions of rosacea, a skin disorder. This new product was formulated, patented, and developed by Dow Pharmaceutical Sciences and will be marketed in the U.S. through an alliance with Galderma Laboratories.

(Source: Dow, July 6, 2005.)

Generic Desmopressin Antiuretic Therapy

Barr Laboratories, Inc., has received final approval from the FDA for its generic version of desmopressin acetate (DDAVP®) tablets, 0.1 and 0.2 mg.

The tablets are indicated as antiuretic replacement therapy in the management of central diabetes insipidus, temporary polyuria and polydipsia following head trauma or surgery in the pituitary region, and primary nocturnal enuresis.

(Source: Barr, July 5, 2005.)

Ramelton for Insomnia

The FDA has approved a New Drug Application for ramelton 8-mg tablets (Rozerem™, Takeda), indicated for the treatment of insomnia characterized by difficulty with sleep onset.

This is the first prescription sleep medication that has shown no evidence of abuse and dependence. As a result, it has not been designated as a controlled substance by the U.S. Drug Enforcement Administration (DEA). All other prescription drugs for insomnia are classified as Schedule IV controlled substances by the DEA. Ramelton is also the first prescription insomnia medication with a new therapeutic mechanism of action in 35 years. It will be available by late September.

Ramelton can be prescribed for long-term use, but patients should see their health care providers if insomnia does not remit or if it worsens.

Ramelton has been associated with decreased testosterone levels and elevated prolactin levels. It has not been studied in children or adolescents.

(Source: Takeda, July 23, 2005; www.rozerem.com.)

Dapsone Gel Improves Acne

The FDA has approved dapsone (Aczone™ Gel, QLT, Inc.) 5% for the topical treatment of acne vulgaris.

The aqueous gel form enables dapsone to be applied topically and safely. In two randomized double-blind, vehicle-controlled clinical studies of 3,000 patients with acne, the gel was able to reduce the number of acne lesions and showed better success rates on the Global Acne Assessment Score.

Common adverse events included oiliness or peeling of the skin, dryness, and erythema.

(Source: QLT, Inc., July 7, 2005.)

Generic Allegra® Approved

Barr Laboratories, Inc., has received final approval from the FDA for its generic version of Aventis Pharmaceuticals’ Allegra® (fexofenadine HCl) Capsules, 60 mg. Barr is the first applicant to file an Abbreviated New Drug Application containing a paragraph IV patent challenge on the patents related to Allegra® capsules and is entitled to 180 days of marketing exclusivity on the product.

Fexofenadine HCl is indicated for the treatment of seasonal allergic rhinitis and for the treatment of uncomplicated skin manifestations of chronic idiopathic urticaria in adults and children six years of age and older. Allegra® capsules, 60 mg, are no longer marketed by Aventis.

(Source: Barr, July 14, 2005.)

DRUG NEWS

Patient Safety Act Passed

The U.S. House of Representatives has passed the Patient Safety and Quality Improvement Act in an effort to enhance medical care and to establish a mechanism for the voluntary reporting of medical errors to “patient safety organizations.”

This legislation should aid in detecting, correcting, and preventing medical errors and will protect those who report errors without triggering lawsuits.

This landmark legislation, signed by President Bush, will establish a national patient safety database. The bill, S.544, was sponsored by Senator Jim Jeffords, I-Vermont.

The reporting system will cost about $58 million over the next five years.

(Source: Academy of Managed Care Pharmacy, July 29, 2005; www.businessinsurance.com, © Crain Communications.)

Three Asthma Drugs to Stay on Market for Now

A panel of lung experts met in July to advise the government whether three popular asthma drugs should remain on the market, be relabeled, or be taken off the market because of safety concerns. The FDA concluded that the drugs could be kept on the market but urged more research.

GlaxoSmithKline’s fluticasone propionate/salmeterol (Advair® Diskus) and salmeterol xinafoate (Serevent® Diskus) and Novartis/Schering’s formoterol fumarate (Foradil® Aerolizer) are bronchodilators that ease breathing. Concerns had arisen because these drugs have been associated with severe asthma exacerbations and life-threatening respiratory problems in a few patients.

Advair® and Serevent® have carried “black-box” warnings since 2003. A study had shown a small but significant increase in mortality among patients who
added the drugs to their usual asthma treatment: 13 deaths in 13,176 patients who took the drugs, versus 3 deaths in 13,179 patients who took placebo. Foradil® was not part of the study and does not carry a black-box warning.

Advair® is also discussed in this month’s issue of P&T in the Meeting Highlights article on page 467. (Source: The New York Times and USA Today, July 13, 2005.)

**Fentanyl Patch Advisory**

The FDA has issued a Public Health Advisory regarding the safe use of transdermal fentanyl patches (e.g., Duragesic®, Janssen) in response to reports of deaths in patients using this narcotic medication for pain management.

A patient information sheet and an alert to health care professionals were also issued to identify important safety precautions for the use of the patches.

