

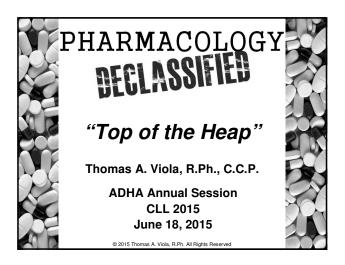
CE Course Handout

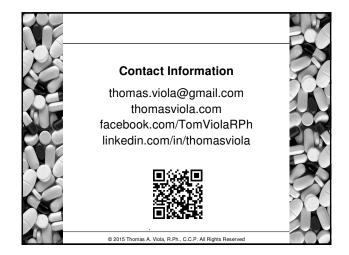
"Top of the Heap"
The Most Frequently Prescribed Brand-Name
Medications and Their Clinical Dental
Implications

Thursday, June 18, 2015 2:30pm-5:30pm









Program Learning Objectives

Upon successful completion of this program, participants will be able to:

- · Identify the 25 most frequently prescribed FDA approved brand name medications.
- · Review the basic mechanism of action, therapeutic indications, and potential adverse reactions and drug interactions of these medications.
- · Discuss the clinical dental considerations of these medications and potential impact on dentistry.

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The Top 25 Most Frequently Prescribed Brand Name Medications

Lipitor (atorvastatin)

Crestor (rosuvastatin)

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The Top 25

1. Lipitor

10. Cymbalta

18. Nasonex

2. Nexium

11. Diovan

3. Plavix

19. Viagra

12. Ventolin HFA 20. Lyrica

4. Singulair

13. Diovan HCT

21. Celebrex

5. Lexapro 6. Crestor

14. Actos 15. Seroquel 22. Concerta 23. Spiriva

7. Synthroid

16. Levaquin 17. Lantus

24. Effexor XR

8. ProAir HFA

25. Tricor

9. Advair Diskus

Antihyperlipidemic Agents

- Hyperlipidemia
 - -Elevation of lipids (fats) in the bloodstream
- Lipoproteins
 - -Cholesterol, phospholipids and triglycerides are insoluble in our water-based blood
 - -Must be bound to lipid-containing proteins (lipoprotein) for transport

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Antihyperlipidemic Agents

- Low-density lipoproteins (LDL's)
 - -Transport cholesterol to peripheral cells
 - -Excess cholesterol is discarded into the blood
 - · Leads to high cholesterol
 - Leads to atherosclerotic plague formation
- High-density lipoproteins (HDL's)
 - -Transfer cholesterol from peripheral cells to liver
 - -Cholesterol is metabolized in liver and excreted

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Lipitor (atorvastatin)

- Pharmacologic Classification
 - -Antihyperlipidemic
- Mechanism of Action
 - -Inhibits HMG-CoA reductase, reduces cholesterol synthesis, decreases LDL's and increases HDL's
- Therapeutic Indication
 - -Treatment of high cholesterol
 - -Reduction of risk of MI, angina

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Lipitor (atorvastatin)

Precautions

-Pregnancy

-Active liver disease

- Adverse Effects
 - -Headache
- -Myalgia, allergy
- -GI upset
- -Anterograde amnesia
- -Flatulence
- Dental Considerations
 - -Drug interactions with erythromycin, fluconazole, grapefruit juice, pomegranate juice
 - Possible severe myopathy or rhabdomyolysis

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Nexium (esomeprazole)

Nexium (esomeprazole)

- Pharmacologic Classification
 - -Proton-pump inhibitor
- Mechanism of Action
 - -Inhibits enzyme on the surface of parietal cells, reduces gastric acid synthesis
- Therapeutic Indication
 - -Treatment of gastroesophageal reflux disease

Nexium (esomeprazole)

Precautions

-Allergy

-Active liver disease

- Adverse Effects

 - -Headache
 - -GI upset

 - -Dizziness
 - -Xerostomia
 - -Halitosis
- Dental Considerations
 - -Reduced absorption of drugs requiring low pH
 - -Use NSAIA's with caution
 - -Possible blood dyscrasias
 - -Consider semi-supine chair position

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Plavix (clopidogrel)

