

CA-ADAP Medical Advisory Committee: Formulary Review

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CA-ADAP Formulary Review: AGENDA

ADAP's formulary covers antiretroviral treatment, opportunistic infection treatment, and select medications for common comorbidities among people living with HIV

At each MAC meeting several classes of therapeutics will be reviewed. Today's meeting will focus on:

- Hypertension
- Treatment of Diabetes with Insulin Therapy
- Medication-Assistance Therapy

A large blue trapezoidal shape is the background. It is decorated with several colorful triangles: a large orange triangle on the left, a lime green triangle above it, a purple triangle in the upper right, a cyan triangle to its right, and a magenta triangle below the purple one.

Therapeutic Class Review

ANTIHYPERTENSIVE THERAPIES

Hypertension (HTN) in PLWH



Blood Pressure Levels		
Classification	Systolic	Diastolic
Normal	< 120 mmHg	< 80 mmHg
Pre-HTN	120-139 mmHg	80-89 mmHg
Stage I HTN	140-159 mmHg	90-99 mmHg
Stage II HTN	≥ 160 mmHg	≥ 100 mmHg

- HTN is becoming more prevalent in people living with HIV (PLWH), especially as they age.
 - A recent meta-analysis of data collected globally, demonstrated 35% of HIV patients on antiretroviral therapy (ART) have HTN, compared to only 30% of HIV-uninfected adults.
 - In ART experienced individuals aged 50 and older, > 50% of patients had HTN.
- PLWH with concomitant HTN have a higher risk for:
 - 1) Cardiovascular events and all-cause mortality than HIV-uninfected adults and PLWH with normal blood pressure.
 - 2) 2-fold higher risk for myocardial infarction (MI) than uninfected adults.
- The mechanisms for the potential causes of HTN in PLWH are still unknown

Hypertension (HTN) in PLWH



Treatment Guideline	Patient Demographic	When to start treatment	Blood Pressure Goals
JNC8, AAFP, ACP	Adults \geq 60 years of age	$>$ 150 SBP or $>$ 90 DPB	$<$ 150/90
	<ul style="list-style-type: none"> • Patients $<$ 60 years of age • Patients with chronic kidney disease (CKD) 	$>$ 140/90	$<$ 140/90
AHA/ACC	<ul style="list-style-type: none"> • Lower risk adults • Patients without CVD 	\geq 140/90	$<$ 140/90
	<ul style="list-style-type: none"> • High risk adults • Patients with CVD 	\geq 130/80	$<$ 130/80

❖ Classes of medications used to treat HTN:

- 1) Angiotensin-Converting Enzyme Inhibitors (ACE-I)
- 2) Angiotensin II Receptor Blockers (ARBs)
- 3) Thiazide-type/like Diuretics
- 4) Calcium Channel Blockers (CCBs)
- 5) Beta Blockers (BB)

HTN Pharmacotherapy



Agent	Generic	CA ADAP FORMULARY
ANGIOTENSIN-CONVERTING ENZYME INHIBITORS (ACE-I)		
Benazepril (LOTENSIN)	X	
Captopril (CAPOTEN)	X	
ENALAPRIL (VASOTEC)	X	
FOSINOPRIL (MONOPRIL)	X	
LISINOPRIL (ZESTRIL)	X	
QUINAPRIL (ACCUPRIL)	X	
RAMIPRIL (ALTACE)	X	
ANGIOTENSIN II RECEPTOR BLOCKERS (ARBs)		
Candesartan (ATACAND)	X	
Irbesartan (AVAPRO)	X	
Losartan (COZAAR)	X	
Olmesartan (BENICAR)	X	
Telmisartan (MICARDIS)	X	
Valsartan (DIOVAN)	X	
THIAZIDE-TYPE/LIKE DIURETICS		
Chlorthalidone (DIURIL)	X	
Hydrochlorothiazide (MICROZIDE)	X	
Indapamide (LOZOL)	X	

HTN Pharmacotherapy



Agent	Generic	CA ADAP FORMULARY
CALCIUM CHANNEL BLOCKERS (CCBs)		
Amlodipine (NORVASC)	X	
Diltiazem (CARDIZEM, CARTIA XT, DILT-XR)	X	
Felodipine (PLENDIL)	X	
Nifedipine (PROCARDIA, ADALAT)	X	
Verapamil (CALAN, VERELAN)	X	
BETA BLOCKERS (BB)		
Atenolol (TENORMIN)	X	
Bisoprolol (ZABETA)	X	
Carvedilol (COREG)	X	
Labetalol (NORMODYNE)	X	
Metoprolol Tartrate (LOPRESSOR)	X	
Metoprolol Succinate (TOPROL XL)	X	

A large magenta shape with several colorful triangles (orange, lime green, purple, blue, pink) scattered around it.

