

RxFiles Drug Comparison Charts

12th Edition (Nov 2019)

CHART PEARLS

BY THE NUMBERS

Total pages: 244 New pages: 42 New charts: 20 Changes: thousands. Charts updated daily, then to web/app.

• Antibiotics: Oral & IV Expanded

Antibiotics: Beta Lactam Allergy & Harms	p. 86-87
Antibiotics for Acute Otitis Media, Bronchitis,	p. 88-98
Pharyngitis, Sinusitis & Skin	
HIV (a complete overhaul)	р. 105-106
Community Acquired Pneumonia (CAP) Management	р. 110-111
Probiotics	p. 113-114
Cystitis- Uncomplicated	р. 116-117
Chronic Non-Cancer Pain (CNCP)	p. 121-124
Opioids: Prescribing Safely & Strategies	р. 130-133
Osteoporosis Chart (a complete overhaul)	p. 137-138
Rheumatoid Arthritis: DMARDS (additional 2 pages)	p. 139-141
Seizures: Antiepileptics (additional 2 pages)	р. 155-158
 Cannabinoids (additional 2 pages) 	p. 199-201
• Dry Eye	p. 213-214
• Substance Use Dx / Addiction / Stimulant Use Disorder	p. 219-221

• Opioid Use Disorder

SCANNING THROUGH THE CHARTS

Some Highlights Include:	Go To
Significant revisions to DAPT/TT chart: incorporation of major trials	p.19-20
(PIONEER, AUGUSTUS, ENTRUST, TWILIGHT); dual therapy has less	
bleeding risk than triple therapy, and appears to be as effective!	
Incorporation of major SGLT-2 trials: CREDENCE, CANVAS	p.40-42
(canagliflozin), DECLARE, DAPA-HF (dapagliflozin).	
Update of self-monitoring blood glucose monitors and insulin pens,	p.43-44
highlighting unique features of each product.	
Update of HIV chart with new products (JULUCA, DOVATO), drug	p.105-106
coverage, safety information and more.	
Expansion of Seizure chart to include overview, clinical pearls,	p.155-158
approach to treatment and more. (including pregnancy section)	
Significant revisions to Multiple Sclerosis chart to include different	p.148
products, treatment of disabling relapse and more.	
Update of information based on guidelines and recommendations	p.171-174
and addition of new BRANDs in Over-The-Counter chart.	
Incorporation of AAP, NICE guidelines and recommendations in	p.175-176
ADHD chart; stimulants are recommended 1 st line for >6yrs.	
Incorporation of SYGMA 1/2 trial in Asthma chart, outlining the use	p.191-192
of LABA/ICS given only prn for mild asthma.	
Incorporation of FLAME, IMPACT trial on new COPD pathways; new	p.193-194
TRELEGY ELLIPTA; use of N-acetylcysteine in COPD chart.	
Info on starting SUBOXONE, including both conventional &	p.222-224
microdosing off-label approaches; new SUBLOCADE and PROBUPHINE;	
considerations for pain management in Opioid Use Disorder chart.	

SOME OF THE GUIDELINES REVIEWED

- Cardiovascular: Primary prevention ^{ACC/AHA'19}, A.fib ^{AHA'18}, CCS'18, CHEST'18, Dyslipidemia ^{ESC'19}, AHA'18, Hypertension ^{AHA'18}, ESC'18, Hypertension Canada'18
- Diabetes: Treatment Endo Soc'19, ADA'19, Diabetes Canada'18, Diabetes/Pre-diabetes/CVD ESC'19, A1C targets ACP'18
- Neuro/Psych: Migraine AAN'19, ADHD AAP'19, CADDRA'18, Parkinson's Disease, Bipolar Disorder CANMAT'18, Alcohol Use Disorder APA'18
- Gastrointestinal: Ulcerative Colitis ACG'19, AGA'19, Crohn's CAG, ACG'18, IBD AGA'18, IBS CAG, AGA'19, Antiemetic ASCO'17
- Infectious Diseases: HPV ACIP'19, Cystitis AUA/CUA/SUFU'19, Hepatitis C CASL'18, Vaccines ACIP'18, HIV IAS-USA'18, EACS'17, C. diff AMMI'18, IDSA'17
 Othere: CODD G900'19 (TS'19, Boors Criteria AGS'19)
- Others: COPD Gold'19, CTS'19, Beers Criteria AGS'19, Multiple Sclerosis ANN'18, Erectile Dysfunction AUA'18... etc