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Thromboembolic Disease

- Coagulation
 - -A normal clotting mechanism which prevents blood loss when the integrity of a blood vessel is disrupted
- Hypercoagulation
 - -An abnormally overactive clotting mechanism which produces clots (thrombi) within undamaged
 - Arterial thrombi produce stroke, MI, death
 - · Venous thrombi produce deep vein thrombosis and pulmonary embolism

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Oral Antiplatelet Agents

- Types
 - -aspirin
 - -clopidogrel (Plavix)
 - -dipyridamole (Persantine)
 - -prasugrel (Effient)
 - -ticagrelor (Brilinta)
- Uses
 - -Prevention of cardiovascular events in adults with
 - · Acute coronary syndrome
 - · Recent MI, TIA, stroke
 - Post-stenting

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Oral Antiplatelet Agents

- Dental considerations
 - -Drug interactions with liver enzyme inducers and inhibitors (Plavix and Brilinta)
 - -Increased risk of bleeding may be exacerbated by other drugs used in dentistry
 - NSAIA's
 - Antibiotics
 - -No contraindication for dental treatment

Plavix (clopidogrel)

- Pharmacologic Classification
 - -Platelet aggregation inhibitor
- Mechanism of Action
 - -Inhibits binding of ADP to platelet receptors, inhibits formation of thrombi
- Therapeutic Indication
 - -Treatment of MI, stroke, PVD
 - -Treatment of acute coronary syndrome
 - -Prevention of thrombosis post-stent placement

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Plavix (clopidogrel)

Precautions

-Active liver disease

-Active bleeding

- Adverse Effects

 - -Skin rash
 - -Epistaxis, bruising
 - -GI upset
 - -Stomatitis, dysgeusia
- Dental Considerations
 - -Avoid discontinuation for dental procedures due to increased risk of thromboembolism
 - -Use NSAIA's with caution
 - -Consider local hemostasis measures

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Oral Anticoagulant Agents

- Types
 - -Coumadin (warfarin)
 - Inhibits the synthesis of Vitamin K-dependent clotting factors
- Uses
 - -Prevention and treatment of venous thrombosis. pulmonary embolism, thromboembolism due to
 - · Atrial fibrillation
 - Prosthesis
 - Recent MI

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Oral Anticoagulant Agents

- Patient care considerations
 - -Increased risk of bleeding
 - Assessed by INR
 - -INR (international normalized ratio)
 - · Value of 1 is "normal"
 - Value of <3.5 is needed for dental hygiene treatment
 - -INR test should be done immediately before oral treatment

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Oral Anticoagulant Agents

- Dental considerations
 - -Anticoagulant effect may be reversed with administration of Vitamin K or whole blood
 - -Increased risk of bleeding may be exacerbated by other drugs used in dentistry
 - NSAIA's
 - Antibiotics
 - -No contraindication for dental treatment!

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Oral Anticoagulant Agents

- Types
 - -Pradaxa (dabigatran)
 - · Inhibits thrombin (factor IIa)
- Uses
 - -Prevention and treatment of venous thrombosis, pulmonary embolism, thromboembolism due to atrial fibrillation

Oral Anticoagulant Agents

- Patient care considerations
 - -No antidote for reversal of anticoagulant effect
 - · No INR testing for monitoring
 - -High incidence of dyspepsia
 - · Due to tartaric acid included in capsule to improve absorption
 - -Missed doses increase risk of stroke
 - · Must be taken twice daily

Oral Anticoagulant Agents

- Patient care considerations
 - Increased risk of bleeding may be exacerbated by other drugs used in dentistry
 - NSAIA's
 - Antibiotics
 - Co-administration with aspirin doubles bleeding risk
 - -No contraindication for dental treatment!

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25

Oral Anticoagulant Agents

- Types
 - -Xarelto (rivaroxaban)
 - -Eliquis (apixaban)
 - Inhibit factor Xa
- Uses
 - -Prevention and treatment of venous thrombosis, post-hip or knee replacement
 - Prevention and treatment of venous thrombosis, pulmonary embolism, thromboembolism due to atrial fibrillation

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Oral Anticoagulant Agents

- Patient care considerations
 - -No antidote for reversal of anticoagulant effect
 - · No INR testing for monitoring
 - -Possible drug interactions
 - -Impaired renal function may alter efficacy
 - -Should be taken with food

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Oral Anticoagulant Agents

- Patient care considerations
 - Increased risk of bleeding may be exacerbated by other drugs used in dentistry
 - NSAIA's
 - Antibiotics
 - -No contraindication for dental treatment!

