

American Association of Colleges of Pharmacy

Self-Care Therapeutics/Nonprescription Medicines

Special Interest Group Newsletter

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SPRING 2010 ELECTIONS

**Please review the biographies contained on pages 2 and 3 of this newsletter
and visit <http://www.surveymonkey.com/s/FHTSK6G> to cast your vote**

ALL VOTES MUST BE RECEIVED NO LATER THAN 3/31/10



Table of Contents:

Chair-Elect 2011-2012 Information	Page 2
Nonprescription Pharmacotherapy of Pediatric Insomnia	Page 4
A Review of Complementary and Alternative Medicine Resources	Page 5
Incorporation of Self-Care into Introductory Pharmacy Practice Experiences	Page 7



Chair-Elect Candidate: Kelly Orr, Pharm.D.

Kelly Orr is a Clinical Associate Professor at the University of Rhode Island College of Pharmacy. She serves as a course coordinator and lecturer for the 3-credit required Self Care 1 course as well as the elective, Self Care 2. Dr. Orr has published articles on the use of nonprescription drugs in the pediatric population, emergency contraception, and utilizing virtual patients in self care teaching. Dr. Orr's virtual patient learning activity received an honorable mention in the 2006 Council of Faculties AACP Innovations in Teaching Competition and has been adapted by other schools for use in their self care curricula. Dr. Orr co-authored the Natural Products chapter for the sixteenth edition of the APhA Handbook of Nonprescription Drugs and serves as a member of the Nonprescription Medicines Academy (NMA) Steering Committee.

In addition to her self care responsibilities, Dr. Orr is a course coordinator and lecturer in the area of pulmonary therapeutics. Her practice interests are the areas of smoking cessation and asthma management, which has led to her obtaining the National Asthma Educator Certification (AE-C). She serves as a community pharmacy preceptor and is responsible for the development of advanced practice experiences in the community pharmacy setting. Dr. Orr is the current faculty liaison to the College's Student Leadership Council. Along with her memberships in national pharmacy organizations, Kelly is past-president of the Rhode Island Pharmacists' Association (RIPA) and was recently appointed by the Governor of Rhode Island to the Rhode Island Board of Pharmacy.



Chair-Elect Candidate: Paul J. Oesterman, Pharm.D.

Paul Oesterman is an Associate Professor of Pharmacy Practice at the University of Southern Nevada College of Pharmacy (USNCOP) and a practicing community pharmacist. Currently he coordinates and teaches the Communications and Self Care Therapeutics block, emphasizing the importance of interviewing and counseling patients with special emphasis placed on nonprescription products. In addition, he coordinates and teaches the Pharmacy Administration block at both USN campuses.

Prior to his return to academia in 2005, Paul served as a hospital pharmacy director, an HMO drug education coordinator and pharmacy manager, owned and operated three independent pharmacies, served as a pharmacy manager for a retail chain (for whom he still works on a per diem basis), and worked for 5 years in a call center for a mail order pharmacy.

Dr. Oesterman's prior experiences cultivated a genuine interest in community pharmacy, especially increasing the role of the pharmacist in Medication Therapy Management (MTM) services. Paul has obtained certifications in Pharmacy-Based Immunizations, Pharmacy-Based Lipid Management, Pharmacy-Based Diabetes Care, Pharmacy-Directed Coagulation Monitoring, and Tobacco Cessation training. Dr. Oesterman is active in various pharmacy organizations and currently serves as chairperson for the State of Nevada Drug Utilization Review Board, NCPA faculty liaison for the USN Henderson campus, and faculty advisor for the nationally recognized Drug Abuse Awareness Team (DAAT), an organization who serves to educate young adults about the risks associated with improper use of over-the-counter and prescription medications.

Dr. Oesterman's dedication to fostering both patient and student awareness to the importance of Self Care Therapeutics is evidenced by his regular attendance, presentations, and participation at annual APhA Self Care Institutes and Nonprescription Medications Academy annual meetings. Paul also has served on the nominations committee for AACP Self-Care SIG the last two years. His continuous commitment to the practice of pharmacy and community involvement was most recently recognized when he was awarded the 2008 Bowl of Hygeia Award for the State of Nevada.

