

PHARMACY NEWSLETTER

A quarterly e-newsletter of the General Administration of Pharmaceutical Care, Therapeutic Affairs Deputyship

Volume 2, Issue 2 **January** 2023



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Formulary New Additions

The following medications were added from the Minstry of Health formulary:

- Upadacitinib 15 mg tablet: modified release Restricted for severe atopic dermatitis The privilege of prescribing for consultant dermatologists **Central Medication** Linked with Drug Disease Registry for Immunology Email: immunology-registry@moh.gov.sa

- Upadacitinib 30 mg tablet: modified release Restricted for severe atopic dermatitis The privilege of prescribing for consultant dermatologists **Central Medication** Linked with Drug Disease Registry for Immunology Email: immunology-registry@moh.gov.sa

- Insulin glargine 100 units /mL + lixisenatide 33 microgram/mL injection, 3 mL prefilled injection device

Restricted for T2DM uncontrolled on GLP1+OAD or Basal insulin+

The privilege of prescribing for consultant endocrinologists **Central Medication**

- Insulin degludec 100 international units/ mL injection, 3 mL prefilled pen

Restricted for 2nd line for : pediatric type 1 DM and pregnancy (initiation)

The privilege of prescribing for adult and pediatric consultant endocrinologists

Central Medication

- Perampanel 2 mg tablet

Restricted for the treatment of partial onset & generalized seizures for adult and pediatric 4 years as 3rd or 4th line The privilege of prescribing for consultant neurologists **Central Medication**

With Special Order Form

- Perampanel 6 mg tablet

Restricted for the treatment of partial onset & generalized seizures for adult and pediatric 4 years as 3rd or 4th line The privilege of prescribing for consultant neurologists **Central Medication** With Special Order Form

- Perampanel 12 mg tablet

Restricted for the treatment of partial onset & generalized seizures for adult and pediatric 4 years as 3rd or 4th line The privilege of prescribing for consultant neurologists **Central Medication** With Special Order Form

- Brivaracetam 25 mg tablet

Restricted to adult and pediatric patients \geq 2 years and \geq 10 kg with severe renal dysfunction in the treatment of partial onset seizures as 2nd line (when levetiracetam is poorly tolerated) The privilege of prescribing for consultant neurologists

- Brivaracetam 50 mg tablet

Restricted to adult and pediatric patients \geq 2 years and \geq 10 kg with severe renal dysfunction in the treatment of partial onset seizures as 2nd line (when levetiracetam is poorly tolerated) The privilege of prescribing for consultant neurologists

- Brivaracetam 10 mg/mL injection, 5 mL vial

Restricted to adult and pediatric patients ≥ 2 years and ≥ 10 kg with severe renal dysfunction in the treatment of partial onset seizures as 2nd line (when levetiracetam is poorly tolerated) The privilege of prescribing for consultant neurologists

- Brivaracetam 10 mg/mL oral solution, 300 mL bottle liquid Restricted to adult and pediatric patients \geq 2 years and \geq 10 kg with severe renal dysfunction in the treatment of partial onset seizures as 2nd line (when levetiracetam is poorly tolerated) The privilege of prescribing for consultant neurologists
- Zinc oxide 15% (150 mg/g) cream
- Normal immunoglobulin, human 10% (10 g/100 mL) injection vial for intravenous infusion

Formulary Deletions

The following medications were deleted from the Minstry of Health formulary. Deletion is effective when the stock reaches zero (DWZ):

- Insulin detemir 100 international units/ mL injection, 3 mL prefilled pen
- Zinc oxide 10% (100 mg/g) cream

Updated Description

- Simeticone 40 mg/0.6 mL oral drops

















New Strength and/or **Dosage Form Addition**

- Benralizumab 30 mg/mL SubQ injection, 1mL autoinjector Restricted to the treatment of severe asthma with an eosinophilic phenotype

Privilege of prescribing for consultant pulmonologist (adult) **Central Medication**

Linked with Drug Disease Registry for Severe Asthma Email: Severe-asthma-registry@moh.gov.sa

The Top 5 Most Frequently **Reported Medication Errors**

The Top 5 reported medication errors through the Ministry of Health Medication Error Reporting System were as follows:



Category A: 59.27%, Category B: 39.48%, Category C: 1.17%, Category D: 0.069%.



The Importance of Reporting Mail Delivery Medication Errors

As part of reporting medication errors, mail delivery medication errors are essential to reporting errors that happened to improve services. Identifying errors and taking corrective action leads to increased patient safety in all services.

