Pharmacy DAILY
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Takeda acquisition

JAPANESE pharmaceutical company Takeda has acquired the Swiss pharmaceutical business, Nycomed for €9.6 billion, naming Frank Morich as CEO of the Zurich-based Nycomed.

The acquisition, according to Morich will bring "enhanced revenue, growth and diversification, while maintaining the strong momentum of both companies".

Heading up the combined Takeda and Nycomed commercial operation in Australia is the newly appointed Commercial Country Leader, James Jones.

"Takeda is now the 12th largest pharmaceutical company in the world, with a combined presence in more than 70 countries," said Jones.

"The integration unites the best talents from both companies, creating an unbeatable workforce and vibrant global culture," he added.

WIN AL'CHEMY PRODUCTS

This week ***Pharmacy Daily*** is giving five lucky readers the chance to win a shampoo & conditioner pack, courtesy of **Al'chemy**.

With a selection of hair strengthening shampoos, hydrating conditioners and rich hair treatments, the Al'chemy range is made with vitamins, protective anti-oxidants and natural botanical actives.

For more info, visit www.purist.com.

For your chance to win, simply be the first person to send in the correct answer to the question below to: comp@pharmacydaily.com.au

List 3 active ingredients in the Al'chemy Ylang Ylang shampoo?

Congratulations to yesterday's lucky winner, **Devina Jogia** of **Deepdene Pharmacy**, VIC.

Vitamins can be trusted

THE Australian Self Medication Industry is reassuring consumers and healthcare professionals about the safety of dietary supplements and multivitamins in the wake of a damning US study published in the *Archives of Internal Medicine*.

The study looked at the use of vitamin and mineral supplements in relation to total mortality in 38,772 older American women (with an average age of 62) and found that the use of multivitamins, Vitamin B6, folic acid, iron, magnesium, zinc and copper were associated with an increased risk of total mortality when compared with corresponding non-use.

To arrive at their conclusion the study authors from the University of Minnesota and the University of Eastern Finland, looked at self-reported supplement use in 1986, 1997 and 2004.

Interestingly, during this time, the total number of participants taking vitamins rose from 66% in 1986 to 85% in 2004.

"Based on existing evidence, we see little justification for the general and widespread use of dietary supplements," said the study authors.

ASMI has however hit back at the report, saying the authors acknowledged that they did not have the nutritional status of participants, and that they didn't hold detailed information on the supplements being used, why they were being used or the amount taken each day.

Importantly, ASMI said that the study did not show that vitamin supplements cause early death, and that it is possible that the women were taking the supplements in response to an illness which itself could have caused their death.

"It's crucial to recognise that general vitamin, mineral and supplement products in Australia are regulated under TGA guidelines, which stipulate a safe maximum daily intake (RDI) for many of the active ingredients discussed in this US study," said ASMI Regulatory and Scientific Affairs Director, Steven Scarff.

"Dietary vitamin and mineral supplements are important for many people.

"Consumers have made it very clear that they see a distinct role for these complementary medicines as part of an integrated approach to personal health, and they want GPs, pharmacists and other healthcare professionals to assist them in making the right choices," he added.

MEANWHILE the Complementary Healthcare Council of Australia (CHC) has weighed in on the debate saying that consumers can have confidence in Australian complementary medicines.

Discussing the study's findings the CHC's Executive Director Dr Wendy Morrow said "In short, the 'maths' is wrong".

Morrow said that because of the methodology of the study there was no way of differentiating between the impact of individual nutrients, when multiple supplements were taken and individual nutrient measures.

Morrow also criticised the "flawed research" saying it did not take into account any pre-existing health conditions.

It terms of the study's relativity to Australian consumers, Morrow said "it's really difficult to draw comparisons between Australia and other countries such as the US, due to the extremely tough regulatory consumer protections in place for medicines in Australia, as well as the completely different product formulations allowed elsewhere.

Two new AusPARS

THE Therapeutic Goods Administration has published two new AusPARs for Novartis Pharmaceuticals' Nilotinib and Merck Sharp & Dohme's Nomegestrol acetate/oestradiol.

See www.tga.gov.au.

Pharmacist winner

THIS week pharmacist Cathie Reid took out the coveted title of Commonwealth Bank Business Owner Award at the Queensland Telstra Business Women's Awards.

Reid beat out five competitors to take the crown, which was awarded to her for her efforts as Managing partner of APHS, a national hospital, oncology and aged care pharmacy provider.

