

Promoting the appropriate use, and reducing the abuse and misuse, of monitored drugs in Nova Scotia.

Important Information for Prescribers and Pharmacists

Centre for Addiction and Mental Health Opioid Dependence Treatment (ODT) Core Course

In conjunction with Addiction Services across Nova Scotia, the Center for Addiction and Mental Health (www.camh.ca) will offer its opioid dependence treatment (ODT) core course in Nova Scotia. This course prepares pharmacists, physicians, nurses and counsellors to provide a comprehensive range of services for people with opioid dependence. This course is required by the College of Physicians and Surgeons of Nova Scotia to obtain an exemption to prescribe methadone or buprenorphine for opioid dependence in Nova Scotia.

The course consists of five online modules that will be available on January 27, 2014 and a one-day workshop in Halifax on March 2, 2014. Registration closes on January 29, 2014.

The course is approved for the following Mainpro CPD credits from the College of Family Physicians of Canada:

• Up to 22.5 Mainpro-M1 credits for the Opioid Dependence Treatment - Core course.

 Up to six Mainpro-C credits (and 0 Mainpro-M1) for the one-day workshop.

The course is also approved by The Canadian Council on Continuing Education in Pharmacy for 20.5 CEUs and The Canadian Addiction Counsellors Certification Federation for 20 CEUs.

For more information, visit http://www.camh.ca/en/education/ab out/AZCourses/Pages/odtcore odt.asp <u>x</u> or call Robyn Steidman at (416) 535-8501, extension 6640.

2013 Stakeholder Survey

The Nova Scotia Prescription Monitoring Program would like to extend its thanks to all stakeholders that took an opportunity to complete the 2013 Stakeholder Survey. In total, there were over 250 responses to the survey.

The feedback obtained from the survey will not only allow the NSPMP Board to better understand how key stakeholders view the Program and its services; it will also assist the Board to determine what, if any, enhancements or adjustments may be required.

Inside this Issue

CCENDU Advisory	2
eAccess	3
Out of Province Prescribers	3
Changes to Compound PINs	3-4



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Canadian Community Epidemiology Network on Drug Use (CCENDU) Advisory

On January 10, 2014, the Canadian Community Epidemiology Network on Drug Use (CCENDU) released an advisory pertaining to *"Severe tissue damage and/or death resulting from recreational use of Bupropion (Wellbutrin®; Zyban®)".* The advisory was released based on reports from members of the CCENDU network about the misuse of Bupropion in their regions.

Although the bupropion is not monitored by the NSPMP, it has been determined that advising prescribers and pharmacists of this information is in keeping with our mandate. It is important to understand that by providing this information, the Program is not suggesting that the prescribing and dispensing of bupropion be discontinued. The purpose of providing this information is to keep prescribers and pharmacists informed so they can screen for potential aberrant behavior.

Included in the advisory was an information sheet prepared by Addiction Services, Pictou County Health Authority in Nova Scotia: *Recreational Use of Bupropion (Wellbutrin®; Zyban®)*. This information sheet cited the following, "*Recreational users of bupropion crush the pills and inject or inhale the drug to achieve what has been described as a crack cocaine-like "high", however some individuals report a less intense effect. The duration of the "high" is relatively brief and it is common for other drugs to be ingested simultaneously (e.g. – mixed with crack cocaine; alcohol). Anecdotal reports also suggest bupropion may be mixed with other medications such as hydromorphone, as it gives an amphetamine like feeling to counter the sedative effects of narcotics."*

Additionally, the advisory included links to an alert issued by the Interim Chief Coroner for Ontario to Ontario Physicians and Pharmacists, as well as a presentation created by Dr. James Truong, North Bay Regional Health Centre, North Bay, Ont. The alert and presentation are available at the following links:

http://www.cfpc.ca/uploadedFiles/Publications/_PDFs/130507%20Alert%20to%20Ontario%20Ph ysicians%20and%20Pharmacists%20re%20Bupropion.pdf

http://prezi.com/i-ljzl4ofngd/wellbutrin-injection-a-novel-pattern-of-prescription-drug-abuse/



eAccess

Based on generally accepted best practices for limiting the potential for misuse and abuse and/or diversion, the NSPMP recommends that prescribers and pharmacists register for the NSPMP's eAccess and review each patient's NSPMP claims history prior to writing or dispensing new prescriptions. eAccess is an easy-to-use online web application, which provides access to real time claim information which assists prescribers and pharmacists to make informed decisions when prescribing and dispensing monitored drugs.

The registration process for eAccess takes approximately 1 business day to complete. Registration and User Agreement forms can be downloaded from the NSPMP website at http://www.nspmp.ca/forms.php.

Forms can also be obtained by contacting the Program toll free at 1-877-476-7767 or 902-496-7123 or by email at pmp@medavie.bluecross.ca.

Out of Province Prescribers

Prescribers from out of province are eligible to register with the NSPMP, and once registered, write duplicate prescriptions for monitored drugs which will be dispensed in Nova Scotia. A common scenario which will require an out of province prescriber to register with PMP is so they can prescribe methadone to an individual travelling to this province.

If an out of province prescriber is attempting to make arrangements for a patient, requiring methadone maintenance therapy, to receive the medication in NS please <u>do not</u> refer them to a local opiate dependence treatment program. In this, or any other type of situation, the out of province prescriber should be directed to contact the NSPMP.

Changes to Compound PINs

With the implementation of the Drug Information System (DIS), NS pharmacies that are linked to the DIS and dispense compounds must use an OPINIONS registered Product Identification Numbers (PINs). In order to meet this requirement for compounds with a monitored drug ingredient, the NSPMP has registered all in-use compounds and obtained new OPINION PINs.

In an effort to ensure consistent compound claim information is submitted, the NSPMP is requesting that <u>all</u> NS pharmacies begin using the new OPINIONS PINs **effective February 1**, **2014**. A list of registered NSPMP compounds and their corresponding OPINIONS PIN is provided on the following page.



NSPMP Monitored Drug Chemical	OPINIONS PIN
Belladonna Tincture	99099966
Cocaine Powder	99099974
Codeine Powder	99099975
Dexedrine Trial	99099976
DHEA (prasterone)	99099977
Fentanyl Powder	99099978
Generic Monitored Ingredient	99099979
Hydromorphone Powder	99099980
Ketamine Powder	99099981
Methadone Powder	9909993
Methylphenidate Trial	99099984
Morphine Powder	99099986
Sativex Trial	99099991
Testosterone Powder	99099963

NOTE for DIS Pharmacies:

When submitting claims for compounds, which include one or more monitored ingredients, pharmacies <u>must</u> record the following information:

- a free text description of the compound; and
- the monitored drug ingredient(s) represented by
 - 1. the <u>name</u> of the ingredient
 - the <u>ID #</u> either the DIN of the monitored drug manufactured product <u>or</u> the OPINIONS PIN of the monitored drug chemical used in the compound (list provided below); and
 - 3. the <u>quantity</u> of ingredient used in the compound. For methadone compounds, the quantity of methadone dispensed shall be specified in milligrams (mg).

Non-monitored ingredients may also be listed, but are not required. A non-monitored ingredient can be represented by an ID # that is a DIN, NPN, OPINIONS PIN or pseudo DIN.

Refer to page 10 of the *User Guide for Transition to the Drug Information System* <u>http://www.nspmp.ca/library/00000316-library.pdf</u>

NOTE for Non-DIS Pharmacies:

The only change to be aware of is the new OPINIONS PINs, otherwise the claim submission process has not changed.