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NOAC Drug Interactions

One of the great benefits of the novel oral anticoagulants (NOACs - Pradaxa®, Xarelto®, Eliquis®) is that they interact with very few medications. This is especially true when they are compared with Coumadin®.

One very important interaction with the NOACs is emerging, however. Biaxin® inhibits both their metabolism in the liver and their elimination via the kidneys and the intestinal tract. This interaction is so significant that Biaxin® should not be used with any of the three new anticoagulants.

The reaction occurs on two levels. A molecule in the gut and kidneys, called P-glycoprotein, is part of a pumping mechanism that pushes the NOACs out of the body. Biaxin® impairs the activity of the pump so the NOAC blood levels increase. Biaxin® also interacts with cytochrome P450 3A4, the enzyme system that breaks down NOACs in the liver. In the event Biaxin® is ordered with one of these agents, GeriatRx will advise you.

Physicians should be aware that some pharmacy computer systems do not give adequate warning of the bleeding risk associated with this combination.

Palliative Care Order Set

Some of our individual physicians or facilities have pre-printed palliative orders. These order sets can simplify medication ordering when there is a downturn in a resident's condition.

In an effort to assist in this process, we have created a *GeriatRx Palliative Care Order Set*. It addresses a number of symptom sets which may require treatment. It also gives different drug options, often specifying when one listed agent might be preferred over another. The symptoms included are: pain/dyspnea, delirium, excessive secretions, dry mouth, nausea/vomiting along with a miscellaneous category. The set includes nurse and physician signature boxes on the bottom of the page, so it can be used in the same manner as a standard *Physician Order Form*.

If you are interested in utilizing the order set, speak to your consultant pharmacist. He or she can review the document with your physicians or at your next Professional Advisory Committee meeting.

Family Supplied Meds

Family members often purchase OTC products for their relatives in an effort to save money. Unfortunately, they don't realize the impact this practice has on the nurse and her medication cart.

Bins must be moved to accommodate large bottles, impacting cart organization. Drug administration for all residents is delayed while extra time is spent accessing and preparing medications outside of the multi-dose pouch system.

More importantly, allowing this practice can place the facility at odds with the MOHLTC. The *LTC Homes Act, 2007* [136(1c)] states that all drug containers must have full prescription labels, as per section 156(3) of the *Drug and Pharmacies Regulation Act*. Also, sections 126 and 122(1) of the *LTC Homes Act*, state that all drugs received or stored within the facility must "remain in the original labelled container or package provided by the pharmacy service provider or the Government of Ontario" and must be provided by the same source.

These regulations protect the facility and its nursing staff by assuring consistency of supply and procedures. Furthermore, failure to comply may result in citation from MOHLTC.

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