

CANADIAN HIV/AIDS PHARMACISTS NETWORK ANNUAL MEETING

Saturday, January 30, 1999
Hyatt Regency Hotel, Gold Coast Room
Chicago, IL

MINUTES

PRESENT:	Ann Beardsell	Yasmin Khaliq
	Nikola Ostrop	Kathy Slayter
	Yvonne Shevchuk	Sandra Tailor
	Rachel Therrien	Alice Tseng
	Helene Bourget-Letarte	Tom Chin
	Christine Hughes	Marie Courchesne
	Manish Patell (Guest)	Monica Kader (Merck)
	Jean Baril (Merck)	
REGRETS:	Colette Bisailon	Michelle Foisy
	Glenda McNeilly	Natalie Dayneka
	Linda Sulz	Alfred Gin

HOUSEKEEPING ISSUES:

Travel Grants - Merck will provide travel grant of \$500.00 to cover cost of flight & taxi

Hotel - Merck will reimburse for 2 nights (*send in receipts to Ginette*).

Yvonne, Marie, Sandy will not be staying for conference. Participants must pay for their own registration.

HIV Network Roster - Kathy will update and send to everyone.

Value Added Services for Pharmacists - Jean Baril (Merck)

A prototype for a blister packaging Crixivan was reviewed by the group. The capsules are stable in blister pack without desiccant.

Potentially may enhance compliance/adherence.

Important to have patient input. Good for post-exposure prophylaxis kits.

Could be used for mid-day dose. (ie. can take to work etc.)

Perhaps may be useful for patients who are incarcerated.

May be bulky. (ie. take up a lot of space)

Would be useful to have perforated strips.

May be “noisy” when administering. May be useful for weekend trips.

Useful for unit dose and in the ER.

Needs to be the same price as bulk capsules.

CLINICAL SHARING SESSION:

Drug Interactions

Alice circulated update of Drug Interactions table (attached with minutes).

HIV Pharmacist Position Paper

Unanimous - submit to CJHP.

* Perhaps submit as a supplement - need sponsorship from drug companies.

- will try to submit as original article before pursuing supplement idea. Announcements should be sent out (where to do this?) to advertise to other pharmacists, that will be available in print).
- Please E-mail ideas to Sandy.

Please give Sandy feedback by Friday, February 12, 1999 on the paper.

Clinical Pearls

Anne says Abbott is now supplying capsules and syringes for patients receiving Ritonavir liquid. (contact local Abbott representative).

Education Tools

Yvonne has drafted a letter to survey institutions with regards to educational tools practitioners are accessing for continuing education. To be sent out to CE people, network people and people in industry.

Second part of survey would be a needs assessment.

Perhaps faxing out letter and survey would be more useful. Monica offered to co-ordinate faxing out to people using commitment to care.

Hyperlipidaemia

Many participants have seen pancreatitis and are therefore being vigilant with diet, exercise and pharmacotherapy.

Lipodystrophy

“Mushy head” has been reported - perhaps from fat distribution.

CNS Effects Sustiva

Everyone commented on their experience. Sometimes splitting the dose has helped.

New Beeper Trial - Monica Kader

Monica presented some new information.

New beepers are available which appear to be more reliable.

New self-programmable - vibrating beeper.

Monica would like feedback from everyone. 10 people to volunteer to trial the new beeper.

Which one is best? May be expensive to keep both ie. ALR and new prototype (MRS)

Volunteers for beeper trial

Alice	Marie	Kathy
Nikola	Tom	Christine
Marie	Rachel	Ann

Everyone above signed MRS pilot test agreement. Draft questionnaires are attached. Monica will send out pilot packages to everyone who has signed the agreement.

Small Group Sessions

Everyone broke off into small groups to brainstorm.

Communication Group

	<u>Alfred</u>	
Michelle		Alice

Publications

	<u>Sandy</u>	
Natalie		Nikola
Christine		Yasmin
Rachel		Helen

Research

Nicola
Yasmin Christine
Marie Rachel

Education

Glenda
Yvonne Ann
Colette Linda
Rachel

P-glycoprotein Presentation**Professor David Back**

University of Liverpool. Department of Pharmacology and Therapeutics

Efflux transporters ie. p-glycoprotein

- 170 KDa transmembrane glycoprotein
- ATP dependant drug efflux pump
- ABC superfamily of transporters
- Encoded by MDRI and MDR2 proteins

Found in gut (enterocytes), liver, kidney, BBB, lymphocytes

1. Gut

First pass metabolism (ie. Saquinavir) by CYP3a4 in gut and liver.

P-glycoprotein increases from jejunum as you go to the colon (the inverse is true for CYP3A4)

Therefore what is the role of p-glycoprotein?

If you inhibit p-glycoprotein in addition to CYP you will increase bioavailability further (ie. say of Saquinavir) prevents efflux and further allows absorption).