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28

To Bleed or Not to Bleed...

There is a widespread belief that oral anti-thromboembolic therapy must be discontinued before dental treatment to prevent serious hemorrhagic complications.

 This is regardless of the fact that dental treatment rarely involves trauma to major blood vessels and that effective local hemostatic measures exist in dentistry (aminocaproic acid or tranexamic acid oral rinse)

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To Bleed or Not to Bleed...

The potential for excessive bleeding with continuation of therapy must be weighed against the adverse effects of discontinuation of therapy.

- Patients receiving oral antithromboembolic therapy may bleed more that what is normally encountered.
- Patients who discontinue such therapy are at greater risk for resulting hypercoagulation.

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To Bleed or Not to Bleed...

Clinical literature does not support routine discontinuation of oral antithromboembolic therapy for dental patients.

- Discontinuation of oral antithromboembolic therapy prior to dental treatment puts the patient at unnecessary risk for severe morbidity and mortality.
- Antithromboembolic therapy is not within the scope of practice of dentists or hygienists.

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Singulair (montelukast)

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Singulair (montelukast)

- Pharmacologic Classification
 - -Leukotriene receptor antagonist
- Mechanism of Action
 - Inhibits binding of leukotrienes to receptors, decreases bronchoconstriction and edema
- Therapeutic Indication
 - Prophylaxis and treatment of chronic bronchial asthma

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Singulair (montelukast)

- Adverse Effects
 - -Headache
 - -Skin rash
 - -GI upset
 - -Viral infection
- Precautions
 - Not for use in acute asthma or exerciseinduced asthma
- Dental Considerations
 - -Keep short-acting bronchodilators readily available
 - -Use NSAIA's with caution
 - -Use vasoconstrictors (sulfites) with caution
 - -Consider semi-supine chair position

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34

Lexapro (escitalopram)

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Antidepressant Agents

- Mechanism of action/Types
 - -Inhibit reuptake of norepinephrine/serotonin
 - Tricyclic antidepressants (TCA's)

 amitriptyline (Elavil)
 - trazodone (Desvrel)
 - venlafaxine (Effexor)
 - -Inhibit reuptake of serotonin only (SSRI's)
 - fluoxetine (Prozac)
 - sertraline (Zoloft)

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Antidepressant Agents

- Mechanism of action/Types
 - -Inhibit reuptake of norepinephrine/dopamine
 - bupropion (Wellbutrin)
 - -Inhibit breakdown of norepinephrine (MAOI's)
 - phenelzine (Nardil)
 - selegiline (Emsam transdermal patch)
 - -Use epinephrine with caution

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Lexapro (escitalopram)

- Pharmacologic Classification
 - -Antidepressant
- Mechanism of Action
 - -Selective serotonin reuptake inhibitor (SSRI), increases serotonin activity at receptors
- Therapeutic Indication
 - -Treatment of major depressive disorder
 - -Treatment of generalized anxiety disorder

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Lexapro (escitalopram)

- Adverse Effects
- Precautions
- -Headache
- -Increased bleeding
- -Xerostomia
- -Serotonin syndrome
- -GI upset
- -Seizure disorder
- -Bruxism
- -Suicidal thoughts
- Dental Considerations
 - -Increased risk of bleeding events, especially with concurrent use of NSAIA's, aspirin, warfarin
 - -Use epinephrine with caution, monitor blood pressure and pulse

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Synthroid (levothyroxine)

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Synthroid (levothyroxine)

- Pharmacologic Classification
 - -Thyroid hormone
- Mechanism of Action
 - -Synthetic for of thyroxine, responsible for normal growth and development
- Therapeutic Indication
 - -Treatment of hypothyroidism

Synthroid (levothyroxine)

- Adverse Effects
- -Alopecia
- Precautions -Allergy
- -Dry skin
- -Ischemic heart
- -GI upset
- disease
- -Dysphagia
- Dental Considerations
 - -Overdose may lead to exaggerated response to epinephrine and cardiac arrhythmias
 - -Refer uncontrolled patients for medical consult
 - -Monitor blood pressure and pulse

ProAir HFA (albuterol) Ventolin HFA (albuterol)

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ProAir HFA (albuterol)