Nonprescription Pharmacotherapy of Pediatric Insomnia

Maqual Graham, Pharm.D.
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University of Missouri-Kansas City School of Pharmacy

Insomnia is a major public health problem as it can affect brain function, behavior and normal metabolism.¹ It is the third most common patient complaint, following headache and the common cold.² Insomnia is defined as having trouble falling asleep, staying asleep or lack of feeling refreshed upon awakening.² When compared to adult-onset insomnia, the pediatric population differs in that clinical manifestations include bedtime resistance or refusal, delayed sleep onset and/or prolonged night awakenings.³ The cause of pediatric insomnia may be medically related and/or associated with a primary sleep disorder (ie: allergies, asthma, anxiety, obstructive sleep apnea, restless leg syndrome) or behavioral concern (ie: poor sleep hygiene).³ Combinations of these factors contribute to insomnia with treatment resulting in lifestyle modifications with or without drug therapy. Initiation of a pharmacologic agent may have a more rapid and potent effect, however the incorporation of nonpharmacologic interventions may produce a more long-term solution.³ Some lifestyle modifications may include falling asleep and waking at the same time every day, making sleep comfortable by avoiding extremes in temperature, noise and light, exercising regularly with the exception of late evening activities, avoiding a heavy meal within two to three hours of bedtime and avoiding caffeine within four to six hours of sleep.^{2,4} Drug therapy may be recommended by an experienced pediatric sleep specialist following assessment of clinical symptoms and a thorough evaluation of currently available agents used to treat insomnia. Rational use of nonprescription agents should consider both the type of sleep problem and characteristics of currently available agents. Unfortunately, parents and uninformed clinicians may also purchase or recommend nonprescription agents to treat insomnia in pediatric patients, contributing to

widespread use and potential misuse of these agents.³ The nonprescription antihistamine diphenhydramine is a commonly used sedative to treat pediatric insomnia. Potential side effects include daytime drowsiness and paradoxical excitation. Diphenhydramine is generally well tolerated, however tolerance may result which can lead to higher doses necessary to treat the insomnia.³ Limited data suggest that only a few supplements may be useful in treating pediatric insomnia.³ Such therapies include melatonin, 5-hydroxytryptophan (5-HTP), valerian, kava kava and tryptophan. Melatonin is thought to supplement the endogenous hormone with the goal of treating insomnia associated with acute or chronic circadian rhythm disturbances.^{3,4} Melatonin use is generally regarded as safe, however available products may vary in purity and strength.⁴ 5-HTP, an immediate precursor of serotonin, is being used to treat insomnia however its efficacy has not been proven.² Valerian, an herb that possesses benzodiazepine-like effects to induce sleep, has some evidence supporting its use in pediatric patients.^{3,4} Kava kava and tryptophan are associated with significant safety concerns.^{3,4} In summary, diphenhydramine should not be recommended to treat insomnia in patients less than 12 years of age and use of select supplements should be discouraged unless suggested by an experienced medical provider.

References:

1. Lipton J, Becker RE and Kothare SV. Insomnia in Childhood. *Current Opinions in Pediatrics* 2008;20:641-649.
2. Kirkwood CK and Melton ST. Insomnia. *Handbook of Nonprescription Drugs*, Chapter 48. 16th edition. American Pharmaceutical Association 2009.
3. Owens JA. Pharmacotherapy of Pediatric Insomnia. *J Am Acad Child Adolesc Psychiatry* 2009 48;2:99-107.
4. Holcomb SS. Putting Insomnia to Rest. *The Nurse Practitioner* 2007 32;4:29-34.

IMPORTANT DATES:



Self Care Institute

June 17th-20th, 2010
By Invitation Only

AACP

July 10th-14th, 2010
Seattle, WA

NMA

September 23rd-25th, 2010
Cincinnati, OH
*Visit www.nmafaculty.org
for application information*

A Review of Complementary and Alternative Medicine Resources

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A physician stopped me in the hall of clinic and asked if I would be willing to see her patient, a “pleasant but stubborn gentleman,” who likes to “dabble with herbs.” As it turned out, “dabble with herbs” translated to a gym bag full of herbs, most of which I have not seen in practice.

With the use of complementary and alternative medicine (CAM) on the rise, patient scenarios such as the one mentioned are becoming commonplace. The 2007 National Health Interview Survey stated 38.3% of adults reported using complementary and alternative medicine therapy, an increase from 2002. Natural products remain the most commonly used CAM therapy. Dietary supplements remain an excellent avenue for pharmacists to offer their counseling expertise, considering the number of health care professionals not well versed on this increasingly popular topic. Knowing where to look for information on CAM is one step towards becoming the resident expert on CAM therapy.