PRICE CHANGES

Significant >10% price decrease:

• NITRO-DUR (all strengths): -30% → \$4-14 less/month

Significant >10% price increase:

• IBAVYR (all strengths): +50% \rightarrow up to \$785 more/month

Moderate 5-10% price increase:

p. 81-85

p. 222-224

- Oral Contraceptive Pills TRI-CYCLEN, TRI-CYCLEN LO, CYCLEN: +9%
 → \$20-30 more/month
- TYLENOL with codeine #2, #3, #4: +9% \rightarrow \$3-7 more/month
- CONCERTA (most strengths): +5% \rightarrow \$4-6 more/month
- ZYPREXA, ZYPREXA ZYDIS (all strengths): +5% \rightarrow \$3-17 more/month

NEW DRUG (BRAND NAME) ADDITIONS

ADDYI, ADYLXINE, AIMOVIG, AKYNZEO, BELSOMRA, BIKTARVY, CONTRAVE, CRESEMBA, DELSTRIGO, EVENITY, FASENRA, JULUCA, MAVENCLAD, MEZERA, MONOFERRIC, MOVAPO, OLUMIANT, ONSTRYV, ORILISSA, OZANEX, OZEMPIC, PROBUPHINE, SILIQ, SOLIQUA, STEGLUJAN, SYMTUZA, SYRIZI, TRELEGY ELLIPTA, TRUMENBA, VYZULTA, VIIBRYD, XULTOPHY, XIIDRA... LOTS!

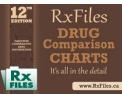
STATUS & REIMBURSEMENT CHANGES

- <u>New generics¹⁵</u>: AGGRENOX, ATRIPLA, ABILIFY, budesonide nebs, CHAMPIX, COVERSYL PLUS, DUOTRAV, FOSFOMYCIN, HP-PAC, hydralazine, hydromorph contin, INSPRA, LEVITRA, MACROBID, MAVIK, methimazole, perindopril, PRADAXA, RENAGEL, SUBOXONE, TAMIFLU, TROSEC, ULORIC, VIMPAT, VIMOVO, VOLIBRIS, ZELDOX.
- On SK Formulary: BASAGLAR, benztropine 1mg, celecoxib, ciclopirox, clopidogrel, DETROL LA, ENSTILAR, HUMALOG KWIKPEN ^{2001U/mL}, M-EDIAT, KYLEENA, methotrexate SC inj, olanzapine, TRESIBA, TRUVADA, VESICARE
- <u>New EDS</u>: AXERT, BIKTARVY, BOTOX, BRILINTA^{60mg}, BRIVLERA, DUODOPA, DYSPORT, DYSPORT, ERELZI, FASENRA, GLATECH, HEMANGIOL, INVEGA TRINZA, KEVZARA, LANCORA, LIXIANA, MICTORYL PEDIATRIC, MOVAPO, NUCALA, OCALIVA, OCREVUS, ODEFSEY, PRALUENT, REPATHA, PROBUPHINE, PROCYSBI, QUINSAIR, RAVICTI, RENFLEXIS, REXULTI, SILIQ, STELARA, SYNJARDY, TALTZ, UPTRAVI, VOSEVI
- New full NIHB ▼: ADDERALL, AVODART, BASAGLAR, BIANCA, DETROL LA, DITROPAN XL, ENSTILAR, ENTOCORT ^{3mg}, EPURIS, JARDIANCE, JULUCA, KYLEENA, LAMAS for COPD (SPIRIVA, TUDORZA, SEEBRI, INCRUSE), LAMA+LABA combo for COPD (DUAKLIR, ULTIBRO, INSPIOLTO, ANORO), methotrexate SC inj, MEZERA, MICTORYL PEDIATRIC, NICORETTE QUICKMIST, ODEFSEY, oseltamivir, OZEMPIC, PROSCAR, REXULTI, SYNJARDY, TUOJEO, TRESIBA, TRILEPTAL, ZOMIG ^{SPRAY} (▼ used when has SPDP restrictions)
- New prior NIHB approval ②: ADEMPAS, AFINITOR, ANDRODERM, ANDROGEL, BOSULIF, BRIVLERA, CAYSTON, COLY-MYCIN, COSENTYX, DIFICID, ENTYVIO, ERELZI, ESBRIET, HEMANGIOL, IBRANCE, IMBRUVICA, INLYTA, INVEGA TRINZA, JAKAVI, LANCORA, LIXIANA, MAVIRET, 11 Multiple sclerosis drugs, NUCALA, OCREVUS, PRALUENT, RENFLEXIS, RENVELA, REPATHA, rotigotine, SILIQ, STIVARGA, TANTUM, TALTZ, TASIGNA, tenofovir, TESTIM, UPTRAVI, VOSEVI, XALKORI, XIGDUO