- Pharmacologic Classification
 - -Short-acting Beta-2 adrenergic agonist
- Mechanism of Action
 - -Stimulates Beta-2 receptors, relaxes bronchial smooth muscle, producing bronchodilation
- Therapeutic Indication
 - -Prevention and relief of bronchospasm and exercise-induced bronchospasm

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ProAir HFA (albuterol)

- Adverse Effects
- Precautions
- -Headache
- -Hyperthyroidism
- -Tachycardia
- -Severe cardiac
- -Pharyngitis
- disease
- -Xerostomia
- Dental Considerations
 - -Keep short-acting bronchodilators readily available
 - -Use NSAIA's with caution
 - -Use vasoconstrictors (sulfites) with caution
 - -Consider semi-supine chair position

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Advair Diskus (fluticasone/salmeterol)

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Advair Diskus (fluticasone/salmeterol)

- Pharmacologic Classification
 - -A combination of a corticosteroid and long-acting Beta-2 adrenergic agonist
- Mechanism of Action
 - -Corticosteroid reduces inflammation and Beta-2 agonist produces bronchodilation
- Therapeutic Indication
 - -Prophylaxis and treatment of chronic bronchial asthma

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Advair Diskus (fluticasone/salmeterol)

- Adverse Effects
 - -Headache
 - -Tachycardia
 - -Oral candidiasis
 - -Xerostomia
- Precautions
 - -Not for use in acute asthma or exerciseinduced asthma
 - -Asthma-related death
- Dental Considerations
 - -Rinse after use to minimize risk of candidiasis and fungal pharyngitis
 - -Use NSAIA's with caution
 - -Use vasoconstrictors (sulfites) with caution

Cymbalta (duloxetine)

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Cymbalta (duloxetine)

- Pharmacologic Classification
 - -Antidepressant
- Mechanism of Action
 - Inhibits serotonin and norepinephrine reuptake, increases their activity at their receptors
- Therapeutic Indication
 - -Treatment of major depressive disorder
 - -Treatment of diabetic neuropathy
 - -Treatment of fibromyalgia and chronic muscle pain

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Cymbalta (duloxetine)

- Adverse Effects
- Precautions
- -Headache
- -Increased bleeding
- -Xerostomia
- -Hepatotoxicity
- -GI upset
- -Serotonin syndrome
- -Bruxism
- -Suicidal thoughts
- Dental Considerations
 - Increased risk of bleeding events, especially with concurrent use of NSAIA's, aspirin, warfarin
 - Use epinephrine with caution, monitor blood pressure and pulse

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Diovan (valsartan)
Diovan HCT (valsartan/HCTZ)

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Hypertension

- Hypertension
 - A failure in fluid volume homeostasis in the renin-angiotensin-aldosterone system in the kidneys
 - Causes the volume of blood being pumped to exceed the capacity of the cardiovascular system.
 - Results in high blood pressure (augmented by SANS stimulation)

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Renin-Angiotensin-Aldosterone System Reduced Activation of angiotensinogen release blood flow Angiotensin I to kidneys ACE Angiotensin III 4 Angiotensin II Aldosterone release Powerful vasoconstriction Increased blood pressure Retension of salt and water Increased blood flow to the kidneys

Sympathetic Autonomic Nervous System

Receptor Stimulation by (nor)epinephrine produces:

α₁ Vasoconstriction (skin and mucosa)

β₁ Increased cardiac activity

β₂ Vasodilation (skeletal muscle)
Bronchodilation

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Treatment of Hypertension

- Non-pharmacologic treatment of hypertension
 - -Reduce weight
 - -Limit alcohol consumption
 - -Increase aerobic physical activity
 - -Restrict sodium intake
 - -Stop smoking

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Treatment of Hypertension

Pharmacologic treatment of hypertension

Goal of Treatment
Reduce plasma volume

Drugs Employed
Diuretics

Dilate blood vessels

ACEI's, ARB's, CCB's, hydralazine

Reduce cardiac output (via SANS)

Beta-1 Blockers, Alpha-1 Blockers,

clonidine

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Diovan (valsartan)

- Pharmacologic Classification
 - –Angiotensin II receptor (AT1) antagonist
- Mechanism of Action
 - Inhibits binding of angiotensin II to receptors, produces vasodilation and reduces blood pressure
- Therapeutic Indication
 - -Treatment of hypertension
 - -Treatment of heart failure

