

"It generates direct sales and just as importantly good will with customers"

Read what Jo McDowall has to say, click here.



Eli's innovation call

NEW medicine development holds the key to improving patient health care and access and also keeping long-term health care costs down, according to Eli Lilly ceo, Hohn Lechleiter.

Speaking in Germany this week, Lechleiter said that the continued development of new and better targeted drugs to tackle epidemics such as diabetes and cardiovascular disease continues to provide long term benefits to patient health.

He urged a shift in focus from the cost of drugs to the overall saving to the healthcare sector in general, through the prevention and retardation of costly hospital treatment and long term home care management.

"New medicines alleviate the growing human and economic toll of Alzheimer's disease [and] address countless other unmet medical needs around the world could have dramatic positive impacts not only on the quality human life, but also on the capacity of our health care systems and the costs they incur," said Lechleiter.

He also hailed the economic benefit of the thousands of jobs provided via pharmaceutical R&D.

ACSOM members appointed

THE TGA has announced the membership of its new Advisory Committee on the Safety of Medicines (ACSOM), which replaces the former Adverse Drug Reaction Advisory Committee.

Members include pharmacist Dr Jane Robertson from the University of Newcastle, who has extensive expertise in pharmacy and pharmacoepidemiology.

The eight-member committee will be headed up by Professor Emily Banks, senior research fellow at the National Centre for Epidemiology and Population Health and former winner of the UK National Woman of Achievement in Science and Technology in 2000.

Other members include pharmacology and toxicology expert, Nick Buckley, who's Professor of Medicine at Prince of Wales Hospital, as well as Christopher Beer, Associate Professor of Geriatric Medicine at the University of Western Australia.

Also included is Associate Professor Danny Liew, director of Clinical Pharmacology and deputy director of General Internal Medicine, University of Melbourne,

and Deputy Director of the National Centre for Immunisation Research and Surveillance of Vaccine Preventable Diseases, Dr Kristine Macartney, who is also a Postgraduate Clinical Fellow at The Children's Hospital Westmead.

Former chair of ADRAC associate professor Simone Strasser (University of Sydney) and ADEC member Professor Duncan Topliss of Monash University and Director of Department of Endocrinology & Diabetes, The Alfred, Melbourne both round out the panel.

The team is scheduled to meet on 7 May, 2 Jul, 3 Sep and 5 Nov.

Zoton replacement

WYETH Australia has today announced the launch of a 15mg version of Zoton FasTabs (lansoprazole orodispersible tablets) replacing the current 15mg capsule.

The FasTabs will be PBS-listed from 01 Apr and are fully bioequivalent to the Zoton capsule.

The Zoton 30mg capsule was deleted from the PBS on 01 Nov 09 and the 15mg will similarly be removed from 01 Jun 2010.

Wound care for PBS

ASSOCIATE Professor Geoff Sussman of from the pharmacy department at Monash University has called for wound management products to be listed on the Pharmaceutical Benefits Scheme.

Speaking this week at the Australian Wound Management Association National Conference in Perth, Sussman said PBS neglect of wound care leads to "serious patient outcomes."

He said high risk groups such as the elderly and those on healthcare benefits should receive provision for wound treatments, and pharmacy could play a "vital role" in addressing Australia's significant wound management problem, with over 270,000 people currently living with the condition.

MEANWHILE the Wound Management Association also last night elected Associate Professor Bill McGuinness as its new president last night, with McGuinness saying a preventative approach to wound management is critical.

He outlined plans to engage with other healthcare stakeholders, and establish a national office to lobby the federal Government for better provision for chronic wound patients.

April MIMS Monthly Medicine Update

NEW PRODUCTS

Galvus (vildagliptin) is a member of the class that enhances islet cell insulin secretion via an augmented incretin effect and is a high affinity dipeptidyl-peptidase-4 (DPP-4) inhibitor that improves glycaemic control. The administration of vildagliptin results in rapid and near complete inhibition of DPP-4 activity. In patients with type 2 diabetes, administration of vildagliptin led to inhibition of DPP-4 enzyme activity for a 24 hour period. Vildagliptin inhibition of DPP-4 results in increased fasting and postprandial endogenous levels of the incretin hormones GLP-1 (glucagon-like peptide 1) and GIP (glucose-dependent insulinotropic polypeptide). The degree of improvement in beta-cell function is dependent on the initial degree of impairment; in nondiabetic (normal glycaemic) individuals, vildagliptin does not stimulate insulin secretion or reduce glucose levels. By increasing endogenous GLP-1 levels, vildagliptin enhances the sensitivity of alpha cells to glucose, resulting in reduced

glucagon secretion. There is a reduction in inappropriate glucagon release during meals. The increase in the insulin/glucagon ratio with hyperglycaemia, due to increased incretin hormone levels, may thus be expected to decrease postprandial hepatic glucose production, leading to reduced glycaemia. The known effect of increased GLP-1 levels to delay gastric emptying is not observed with vildagliptin treatment.

