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First Script at FirstScriptNews@cvty.us.com



First Script Prescription Benefit News for Workers' Compensation

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Ask The Pharmacist

To suggest a topic, send an email to:
AskThePharmacist@cvty.us.com

What's the difference between a drug allergy and a side effect?

Drug allergies and side effects present differences that are often misunderstood. They are commonly discussed in overlapping terms that can understate the importance in how each should be managed (e.g., "I think I'm allergic to Aspirin, it upsets my stomach.").

True medication allergies are more rare than side effects, but are potentially very serious, resulting from the activation and response of your body's immune system to an "insult" or "foreign body." Allergies occur across a range of severity, from mild to life-threatening, and often only occur on the second exposure to the drug, food, or substance that triggers it.

Mild allergy symptoms might include hives, a rash, or itchy skin, while more serious ones would be throat tightness, difficulty breathing, swollen face, light-headedness, reddened skin or blisters, or anaphylaxis (whole-body shock with life threatening low blood pressure). It's important to seek medical attention quickly if these serious symptoms occur when taking a medicine. Before starting any new medication, be sure to let your doctor know about any drug reactions you've had in the past and update your list of other prescribed medications, supplements, or vitamins you may be taking.

Treatment of acute drug allergies may include antihistamines, bronchodilators, and/or corticosteroid medications to manage symptoms. Epinephrine injections may be used to treat anaphylaxis.

Medications, supplements, and vitamins all have an expected range of physiologic effects when they are consumed. The desired therapeutic effect of a drug is called its indication for use. A side effect is a known but unwanted reaction listed in the drug labeling that may occur, even when a medication is administered correctly.¹ Side effects are not uncommon and may also be mild, (e.g., a runny nose) or more severe (e.g., increased risk of a heart attack). They can happen when you begin taking a new medication, supplement, or vitamin; if you suddenly stop taking one that you've used for some time; or if you increase or decrease the amount of the substance you take. Your age, gender, route of administration, absorption differences, kidney function, as well as co-administered medicines, foods, or supplements can all affect your likelihood of experiencing a side effect.²

Common, milder side effects of medications include headache, insomnia, gastrointestinal distress, dry mouth, blurred vision, and skin rashes. Serious side effects are more rare and might include heart rhythm disturbances, liver failure, sedation or loss of consciousness, respiratory depression, etc.

Managing side effects, in general, involves prevention and management strategies, including deciding whether the benefit of the medication outweighs the annoyance or risk of the side effect.

To summarize, the similarities between allergic reactions and side effects are that symptoms of both may range from uncomfortable to life threatening. Prevention of both include some strategies in common, such as identification and avoidance. An important difference in these is in recognizing the contribution to serious allergic reactions of your immune system and tailoring treatments and prevention strategies accordingly for the best outcome.

1. www.fda.gov/drugs/drug-information-consumers/finding-and-learning-about-side-effects-adverse-reactions
2. www.merckmanuals.com/home/drugs/adverse-drug-reactions/overview-of-adverse-drug-reactions

Drug of the Month

PEPCID® (famotidine)

PEPCID (famotidine) is one of several histamine-2 receptor antagonists (H2 blockers) that are approved for adult or pediatric use in the U.S. as prescription medicines for active duodenal or gastric ulcers, symptomatic gastroesophageal reflux disease (GERD), and erosive esophagitis.¹

Over-the-counter (OTC) versions are available in lower strengths, approved for use in GERD and sour stomach.

All H2 blockers work by reducing the amount of gastric acid produced by specialized cells in the lining of the stomach. PEPCID's onset of action is 10-12 hours and reduces 24-hour acid secretion by approximately 70%.¹ OTC H2 blockers shouldn't be used for longer than two weeks, except at your doctor's recommendation. Users should stop taking them if heartburn symptoms persist beyond that.

Recently, several H2 blocker medications have been identified to contain an unexpected impurity called N-nitrosodimethylamine (NDMA) and are presently subject to a variety of manufacturer holds and voluntary recalls. The U.S. Food and Drug Administration (FDA) investigation of these is continuing, but in the interim it is useful to know that several alternatives to the affected H2 blockers (Zantac® and ranitidine) are widely available. PEPCID, Axid® (nizatidine), and Tagamet® (cimetidine), for example, have not been found, to date, to contain NDMA.² Beyond medicines in the H2 blocker category, there are medications which act by different means, that can serve as alternatives, such as proton pump inhibitors (PPIs), antacids, and miscellaneous agents like Carafate®.

1. www.accessdata.fda.gov/drugsatfda_docs/label/2018/019462s039lbl.pdf

2. www.fda.gov/drugs/drug-safety-and-availability/questions-and-answers-ndma-impurities-ranitidine-commonly-known-zantac



Governmental Activity by State

Find out more about the governmental updates and potential changes currently being proposed in your state

To find out more about the governmental updates and potential changes currently being proposed in your state, visit the [Coventry News and Insights page](#) each month to read our Government Relations Newsletter. Find this month's newsletter [here](#).

Clinical Updates

EMBEDA extended-release capsules discontinued

On November 15, 2019 EMBEDA® Extended Release Capsules will be discontinued and withdrawn from sale. To find out more about the discontinuation, read our First Script Bulletin.

Upcoming Webinars

New York has adopted new rules regarding its workers' comp drug formulary, including a web-based portal, which is required for prior authorization of non-formulary drugs. To assist with this important change, First Script will offer an on-demand webinar, which will be available on our [Webinars page](#) in mid-November.

Join First Script for our annual drug trends webinar "Evaluating Pharmacy Trends in Work Comp," where we provide insightful perspectives on the pharmacy trends and challenges faced in work comp. You can register for the event being held on Wednesday, December 4th [here](#).