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Diovan (valsartan)

- Adverse Effects
- Precautions
- -Dizziness
- Hepatic impairmentRenal artery stenosis
- -Orthostasis
- GI upsetJoint pain
- Dental Considerations
 - Use sedatives and general anesthesia with caution (possible hypotensive episode)
 - -Consider short appointments and stressreduction techniques

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Actos (pioglitazone)

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Antidiabetic Agents

- Treatment of Diabetes Type II (NIDDM)
 - -Stimulate insulin production
 - glipizide (Glucotrol, XL)
 - repaglinide (Prandin)
 - nateglinide (Starlix)
 - Reduce cellular insulin resistance
 - rosiglitazone (Avandia)
 - pioglitazone (Actos)
 - Decrease hepatic glucose production and increase cellular sensitivity to insulin
 - metformin (Glucophage)

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Antidiabetic Agents

- Treatment of Diabetes Type II (NIDDM) (continued)
 - Inhibit breakdown of ingested carbohydrates
 - acarbose (Precose)
 - -Mimic the action of incretin hormones
 - Prolongs the stimulation of insulin production -exenatide (Byetta)
 - -Inhibit the breakdown of incretin hormones
 - sitagliptin (Januvia)
 - saxagliptin (Onglyza)
 - linagliptin (Tradjenta)
 - alogliptin (Nesina)

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Actos (pioglitazone)

- Pharmacologic Classification
 - -Antidiabetic
- Mechanism of Action
 - -Reduces skeletal muscle insulin resistance and decrease hepatic glucose output
- Therapeutic Indication
 - -Treatment of Type II diabetes

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Actos (pioglitazone)

- Adverse Effects
 - -Headache
 - -Myopathy
 - -Sinusitis
 - -Pharyngitis

Precautions

-Renal impairment -Increased risk of MI

-Hepatic impairment

- Dental Considerations
 - -No drug-specific
 - · Consider susceptibility to infection
 - · Consider decreased wound healing
 - Consider AM appointments/stress reduction

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Seroquel (quetiapine)

Seroquel (quetiapine)

- Pharmacologic Classification
 - -Psychotherapeutic agent
- Mechanism of Action
 - -Antagonizes dopamine, serotonin, histamine, and alpha-1 adrenergic receptors, reduces psychoses
- Therapeutic Indication
 - -Treatment of schizophrenia

Seroquel (quetiapine)

- Adverse Effects
- Precautions
- Hypertension
- -Hepatic impairment
- -Orthostasis
- -Renal impairment
- -Somnolence
- -Tardive dyskinesia
- -Xerostomia
- -Suicidal thoughts
- -Weight gain
- Dental Considerations
 - -Prolongs QT interval (caution with vasoconstrictor)
 - -Additive sedation with CNS depressants
 - -Possible extrapyramidal adverse effects
 - -Drug is also used illicitly ("cheeked")

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07

Levaquin (levofloxacin)

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Antibacterial Agents

- General patient care considerations
 - -Drug interactions
 - Warfarin
 - -Antibiotics reduce flora that make vitamin K (increase effect of warfarin)
 - Other antiinfectives (antagonism)
 - Bacteriostatic and bactericidal antibiotics should not be used together
 - Oral contraceptives
 - -Reduced effectiveness

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Antibacterial Agents

- General patient care considerations (continued)
 - -Allergic reactions
 - · Possible anaphylaxsis
 - -Gastrointestinal side effects
 - Pain
 - · Increased GI motility and diarrhea
 - · Pseudomembranous colitis
 - -Pregnancy/teratogenicity
 - -Risk of suprainfection

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Precautions

-Hypersensitivity

-Renal impairment

Levaquin (levofloxacin)

- Pharmacologic Classification
 - -Fluoroquinolone antiinfective
- Mechanism of Action
 - Interferes with bacterial DNA synthesis and cell replication, bactericidal
- Therapeutic Indication
 - -Treatment of upper/lower respiratory infections
 - -Treatment of urinary tract infections

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Levaquin (levofloxacin)

- Adverse Effects
 - -Headache
 - -GI upset
 - -Pharyngitis
 - -Tendonitis
- Dental Considerations
 - -Prolongs QT interval (caution with vasoconstrictor)
 - -May increase NSAIA-induced seizure risk
 - -May increase warfarin anticoagulant effect

