



# 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
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 <b>KERENDIA</b> 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 <b>ENTOCORT</b> is now the only steroid enema available in Canada for treating inflammatory bowel disease.	pg 72
New progestin-only contraceptive drospirenone <b>SLYND</b> may have a more forgiving dosing window than norethindrone <b>MICRONOR</b> .	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 <sup>AHA/ACC'22</sup>; Obesity <sup>AGA'22</sup>; Diabetes <sup>ADA'22</sup>; Depression <sup>ACP'23</sup>; COPD <sup>GOLD'23</sup>; Asthma <sup>CTS'21</sup>; Vaccinations <sup>ACIP'22</sup>; Osteoporosis <sup>ACP'23 and SOGC'22</sup>; Chronic Idiopathic Constipation <sup>AGA'23</sup>; Menopause <sup>NAMS'23 and SOGC'22</sup>; Head Lice <sup>AAP'22</sup>; GERD <sup>ACG'22</sup>; Perioperative DMARD Guide for THA/TKA <sup>ACR'22</sup>; IBS with Constipation <sup>AGA'22</sup>; Erectile Dysfunction <sup>CUA'21</sup>

### 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/month (brand), now \$90/month (generic, but not yet formulary)

#### 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, PREVARNAR-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, RINVOO, 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, ENERZAI, 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).
- **DELIVER:** 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

<b>Green</b> shading usually indicates <b>HERBAL/LIFESTYLE</b> related
<b>Blue</b> shading usually indicates <b>PEDIATRIC</b> related
<b>Dark Blue</b> shading usually indicates <b>ADOLESCENT</b> related
<b>Tan</b> shading usually indicates <b>GERIATRIC/OLD</b> adults related
<b>Purple script</b> usually indicates <b>TRADE NAMES</b>
<b>Yellow highlights</b> <b>CLINICAL DIFFERENCES, PRACTICE GAPS &amp; COMMON ?'s</b>
<b>Blue script</b> usually indicates <b>MAJOR TRIALS</b>
<b>Pink script</b> usually indicates <b>PREGNANCY &amp; LACTATION</b> related
<b>Red</b> shading usually indicates official FDA black box or HC warning
<b>Gray</b> script usually indicates <b>DISCONTINUED</b> drug
<b>Purple</b> shading usually indicates <b>OVERVIEW/GUIDELINE</b> approach



See our Geri-RxFiles 3<sup>rd</sup> ed. for useful tools, tips and strategies when caring for older adults!  
<https://www.rxfiles.ca/files/uploads/documents/14>

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## SYMBOLS

	Canada (We are <b>Canadian</b> )		
<b>X</b>	Non-formulary in Saskatchewan		
	Exception Drug Status ( <b>EDS</b> ) in Saskatchewan ( <b>SK</b> ) <b>(1-800-667-2549)</b>		
	Not covered by NIHB (Non-Insured Health Benefits) <a href="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">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</a>		
	Prior approval required by <b>NIHB</b> . Coverage for eligible <b>First Nations &amp; Inuit (1-800-580-0950)</b>		
	Covered by NIHB. Identified <b>ONLY</b> for those drugs that have <b>SK</b> Formulary restrictions such as <b>EDS or non-formulary status</b> .		
<b>\$</b>	Retail <i>Cost to Consumer</i> 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		
	Warfarin interactions on the herbal chart		
	Tablet is scored. Appears as superscript, e.g. 25 <sup>5</sup> mg tablet.		
	Tastes good		
	Concern if drug or herbal is given <b>Pre-Op</b>		
	Avoid if patient has soybean & peanut allergy		
	Male		Female
	Dose ↓ may be required for <b>liver</b> dysfunction		
	Dose ↓ required for <b>renal</b> 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]		

## COMMONLY USED ABBREVIATIONS

<b>AE</b>	Adverse event
<b>BID</b>	Twice daily
<b>BP</b>	Blood pressure
<b>bz</b>	Benzodiazepine
<b>CI</b>	Contraindication
<b>CV</b>	Cardiovascular
<b>D</b>	Drug interaction
<b>dx</b>	Diagnosis/disease
<b>HSR</b>	Hypersensitivity reaction
<b>LFT</b>	Liver function tests
<b>M</b>	Monitoring
<b>OTC</b>	Over the counter
<b>HTN</b>	Hypertension
<b>QID</b>	Four times daily
<b>eGFR</b>	Estimated glomerular filtration rate
<b>g</b>	Generic available
<b>GI</b>	Gastrointestinal
<b>HA</b>	Headache
<b>HF</b>	Heart failure
<b>HR</b>	Heart rate
<b>HS</b>	Bedtime
<b>SCr</b>	Serum creatinine
<b>SJS</b>	Stevens Johnson Syndrome
<b>sx</b>	Syndrome/symptom
<b>sz</b>	Seizure
<b>TID</b>	Three times daily
<b>tx</b>	Treatment/Therapy
<b>BMD</b>	Bone mineral density
<b>MI</b>	Myocardial infarction
<b>NNT</b>	Number needed to treat
<b>NNH</b>	Number needed to harm

## DRUGS IN PREGNANCY & LACTATION RISK CATEGORIES

PREGNANCY [P]	LACTATION [L]
<b>Safe</b>	<b>Safe</b>
<ul style="list-style-type: none"> <li>• Compatible in pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>• Compatible in breastfeeding</li> </ul>
<b>Likely Safe</b>	<b>Likely Safe</b>
<ul style="list-style-type: none"> <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>	<ul style="list-style-type: none"> <li>• No (limited) human data – probably compatible</li> </ul>
<b>Caution</b>	<b>Caution</b>
<ul style="list-style-type: none"> <li>• Human, and or animal, data suggest risk </li> <li>• Potential risk in specific trimester(s), as indicated by 'x' </li> </ul>	<ul style="list-style-type: none"> <li>• Hold/delay breastfeeding</li> <li>• No (limited) human data – potential toxicity</li> </ul>
<b>Contraindicated</b>	<b>Contraindicated</b>
<ul style="list-style-type: none"> <li>• Contraindicated in pregnancy </li> <li>• Contraindicated in specific trimester(s), as indicated by 'x' </li> </ul>	<ul style="list-style-type: none"> <li>• Contraindicated in breastfeeding</li> </ul>
<b>Unknown for Pregnancy</b> <b>and/or Lactation</b>	
<ul style="list-style-type: none"> <li>• No (limited) human data – no relevant animal data</li> </ul>	
<b>Reference: Drugs in Pregnancy and Lactation.</b> 12 <sup>th</sup> ed. Briggs GG, Freeman RK, Towers CV, et al, editors. Wolters Kluwer; 2021.	

**What you'll see in the charts:**  
 P = pregnancy L = lactation risk category  
 Colours correspond to risk categories outlined in this table. Example, warfarin:  
 P = contraindicated 1<sup>st</sup> trimester  
 L = compatible during lactation