These precautions inform patients about signs of an overdose, the proper technique for applying the patch, taking other medications while using the patch, safeguards for children, and proper storage and disposal.

(Source: FDA, July 15, 2005.)

**Pennsylvania Hospitals Report High Infection Rates**

In 2004, 11,668 patients in Pennsylvania hospitals acquired infections during their stays, causing them to spend an estimated 205,000 extra days, according to the Pennsylvania Health Care Cost Containment Council, an independent state agency.

Complications of these hospital-acquired infections added nearly $350 million to the cost of care in 2004.

Of more than 1.5 million patients admitted, 1,793 patients who contracted hospital-acquired infections died—1,510 more deaths than expected.

Pennsylvania is one of only a few states that require hospitals to report infections, and it is the first to publicly issue an analysis of those disclosures.

Reducing the costs associated with hospital-acquired infections has been the focus of quality-improvement efforts by several organizations, including the Centers for Medicare and Medicaid Services (CMS).

While agreeing that public disclosure of quality and safety data helps the effort to make improvements, P. J. Brennan, Chief Medical Officer of the University of Pennsylvania Health System, said concerns remained about the scientific rigor of the infection data collected by the Council.

It is hoped that, over time, the information will be useful for payers and patients in making decisions about health care.

(Source: The Philadelphia Inquirer, July 13, 2005.)

**Vision Problems with Erectile Dysfunction Drugs**

The FDA has approved updated labeling for three oral medications used to treat erectile dysfunction to reflect a small number of postmarketing reports of sudden vision loss attributed to non-arteritic ischemic optic neuropathy (naion). In patients with naion, blood flow to the optic nerve is blocked.

The FDA advises patients to stop taking tadalaafil (Cialis®, Lilly/Ilco), vardenaafil (Levitra®, Bayer/GlaxoSmithKline), and sildenafil (Viagra®, Pfizer) right away if they experience sudden or decreased vision loss in one or both eyes.

Patients taking or considering taking these products should inform their doctors if they have ever had severe loss of vision, which might reflect a prior episode of naion. Naion tends to recur in such patients.

Those at highest risk for the vision loss were patients older than age 50 who had diabetes, heart disease, high blood pressure, and high cholesterol levels. It is not clear whether the three medications caused the vision loss or whether the vision loss was related to the other health problems cited.

(Source: FDA, July 8, 2005.)

**Revised “Black-Box” Label For Mifepristone (RU-486)**

The FDA has announced changes to the labeling of mifepristone (RU-486, or Mifeprex®, Danco Laboratories, LLC). RU-486 was approved in 2000 for the termination of early pregnancy, defined as 49 days or less. The FDA and the company have received reports of serious bacterial infections, bleeding, ruptured ectopic (tubal) pregnancies, and deaths. These reports have led to the revision of the “black-box” labeling.

Bacterial infections and sepsis may occur without the usual signs of infection, such as fever and tenderness on examination. Prolonged, heavy bleeding may warrant surgical intervention.

The label warns health care providers to watch for patients with undiagnosed ectopic pregnancies. Some symptoms of an ectopic pregnancy may mimic the expected symptoms of a medical termination of pregnancy. Mifepristone is not effective for termination of these pregnancies.

The medication guide encourages consumers to contact their health care providers at once if they experience fever, abdominal pain, or heavy bleeding and to bring the guide with them to the emergency department or their physician.

(Source: FDA, July 19, 2005.)

**Painkiller Palladone™ Pulled**

The FDA has asked Purdue Pharma to withdraw hydromorphone HCl (Palladone™) for safety reasons after learning that serious and potentially fatal adverse reactions can occur when the extended-
release capsules are taken with alcohol.

Palladone™, a once-daily drug for pain management, contains a potent narcotic. A new study shows that alcohol can damage the extended-release mechanism, possibly resulting in the rapid release of the active ingredient into the bloodstream.

The consequences of this “dose dumping” at the lowest marketed dose (12 mg) may lead to adverse events in some patients. The risk is even greater for the higher strengths of the product.

The current labeling for Palladone™, approved in September 2004, already includes the standard opioid warning against the concomitant use of alcohol.

The company agreed to suspend sales of the product in the U.S. pending further discussions with the FDA.

Patients taking Palladone™ should consult their physicians for alternative treatments.

(Sources: FDA, July 14, 2005, www.fda.gov; Associated Press.)

Infusion Pumps Recalled

The FDA has announced a class I worldwide recall of all models of Baxter Healthcare Corporation’s Colleague Volumetric Infusion Pumps because they can shut down while delivering critical medication and fluids to patients. Class I recalls are the most serious type of recall and are issued when use of the affected product would probably cause injury or death.

The following models are affected: 2M8151, 2M8151R, 2M8161, 2M8161R, 2M8153, 2M8153R, 2M8163, and 2M8163R.