There are many companies that have tapped into the CAM market providing information specific to dietary supplements. The first was the German Commission E. This resource is the grandfather of herbal supplement resources, however it provides limited information compared to comprehensive databases such as Natural Standard and Natural Medicines Comprehensive Database that were developed in its wake.

Natural Standard offers one of the most comprehensive indexes of dietary supplement monographs in both extended and abridged formats; however, only institutional subscriptions are available for this database. A subset of Natural Standard monographs, highlighting the most commonly used supplements, can be obtained free of

charge on the government website MedlinePlus. The “effectiveness” section of Natural Standard is particularly helpful as it grades level of evidence pertaining to specific disease states with a rating of A-F compared to other resources using an A-D rating system. Also of note, the Natural Standard website contains a “new items” section providing recent developments related to the product entered into the search field.

If the institutional subscription is a prohibiting factor, Natural Medicines Comprehensive Database also offers a wide-range index of monographs comparable to that of Natural Standard but with individual memberships available at a reasonable cost. You can search Natural Medicines Comprehensive Database a variety of ways but one unique search feature is the ability to search by “disease state.” This function is useful when there is a disease state an individual is looking to treat with CAM therapy but does not know what products to consider in their assessment. Natural Medicines Comprehensive Database can also be a real time saver since it allows for the investigation of multiple products as part of one search, rather than searching for each ingredient separately.

For professionals not working extensively with dietary supplements, but anticipate the occasional inquiry, a number of general drug information resources currently have dietary supplement components. Clinical Pharmacology, Lexi-Comp, and Micromedex all possess databases within their online systems pertaining to alternative medicines. Micromedex and Lexi-Comp present information in a bulleted summary page while Clinical Pharmacology provides information in a tabular format. Lexi-Comp also offers

its information in a print version titled the Natural Therapeutics Pocket Guide. The databases are easy to navigate and some include patient education sheets available in English and Spanish. If financial resources are limited, a one-page herbal fact sheet written in lay language can be found in PDF format on the National Center for Complimentary and Alternative Medicine (NCCAM) website. NCCAM also publishes these PDF’s as a quick reference handbook that can be obtained free of charge on their website.

Cochrane Reviews provide a two or three page summary of the evidence supporting the use of a particular product for a specific condition. This resource may not be as helpful to professionals as some of the other resources discussed in this article due to its focus on consumer information.

Other references that are not in monograph form but can be useful for very specific informational needs are ConsumerLab.com and the International Bibliographic Information on Dietary Supplements (IBIDS) database. If a recommendation must be made for a specific herbal product or supplement, ConsumerLab.com provides a consumer report containing information on product quality, pricing, voluntary certification, and other product facts. IBIDS, a National Institute of Health (NIH) database focusing on dietary supplements, is comparable to PubMed and provides primary literature references related to the product in question. The National Library of Medicine (NLM) regulates the Dietary Supplement Labels Database (DSLDD), a resource that functions primarily as a link to other resources regarding the product in question.

For a list of the websites included in this article, as well as a brief comparison chart, please view page 6.

Table of Websites

<p>Clinical Pharmacology: www.clinicalpharmacology.com</p> <p>Cochrane Reviews: www.cochrane.org/reviews</p> <p>Consumer Lab: www.consumerlab.com</p> <p>Dietary Supplement Labels Database (DSLDD): http://dietarysupplements.nlm.nih.gov/dietary</p> <p>German Commission E: www.herbalgram.org</p> <p>International Bibliographic Information on Dietary Supplements (IBIDS): http://dietary-supplements.info.nih.gov/Health_Information/IBIDS.aspx</p>	<p>Lexi-Comp: www.lexi.com</p> <p>MedlinePlus: www.medlineplus.com</p> <p>Micromedex: www.thomsonhc.com</p> <p>National Center for Complimentary and Alternative Medicine (NCCAM): http://nccam.nih.gov</p> <p>Natural Standard: www.naturalstandard.com</p> <p>Natural Medicine Comprehensive Database: http://naturaldatabase.therapeuticresearch.com/nd/products.aspx</p>
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	Cost Associated (\$) or Free (F)	Electronic (E) or Paper(P)	Other Names of Product	Uses/Indications	Doses	Effectiveness/Level of Evidence	Adverse Drug Events	Mechanism of Action	Kinetics/ADME	Drug/Food/ Lab Interactions	Contra-indications/ Precautions	Special Populations	How Supplied	Monitoring Parameters	Patient Education Sheets
Clinical Pharmacology	\$	E	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Cochrane Reviews	F	E	N	Y	Y	Y	Y	Y	N	N	N	N	Y	N	N
German Commission E	\$	E/P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	N	N
Lexicomp	\$	E/P	Y	Y	Y	N	Y	Y	N	Y	Y	N	N	N	N
Medline Plus	F	E	Y	Y	Y	Y	Y	Y	N	Y	Y	Y	N	N	N
Micromedex	\$	E	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Natural Medicines	\$	E	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y
Natural Standard	\$	E/P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	N
NCCAM	F	E/P	Y	Y	N	Y	Y	N	N	N	Y	N	Y	N	Y
NLM- DSLD	F	E	Y	Y	N	N	Y	Y	N	N	N	N	N	N	N

