

The GeriJournal



Volume 2, Number 9
September 2007

A publication of GeriatRx Pharmacy

Glucometer Upgrade

The majority of our facilities use Contour® glucometers, manufactured by Bayer. Bayer has built a number of new features into an upgraded version which we will be releasing to the facilities with a full education program to insure optimal usage.

The key “no-coding” feature of the glucometer remains in place. Nursing staff will be very pleased to see that the testing time has been reduced from 15 seconds to just 5 seconds. The new version is also “dialysis friendly”. Some of the chemicals found in peritoneal dialysis solutions can adversely affect glucometer results, but that will not be a concern with the new monitor. There are other programming and retrieval features that some facilities may or may not wish to use.

The conversion should be seamless. The new meters use the same test strips as the current version, and the testing procedure is virtually the same. Please contact us when you are ready to make the switch.

Formulary Changes

The new formulary has brought us a number of interesting changes. Biaxin® (but not Biaxin XL®) has been genericized. Serc®, a novel antihistamine usually used to treat dizziness, will be available in generic form. This medication is not covered by ODB, so the generic substitution will result in substantial cost savings for those residents using it. The same situation applies to Flonase® nasal spray, which is now interchangeable with ratio-fluticasone.

Tapazole®, a drug used for hyperthyroidism, will no longer be covered by ODB. Unfortunately, there is no reasonable alternative to this medication. We have contacted the families of all residents taking Tapazole® to apprise them of this.

Topical Morphine for Skin Ulcers

Painful skin ulcers present a significant treatment problem. Often, large doses of systemic opioids are administered to provide comfort to those affected, but the adverse effects from this approach are undesirable.

There is some historical research supporting the use of topical opioids in such individuals. Recent anecdotal

reports have also been quite positive.

We have used 0.1% morphine in Intralite® gel for a small number of these residents. Their responses have been excellent, with decreased analgesic requirements, and reduced discomfort associated with dressing changes being reported. This treatment may offer tremendous benefits to selected residents in your facility.

Probiotics

Would you intentionally ingest a tablet, capsule or drink filled with billions of live bacteria or yeast? More and more people seem to be doing just that.

Probiotic treatment, with “friendly”, non-pathogenic organisms, is gaining support in the scientific literature. Many of these “bugs” are normal flora in the GI tract, and are often unintended victims of antibiotic treatment. When probiotics are taken during and after a course of antibiotics, they can prevent the loss of these natural bacteria, and the diarrhea that often follows. A recent study from the *BMJ* showed that a custom probiotic drink prevented development of potentially lethal *C. Difficile* linked diarrhea. We will be seeing this strategy used more often in the future.

*Prepared by Randy Goodman
Certified Geriatric Pharmacist*

