# DCF Psychotropic Medication Advisory Committee Monthly Meeting Notes

June 13, 2008, 1:00PM Riverview Hospital for Children and Youth Middletown, CT.

PRESENT: Janet Williams M.D., DCF Medical Director; David S. Aresco, Pharmacist Consultant; Carlos A. Gonzalez M.D. IPP; Jacqueline Harris MD, DCF Western Regional Medical Director; Joan Narad M.D. DCF CO; Naida Arcenas APRN, DDS; Chris Malinowski APRN, Village; Amy J. Veivia Pharm.D. Pharmacist Consultant; Patricia Cables APRN, Wheeler Clinic; Pieter Joost Van Wattum M.D. CB; Fredericka Wolman DCF.

- 1. Call to order: Janet Williams MD called the meeting to order at 1:10 pm.
- 2. <u>Set date/time of next meeting</u>: The next meeting is scheduled for July 11, 2008 from 1-3PM; RHCY AB Conference Room.

#### 3. Announcements:

- Psychopharmacology Conference Work Group Report: The group did not meet; no report.
- Update from AHA and AACAP on Stimulants and EKG's.
  - Consensus is that EKG's are not mandatory. DCF PMAC guidelines on this issue remains unchanged.
- □ An article from the NY Times "Researches Fail to Reveal Full Drug Pay" was distributed and discussed in detail. No actions will be taken by PMAC at this time regarding issues raised by this article.
- □ Naida Arcenas announced her retirement from state service effective July 1, 2008.
   Naida leaves after 25years of service and will be returning to community practice.
- 4. <u>Minutes</u>: The minutes of the April 4, 2008 PMAC were reviewed and approved with the following change.
  - Spelling of Vivance to be corrected to Vyvance.
- 5. <u>Discussion with Laurie Van DerHeide and the PMAC Medicaid Pharmacy Utilization</u> Subcommittee.
  - □ Dr. Williams presented an overview/summary report of the Subcommittee's teleconference.
    - DSS will not be able to provide data prior to Feb 2008. This is due to utilization of multiple vendors with differing data-sets. There are concerns with the quality of the data extracted from multiple vendor sources.
    - The first data will be extracted for the period Feb 08 Jun 08.
  - □ Copies of the data-packet were distributed, reviewed, and discussed in detail.
    - o Recommend data be sorted by age as follows: 0-5yrs, 6-11yrs, 12-18yrs.
    - o Recommend data be sorted by DCF committed, DCF involved, non-DCF.
    - Recommend reporting the number of children on 1, 2, 3, 4, and >5 medications.
    - o Recommend reporting the number of children on >3 psychotropics.
    - Recommend running a report showing children on medications prescribed at above the PMAC recommended maximum dose.
      - Recommend developing maximum dose guidelines for all remaining drug classes to accommodate development of this report.

- Formulary issues were discussed.
  - Recommend Medicaid formulary be coordinated with the DCF PMAC approved drug list.
    - A copy of the Medicaid formulary needs to be obtained to implement this recommendation.
- Cost issues were discussed.
  - Recommend cost issues be secondary to clinical issues.
- Work-load issues were discussed.
  - Recommend work be done by the Subcommittee who will report to the full PMAC. This should result in a reasonable workload for the full PMAC.
- □ All recommendations were endorsed/approved by the PMAC.

## 6. Review of Medication Guidelines/Protocols:

- □ Lithium/anticonvulsants: The protocol was distributed and discussed in detail.
  - □ Recommendation to change Q3month follow-up to Q3months x 1yr then Qyear.
  - □ Recommendation: Valproic acid; change weight to BMI. Change Q3months to at 1month then Q3months. Do both Amylase and Lipase.
  - Recommendation to strike the note referring to elderly patients in the Lithium section.
  - □ Recommendation to add literature references to the protocol.
- □ Lithium/anticonvulsants: Maximum dosing guidelines.
  - □ It was noted that there are no guidelines in the literature for Lithium use in patients <12yrs old or for Valproic Acid use in patients <10yrs old. This issue was discussed in detail. Dr. Harris has some data on Valproic acid use in children recommending a level of 115. Dr. Harris will confirm this data. Recommend postponing publishing of these dosing guidelines until this data is confirmed and approved.
- All recommendations endorsed/approved.

## 7. <u>Update: CMCU discussion about recent Melatonin requests and other requested</u> supplements.

- □ CMCU reports Melatonin being requested on a regular basis. The issues of product quality among differing manufacturers was discussed and is of concern.
  - □ Recommendation to have CMCU recognize that this product is being used but is NOT officially reviewable for approval by the CMCU.
- □ Recommendation endorsed/approved.

### 8. Other:

- Article distributed regarding Clozapine use and Benign Ethnic Neutropenia.
  - ☐ This issue was discussed in detail. Noted that ONLY Novartis has a mechanism to get a waiver re the usual lab thresholds.
- Article distributed regarding genetic testing for P450 enzyme markers re SSRI's and Antipsychotics.
  - □ After much discussion it was felt that the state of the science is such that testing in every patient is not reasonable at this time.
  - ☐ The test may have some value at this time in those patients that are shown to be either resistant to effects or show toxicity but only after trials with several medications.
- □ Article distributed regarding use of amantadine in children with aggression.
  - ☐ This topic was discussed in detail. This article is dated 2002.

Agreed that this medication seems to be effective for aggression and
hyperactivity as well as TBI agitation. SE's are dose related and the drug has
dopamine agonist properties.

9. Adjournment: 2:36pm

Respectfully Submitted:

David S. Aresco