Incorporation of Self-Care into Introductory Pharmacy Practice Experiences

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St. John's University College of Pharmacy and Allied Health Professions

The 2007 Accreditation Standards and Guidelines for the Professional Program in Pharmacy Leading to the Doctor of Pharmacy Degree have increased the Introductory Pharmacy Practice Experience (IPPEs) requirement from twenty-four hours to a 300-hour minimum. This significant change provides the means for a more thorough and memorable inclusion of self-care into the IPPEs.

The creation and incorporation of guided worksheets by faculty and preceptors is a great way to introduce students to the many types of products they will encounter in a pharmacy. Some examples of such products are vitamins, herbals, dietary supplements, and monitoring devices. Preceptors may find it beneficial to work with faculty during this creative process so that specialty products present at their site (ie: surgical supplies) may be highlighted in the worksheets. One example of a guided worksheet would be a product identification activity. The student would choose a common ailment that is self-treatable, such as a headache. They would choose an over-the-counter (OTC) product that is FDA-approved to treat the chosen condition. In order to gain exposure to that product and familiarize himself or herself with the product labeling, the student would document the brand name of the product and record the active ingredient(s). The student can proceed to choose other products that are FDA-approved to treat the same ailment. At the completion of the exercise, the student can review the worksheet to take note of the different ingredients identified to treat the condition in question. Searching the shelves to treat that specific condition will also help students identify products marketed from a variety of manufacturers that contain the same active ingredient, a situation that can

prove confusing to a number of patients. A second example of a guided worksheet would be a home diagnostic and monitoring device identification activity. Students will be given a number of conditions that are associated with OTC home diagnostic kits and/or monitoring devices (ie: diabetes, high blood pressure, high cholesterol, etc.). Documenting the items available for each condition will allow the student consider factors that are important when making recommendations for a patient such as ease of use, cost, and a general idea of how each product works.

Having students observe a pharmacist-patient interaction regarding a self-care issue is another example of a potential exercise that can be incorporated into IPPEs. At the conclusion of the viewed interaction, a set of guided questions can be provided to provoke reflection. Some specific areas of interest are the initiator of the discussion, the questions posed by the pharmacist, and the ways this type of interaction differs from a prescription counseling session. Questions are intended to help the student recognize the most important aspects of the self-care interaction, particularly the type of questioning utilized by the pharmacist to gather all the information necessary. This can be especially helpful if the type of questioning and interview style utilized by the pharmacist coincides with information provided to students as part of future courses that address self-care.

Scenarios where students are given the chance to play the role of a patient in need of a nonprescription product can serve as an eye-opening experience, especially considering how easily patients can become confused when trying to choose an over-the-counter remedy. The student would be required to choose a product for the assigned ailment without the help of a pharmacist

and following, reflect on the thought process utilized in choosing that product. At the conclusion of the exercise students are to discuss the choice with their preceptor, as well as any questions or concerns that may have come about as part of this experience. This activity differs from the product identification activity in that the student would not just be identifying brand and generic product names. A reflection on the thought process and product choice is the major focus of this assignment. The ultimate goal of this activity is to help students recognize the challenges patients encounter when choosing a nonprescription product without the help of a pharmacist.

In addition to the activities mentioned, there are a number of resources that can provide benefit to students during their IPPEs. One such example is *The Handbook of Nonprescription Drugs: An Interactive Approach to Self-Care* (Berardi et. al.). This reference can be utilized for both basic introductory reading as well as case studies throughout the experience. Another idea is having students purchase a set of nonprescription drug cards as a quick reference source for the most common products sold in pharmacies. Students may be assigned a number of products to review for a given period and then discuss the products with their preceptor during the practice experience.

As shown here, there are many creative activities that can aid in incorporating self-care into the IPPEs. As a result of these activities, preceptors are able to provide students with an awareness of the self-care needs of patients as well as an awareness and understanding of the role of the pharmacist in self-care.