Quetiapine 200mg was prescribed in one of the cases, and Quetiapine 300mg was dispensed instead due to the look-alike packaging between the two strengths. The error was discovered and captured by the pharmacist and corrected before reaching the patient.

The solution for this error was to create and follow a structured workflow to ensure double-checking.

Counter > Checking > Assign pharmacist to prepare mail to insure checking before delivery to the patient.

Gabapentin is a Controlled **Psychotic Substance Now**

The Saudi Food and Drug Authority (SFDA) has recently added Gabapentin to the second schedule of category E of locally controlled psychotropic substances.

What's Gabapentin?

Gabapentin is an anticonvulsant medication used to treat partial seizures and neuropathic pain. It is a first-line medication for treating neuropathic pain caused by diabetic neuropathy, post-herpetic neuralgia, and central pain.

Gabapentin mechanism of action

Gabapentin is structurally related to the neurotransmitter GABA; however, gabapentin and its metabolites do not bind to GABA(A) or GABA(B) receptors or influence the degradation or uptake of GABA, mechanism by which Gabapentin exerts its analgesic and anticonvulsants effects is unknown.

Gabapentin side effects

The most often reported side effects of Gabapentin are ataxia, dizziness, drowsiness, fatigue, fever, nystagmus disorder, sedated state, and viral infection. Along with this, patients may experience blurred vision, diplopia, peripheral edema, tremor, amblyopia, irritability, and xerostomia.



Gabapentin Withdrawal Symptoms

Withdrawal and dependency risks are associated with Gabapentin use. Abrupt discontinuation of the drug may result in symptoms that include confusion, incoherent speech, impaired ability to pay attention, insomnia, restlessness, anxiety and agitation.

Gabapentin Abuse and Addiction

Gabapentin has a potential to be abused either alone or in combination with other drugs, most often opioids, and used mainly for recreational purposes, self-medication, or intentional self-harm. The most frequent participants in its abuse were those with substance abuse history.



Opioid Allergy "Safety Alert"

Overall, immune-mediated allergic reactions to opioids are extremely rare. However, all opioids may cause an allergic reactions. Codeine, morphine, and meperidine are the main opioids that cause most allergic reactions. Opioid adverse effects can be severe and overlap with signs and symptoms of a true allergy.

	Side effects	Adverse Drug Reaction	
		Pseudo-Allergy	True-Allergy
Cause	Side effect or toxicity	Mast cell degranulation or histamine release	Anaphylactic IgE mediated reaction
Timing	Anytime throughout treatment	May occur with the first dose	Within 1 hour of re-exposure (Require prior exposure)
Signs& Symptoms	Nausea & Vomiting Constipation Sedation Defirium	Mild Itching Flushing Sneezing Sweating Hives Bronchospasm Hypotension	Flushing Pruritis Angloedema Hives Bronchospasm Hypotension Maculopapular rash Pustular rash
Management	If not tolerated side effect: Reduce the dose or switch to alternative.	Antihistamine Steroids Reduce Opioid dose Discontinue or switch to different subclass	Epinephrine Steroids Discontinue opioids

The pharmacist's role:

- Take the opportunity to intervene and identify patients with pseudoallergic or true allergic reaction.
- Ensure patient's access to pain medications.
- Educate the patient on allergy monitoring, side effects, and interactions.
- Collect and evaluate information on pharmacotherapy and consult the patients about their pain medications and the



How Can Pharmacists Improve **Patient Safety?**

Pharmacists have a vital role in contributing to patient safety through:

Facilitating medications access

Ensuring that patients may afford their treatment and obtain the needed prescription.

Providing medication information

Providing knowledge to patients and their caregivers to enables safe and efficient drug administration.

Assessing the propriety of a prescription

Each medication should be evaluated to ensure the treatment is the most appropriate, efficient, and safe option for the patient.

Enhancing medication compliance

Encouraging patients to take their prescriptions as directed by their medical professionals.

Offering services for health and wellbeing

Delivering essential patient care services aimed at enhancing patients' health.

Providing medication management services

Thoroughly examining each patient's medications, verifying that they will interact with each other without causing complications, and creating a successful, well-designed treatment plan in order to treat or prevent disease.



Evaluating the patient's health

Assessing a patient's current condition to guide treatment and evaluate the success of medication therapy.

Managing care transitions

Helping with care coordination and medication management coordination for patients as they transition from one care setting to another.









