PHARMACY NEWSLETTER

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Issued by:

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1. Pharmacy and Therapeutics Committee (P & TC) Updates

Formulary Updates

Formulary addition	Formulary deletion
Nitrofurantoin Tab 100mg	Ertapenem Injection 1g
Fosfomycin sachet 3g	

2. Management of First Line Anti-Tuberculosis Drugs Induced Hepatotoxicity (DIH)*

Criteria for Diagnosis of Hepatotoxicity

Presence of at least one of the following criteria raises the possibility of DIH due to anti-tuberculosis drugs include

A rise of five times the upper limit of normal levels of AST and/or alanine aminotransferase (ALT)

A rise in the level of serum total bilirubin 1.5 mg/dl

Any increase in AST and/or ALT above pre-treatment levels together with anorexia, nausea, vomiting, and jaundice

Classification of Liver Toxicity	
LFT's (Transaminase level) of ULN	**Nature of Liver Toxicity**
< 5 times	Mild
5-10 times	Moderate
>10 times	Severe

Management

- After diagnosis of hepatotoxicity due to anti-tuberculosis therapy, stop all the potential hepatotoxic drugs (till complete clinical and biochemical resolution of hepatotoxicity)
- Start at least three non- hepatotoxic drugs (Streptomycin, Ethambutol and Floroquinolones (Levofloxacin or Moxifloxacin) in the interim period
- First-line drugs can be reintroduced sequentially in the order isoniazid, rifampicin and pyrazinamide (Daily Monitoring of LFT's)
- If 1st line drugs are well tolerated they should be continued and second line drugs should be withdrawn

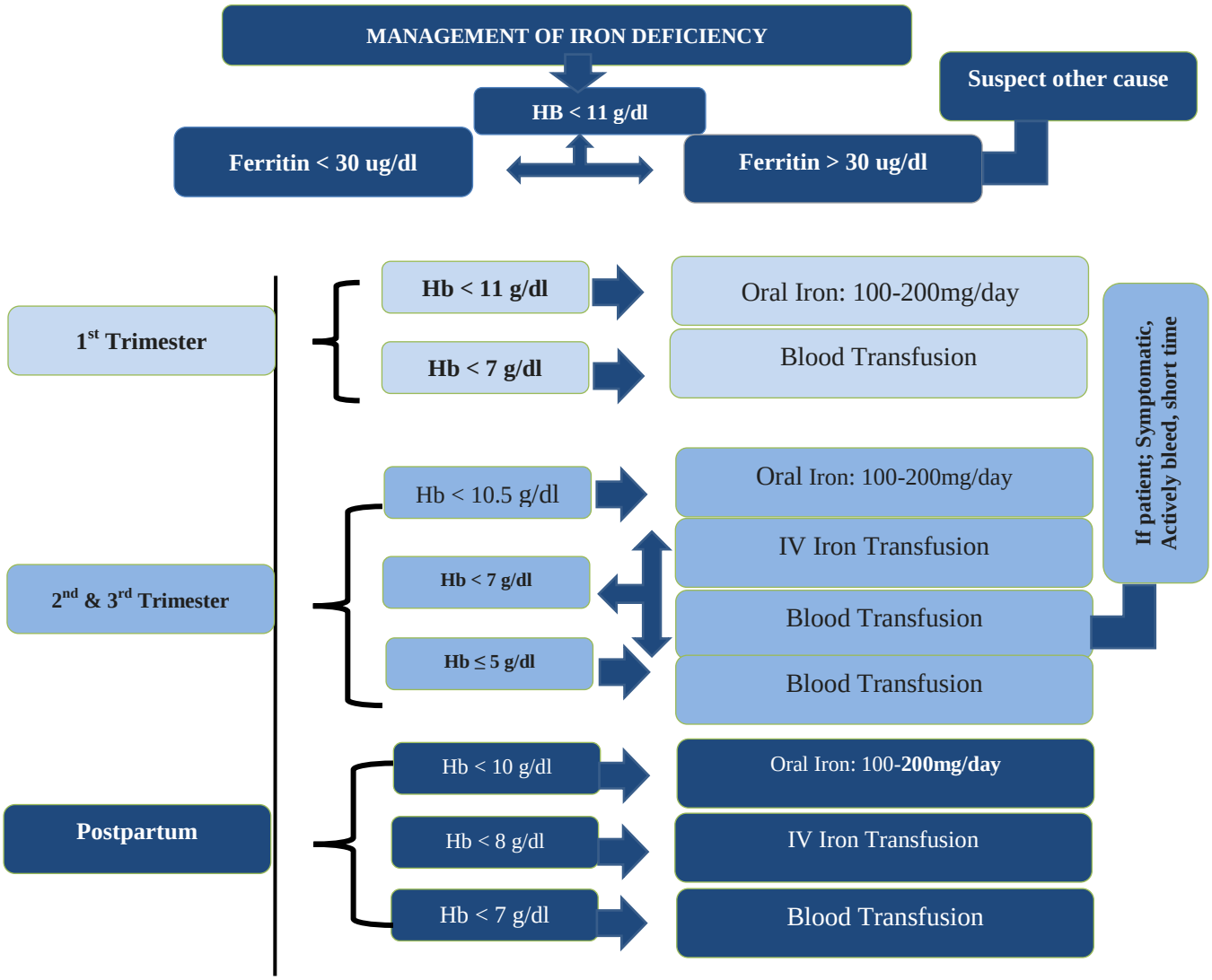
Isoniazid should be re-introduced at 50mg/day and should be gradually increased to 300mg over a period of 4 days