"This award is more than an endorsement of my career and the entire APHS team; it is a reflection of our customers' support," she said.

"Our customers have helped APHS Packaging deliver one of the fastest growing pharmacy products in Australia, one that not only provides them with a business benefit but meets a growing community need," she added.

Cathie, pictured right, now proceeds to the National Telstra Business Women's Awards held on 18 Nov.

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Travel Specials

WELCOME to *Pharmacy Daily's* travel feature. Each week we highlight a couple of great travel deals for the pharmacy industry.

TEMPO Holidays is offering a Taste of Vienna from $1,040pp.

The package includes three nights with brekkie at the DO & Co Hotel; a three-course dinner; half day Historic Vienna and Schönbrunn tour; entrance to the Apple Strudel Show; coffee and cake at a typical Viennese coffee house and return private airport transfers, and is available for travel until 31 March 2012.

Call 1300 362 844 for details.

Addiction to get serious

AUSTRALIANS believe that addiction is not taken seriously enough, according to a new study conducted by StollzNow research for Pfizer Australia.

The research looked at responses from 1,035 Australian adults between the age of 18 and 65 and found that 67% believed that the treatment of addiction is not taken seriously enough, whilst 78% believed that addiction to nicotine, alcohol or illicit drugs should be considered treatable medical conditions.

Interestingly, despite these figures 17% of participants said they thought there is a safe level for cigarette smoking, whilst 13% said there was a safe level for illicit drug use.

Meanwhile worrying trends revealed in the survey included the fact that 47% of participants knew someone with an alcohol problem, 27% knew someone with an illicit drug problem, and a massive 68% knew someone addicted to nicotine.

"It's alarming that people do not recognise the gravity of substance abuse in Australia," said addiction specialist Dr Raymond Seidler.

"They still think, despite all the health warnings, that even small amounts of addictive substances are harmless, particularly nicotine in cigarettes," he added.

Of the smokers surveyed 22% said that nicotine addiction is a habit, not a medical condition, whilst 72% said that they would change their approach to quitting if they knew nicotine addiction was a recognised medical condition.

The change in approach, according to the respondents would include seeing a GP (70%) and using a medicine (64%).

Only 22% said that they would quit smoking "cold turkey".

"It is important that all Australians take action against these treatable medical conditions by seeking appropriate support," said Seidler.

DISPENSARY CORNER

EMERGENCY crews confront Evil.

A team of ambulance officers were confronted with a horrific scene of blood and gore when they responded to a call from a movie set in Toronto, Canada.

According to reports, 12 actors were injured when a high platform shifted suddenly.

Ambulance officers arriving at the scene found the actors covered head to foot in blood and bits, but upon closer inspection discovered that they were made up as zombies for the newest installment in the Resident Evil film franchise.

The actors themselves had only sustained injuries ranging from bruises to a broken leg.

October MIMS Monthly Medicine Update

NEW PRODUCTS

Eliquis **(apixaban)** is a reversible, direct and highly selective inhibitor of factor Xa. It does not require antithrombin III for antithrombotic activity. Apixaban inhibits free and clot-bound factor Xa, and prothrombinase activity. Apixaban has no direct effects on platelet aggregation, but indirectly inhibits platelet aggregation induced by thrombin. By inhibiting factor Xa, apixaban prevents thrombin generation and thrombus development. Eliquis is indicated for the prevention of venous thromboembolic events (VTE) in adult patients who have undergone elective total hip or total knee replacement surgery. Eliquis is contraindicated in clinically significant active bleeding (such as intracranial and gastrointestinal bleeding) and in patients with spontaneous or pharmacological impairment of haemostasis; in hepatic disease associated with coagulopathy and clinically relevant bleeding risk, including severe hepatic impairment (Child-Pugh C); in severe renal impairment with a creatinine clearance < 15 mL/min; in organ lesions at risk of clinically significant bleeding, including haemorrhagic stroke within the last 6 months, and in those receiving concomitant treatment with strong inhibitors of both CYP3A4 and P-gp, such as systemic treatment with azole antimycotics (e.g. ketoconazole) or HIV protease inhibitors (e.g. ritonavir). The recommended dose in patients undergoing hip replacement surgery is 2.5 mg twice daily for 32 to 38 days, and in patients undergoing knee replacement surgery 2.5 mg twice daily for 10 to 14 days. Eliquis is available as a 2.5 mg film coated tablet in blister packs of 20's, 30's or 60's.

