

# **RxFiles Drug Comparison Charts**

14th Edition (Aug 2023)

# **CHART PEARLS**

## **BY THE NUMBERS**

Total pages: 246 New chart pages: 12

Changes: thousands. Charts updated daily, then to web/app.

#### **NEW AND REVAMPED CHARTS**

Art of Optimizing Heart Failure Medications pg. 27-28 Gestational Diabetes & T2DM in Pregnancy pg. 57 Inflammatory Bowel Disease pg. 71-73 COVID-19 Prevention & Outpatient Treatment pg. 121-122 Common Analgesics & Co-Analgesics pg. 130 Depression Colour Comparison pg. 179 Depression & Anxiety in Children & Adolescents pg. 180
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Treatment-Resistant Depression pg. 181
Attention Deficit Hyperactivity Disorder Overview pg. 182-184
Anxiety Overview pg. 185
Asthma Colour Comparison Chart pg. 207

## **SCANNING THROUGH THE CHARTS**

Some Highlights Include:	Go To
New RCT data suggests no difference in efficacy between chlorthalidone and hydrochlorothiazide in hypertension; however chlorthalidone has a greater risk of hypokalemia.	pg 4
Finerenone KERENDIA now approved in Canada for patients with chronic kidney disease in diabetes – may consider if ACR>3 despite ACEi/ARB + SGLT2i therapy (but coverage currently limited).	pg 48
Budesonide ENTOCORT is now the only steroid enema available in Canada for treating inflammatory bowel disease.	pg 72
New progestin-only contraceptive drospirenone SLYND may have a more forgiving dosing window than norethindrone MICRONOR.	pg 167
New comparison of onset and duration for ADHD stimulant therapy, to help adjust therapy to improve efficacy or manage adverse effects.	pg 183
Pregabalin has evidence for benefit if SSRI/SNRI non-response in anxiety.	pg 185
New info on off-label dosing of naltrexone PRN for alcohol use disorder – 50mg PRN 1-2 hours before anticipated time of drinking or when cravings arise.	pg 200
Asthma Colour Comparison chart shows which inhalers have dose counters, a low carbon footprint, low bioavailability, option for once daily dosing, and other comparisons	pg 207

## **SOME OF THE GUIDELINES REVIEWED**

Heart Failure AHA/ACC'22; Obesity AGA'22; Diabetes ADA'22; Depression ACP'23; COPD GOLD'23; Asthma CTS'21; Vaccinations ACIP'22; Osteoporosis ACP'23 and SOGC'22; Chronic Idiopathic Constipation AGA'23; Menopause NAMS'23 and SOGC'22; Head Lice AAP'22; GERD ACG'22; Perioperative DMARD Guide for THA/TKA ACR'22; IBS with Constipation AGA'23; Erectile Dysfunction CUA'21

#### **SOME PRICE CHANGES**

#### **Price Decreases:**

- ATAZANAVIR (300MG) was \$440/month, now \$263/month
- APIXABAN (5MG) was \$118/month (brand), now \$37/month (generic)
- JANUVIA XR (1000/50MG) was \$135/month (brand), now \$75/month (generic)
- ACTONEL DR (35MG) was \$58/month (brand), now \$32/month (generic)
- PROMETRIUM (200MG) was \$93/month (brand), now \$30/month (generic)
- AUDRINA -GENERIC ALESSE (DAILY) was \$13/month, now \$10/month
- DAPAGLIFLOZIN was \$320/3 months (brand), now \$90/3 months (generic, not yet SPDP formulary, but NIHB open benefit in some provinces)

#### **Price Increases:**

- FENTANYL PATCHES (25MCG/HR) was \$50/month, now \$104/month
- CARBAMAZEPINE (400MG BID) was \$44/month, now \$60/month
- DIAZEPAM (10MG TABS BID) was \$17/month, now \$87/month
- BUPROPION (150MG SR BID) was \$26/month, now \$71/month

## **SOME NEW DRUG (BRAND NAME) ADDITIONS**

ARAZLO, CEQUA, LEQVIO, MYINFLA, NEXTSTELLIS, OSPHENA, PONVORY, REMIMA, TRULANCE, VRAYLAR, VYEPTI, XYDALBA, CAMZYOS, RUKOBIA, SKYRIZI, SLYND, TEZSPIRE, VABLYS, VAXNEUVANCE, VYEPTI, AREXVY, KERENDIA, KIRSTY, SEMGLEE, ONDEXXYA, PREVNAR-20, UBRELVY, WEGOVY ... MANY!

#### **SOME FORMULARY CHANGES**

- New generics: apixaban, risedronate DR, teriflunomide, ticagrelor, ciprofloxacin/dexamethasone, amox/clav, clonidine, cloxacillin, calcipotriol/betamethasone dipropionate, darifenacin, lurasidone, darunavir, micronized progesterone, octreotide LAR, adapalene/benzoyl peroxide, ethinyl estradiol/drospirenone, tofacitinib
- New SK Formulary: BAQSIMI, CREON-35, DUOBRII, ENTUZITY, ESTRAGYN, EZETROL, HALOETTE, NEXPLANON, SPIRIVA, SUBOXONE SL, TRINTELLIX, TRURAPI, ARAZLO, KIRSTY, SEMGLEE
- New EDS 

  : AJOVY, ATECTURA, BREZTRI, EMGALITY, CABENUVA, ENERZIAR, FOQUEST, ILUMYA, KESIMPTA, KYNMOBI, MAYZENT, RINVOQ, VASCEPA
- New NIHB ▼: AERMONY, CABENUVA, DUOBRII, ENTUZITY, FOQUEST, HALOETTE, NEXPLANON, RIABNI, TRINTELLIX, VOCABRIA, ENSTILAR, LIBERTE IUD, pregabalin, SEMGLEE, SHINGRIX if ≥60yrs of age
- New NIHB prior approval ©: AJOVY, ATECTURA, BAQSIMI, ENERZAIR, VASCEPA, DEXCOM or LIBRE continuous glucose meters for any patient on insulin

## **OUTCOME EVIDENCE FROM MAJOR TRIALS**

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

REDUCE-IT: icosapent ethyl VASCEPA vs mineral oil (as placebo) in patients with elevated triglycerides despite statin therapy (see page 29).