If you give verapamil (inhibitor p-glycoprotein) it will increase concentration of saquinavir.

It appears that ritonavir's effect on saquinavir concentration is also due to inhibition to p-glycoprotein. (As cell line tested in $\rightarrow \emptyset P450$) $R > N > I$ (potency) must be part of the interaction we see in the patient (ie. Not just inhibition of CYP450)

2. Saquinavir and other PI's are also inhibitors of p-glycoprotein in lymphocytes resulting in less efflux out of the cell $R = S > N > I$.

Indinavir not a powerful inhibitor of p-glycoprotein.

3. CEM cells (also lymphocytes)

MDR-1 $N > R = S > I$

MRP-1 $R = S > N = I$

What does this mean for antiviral effects in CEM cells?

	WTB (wild type)	MDR-1	MRP-1
Saquinavir	4	4.9	5.6
Ritonavir	4.2	5.8	5.9
Indinavir	5.0	6.8	6.9
Nelfinavir	4.5	5.7	5.8

But it doesn't look like you need more drug for antiviral effect simply more drug to knockout p-glycoprotein.

What is the function of p-glycoprotein in vivo?

Does HIV regulate p-glycoprotein?

Where do PIs work?

During (lymphocytes) budding and immediately after budding (plasma).

Brain/plasma ratio greatly increases in "gene knockout mice" (without p-glycoprotein) for all PIs.

It would be great to selectively inhibit p-glycoprotein in the brain allowing more PI to get in. Not sure how to do this.

Web Site: Drug Interactions
<http://www.liv.ac.UK/~hivgroup/home.html>(attached)

Small Group Presentations

Education: (Yvonne)

To send out letter and survey to assess educational materials. Yvonne asked for everyone's input and revisions were made.

Yvonne will then send letter and survey out to stakeholders

Research (Nikola)

Ideas

- a. Pregnancy
 - PI Study (Yasmin)
 - Physician survey (Nikola will e-mail survey)
 - i. Prescribing patterns
 - ii. Pregnancy Registry
 - iii. Data used
- b. Salvage Therapy
 - descriptive, tolerability and efficacy
 - retrospective vs prospective
 - ? Feasibility

4. Liver Dysfunction - AR Therapy (Yasmin)

- review
 - study
 - pharmacokinetics
5. Lipodystrophy
 - review of literature
 - study
 - usage of treatment - efficacy
 - tolerability
 - predictive factors
 6. Growth Hormone
 - study
 7. Azithromycin dosing for MAC prophylaxis
 - other doses used
 - efficacy
 - tolerability, patient subjectivity
 8. Seamless Care
 9. Adherence

Yasmin will e-mail group regarding pregnancy and liver dysfunction PK study.

Alice CTAC - Canadian Treatment Advocacy

- want to develop a pilot study looking at a system for patients to self-report ADRS.

Publications Group

1. Final draft submissions February 12, 1999
2. Submission to CJHP - February 26, 1999
3. Following approval → obtain funding for national distribution → place announcements in professional publications

Future Publication Ideas

* Priority: HIV/AIDS website review (Sandy)

Deadline: June 1, 1999 1st Draft

(Use criteria published in Lancet for evaluation)

Other: Pick 2 others max to work on

- i. Continuing education (when info available)
- ii. ADR tips
- iii. Compliance (already done by Alice)
- * iv. Complimentary/Alternative Medications. Deadline February 26, 1999 (Tom/Yasmin/Kathy).
- v. Case reports
- vi. Lipodystrophy reviews with case examples (Nikola's resident is doing)
- vii. CNS disturbances with efavirenz with case examples.
- viii. Seizure disorders and the HIV patient with case examples

- ix. Cardiovascular complications in HIV
- * x. Drug Wastage → see how much this is happening (Christine, Alice and Ann). This will be a collaborative approach. (ie. all members to be involved)
Protocol draft end of February.

Communications

Website (Alfred Heading Up)

Written agreement of funding from Merck. The contents will remain our property solely.

What do we want on the website?

- Start of basic
- Links to different sites (will decide after Sandy's review).
- Directory for all of us.

New Secretary/Chair-Elect

- Christine

Chair

- organize conference
- keep sub-groups on track
- prepare 3-4 newsletters per year
- liaising with outside interest groups
- \$2,000.00 travel grant (for use over 2 years)

Secretary

- minutes at meetings
- send out newsletter and attachments

PSNS - Pharmacy Speciality Network (Tom gave an overview).

Benefits

- Communication (electronic)
- Collaborative research, projects, etc.
- Expert resource
- education (PPC, AGM)
- Profession
- Recognition

Implications

- CSHP
- HIV Group

Tom will circulate Pharmacy speciality network to everyone for review.

Attachments:

1. Position Paper
2. Network Roster
3. Drug Interactions Table
4. ALR/MLS Questionnaires
5. HIV Research Group Website

Respectfully Submitted,

Kathy Slayter