Earlier, the company had advised customers to stop using any pumps that exhibited a failure code beginning with 402, 403, 533, 535, or 599, related to the electronic problems, and to remove from service any pumps exhibiting failure codes 810:04 and 810:11, related to air-in-line sensor difficulties, until they could be inspected.

Approximately 255,000 pumps are in use, including 206,000 in the U.S.

(Sources: FDA, July 21, 2005; www.baxter.com; PNN Pharmacotherapy News Network.)

NEW MEDICAL DEVICES

Marvin M. Goldenberg, PhD, RPh, MS

Name: VelaSmooth™
Manufacturer: Syneron Medical, Ltd., Israel
Approval Date: June 24, 2005
Use Classification: Cellulite therapy
Description: VelaSmooth™ uses Elōs™ combined energy technology, bipolar radiofrequency and infrared light, and tissue mobilization and suction to recontour the skin surface.
Purpose: Suction is used to manipulate and smooth out the skin to eliminate the appearance of dimpled skin.
Benefit: The Elōs™ technology requires lower overall energy levels for superior results and maximum safety. Most people experience no side effects, although a few might exhibit some short-term local reddening of the surrounding skin. No patient recovery time is needed.

The combination of infrared light and radiofrequency with mechanical manipulation (combined heat energy), when delivered to the skin, goes deeper than other devices do, so that fat is mobilized. This process allows for new collagen to be deposited, and a smoother skin surface is created.

In addition to reducing thigh circumference and improving the skin surface irregularities, the device gives a better appearance to the cellulite in general. Patients do not lose weight, but they appear thinner because the whole area has been recontoured.

Sources: www.syneron.com; www.pharmacyonesource.com

Name: GlucaGen® HypoKit™
Manufacturer: Novo Nordisk, Princeton, NJ
Approval Date: July 12, 2005
Use Classification: Hypoglycemia treatment

Description: Glucagon (recombinant DNA origin) for injection, the active ingredient in the new kit, is used to treat severe hypoglycemic reactions in patients with type-1 (insulin-dependent) diabetes. If mild or moderate hypoglycemia is not treated promptly with some form of glucose, extremely low blood glucose levels may occur.

The emergency kit consists of a disposable syringe prefilled with sterile water for mixing and a vial of GlucaGen® powder. The hard-shell, bright-orange case protects the product, which does not need to be refrigerated.

Purpose: The kit promotes the release of glucose from glycogen stores in the liver. Blood sugar levels increase within 10 minutes.

Benefit: The kit is portable, can be used in any setting, and is safe for children. Comprehensive instructions are included, and there is no danger of an overdose.

Precautions: GlucaGen® should be used with caution in conditions such as prolonged fasting, starvation, adrenal insufficiency, or chronic hypoglycemia. These conditions result in low concentrations of releasable glucose in the liver and an inadequate reversal of hypoglycemia by GlucaGen® treatment.

Sources: www.diabetes.org; http://biz.yahoo.com/prnews/050712/nytv048.html?v=17, July 12, 2005

Name: Vagus Nerve Stimulation Therapy
Manufacturer: Cyberonics, Inc., Houston TX
Approval Date: July 18, 2005
Use Classification: Add-on therapy for depression

Description: Vagus nerve stimulation (VNS) was previously approved to reduce the frequency of epileptic seizures in adults and adolescents over 12 years of age.

VNS is delivered from a small pacemaker-like device implanted in the chest that emits mild pulses to the brain by means of the vagus nerve in the neck. A thin, thread-like wire, attached to the generator, is placed under the skin close to the left vagus nerve. The vagus nerve, one of the 12 cranial nerves, connects the brain to many major organs. VNS may modulate neurotransmitters such as serotonin and norepinephrine, which are thought to be involved in mood regulation.

Purpose: The device is approved for patients with chronic or recurrent depression who are experiencing a major depressive episode and who haven’t responded adequately to four or more antidepressant treatments.

Benefit: This is the first long-term therapy approved for treatment-resistant depression. VNS seems to be most effective in patients with low-to-moderate antidepressant resistance.

Sources: www.vsntherapy.com; www.cyberonics.com; www.newstream.com; www.pharmacyonesource.com

Recalled Devices

Name: AED20 Automatic External Defibrillator
Company: MRL, Inc., a Welch Allyn Company
Date: July 2005
Reason for Recall: Any impact to the device could cause an electrical short circuit. A short circuit would prevent the defibrillator from analyzing the patient’s electrocardiogram and would thus prevent the defibrillator from delivering a shock when needed.

Source: www.accessdata.fda.gov

Name: HeartStart and Philips Medical System CodeMaster Defibrillator
Company: Laerdal Medical Corporation
Date: July 2005
Reason for Recall: If wires within the affected cables break, the device would be prevented from delivering a shock. The recalled devices are the CM 100 HeartStart® Adapter Cables. The part number for these cables is 920650. Anyone who has any of these adapter cables should stop using them and order alternative cables.

Source: www.accessdata.fda.gov