After a further period of 3 days, **Rifampicin** is introduced at 75mg/day and increase to 300mg per day after 4 days and can further increased to 450 mg (<50kg) and 600mg(>50kg)

Finally **Pyrazinamide** can be added after further 3 days at 250mg/ day and can be increased to 1000mg and then 1500mg (<50kg) and 2000mg (>50kg)

*Blumberg HM, Burman WJ, Chaisson RE, Daley CL, Etkind SC, Friedman LN, et al. American Thoracic Society, Centers for Disease Control and Prevention and the Infectious Diseases Society. American Thoracic Society/Centers for Disease Control and Prevention/Infectious Diseases Society of America: treatment of tuberculosis. Am J Respir Crit Care Med 2003;167:603-62.

3. Management of Iron Deficiency Anemia in Pregnancy



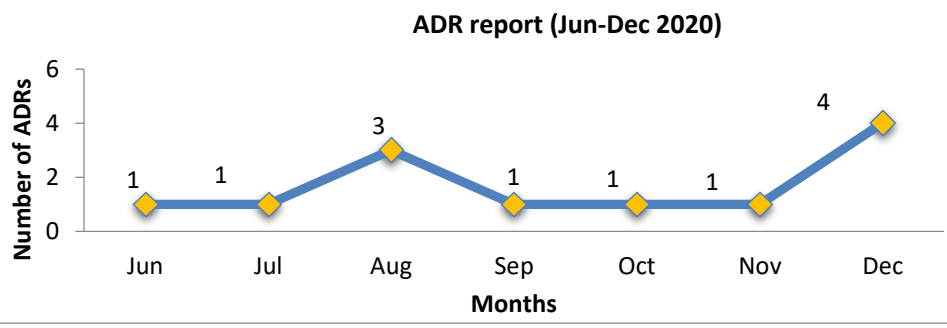
The dose of intravenous Iron must be individually calculated for each patient according to the total iron deficit calculated with the **following Ganzoni Formula,**

Total iron deficit [mg] = BW [kg] x (target Hb - actual Hb) [g/dl] x 2.4 + Iron storage [mg]

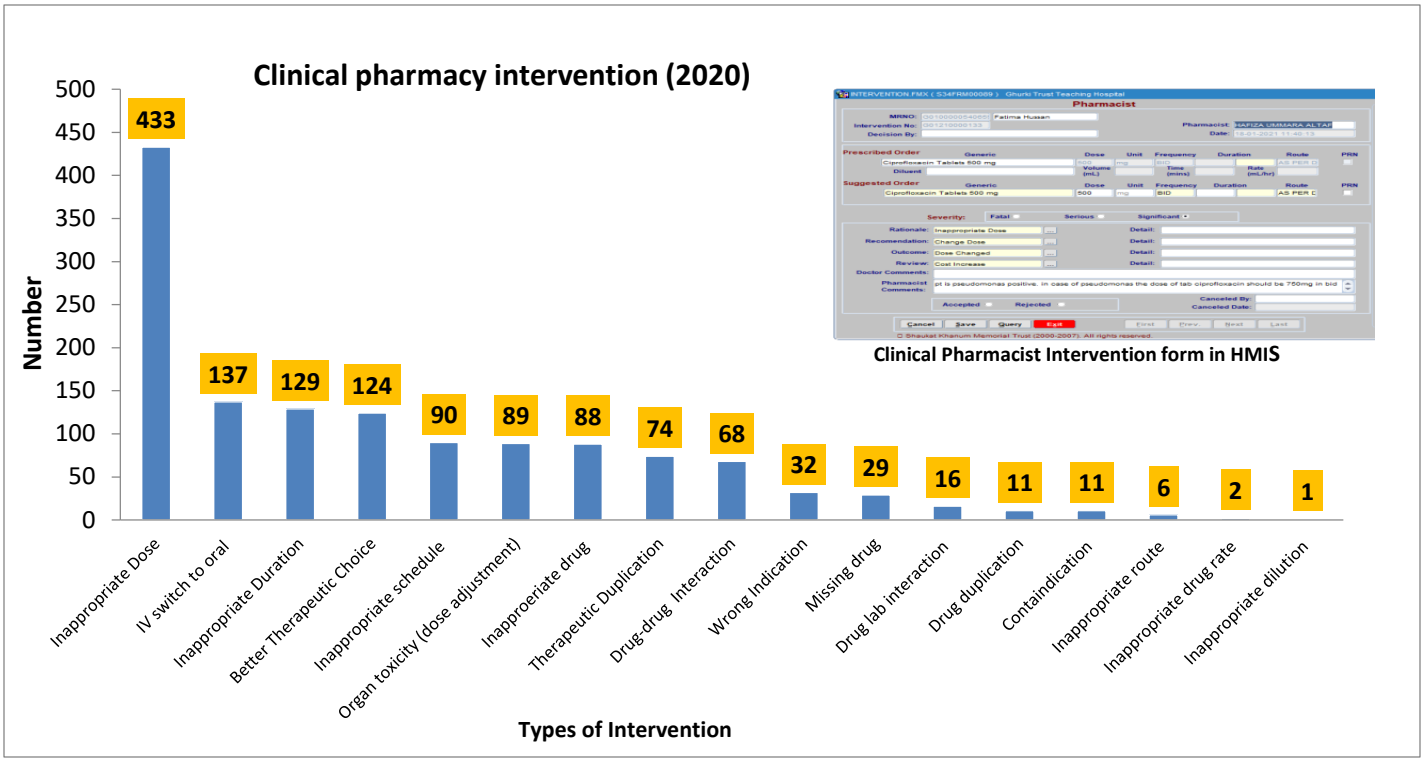
Body Weight < 35kg: Iron Storage = 15mg/kg