OUTCOME EVIDENCE FROM MAJOR TRIALS

Major outcome trials & drug dosages used are often noted on charts when pertinent. Relatively recent:

CARES (Allopurinol vs febuxostat in gout+CVD patients), COMPASS (Rivaroxaban+ASA for 2° CVD prevention), FOURIER (Evolocumab effect on CV events), IMPACT (Trelegy vs Bre <u>or</u> Anoro for COPD), ODYSSEY(Alirocumab in ACS patients), RE-DUAL PCI (dabigatran+clopidogrel vs triple therapy with warfarin) SPACE (Opioid vs nonopioid in tx of CNCP), TARDIS (triple antiplatelet therapy vs standard for stroke), TRUST (levothyroxine in older pts with subclinical hypothyroidism), & VERO (teriparatide vs risedronate in PMO osteoporosis).



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RECENT ADVERSE REACTION ADVISORY	RxFiles Online www.RxFiles.ca	
Health Canada Advisories, Warnings and Recalls - Health Canada & FDA	✓ FREE Newsletters, Q&As, Trial Summaries to all	
 Vaping Products ^{Sept/19}: potential risk of pulmonary illness Modafinil ^{June/19}: associated with cases of major fetal congenital 	✓ Subscribe to RxFiles email updates	
 modalining associated with cases of major retain congenital malformations when used in pregnancy; now CI in pregnancy 	·	
 Gentian Violet ^{June/19}: exposure may ↑CA risk; advised to stop use 	For those with subscription or a Saskatchewan SHIRP account ✓ Drug comparison charts with weekly updates	
 Tocilizumab ^{May/19}: serious drug-induced liver injury reported 		
Belimumab Apr/19: depression, suicidal ideation or behavior and	 RxFiles+ app with quarterly updates; download on your iPad, 	
self-injury reported more frequently vs. standard therapy	iPhone or Android device	
 Daratumumab Mar/19: hepatitis B virus reactivation reported 	 ✓ Other features: links, program information, references, 	
 Atezolizumab Mar/19: immune-related myositis reported 	search function	
 Hydrochlorothiazide Jan/19: prolonged use may ↑non-melanoma 		
skin cancer risk	Link to order form: <u>http://www.rxfiles.ca/rxfiles/uploads/documents/1A-CHT-Book-ORDERFORM.pdf</u>	
 Rivaroxaban^{Dec/18}: ^all-cause mortality, thromboembolic and bleeding events after transcatheter aortic valve replacement 	Our Editors: Brent Jensen, Loren Regier, Lynette Kosar, Julia Bareham, Alex Crawley, Marlys LeBras, Taisa Trischuk, Margaret Jin	
Ranitidine Products Sept/19: concerns of NDMA contamination		
	SYMBOLS	
PICTURES & COLORS SPEAK A 1000 WORDS	Canada (We are Canadian)	
Colours used within the Charts	X Non-formulary in Saskatchewan	
	Exception Drug Status (EDS) in Saskatchewan (SK)	
Green shading usually indicates HERBAL/LIFESTYLE related	<mark>(1-800-667-2549)</mark>	
Blue shading usually indicates PEDIATRIC related	Not covered by NIHB (Non-Insured Health Benefits)	
Dark Blue shading usually indicates ADOLESCENT related	https://www.canada.ca/en/indigenous-services-canada/services/non-insured-health-benefits-first-nations- inuit/benefits-services-under-non-insured-health-benefits-program/drugs-pharmacy-benefits/drug-benefit-list.html	
Tan shading usually indicates ELDERLY related	Prior approval required by NIHB. Coverage for eligible First	
Purple script usually indicates TRADE NAMES	V Nations & Inuit (1-800-580-0950)	
Yellow highlights CLINICAL DIFFERENCES, PRACTICE GAPS & COMMON ?'s	Covered by NIHB. Identified <u>ONLY</u> for those drugs which have SK	
Blue script usually indicates MAJOR TRIALS	Formulary restrictions such as EDS or non-formulary status.	
Pink script usually indicates PREGNANCY & LACTATION related	 Retail <i>Cost to Consumer</i> price based on acquisition cost, markup & dispensing fee in Saskatchewan. Lowest generic price use when 	
Red shading usually indicates official FDA black box or HC warning	where available.	
Gray script usually indicates DISCONTINUED drug	Full medication coverage by the Saskatchewan Cancer Centre	
Purple shading usually indicates OVERVIEW/GUIDELINE approach	Warfarin interactions on the herbal chart	
	ζ Tablet is scored. Appears as superscript, e.g. 25 ^{ς} mg tablet.	
GERI-RXFILES 3RD EDITION	😳 Tastes good	
ASSESSING MEDICATIONS See our NEW Geri-RxFiles 3 rd ed.	Concern if drug or herbal is given Pre-Op	
IN OLDER ADULTS		