Therapeutic Class Review

INSULIN THERAPIES

Diabetes in PLWH



❖ People living with HIV (PLWH) are at an increased risk for developing Type 2 Diabetes:

- Due to aging (≥ 45 years of age)
- Chronic Inflammation
- HIV Medications (typically older agents)

➤ Diabetes is the leading cause of major health complications:

- End-Stage Renal Disease (ESRD) and lower extremity amputations
- Ischemic heart disease
- Stroke
- Peripheral vascular disease
- Vision loss

❖ Classes of Medications used to treat Type 2 Diabetes:

- Biguanides
- Sulfonylureas
- Thiazolidinediones (TZDs)
- SGLT2 Inhibitors
- DPP4 Enzyme Inhibitors
- GLP-1 Receptor Agonists
- Alpha-Glucosidase Inhibitors
- Meglitinides
- **Insulin**

Insulin Pharmacotherapy

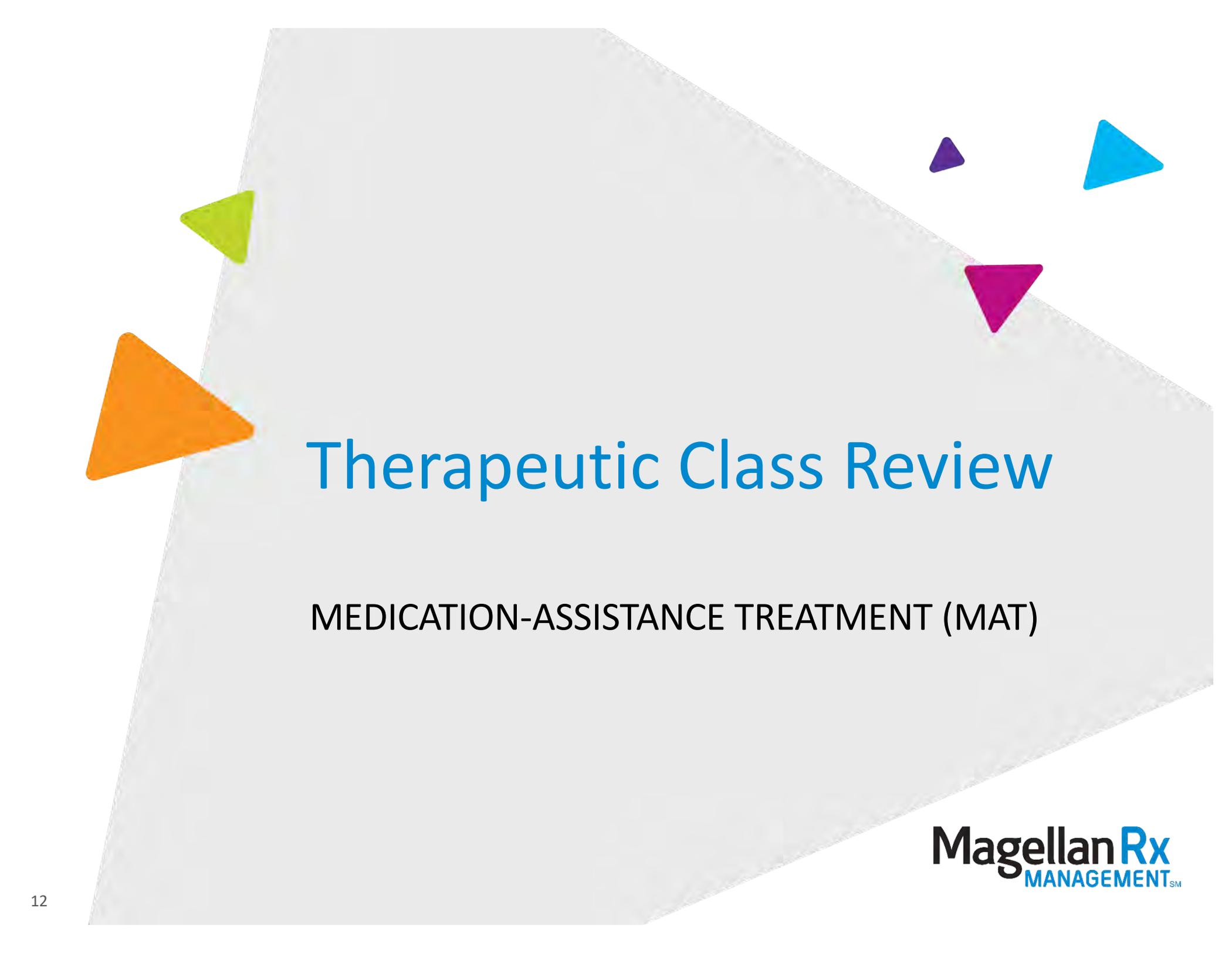


Agent	Generic	CA ADAP FORMULARY
RAPID-ACTING INSULINS		
Insulin aspart (NOVOLOG, FIASP)	X	
Insulin Lispro (ADMELOG, HUMALOG)	X	
Insulin Glulisine (APIDRA)		
Human Insulin Inhalation Powder(Afrezza)		
REGULAR/SHORT-ACTING INSULIN		
Human Insulin (Humulin R, Novolin R)		
INTERMEDIATE-ACTING INSULIN		
Isophane Insulin NPH (Humulin N, Novolin N)		
LONG-ACTING INSULIN		
Insulin degludec (TRESIBA)		
Insulin detemir (LEVEMIR)		
Insulin glargine U-100 (BASALGAR, LANTUS)		
ULTRA LONG-ACTNG INSULIN		
Insulin glargine U-300 (TOUJEO)		

Insulin Pharmacotherapy



Agent	Generic	CA ADAP FORMULARY
RAPID/INTERMEDIATE ACTING COMBINATIONS		
Insulin aspart (Novolog mix 70/30)	X	
Insulin lispro (Humalog mix (75/25, 50/50)	X (75/25)	
REGULAR/INTERMEDIATE ACTING COMBINATIONS		
Human Insulin (Humulin 70/30, Novolin 70/30)		