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Lantus (insulin glargine)

Insulins		
Short	Intermediate	Long
Acting	Acting	Acting
Humulin R Insulin aspart (Novolog) Insulin lispro (Humalog) Insulin glulisine (Apidra)	■Humulin N ■Humulin L ■Humulin 70/30 ■Humalog Mix 75/25	Humulin U Insulin detemir (Levemir) Insulin glargine (Lantus)** 'discard 28 days after 1st use

Lantus (insulin glargine)

- Pharmacologic Classification
 - -Long-acting insulin
- Mechanism of Action
 - Facilitates passage of glucose into skeletal and adipose tissue, regulates serum glucose levels
- Therapeutic Indication
 - -Treatment of Type I diabetes
 - -Treatment of Type II diabetes

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Lantus (insulin glargine)

Precautions

-Hypoglycemia

-Hypokalemia

- Adverse Effects
 - -Fatigue
 - -Muscle weakness
 - -Skin rash
 - -Mouth numbness
- Dental Considerations
 - -Additive hypoglycemia with NSAIA's, salicylates
 - -Corticosteroids and epinephrine may increase serum glucose levels
 - -Monitor for hypoglycemia, ketoacidosis

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76

Nasonex (mometasone furoate)

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Nasonex (mometasone furoate)

- Pharmacologic Classification
 - -Nasal corticosteroid
- Mechanism of Action
 - Inhibits release of inflammatory mediators, prevents onset of allergic reaction
- Therapeutic Indication
 - -Treatment and prophylaxis of seasonal and perennial allergic rhinitis

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Nasonex (mometasone furoate)

- Adverse Effects
 - diverse Lilects
 - -Headache
 - -Epistaxis
 - -Viral infection
- Precautions
 - -Immunosuppression
 - -Impaired wound
- n healing
- -Pharyngitis
- Dental Considerations
 - Rinse after use to minimize risk of candidiasis and fungal pharyngitis

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Viagra (sildenafil)

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Autonomic Signaling Modifiers

- PDE-5 Inhibitors
 - -Promote vasodilation in corpus cavernosum
- Therapeutic uses
 - -Treatment of erectile dysfunction (ED)
- Examples
 - -Sildenafil (Viagra)
 - -Vardenafil (Levitra, Staxyn)
 - -Tadalafil (Cialis)
 - -Avanafil (Stendra)

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Viagra (sildenafil)

- Pharmacologic Classification
 - -PDE Type 5 Inhibitor
- Mechanism of Action
 - Inhibits PDE Type 5, results in smooth muscle relaxation and increased blood flow in cavernosum
- Therapeutic Indication
 - -Treatment of male erectile dysfunction

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Viagra (sildenafil)

- Adverse Effects
- Precautions
- -Headache
- -Concurrent use of
- -Nasal congestion
- nitrates
- –GI upset
- -Possible interaction with nitrous oxide?
- Possible loss of hearing/vision
- Dental Considerations
 - -Drug interactions with erythromycin, fluconazole
 - · Possible priaprism

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Lyrica (pregabalin)

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Lyrica (pregabalin)

- Pharmacologic Classification
 - Antineuralgic, anticonvulsant
- Mechanism of Action
 - Binds to calcium channels in CNS, inhibits excitatory neurotransmitter release
- Therapeutic Indication
 - -Treatment of diabetic peripheral neuropathy, postherpetic neuralgia, fibromyalgia
 - -Treatment of partial-onset seizure disorder

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Lyrica (pregabalin)

- Adverse Effects
 - -Peripheral edema
 - -Dizziness
 - -Weight gain
 - -Xerostomia
- Precautions
- -Abnormal thoughts
- -Mood changes
- Amnesia and mental impairment
- Dental Considerations
 - -Additive sedation with CNS depressants
 - -Medical consult for determine seizure control
 - -Consider stress-reduction techniques

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Celebrex (celecoxib)

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COX Inhibition Phospholipids (phospholipase)

Arachidonic Acid
↓

(COX-2)

Physiologic Prostaglandins

(COX-1)

