

DCF Psychotropic Medication Advisory Committee
Meeting Minutes
October 4, 2019, 1:00 PM

PRESENT: Angela Ojide, APRN; Amy Veivia, PharmD; Alton Allen, MD; Margaret Rudin, PhD, APRN; David Aresco RPh; Carlos Gonzalez, MD; Brian Keyes, MD; Beth Muller, APRN; Dielka Brutus, APRN; Rosina Bandaza, M.D.; Irvin Jennings, MD; Sangeeta Peshori, MD; Marianne Wudarsky, PhD; Jean Hagan, MD; Melissa Straus, MD; Michelle Feinburg, MD; Tina Spokes, RN; Paul Rao, MD

- The meeting was held in Solnit South conference room A. Dr. Rao called the meeting to order at 1:02pm.
- The next meeting is scheduled for November 1, 2019 from 1pm – 2:30pm at Albert J. Solnit Children’s Center 915 River Rd Middletown CT, A Building, Conference Rm A.
- The minutes of the September 2019 meeting were reviewed and approved after several minor revisions.
- Announcements:

There was discussion initiated by a member’s question regarding the recent recall of ranitidine/Zantac and what CMCU should do if something similar should happen with a psychiatric medication. It was agreed that CMCU would take direction from the FDA.

- Medication Therapeutic Class Review:
 - Antidepressants: It was noted that CME credit has been approved for this Drug Class Review.
 - i. The objectives of this drug class review were presented and discussed.
 - ii. A Power Point Slide presentation was led by Dr. Veivia. The various classes (SSRI, SNRI, etc) of antidepressant medications were discussed in detail
 - 1. Discussion included for each class: Safety, efficacy, and possible adverse drug reactions.
 - 2. Bupropion was briefly discussed, and a request was made to review primary literature for evidence for ADHD.
 - 3. Off-label prescribing for PTSD, and non-pharmacologic management of PTSD, including CBT, were discussed.
 - iii. It was noted that in 2018, approximately 35% of CMCU approvals included an approval for antidepressants. Only 10% of these approvals were for antidepressant monotherapy (e.g., antidepressant plus no other medication).
 - iv. The Appendix II (drug use guidelines) section addressing antidepressants was reviewed and discussed in detail regarding possible changes/updates.
 - 1. Paroxetine and venlafaxine were discussed.
 - 2. Tricyclics and citalopram were discussed.
 - 3. The efficacy of fluoxetine over other SSRIs documented in the literature was noted.

4. Noted that trazodone is being utilized primarily for insomnia vs depression. The SE of priapism was briefly discussed.
 5. No changes to the Drug Use Guidelines were recommended.
- Old Business:
 - Standardization of Supplements and Micronutrients: The revised PMAC position paper titled “VITAMINS, HERBAL, MINERAL AND NUTRITIONAL SUPPLEMENTS” was distributed, reviewed, discussed and approved.
 - i. The effects of magnesium supplements were briefly discussed, and no recommendations were made.
 - ADR reporting
 - i. There was considerable discussion on the best method to report ADRs. Utilization of a telephone “ADR hotline” was discussed at length as well as utilizing email to report ADRs. Neither option was recommended. At this time ADRs will continue to be reported by prescribing practitioners. Foster parents may utilize the pharmacy hotline to report these adverse effects, but it was agreed that this should not be the first-line method for reporting ADRs.
 - New Business:
 - Genetic Testing and Psychiatric Disorders: A Statement from the International Society of Psychiatric Genetics.
 - i. This statement was distributed, reviewed and briefly discussed.
 1. It was noted that the APA in its task force on research has cautioned against routine pharmacogenomics testing.
 2. The uncertain value of pharmacogenomic testing was discussed.
 3. Recommendation made and approved to NOT endorse routine testing. Testing should be done on a case by case basis.
 - Other as time allows: NONE
 - Dr. Rao adjourned the meeting at 2:30PM.

Respectfully submitted: David S. Aresco Consulting Pharmacist