(دواء دون أضرار)







Tele-pharmacy is a method of providing various patients with pharmaceutical treatments and care via telecommunication. In this manner, patients can conveniently receive their medications and other pharmaceutical care products in their homes. Patient counseling, drug therapy monitoring, refill authorization for prescription medications, monitoring formulary compliance via videoconferencing or teleconferencing, and prior authorization of prescribed medications are just a few of the services offered. Other services include labeling the systems and delivering medications to isolated locations. These services may be provided by the neighborhood retail pharmacy or even by home care, hospitals, and other medical facilities.

Benefits:

One significant advantage is that providing these services through telecommunication will allow many places, particularly remote ones without access to pharmacy services or pharmacists, to stay connected. This will reduce the expenses of going to other areas to receive pharmaceutical care and ensure patient medication adherence.



Tips for Optimizing Patient Counseling and Medication Education

Lack of proper understanding of one's medical conditions is one of the leading causes of patients not complying with their regimens and monitoring programs.

Patients are typically educated and counseled when prescriptions are dispensed, but they may also be provided as a separate service. Therefore, techniques and content should be modified to match the patient's unique needs and to adhere to the practice settings' policies and procedures.

Pharmacists significantly enhance patient adherence and decrease medication-related issues by delivering education and counseling in the range of pharmaceutical care. The pharmacist's role in pharmaceutical care should encourage patients to seek knowledge and counseling and overcome barriers to offering it. Additionally, they should be able to recognize and interpret nonverbal cues (e.g., eye contact, facial expressions, body movements, and vocal characteristics). Finally, they should be familiar with the cultures of their patients, particularly those related to health and illness.



The following recommendations are typically suitable for pharmacists counseling patients receiving new medications or attending for refills:

- Build trusting ties with patients and determine their first
- Evaluate the patient's understanding of their medical conditions and current treatments. Ask the patient to describe or demonstrate how they will use each medication and ask open-ended questions about the medication's intended use and the patient's expectations.
- Fill in the patient's knowledge gaps by giving verbal instructions and using visual aids or demonstrations.
- Check the patient's understanding of how to take their medication.

With the healthcare team, pharmacists play a vital role in determining what specific information and counseling points are necessary for each patient.



Sign Language Training **Workshops for Pharmacists**

As part of ensuring patient safety and optimizing the pharmaceutical care provided to patients, the General Administration of Pharmaceutical Care, in cooperation with the Saudi Society for Sign Language Interpreters, signed an agreement to conduct five sessions of sign language training workshops to train pharmacists at Ministry of Health hospitals all over the Kingdom of Saudi Arabia. The goal is to train 150 pharmacists in 2022 from different regions to ensure that deaf and hard-hearing patients understand pharmaceutical instructions and optimize the use of their medications. Pharmacists received a certificate after passing the written and practical tests and ara certified by the course's end.



Number of trained pharmacists in 2022



Number of regions



Innovative Insights on Hospital Pharmacy Practice (IHOP 2022)

Under the Patronage of His Excellency the Minister of Health, Mr. Fahad Al-Jalajel, and on his behalf, the Assistant Deputy Minister for Medical Support Services, Prof. Ahmed Al-jedai launched the fifth edition of "Innovative Insights on Hospital Pharmacy Practice" IHOP22 annual conference organized by the General Administration of Pharmaceutical Care which was held in Riyadh from 25th to 28th of December at the Fairmont Hotel.

The main objective is to present all updates in the hospital pharmacy practice. The three-day conference included various sessions, lectures, debates, panel discussions, workshops, roundtables, poster presentations, booth participation, hospital pharmacy, and medication counseling competitions. Moreover, the conference targeted pharmacists, assistant pharmacists, and pharmacy students. More than 1000 attendees came from different regions in the Kingdom of Saudi Arabia and gulf countries.

Initiatives such as honoring retirees and postgraduate graduates were introduced this year, in addition to "Tahseen award," which highlighted innovators who positively impact the development of the pharmaceutical work environment.

IHOP Conference offered a unique opportunity to gather directors in different pharmaceutical care sectors in the kingdom, pharmacy experts, leaders, and researchers to share knowledge and experience and exchange ideas and challenges in the pharmaceutical field.



- 6 committees
- 6 sessions
- 2 roundtables
- 88 distinguished speakers & moderators
- 3 workshops
- 51 posters
- 18 booths
- 4 gulf pharmaceutical societies
- 7 pharmacy colleges students clubs
- 74 volunteers
- 3 hospital pharmacy competition winners
- 3 medication counseling competition winners
- 3 scientific poster winners
- 3 Tahseen award winners





IHOP Conference



JHOP2022