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CAN BE

Male



See our **NEW** Geri-RxFiles 3rd ed. for useful tools, tips and strategies when caring for older adults! https://www.rdiles.ca/rdiles/uploads/documents/1A-CHT-Book-ORDERFORM-Geri-RkTiles.adf

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COMMONLY USED ABBREVIATIONS

con	AIVIONET USED ADDREVIATIONS
AE	Adverse event
BID	Twice daily
BP	Blood pressure
Bz	Benzodiazepine
СІ	Contraindication
CV	Cardiovascular
DI	Drug interaction
Dx	Diagnosis/disease
HSR	Hypersensitivity reaction
LFT	Liver function tests
М	Monitoring
ОТС	Over the counter
Þ	Porphyria
QID	Four times daily
eGFR	Estimated glomerular filtration rate
g	Generic available
GI	Gastrointestinal
HA	Headache
HF	Heart failure
HR	Heart rate
HS	Bedtime
SCr	Serum creatinine
SJS	Stevens Johnson Syndrome
Sx	Syndrome/symptom
Sz	Seizure
TID	Three times daily
Тх	Treatment/Therapy

DRUGS IN PREGNANCY & LACTATION RISK CATEGORIES		
PREGNANCY [P]	LACTATION [L]	
Safe P	Safe L	
 Compatible in pregnancy 	Compatible in breastfeeding	
Likely Safe P	Likely Safe	
 No (limited) human data – probably compatible Compatible: maternal benefit >> embryo-fetal risk Human data suggest low risk 	 No (limited) human data – probably compatible 	
Caution P	Caution L	
 Human, and or animal, data suggest risk P Potential risk in specific trimester(s), as indicated by 'x' Px 	 Hold/delay breastfeeding No (limited) human data – potential toxicity 	
Contraindicated P	Contraindicated	
Contraindicated in pregnancy	Contraindicated in breastfeeding	
 Contraindicated in specific trimester(s), as indicated by 'x' 	What you'll see in the charts: P = pregnancy L = lactation risk category	
Unknown for Pregnancy P and/or Lactation	Colours correspond to risk categories outlined in this table. Example, warfarin:	
 No (limited) human data – no relevant animal data 	P = contraindicated 1 st trimester L = compatible during lactation	
Reference: Drugs in Pregnancy and Lactation. 11 th ed. Briggs GG, Freeman RK, Towers CV, Forinash AB, editors. Williams & Wilkins; Philadelphia, PA: 2017.	PiL	

Avoid if patient has soybean & peanut allergy

Dose \downarrow may be required for **liver** dysfunction

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2) toxic if accumulates 3) an active metabolite requiring dose adjustment. [CrCl <60mL/min indicates impaired renal function]

Dose \downarrow required for **renal** dysfunction <u>if</u> 1) drug \geq 75% renal excretion

Female