Saphris **(asenapine maleate)** is a novel antipsychotic, belonging to the dibenzo-oxepino pyrrole class. The mechanism of action of asenapine is not fully understood, however, it is proposed that the efficacy of asenapine is mediated through a combination of antagonist activity at dopamine 2 (D_2) and serotonin 2A ($5\text{-}HT_{2A}$) receptors. Actions at other receptors, e.g. $5\text{-}HT_{1A}$, $5\text{-}HT_{1B}$, $5\text{-}HT_{2C}$, $5\text{-}HT_6$, $5\text{-}HT_7$, D_3, and α_2-adrenergic receptors, may also contribute to the clinical effects of asenapine. Saphris is indicated in the treatment of schizophrenia in adults; treatment of acute manic or mixed episodes associated with Bipolar 1 disorder in adults as monotherapy or in combination with lithium or sodium valproate, and in the prevention of relapse of manic or mixed episodes in Bipolar 1 disorder in adults as monotherapy or in combination with lithium or sodium valproate. Saphris has a recommended dose range of 5 mg to 10 mg twice daily. Saphris is available as 5 mg and 10 mg wafers in blister packs of 60's.

Yervoy **(ipilimumab)** is a recombinant, fully human monoclonal antibody (IgG1 kappa immunoglobulin) that binds to the cytotoxic T lymphocyte-associated antigen 4 (CTLA-4), which is a negative regulator of T-cell activation. Ipilimumab is a T-cell potentiator that specifically blocks the inhibitory signal of CTLA-4, resulting in T-cell activation, proliferation, and lymphocyte infiltration into tumours, leading to tumour cell death. The mechanism of action of ipilimumab is indirect, through enhancing T-cell mediated immune response. Yervoy, as monotherapy, is indicated for the treatment of patients with unresectable or metastatic melanoma who have failed or are intolerant to prior therapy. The recommended induction regimen of Yervoy is 3 mg/kg administered intravenously over a 90 minute period every 3 weeks for a total of 4 doses. Yervoy is available as 50 mg/10 mL and 200 mg/40 mL glass vials in packs of 1's.

NEW PRESENTATION

Dysport **(botulinum toxin type A)** is now available as a 300 U vial in packs of 1's.

NEW SAFETY RELATED CHANGES

Abilify **(aripiprazole)** is now classed as a Pregnancy category C medicine. Neonates exposed to antipsychotic drugs (including Abilify) during the third trimester of pregnancy are at risk of experiencing extrapyramidal neurological disturbances and/or withdrawal symptoms following delivery. There have been postmarket reports of agitation, hypertonia, hypotonia, tremor, somnolence, respiratory distress, and feeding disorder in these neonates.

Cases of renal failure (including acute failure), some with a fatal outcome, have been observed in patients treated with Afinitor **(everolimus).**

Combigan **(brimonidine tartrate; timolol maleate)** eye drops are now contraindicated in neonates and infants (children under the age of 2 years).

Crinone **(progesterone)** is now contraindicated in cerebral apoplexy.

A causal relationship between tamsulosin and sulfur allergy has not been established, however there is a theoretical risk of an allergic reaction when tamsulosin is taken by patients with a history of sulfur allergy. If a patient reports a serious or life threatening sulfur allergy, caution is warranted when administering Duodart **(dutasteride; tamsulosin hydrochloride)**.

Epilim **(sodium valproate)** is now contraindicated in acute hepatic dysfunction.

The concomitant use of Epilim or Epilim IV **(sodium valproate)** and carbapenem antibiotics is not recommended.

Marvelon 28 **(ethinyloestradiol; desogestrel)** is now contraindicated in known predisposition for venous or arterial thrombosis, such as activated protein C (APC) resistance, antithrombin III deficiency, protein C deficiency, protein S deficiency, hyperhomocysteinaemia, and antiphospholipid antibodies.

When given together with proton pump inhibitors, methotrexate levels have been reported to increase in some patients. In high dose methotrexate administration a temporary withdrawal of Nexium **(esomeprazole)** may need to be considered.

Serdolect **(sertindole)** is now classified as a Pregnancy category C medicine.

Solian **(amisulpride)** is now classed as a Pregnancy category C medicine.

Zofran **(ondansetron)** should be administered with caution to patients who have or may develop prolongation of QTc. This includes patients with electrolyte abnormalities, congenital long QT syndrome, or patients taking other medicinal products that lead to QT prolongation.

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.