Galvus is indicated in the treatment of diabetes mellitus type 2 in persons 18 years of age and older, as an adjunct to diet and exercise to improve glycaemic control in patients with type 2 diabetes with one of metformin, a sulphonylurea or pioglitazone when diet, exercise and the single agent do not result in adequate glycaemic control. Vildagliptin should not be used in patients with type 1 diabetes or for the treatment of diabetic ketoacidosis.

The recommended dose of vildagliptin when used in combination with metformin, (clinical experience is with pioglitazone as dual therapy),

is 50 mg or 100 mg daily. The 50 mg dose should be administered once daily in the morning. The 100 mg dose should be administered as two divided doses of 50 mg given in the morning and evening. The recommended dose of vildagliptin when used in dual combination with a sulphonylurea (clinical experience is with glimepiride as dual therapy) is 50 mg once daily administered in the morning. Vildagliptin can be administered with or without a meal. Galvus is available on a private prescription as a 50 mg tablet in packs of 60.

NEW INDICATIONS

Avastin (bevacizumab) as a single agent is now indicated for the treatment of patients with Grade IV glioma after relapse or disease progression after standard therapy, including chemotherapy. The recommended dose is 10 mg/kg of body weight given once every 2 weeks or 15 mg/kg of body weight given once every 3 weeks as an intravenous infusion.

Prezista (darunavir) (with low dose ritonavir as a pharmacokinetic enhancer) is now indicated in combination

with other antiretroviral agents for the treatment of human immunodeficiency virus (HIV) infection in treatment experienced paediatric patients aged 6 years and older, weighing at least 20 kg. The recommended dose for treatment experienced paediatric patients (6 to < 18 years of age) for Prezista tablets and ritonavir is as follows: ≥ 20 kg to < 30 kg: Prezista 375 mg + ritonavir 50 mg twice daily; ≥ 30 kg to < 40 kg: Prezista 450 mg + ritonavir 60 mg twice daily; ≥ 40 kg: Prezista 600 mg + ritonavir 100 mg twice daily.

SAFETY RELATED CHANGES

Gastrointestinal perforations associated with **Avastin (bevacizumab)** have been reported in clinical trials with an incidence of up to 2% in patients with metastatic renal cell cancer. Vanishing bile duct syndrome has been reported rarely with the use of **Carbamazepine Sandoz (carbamazepine)**.

Cases of worsening thrombocytopenia and recurrence of thrombocytopenia in subjects who suffered thrombocytopenia after the first dose have been reported following vaccination

with **live measles, mumps and rubella (Priorix)** vaccines. In such cases, the risk benefit of immunising with Priorix should be carefully evaluated.

FDA MedWatch

FDA notified healthcare professionals and patients that, based on review of data from a large clinical trial and other sources, there is an increased risk of muscle injury in patients taking the highest approved dose of the cholesterol-lowering medication, **Zocor (simvastatin)** 80 mg, compared to patients taking lower doses of simvastatin and possibly other drugs in the "statin" class. FDA is also reviewing data from other clinical trials, observational studies, adverse event reports, and data on prescription use of simvastatin to better understand the relationship between high-dose simvastatin use and muscle injury.

This list is a summary of only some of the changes that have occurred over the last month. Before prescribing, always refer to the full product information

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CPD Calendar

WELCOME to *Pharmacy Daily's* Continuing Professional Development Calendar, featuring upcoming events and opportunities to earn CPE and CPD points.

If you have an upcoming event you'd like us to feature, email info@pharmacydaily.com.au.

26-28 Mar: PSA NSW March Weekend on the theme of Men's and Women's Health, at Mantra Ettalong Beach. 27.5 CPD credits - www.psa.org.au.

31 Mar: PSA SA Maintenance Treatment in Chronic Pain - Unley - more information sa.branch@psa.org.au.

06 Apr: PSA Qld 'Infant Feeding: Unpacking the evidence' session; PACE Auditorium - michael@psaqld.com.au.

17 Apr: PSA NSW 'Pharmacy Horizons: Careers' session; 4.30pm - 7.30pm - (02) 431 1126.

14-18 Apr: Australian College of Pharmacy conference Barossa Valley - 1300 651 239.

28 Apr-7 May: The PSA will hold its 35th annual offshore conference in Beijing and Shanghai - details on 1300 139 293.

30 Apr-01 May: Blackmores Research Symposium in Sydney - details 1800 151 493.

09 May: Drug Interaction Seminar presented by Debbie Rigby and Geraldine Moses, Brisbane - aacp@aacp.com.au.

26-28 May: The NPS's National Medicines Symposium 2010, Melbourne Conference and Exhibition Centre - www.nms2010.org.au.