- GI protection
 - Decrease gastric acid
- Increase mucus
- Renal protection
- Maintain blood flow/function
- Smooth muscle relaxation
- Vasodilation
- Bronchodilation
- Regulate blood clotting
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Pathologic Prostaglandins

- Inflammation
- Increased capillary permeability and edema
- Nerve cell pain sensitization
- Leukocytosis
 - Activation of white blood cells
 - Release of inflammatory cytokines

cytokines

Celebrex (celecoxib)

- Pharmacologic Classification
 - -NSAIA, analgesic
- Mechanism of Action
 - –Selective COX-2 inhibitor, reduces prostaglandin synthesis
- Therapeutic Indication
 - -Treatment of osteoarthritis/rheumatoid arthritis
 - -Treatment of acute musculoskeletal pain and primary dysmenorrhea

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Celebrex (celecoxib)

- Adverse Effects
 - -Peripheral edema
 - -Dizziness
 - -Stomatitis
 - -Xerostomia
- Precautions
 - Increased risk of serious cardiovascular thrombotic events, including death
- Dental Considerations
 - Contraindicated in patients with hypersensitivity to aspirin, NSAIA's or sulfonamides
 - -Drug interactions with erythromycin, fluconazole
 - -May increase lithium plasma levels and toxicity

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Concerta (methylphenidate)

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Concerta (methylphenidate)

- Pharmacologic Classification
 - -CNS stimulant
- Mechanism of Action
 - -Blocks reuptake of norepinephrine and dopamine, increases attention span and mental alertness
- Therapeutic Indication
 - -Treatment of ADHD
 - -Treatment of narcolepsy

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Concerta (methylphenidate)

- Adverse Effects
- Precautions
- -Headache
- -Psychiatric disorders
- -Hypertension
- -Seizure disorders
- -GI upset
- -Abuse potential
- -Xerostomia
- Dental Considerations
 - -Additive CNS stimulation with TCA's, SSRI's
 - -Monitor blood pressure and pulse
 - -Use vasoconstrictors with caution

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Spiriva (tiotropium)

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Spiriva (tiotropium)

- Pharmacologic Classification
 - -Anticholinergic bronchodilator
- Mechanism of Action
 - -Blocks respiratory muscarinic receptors, produces smooth muscle relaxation, bronchodilation
- Therapeutic Indication
 - -Treatment of bronchospam associated with COPD

Spiriva (tiotropium)

- Adverse Effects
 - -Sinusitis
 - -Pharyngitis
 - -Stomatitis
 - -Xerostomia
- Precautions
 - -Not for use in acute asthma or exerciseinduced asthma
 - -Paradoxical bronchospasm
- Dental Considerations
 - -Keep short-acting bronchodilator readily available
 - -Monitor vital signs, especially respiration
 - -Rinse after use to minimize xerostomia
 - -Consider semi-supine chair position

Effexor XR (venlafaxine)

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Effexor XR (venlafaxine)

- Pharmacologic Classification
 - -Antidepressant
- Mechanism of Action
 - -Inhibits serotonin and norepinephrine reuptake, increases their activity at their receptors
- Therapeutic Indication
 - -Treatment of major depressive disorder
 - -Treatment of generalized anxiety disorder

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Effexor XR (venlafaxine)

- Adverse Effects
- Precautions
- -Headache
- -Increased bleeding
- -Xerostomia
- -Serotonin syndrome
- -GI upset
- -Seizure disorder
- -Bruxism
- -Suicidal thoughts
- Dental Considerations
 - -Increased risk of bleeding events, especially with concurrent use of NSAIA's, aspirin, warfarin
 - -Use epinephrine with caution, monitor blood pressure and pulse

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Tricor (fenofibrate)

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Tricor (fenofibrate)

- Pharmacologic Classification
 - -Antihyperlipidemic
- Mechanism of Action
 - -Enhances synthesis of lipoprotein lipase, reduces VLDL's and increases HDL's
- Therapeutic Indication
 - -Treatment of high cholesterol

Tricor (fenofibrate)

- Adverse Effects
 - -Headache
 - -Myalgia

 - -GI upset -Xerostomia
- Precautions
 - -Active liver disease
 - -Increased risk of rhabdomyolysis with
 - statins
- Dental Considerations
 - -Increased risk of bleeding due to blood dyscrasias, enhanced anticoagulant effect of warfarin
 - Use NSAIA's and aspirin with caution