

**DCF Psychotropic Medication Advisory Committee
MINUTES**

December 6, 2013 1:00 PM

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

Present: Jacqueline Harris, M.D., Chair; David Aresco, RPh; Chris Malinowski, APRN; Amy Veivia, Pharm. D.; Allen Alton, M.D.; Aurele Kamm, APRN; Brian Keyes, M.D.; Joan Narad, M.D.; Margaret Rudin, PhD, Psychologist.

1. Dr. Harris called the meeting to order at 1:10PM.
2. The next meeting is scheduled for January 3, 2014 from 1pm – 2:30pm; Solnit Center AB conference room.
3. Several changes were made to the minutes of the November 2013 meeting. These changes will be completed and the minutes sent for posting on the DCF web site.
4. Announcements: Mr. Aresco noted that the information on the DCF web site regarding Quillivant XR was brought up to date.
5. Old Business:
 - PMAC Work Group report
 - Proposed criteria for reviewing a medication: A sample monograph for oxcarbazepine (Trileptal) was distributed, reviewed and discussed. The process that resulted in this sample monograph was described in detail. Key points in the discussion were:
 - i. Recommend that an executive summary be placed at the beginning of each monograph.
 - ii. A source of the studies used and any disclaimers should be included. The PMAC noted that this information is included in the references section of the monograph.
 - iii. Noted an increased volume of DCF children on this medication. Suggested due to the increased volume this medication should be added to the approved drug list despite evidence of lack of efficacy. As the data does show a lack of efficacy PMAC recommends not adding this medication to the approved drug list. The review date of this medication will be updated on the web site.
 - Proposal for mandatory monitoring for each class of medication: The process that resulted in this proposal was described in detail. The proposal was distributed, reviewed and discussed in detail. Items discussed:

- EKG: done under certain conditions such as prescribing of >1 psychotropic medication concurrently. It was then suggested that this should be >1 medication that could affect such conduction. Tricyclics and lithium were noted as possible examples. PMAC asked that P&T Consulting research the incidence of lithium affecting conduction and bring the result to the next PMAC meeting. Additionally P&T Consulting will develop a list of medications (not limited to psych meds) that may have an effect on conduction. This may be suitable for use as an internal reference tool by the CMCU. It was also recommended that a disclaimer be placed on any such reference document.
 - HT, WT, BMI, BP, P: after a short discussion the PMAC recommends these be mandatory for each patient.
 - Drug levels: defer to the next work group meeting then report recommendations to PMAC.
 - For Tegretol: CBC, LFT, Lytes (Na)
 - For Depakote: CBC, LFT
 - For Lithium: CBC, BUN, CR, Lytes, TSH
 - For Lamictal: Titration schedule must be followed.
 - For Atypicals: Lipids, fasting glucose, LFT, AIMS.
 - Clozapine: CBC, lipids, fasting blood glucose.
- Medication request form/process revisions: DEFER
 - DDS data source: DEFER

6. New Business

- CYP 450 reference tool: the document/tool was distributed reviewed and discussed. Key points included:
 - i. Noted genetic testing requires Medical Review Board approval.
 - ii. Genomics was further discussed. PMAC does not wish this tool to be interpreted as an endorsement of genetic testing. Dr. Harris will consult with the Medical Review Board and inform Mr. Aresco if this tool may be posted on the DCF web site.

7. Other as time allows: none

8. Dr. Harris adjourned the meeting at 238pm.