

October Pharmacy Newsletter



PREFERRED DRUG LIST UPDATES

Integrated (Title 19/21 SMI) and ACC

Additions:

- Advair Diskus 100-50 mcg/dose (Step Therapy Required)
- Advair Diskus 250-50 mcg/dose (Step Therapy Required)
- Advair Diskus 500-50 mcg/dose (Step Therapy Required)
- Ajovy Inj 225/1.5 (Prior Authorization Required)
- Ajovy Syn 225/1.5 (Prior Authorization Required)
- Efavirenz-Lamivudine-Tenofovir Df Tab 400-300-300 Mg
- Efavirenz-Lamivudine-Tenofovir Df Tab 600-300-300 Mg
- Flovent Disk Aer 100mcg
- Flovent Disk Aer 250mcg
- Flovent Disk Inh 50mcg
- Humalog Jr Inj 100/ml
- Humulin 5's Pen 70/30kwp
- Humulin N Pen U-100kwp

Removals:

- Aimovig Inj 70mg/ml
- Aimovig Pen 140mg/ml
- Dyanavel XR Sus 2.5mg/ml
- Insulin Lispro Junior Kwikpen
- Insulin Lispro Protamine Mix Kwikpen
- Novolin 70/30 Vial
- Quillichew Chw 20mg ER
- Quillichew Chw 30mg ER
- Quillichew Chw 40mg ER
- Quillivant xr Sus 25mg/5ml
- Symfi Lo Tablet 400-300-300mg
- Symfi Tablet 600-300-300mg
- Symjepi Inj 0.15mg
- Symjepi Inj 0.3mg

Other Updates

- None

Behavioral Health (Title 19/21 Non-SMI & Non-Title 19/21)

Additions:

- None

Other Updates

- None

Removals:

- Dyanavel XR Sus 2.5mg/ml
- Quillichew Chw 20mg ER
- Quillichew Chw 30mg ER
- Quillichew Chw 40mg ER
- Quillivantxr Sus 25mg/5ml

** Drugs that are not on the formulary may be available via PA (prior authorization) **

- For the complete preferred drug lists, please refer to the Mercy Care websites below
 - RBHA: <https://www.mercycareaz.org/providers/rbha-forproviders/pharmacy>
 - ACC: <https://www.mercycareaz.org/providers/completecure-forproviders/pharmacy>

A review of gabapentin and pregabalin for various treatments:

Prescriptions for gabapentin and pregabalin (Lyrica) continue to surge, possibly driven by the search for non-opioid options for pain. Gabapentin is now the tenth most commonly prescribed medication and Lyrica ranks eighth in drug spending in the U.S.

Both gabapentin and pregabalin are considered:

- First-line for neuropathic pain (e.g., postherpetic neuralgia, diabetic neuropathy) [Evidence Level A-1].
- Second-line for fibromyalgia.
- Evidence is mixed for use of gabapentin and pregabalin for chronic low back pain.
 - There is not good evidence for use in chronic back pain, unless there is a neuropathic component.

Avoid gabapentin and pregabalin for sciatica. Evidence shows they do not work any better than placebo [Evidence Level B-1].

The recommendation is to discourage combining gabapentin and pregabalin. The evidence does not support this combination works better or has fewer side effects than either medication prescribed alone. Gabapentinoids have the potential for misuse or abuse due to their abilities to produce effects similar to alcohol, benzodiazepines, and opioids including euphoria, a marijuana-like high, relaxation, and improved sociability. Gabapentin has been used to enhance the effects of drugs of abuse, including heroin, marijuana, and cocaine. Members with substance use disorder are at higher risk of abusing these medications. In fact, gabapentin is now controlled substance, like pregabalin in Kentucky, Tennessee, and West Virginia. Other states are reviewing gabapentin for potential addition to controlled substance status.

Some common side effects for gabapentinoids include dizziness, drowsiness, peripheral edema, etc. In addition, caution when combining a gabapentinoid with an opioid as it may increase the risk of overdose death. Dosing recommendations are starting with low doses and titrating weekly, or more often if tolerated, to usual effective doses. When discontinuing medication, it is recommended to taper doses over at least a week.

References:

1. Toth C. Pregabalin: latest safety evidence and clinical implications for the management of neuropathic pain. Ther Adv Drug Saf 2014; 5:38-56.
2. Goodman CW, Brett AS. Gabapentin and pregabalin for pain – is increased prescribing a cause for concern? N Engl J Med 2017; 377:411-14.
3. Dowell D, Haegerich TM, Chou R. CDC guideline for prescribing opioids for chronic pain – United States, 2016. MMWR Recomm Rep 2016; 65:1-49.
4. Clinical Resource, Treatment of Chronic Low Back Pain. Pharmacist's Letter/Prescriber's Letter. May 2017.
5. Clinical Resource, Treating Fibromyalgia. Pharmacist's Letter/Prescriber's Letter. June 2017.

This newsletter is brought to you by the Mercy Care Pharmacy Team. For questions, please email Fanny A Musto (MustoF@mercycares.org), Denise Volkov (VolkovD@mercycares.org) or Trennette Gilbert (gilbert@mercycares.org)