



INLAND EMPIRE HEALTH PLAN

PHARMACY TIMES

BY IEHP PHARMACEUTICAL SERVICES DEPARTMENT

September 23, 2008

Attention: Allergist and Pulmonologist Providers

IEHP Pharmacy & Therapeutic Subcommittee Changes Summary

FORMULARY AT A GLANCE		
Non-Formulary Drug	Formulary Alternative	Comments
Singular (montelukast)	Asthma- any standalone inhaled corticosteroids Allergic Rhinitis- 1 st line: Flonase (fluticasone) 2 nd line: Claritin (loratadine) or Zyrtec (cetirizine)	Asthma- NHLBI Guideline continues to recommend low-mid potency inhaled corticosteroids to be used first, including the children 0-4 years of age. Allergic Rhinitis- Latest clinical studies and guideline reiterated that nasal corticosteroids should be used as the first line therapy. Combination therapy- singular + 2 nd antihistamine is not superior to nasal corticosteroid alone.
Nasonex (mometasone)	Flonase (fluticasone)	No clinical differences between mometasone vs. fluticasone.
Advair (fluticasone/salmeterol)	Any inhaled corticosteroids including Asmanex, Azmacort, Flovent, Pulmicort, and QVAR	The combination ICS + LABA should be used after failure of ICS. ICS works as effective as this combination.