Body Weight > 35kg: Iron Storage = 500mg **(Ref: ACOG & NHS guidelines)**

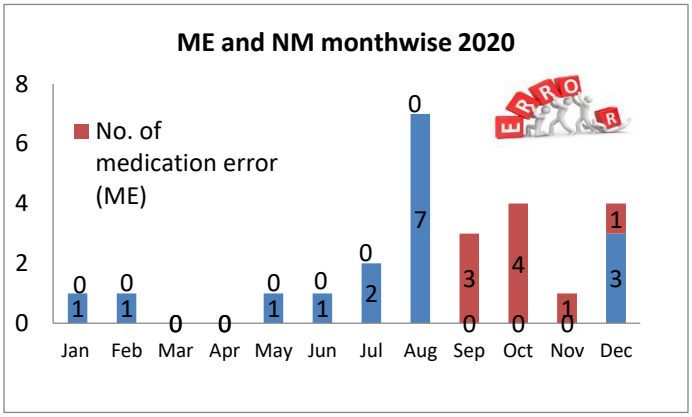
4. Adverse Drug Reaction Updates 2020 (ADR)



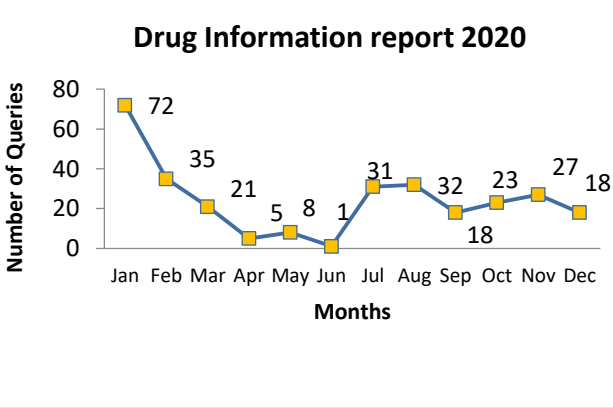
5. Clinical Pharmacy Interventions Update



6. Near Miss and Medication Error Updates 2020



7. Drug Information Updates 2020



8. Comparison of Proton Pump Inhibitors and H_2 blocker

RABEPRAZOLE	$
DEXLANSOPRAZOLE	$$
FAMOTIDINE	$$$
LANSOPRAZOLE	$$$$
OMEPRAZOLE	$$$$
ESOMEPRAZOLE	$$$$$
PANTOPRAZOLE	$$$$$

Note: Cost based upon the treatment of GERD >2 episodes/week

Money down the drain

9. Knowledge becomes Multiplied by Sharing

I. Commencement of "Drug Information Desk"

It is highly privileged to announce the initiation of the drug information desk besides to efficient, updated, and authentic drug data bank software **"Lexicomp"** in the Department of Pharmacy Services.

Drug Information Desk
(Clinical Pharmacy Section)

II. World Pharmacist Day

An event with the concept of **Transforming Global Health** on 25th Sep 2020 was arranged by UVAS, Lahore to provide a platform to the highly qualified pharmacists from different institutions including Govt. sectors to share their ideas regarding the pharmacy profession. **Dr. Muhammad Awais** (Head Pharmacy, GTTH) attended the session as a speaker.

III. One day hands-on workshop organized by the Lahore College of Physical Therapy, LMDC

Ghurki Trust Teaching Hospital, Lahore and Lahore Medical and Dental College, Lahore always strive in the upgrading of healthcare professional's training and development. One-day hands-on workshop on *an* ***"integrated approach toward assessment and management of headache"*** at LMDC were organized by the **Lahore College of Physical Therapy** where a significant number of healthcare workers (physicians, physiotherapists, and pharmacists participated. Dr. Ayesha Tariq (Clinical Pharmacist) participated as a speaker and delivered a lecture on "pharmacotherapy of headache".