

**DCF Psychotropic Medication Advisory Committee
MINUTES**

October 4, 2013 1:00 PM

Albert J. Solnit Children's Center, Middletown, CT.

Present: Jacqueline Harris, M.D., Chair; David Aresco, RPh; Chris Malinowski, APRN; Irvin Jennings, M.D.; Maureen Evelyn, Parent Advocate; Amy Veivia, Pharm. D.; Joan Narad, M.D.; Debra Brown, M.D.; Patty Cables, APRN; Aurele Kamm, APRN; Brian Keyes, M.D.; Renu Kothari, M.D.

1. Call to order: Dr. Harris called the meeting to order at 1:05 PM. Committee members introduced themselves.
2. Set date/time of next meeting: The next meeting is scheduled for November 1, 2013 from 1 PM – 2:30 PM; Solnit Center AB conference room. Dr. Harris will look for an alternate venue (possibly Silvermine) as security in the present location may be a deterrent to attendance.
3. Minutes: The minutes of the September 2013 meeting were review and approved.
4. Announcements: None
5. Old Business:
 - Introduction to Drug Use Guidelines: Defer to November meeting. DCF will review feedback from the PMAC. It was noted that the current draft is not consistent with some recent changes made in the CMCU process. CMCU meets every other week (next meeting Thursday October 10, 2013) and this issue will be on the agenda for that meeting.
 - Prazosin – Alpha-2 agonist: update on study design and/or results: It is noted that the CMCU database lists medications in such a way that sorting out and reporting on specific medications is not possible. A suggestion was made to doing a concurrent study and collect data as requests for this combination are processed by CMCU. As this would require some CMCU resources this suggestion will be brought to the next CMCU meeting by Chris Malinowski, APRN.
It was noted that IOL may be conducting a study on this issue and may have some data to share on prazosin use although it may not be in combination with Alpha-2 agonists. Dr. Narad will contact Dr. Robert Sahl and make inquiries.
A suggestion was made to determine if Value Options has the capacity to generate data regarding prazosin – Alpha-2 agonist use. Dr. Harris will inquire about this possibility but noted that there may be a delay as they are currently focused on reporting utilization of antipsychotics.

It was noted that there seems to be increased utilization of prazosin for treating nightmares with good effect and few side effects.

Information will be presented at the next PMAC meeting to determine if prazosin – Alpha-2 agonist concurrent use is a valid issue worth utilizing additional resources.

It was recommended and approved that information regarding patients at Solnit Children's Center who have experienced side effects from prazosin – Alpha-2 agonist combination use will be reported back to PMAC at the next meeting by Dr. Debra Brown.

- Benzodiazepines: Drug Use Protocol update to include approved indications for use and maximum length of therapy (when indicated): review proposed update: A document detailing information available on this subject was distributed, reviewed and discussed in detail. Noted that situational anxiety is under the purview of CMCU. Noted there is very little in the literature regarding the use of this class of medications in children or adolescents. (see New Business for further discussion).
- Department of Consumer Protection Controlled Drug Tracking: Follow-up:
 - Does prescriber need to be registered to receive automatic CPMRS emails: YES
 - What is the threshold for patient specific reporting of potential diversion/abuse: there is no set threshold. Reporting is usually done by a pharmacist who suspects a patient may be abusing controlled substances based on information presented by the CPMRS database (Dr. shopping, filling prescriptions at multiple pharmacies, etc.),

Follow up is requested by the committee regarding:

-What is the exact information posted in an alert on a patient.

-Who must register as is was noted that there may be a new law requiring all prescribers to register.

P&T Consulting will research these issues and send an email out to all PMAC members with the results.

6. New Business

- NCINQ Measurement Advisory Panel progress report – DEFER.
- PMAC Next Level: A work group needs to be organized to work on what exact issues or criteria are to be considered for each class of medications when CMCU performs it's review function. The goal is to have consistent criteria for use by CMCU when providing "yes" or "no" responses to requests for drug therapy. This recommendation would then come to the DCF PMAC for review. Also consistent standards or criteria need to be developed for use when determining if a medication should be included on the Approved Drug List. Noted this would be for DCF committed children only.

Suggest the work group should be 4 people to include 1 from P&T Consulting, the Parent Advocate, and 2 others. Contact Dr. Harris if interested on joining this work group.

7. Other as time allows.

- ACA enrollment: This is going well for DCF. Noted providers have signed up for at least OPR level. Noted that if there are any issues with filling a prescription an initial 14days supply may be dispensed. If the issue(s) are not resolved in the 14-day period then DCF will provide an additional 44 days of medication. This should allow ample time to resolve any provider issues. Noted there are 2 levels of enrollment: OPR (refer and prescribe only) and Full Enrollment (needed to provide treatment). A notice will be sent to all providers regarding these levels and what they mean.

Noted individual private practitioners may opt to not participate if the volume of patients they are treating is low.

- Obesity and Medications: The report completed by DCF PMAC has been completed and presented to the Commissioner. This report included many excellent recommendations that should be implemented at various levels. There is now another inquiry regarding this issue. PMAC recommends determining if any of the previous recommendation have been implementing prior to expending additional resources on this issue.

A request will be made of Cheryl Wuamo and Mark Root to determine if the previous recommendations have been implemented and report back to the CMCU.

The PMAC reviewed and discussed several of the recommendations made by the report.

- Dosing: dosing issues based on weight were discussed. Noted a child may be at or close to an adult weight but still have undeveloped organs. Noted the best course may be to start at the recommended dose then titrate to effect in obese children.

8. Dr. Harris adjourned the meeting at 2:28 PM.

Respectfully Submitted,

David S. Aresco, RPh, FASCP