29-31 May: The AACP's annual ConPharm clinical seminar at The Grand Chancellor Hotel in Hobart - details www.aacp.com.au.

04-06 Jun: Pharmacy Expo in Sydney - earn up to 20 CPD points in 3 days. More info www.pharmacyexpo.com.au.

15-18 Sep: Pharmacy 2010, the Pharmacy Management Conference on Hamilton Island - www.pharmacyconference.com.au.

11-14 Nov: The 36th National SHPA Conference, Medicines Management 2010 in Melbourne - mm2010shpa.com.

Indigenous diabetes crisis

THE Indigenous Diabetes forum is set to meet today in Melbourne to discuss methods to stem the growing tide of type-2 and cardiovascular disease rates in Central Australian Indigenous communities.

Currently around 30% of Australia's total Indigenous adult population suffers from type-2 diabetes, with the rates highest in Alice Springs where experts predict that the township will have the highest rate of diabetes in the world in a few years.

In fact, Alice Springs has the largest dialysis unit in the Southern Hemisphere with a population of just 27,000 - and almost 20% of all pregnancies in Alice are complicated by diabetes.

"At the centre of our prosperous nation we have an evolving tragedy," said world diabetes expert Professor Paul Zimmet, key speaker at today's forum.

"We must act immediately to help Indigenous communities where we are seeing a rapid increase in the number of children with type-2

diabetes, and many more young people presenting with heart attacks and kidney failure," he said.

Today's forum will see a joining of business, indigenous, community and health leaders to help create a speedy, workable and effective diabetes action plan.

"Unfortunately diabetes is out of control in Aboriginal communities, and what we need are solutions for its prevention, not more dialysis machines," said Australian businessman and attendee of today's forum, Andrew Forrest.

FDA Xifaxan approval

THE US Food and Drug Administration has approved a new indication for Salix Pharmaceuticals' Xifaxan (rifaximin) which can be now used for patients with advanced liver disease.

Already FDA approved for the treatment of travellers diarrhoea, this new indication approves Xifaxan's use for the reduction in the risk of the recurrence of overt hepatic encephalopathy, for advanced liver cancer patients.



DISPENSARY CORNER

LOVE knows no boundaries for this globetrotting bird.

A heart warming tale of a stork and his love was once again reaffirmed when the male stork, Rodan, undertook a journey of around 13,000kms from South Africa to a small village in Croatia to pay a visit to his lifelong mate.

Handicapped and unable to fly due to an encounter with hunters, the female stork called Malena, is cared for by a local villager who has watched Rodan return to his Melana every spring like clockwork.

Together the pair then co-raise a brood of chicks each year, which Rodan teaches to fly in place of Malena, who can not.

The approach of winter always coincides with the departure of Rodan and the chicks, and long months of waiting for his spring return by Melana.

YOU should smile and say "cheese" a lot more often!

A recent study published in Psychological Science has linked big smiles which produce laugh lines, to greater longevity.

Researchers at Wayne State University, studied photos of 230 major league baseball players, grouping them according to their smile type - 'deadpan' (no smile); 'partial smile (only mouth muscles involved in smile) and 'full smile' (all facial muscles involved).

The surprising results found that 'deadpan' players lived on average 72.9yrs, 'partial smile' players lived to 75 and 'full smile' players lived on average to 79yrs.

The researchers concluded that "emotions have a positive relationship with mental health, physical health and longevity".

A GROUNDBREAKING new type of hospital gown has been unveiled in the UK which promises to do a better job of protecting patient modesty.

Unlike the current models which have an embarrassing gap at the back, the proposed new designs have stylish snaps down the side which ensure the end of those nasty draughts.

WIN A FOREVER MATTE GIFT



CONGRATULATIONS to USrilatha Sreepathy of iNova Pharmaceuticals who's won a Forever Matte product by correctly answering yesterday's competition as 'Smudger'.

Total Beauty Network has teamed up with *Pharmacy Daily* this week, giving readers the chance to win a Forever Matte product.

Matte make up is the hottest trend - it doesn't mean that your make up becomes flat or boring, instead think of it as sheer or satiny.

It definitely tones down any dewiness or sparkle.

The Forever Matter collection includes Mineral Powder Foundation, Eyeshadow, Lipstick and both lip and eye pencils.

For your chance to win a Forever Matte product this week, simply send through the correct answer to the daily question below:

What are the two new lip pencil colours?

Send entry to: comp@pharmacydaily.com.au.

The first correct entry received each day will win.

Hint! Visit www.tbn.com.au.