<u>**DELIVER**</u>: dapagliflozin **FORXIGA** vs placebo in patients with heart failure with mildly reduced or preserved ejection fraction (see page 23).

EPIC-HR: nirmatrelvir/ritonavir PAXLOVID for treatment of unvaccinated COVID 19 patients with 1+ risk factors (see page 122).



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#### RECENT ADVERSE REACTION ADVISORY

Health Canada Advisories, Warnings and Recalls - Health Canada & FDA

- Ulipristal ELLA may lose effectiveness when taken within 5 days of a progestin-containing contraceptive (see page 170).
- Nirmatrelvir/ritonavir PAXLOVID may interact with immunosuppressants such as cyclosporin and tacrolimus (see page 122).
- Esketamine SPRAVATO may have a risk of respiratory depression (see page 178).

## **COLORS SPEAK A 1000 WORDS...**

## **Colours used within the Charts**

**Green** shading usually indicates **HERBAL/LIFESTYLE** related

Blue shading usually indicates PEDIATRIC related

Dark Blue shading usually indicates ADOLESCENT related

Tan shading usually indicates GERIATRIC/OLD adults related

Purple script usually indicates TRADE NAMES

Yellow highlights CLINICAL DIFFERENCES, PRACTICE GAPS & COMMON?'s

**Blue** script usually indicates **MAJOR TRIALS** 

Pink script usually indicates PREGNANCY & LACTATION related

Red shading usually indicates official FDA black box or HC warning

Gray script usually indicates DISCONTINUED drug

Purple shading usually indicates OVERVIEW/GUIDELINE approach



See our Geri-RxFiles 3<sup>rd</sup> ed. for useful tools, tips and strategies when caring for older adults!

COMMONLY USED ABBREVIATIONS				
AE	Adverse event			
BID	Twice daily			
BP	Blood pressure			
bz	Benzodiazepine			
CI	Contraindication			
CV	Cardiovascular			
DI	Drug interaction			
dx	Diagnosis/disease			
HSR	Hypersensitivity reaction			
LFT	Liver function tests			
M	Monitoring			
ОТС	Over the counter			
HTN	Hypertension			
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			
tx	Treatment/Therapy			
BMD	1D Bone mineral density			
MI	Myocardial infarction			
NNT	Number needed to treat			
NNH	Number needed to harm			

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SYMBOLS					
*	Canada (We are <b>Canadian</b> )				
X	Non-formulary in Saskatchewan				
<b>a</b>	Exception Drug Status (EDS) in Saskatchewan (SK) (1-800-667-2549)				
8	Not covered by NIHB (Non-Insured Health Benefits)  https://www.canada.ca/en/indigenous-services-canada/services/non-insured-health-benefits-first-nations-inuit/benefits-services-under-non-insured-health-benefits-grogram/drugs-pharmacy-benefits/drug-benefit-list.html				
Ø	Prior approval required by <b>NIHB.</b> Coverage for eligible <b>First Nations &amp; Inuit (1-800-580-0950)</b>				
•	Covered by NIHB. Identified ONLY for those drugs that have SK Formulary restrictions such as EDS or non-formulary status.				
\$	Retail Cost to Consumer price based on acquisition cost, markup & dispensing fee in Saskatchewan. Lowest generic price used when where available.				
*	Full medication coverage by the Saskatchewan Cancer Centre				
W	Warfarin interactions on the herbal chart				
ς	Tablet is scored. Appears as superscript, e.g. 25 <sup>c</sup> mg tablet.				
$\odot$	Tastes good				
P	Concern if drug or herbal is given Pre-Op				
8	Avoid if patient has soybean & peanut allergy				
₫	Male	+0	Female		
	Dose $\Psi$ may be required for	Dose			
A	Dose   Prequired for renal dysfunction if 1) drug ≥ 75% renal excretion 2) toxic if accumulates 3) an active metabolite requiring dose adjustment. [CrCl <60mL/min indicates impaired renal function]				

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 L			
<ul> <li>No (limited) human data – probably compatible</li> <li>Compatible: maternal benefit &gt;&gt; embryo-fetal risk</li> <li>Human data suggest low risk</li> </ul>	No (limited) human data – probably compatible			
Caution P	Caution L			
<ul> <li>Human, and or animal, data suggest risk</li> <li>Potential risk in specific trimester(s), as indicated by</li> <li>'x'</li> </ul>	<ul> <li>Hold/delay breastfeeding</li> <li>No (limited) human data – potential toxicity</li> </ul>			
Contraindicated P	Contraindicated [			
Contraindicated in pregnancy P	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 L	Colours correspond to risk categories outlined in this table. Example, warfarin:  P = contraindicated 1st trimester  L = compatible during lactation  P1 L			
No (limited) human data – no relevant animal data				
Reference: Drugs in Pregnancy and Lactation.  12 <sup>th</sup> ed. Briggs GG, Freeman RK, Towers CV, et al, editors. Wolters Kluwer; 2021.				