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Pradaxa and surgery

ATRIAL fibrillation patients who received treatment with Pradaxa (dabigatran etexilate) can undergo surgery more quickly following treatment cessation and without increasing the risk of bleeding compared to warfarin, according to a new study published in *Circulation*.

The *Peri-Procedural Bleeding and Thromboembolic Events with Dabigatran Compared to Warfarin: Results from the RE-LY Randomized Trial* study compared the peri-procedural bleeding risk of patients in the RE-LY trial treated with dabigatran and warfarin.

Bleeding rates were evaluated from 7 days prior until 30 days following invasive procedures.

The study looked at 4,591 patients who underwent at least one invasive procedure: 24.7% of patients receiving dabigatran-110; 25.4% on dabigatran-150 and 25.9% on warfarin, $p=0.34$.

According to the results, Pradaxa patients were able to undergo surgery within 48 hours of stopping therapy, compared to patients taking warfarin (46% for dabigatran 150mg bid/110mg bid vs. 11% for warfarin, $p < 0.001$).

In addition, the study found that discontinuing Pradaxa within 48 hours of surgery was associated with a lower risk of peri-operative bleeding compared to similar discontinuation times with warfarin.

Overall the study also found that there were similar rates of bleeding and thrombotic events for patients on Pradaxa and warfarin who underwent surgery.



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Asthma and COPD growth

THE global market for asthma and COPD drugs is expected to reach US\$26,965.5 million in 2017, up from US\$25,102.3m in 2010, according to a new report by Transparency Market Research.

The report also estimated that over the seven year period, the asthma and COPD drug market would experience a compound annual growth rate of 1.03%.

Looking at the 2010 figures, the report found that the asthma drug segment dominated the overall asthma and COPD market at US\$14,509.1 million, whilst the COPD segment was estimated to be worth US\$10,593.2 million.

The COPD market however is expected to reach US\$12.619.8m in 2017.

Meanwhile, between now and 2017, the report estimates that the market will grow slowly, primarily because of expiry of patents of

leading drug brands and price erosion in the market.

In 2017 however, the report said that the arrival of a few novel drugs into the asthma and COPD market, will be a driver of future growth, whilst other factors that will boost the market include long term use of asthma and COPD drugs, and an increase in disposable income and improved access to medical care facilities in emerging economies.

According to the report, the existing asthma and COPD market is mainly driven by increasing patient population.

Get your API calendars

PHARMACISTS can now make order their 2013 API Calendars.

Highlight features of the calendars include an optional QR code to connect with customers digitally.

There's also a 'Get Online' website package - details on the **last page** of today's *Pharmacy Daily* or see pharmacycalendars.com.au.

PD competition winner

KATHRINA Casella of Ayr Hospital Pharmacy is the lucky winner of Friday's **PD** comp.

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Guild Update

The Pharmacy Guild welcomes the launch by the Medicines Partnership of Australia (MPA) of a new website aimed at giving the public, Government and industry a clearer picture of the Pharmaceutical Benefits Scheme.

The new website can be viewed at: medicinespartnership.com.au.

The MPA consists of the Guild, Medicines Australia, the Generic Medicines Industry Association, the Australian Self-Medication Industry, the Pharmaceutical Society of Australia and the National Pharmaceutical Services Association.

All the MPA organisations have a common interest in ensuring the sustainability of the PBS which is regarded as the best subsidised medicines scheme in the world.

The PBS has served all Australians extremely well since its introduction more than 60 years ago.

The Medicines Partnership of Australia has for some time published a quarterly PBS Scorecard, tracking changes and trends in PBS volumes and aggregate costs.

Now the new website will become the principal location for all interested parties to track these scorecards, as well as other information about the PBS.

The most recent scorecard, issued last month, showed no growth in real terms, confirming the ongoing viability of the PBS.

Growth in Federal Government expenditure on the PBS in the 12 months to 31 March 2012 was just 0.8 per cent.

After adjusting for inflation, this represented a decline of 0.8 per cent in real terms.

This was well below the Government's own target of two per cent growth in real terms. This reinforces the industry's long-held position that the PBS is well under control.



The Pharmacy Guild of Australia

Older Aussies and opioids

MORE older Australians are receiving pharmacotherapy treatment for opioid dependence, according to the latest report from the Australian Institute of Health and Welfare (AIHW).

The *National Opioid Pharmacotherapy Statistics Annual Data collection: 2011* report looked at a single snapshot period (usually a day) in June 2011, and found that during that time there were 46,446 patients receiving medications used to treat opioid dependence and 1,444 prescribers.

The three medications for opioid dependence looked at in the report included methadone, buprenorphine, and buprenorphine-naloxone (buprenorphine in combination with naloxone).

Interestingly the report found that the proportion of patients receiving pharmacotherapy treatment for opioid dependence who were aged 30 and over increased from 72% in 2006 to 85% in 2011.

The median age of patients on the medications during the snapshot was 38 years, whilst almost one in ten (9%) were identified as Aboriginal or Torres Strait Islander descent.

"Of the drugs reported in the 2011 collection, methadone was still the drug most commonly used to treat opioid dependence, although the proportion of clients taking buprenorphine-naloxone increased from 5% in 2006 to 17% in 2011," said AIHW spokesperson Anna White.

According to the report in 2011 69% of patients took methadone and 14% took buprenorphine.

The report also found that buprenorphine-naloxone was used more by younger clients than older patients, with methadone more likely to be used among patients older than 40 years.

In terms of prescribers, the report found that the most common prescriber type was private prescribers, whilst the proportion of prescribers authorised to prescribe more than one pharmacotherapy drug had increased from 51% in 2006 to 77% in 2011.

In addition there were 2,264 pharmacotherapy dosing point sites in 2010-11, an increase of 64 sites from 2009-10, whilst most (88%) dosing points were found to be located in pharmacies.

Pharmacists' Support

THE Pharmacists' Support Service (PSS) is reminding Australian pharmacists that if they make a donation to the PSS before 30 June 2012, they can claim it on tax.

"PSS provides a listening ear and support to any pharmacist, pharmacy student or intern wishing to call on the toll-free number," said PSS President John Coppock.

"All members of the pharmacy profession should support this service," he added.

For information or to donate, call (03) 9389 4000.

DISPENSARY CORNER

TECHNOLOGY gets smaller.

Bolivian authorities have ordered customs officers to carry special pens which are fitted with a camera and a recorder.

It is hoped that the pens will cut down on corruption in the country.

"They will work as an anti-doping mechanism in the department," said Bolivian Customs Director Marlene Ardaya.

According to Ardaya, the pens will remain active during working hours and they will be checked at random by anti-corruption officers.

WIN A HYDRALYTE PRIZE PACK



This week **PD** is giving 5 lucky readers the chance to win a

Hydralyte prize pack, valued at \$60 each.

Hydralyte is an oral rehydration solution which is scientifically formulated. It contains the correct balance of electrolytes and glucose required for rapid rehydration.

For more information go to www.hydralyte.com

For your chance to win this great prize pack, simply be the first person to send in the correct answer to the question below.

What flavours does Hydralyte come in?

Email your answer to: comp@pharmacydaily.com.au

Congratulations to yesterday's lucky winner, **Erinle Adeleye Broken Hill Base Hospital.**

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