Therapeutic Class Review

MEDICATION-ASSISTANCE TREATMENT (MAT)

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Opioid Use Disorder in PLWH



❖ PLWH are at an increased risk for opioid use disorder:

- More likely to have chronic pain
- Receive opioid analgesic treatment
- Receive higher doses of opioids
- Higher incidence of substance use disorders and mental illness in comparison to the general population

➤ Opioid Addition can be successfully treated with Medication-Assisted Treatment (MAT) with opioid agonists or antagonists, individualized counseling, and behavior therapy.

❖ Medication-Assisted Therapy:

- 1) Opioid Agonists
- 2) Opioid Antagonists
- 3) Alpha2-Adrenergic Agonist
- 4) Combination Agents

MAT Pharmacotherapy



Agent	Generic	CA ADAP FORMULARY
OPIOID AGONISTS		
Methadone	X	
Buprenorphine SL Tablets (SUBUTEX)	X	
Buprenorphine ER Injection (SUBLOCADE)		
Buprenorphine Implant (Subdermal) (PROBUPHINE)		
OPIOID ANTAGONISTS		
Naloxone HCl Injection (EVZIO)		X
Naloxone HCl Nasal Spray (NARCAN)		X
Naltrexone HCl Tablets	X	
Naltrexone ER Injectable Suspension (VIVITROL)		
ALPHA₂-ADRENERGIC AGONIST		
Lofexidine (LUCEMYRA)		

MAT Pharmacotherapy



Agent	Generic	CA ADAP FORMULARY
COMBINATION AGENTS		
Buprenorphine/Naloxone SL Film (SUBOXONE)	X	
Buprenorphine/Naloxone Buccal Film (BUNAVAIL)		
Buprenorphine/Naloxone SL Tablets (ZUBSOLV)		
Buprenorphine/Naloxone SL Tablets (SUBOXONE)	X	

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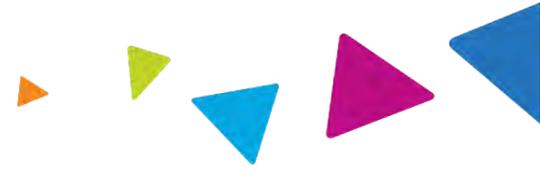
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