

Colleagues,

The year 2010 has so far been one of the most tumultuous in terms of natural and man-made disasters. Early this year the world came face-to-face with the widespread destruction and terror wreaked by the massive earthquake on our neighbours in Haiti. Members of the Jamaican health care team rushed to offer needed healthcare to hundreds of injured Haitians. We salute these persons especially our fellow pharmacists who journeyed to Haiti to give their support and to ensure that good quality pharmacy services was provided at a most difficult time.

The world waits anxiously awaits a solution for a solution to the huge oil spill that

resulted in gallons of oil being poured into the Gulf of Mexico. This has resulted in some of the richest fisheries being threatened and an already fragile ecosystem being further endangered. The Caribbean is also at risk as recent news on a local radio station reported that the oil spill could possibly affect beaches in the Bahamas and Cuba.

Here at home, we continue to grapple with on-going violence and the threat of civil unrest, thankfully, decisive action is being taken. Despite the many challenges, we welcome you to another issue of the PCJ Update; the editorial committee continues its hard work to bring you relevant and up-to-date information. We hope you will find the lead article "Management of Pharmaceutical Waste" enlightening. The article will be published in two parts, in this

issue, part one will shed some light on the occurrence and attending ills in the management of pharmaceutical waste while part two in the next issue of the Update will look at some solutions.

In our quest to remain current, the new drug update provides information on one of the newest additions to the arsenal of antiretroviral therapy. Do read, be informed and remember that we welcome your feedback!

Leonie Wallace  
Editor

No great man ever complains  
of want of opportunities.

~Ralph Waldo Emerson

SUMMARY OF CE CREDITS AWARDED 2010-2011

PROVIDER	DATE	LOCATION	# OF CREDITS
Qualcare Ltd	February 7, 2010	Knutsford Court Hotel, Kingston	1.5
PCJ	February 11, 2010	Medallion Hall Hotel, Kingston	2.5
PSJ	February 21, 2010	Medallion Hall Hotel, Kingston	3.5
Novartis	March 7, 2010	Jamaica Pegasus Hotel, Kingston	2
UTECH	March 14, 2010	University of Technology, Kingston	3.5
PSJ Central Branch	March 14, 2010	Golf View Hotel, Mandeville	2
Medimpex Ltd	March 18, 2010	Jamaica Pegasus Hotel, Kingston	1
New Vision Dist.	April 8, 2010	Hilton Hotel, Kingston	2
PSJ	April 18, 2010	University of Technology	3.5
CIPPAR	April 21, 2010	University of Technology, Jamaica	2
PCJ	May 2, 2010	Altamont Court Hotel, Kingston	4.75
Standards & Regulation -MOH	May 16, 2010	University of the West Indies, Mona	3
PSJ-Western Branch	May 16, 2010	The Pelican, Montego Bay	3

**PHARMACISTS TAKE NOTE!** The Pharmacy Council of Jamaica (PCJ) does not accredit every CE seminar. Do ensure that where CE seminars are attended for the sole purpose of obtaining credits, that the provider has applied for and received accreditation from the PCJ.

UPCOMING CE SEMINARS			
PSJ Annual Retreat	June 18-20, 2010	Sunset Jamaica Grande, Ocho Rios	***
UTECH	July 10-11, 2010	University of Technology, Jamaica	***
Cari-Med Ltd	July 18, 2010	Mona Visitors' Lodge, UWI, Mona	***
Caribbean Association of Pharmacists	August 8-15, 2010	St. Lucia	***
Lascelles Laboratories	August 17, 2010	To be Announced	***
Astra Zeneca	October 7, 2010	To be Announced	***
PCJ (repeat seminar)	October 10, 2010	HEART Runaway Bay Hotel	4.5
Indies Pharma	November 7, 2010	To be Announced	***
Lascelles Laboratories	November 12, 2010	To be Announced	***
PCJ (Pharmacy Owners )	November 21, 2010	To be Announced	***

\*\*\*Not yet accredited



An elderly man lay dying in his bed. While suffering the agonies of impending death, he suddenly smelled the aroma of Potato pudding wafting up the stairs. He gathered his remaining strength, and lifted himself from the bed. Leaning against the wall, he slowly made his way out of the bedroom and slowly crawled downstairs. Was it heaven? Or was it one final act of heroic love from his devoted wife of sixty years, seeing to it that he left this world a happy man? Mustering one great final effort, he threw himself towards the table and stretched out an aged and withered hand towards the closest slice of sweet, warm pudding...when it was suddenly smacked with a wet kitchen towel by his wife..... "Move yu craven self!" she said, "Dis a fi yuh funeral."

A woman walked up to a little old man rocking in a chair on his porch. "I couldn't help noticing how happy you look," she said. "What's your secret for a long happy life?" "I smoke three packs of cigarettes a day," he said. "I also drink a case of whisky a week, eat fatty foods, and never exercise." "That's amazing," the woman said. "How old are you?" "Twenty-six," he said.



New Drug Update - Integrase Inhibitors

RALTEGRAVIR  
"A Brighter Light for HIV/AIDS Patients"

As the battle against HIV/AIDS continues the pharmaceutical industry is actively trying to develop not only different drugs of the existing classes of anti-retrovirals (ARV's) that maybe more effective and have less adverse reactions but also newer classes of antiretrovirals that attack other vulnerable areas of the HIV life cycle. The newest class to gain the approval of the U.S. Food and Drug Administration (FDA) is INTEGRASE INHIBITOR. In October 2007 the FDA approved the first integrase inhibitor known as **raltegravir** (RGV) under the brand name **Isentress®**, produced by MERCK & Company, Inc.

Mode of action

Raltegravir inhibits one of three essential enzymes necessary for the replication of the HIV; known as the integrase enzyme. This enzyme is responsible for the integration of the HIV genetic material into the Human CD4 genetic. Integrase inhibitors block the integrase enzyme preventing the viral genetic material from becoming incorporated into the human CD4 DNA therefore stopping the replication of the virus.

Use

Isentress® (raltegravir) is approved both for treatment-experienced patients who have HIV strains that are resistant to multiple antiretroviral (ARV) drugs and for people with drug-sensitive HIV strains, such as those starting antiretroviral therapy for the first time. It is used in combination with other ARV's forming a triple drug ARV's cocktail. According to www.AIDSmeds.com the official HIV treatment guidelines of

the United States Department of Health and Human Services list raltegravir-tenofovir-emtricitabine combination as one of its "preferred" first line treatment options. It has not been approved for use in HIV positive children.

Dosage

The usual dose is raltegravir 400mg every twelve (12) hours without regards to meals. The product is available in tablet dosage form as 200, 400, and 600 mg. An 800 mg dose taken twice a day is recommended for individuals concurrently taking rifampin.

Adverse effects

The most common side effects seen in clinical trials have been diarrhoea, nausea, headache, and fever. Since FDA approval others seen include rash, Stevens-Johnson syndrome, depression and suicidal tendencies. The fact that the enzyme integrase does not exist in mammalian cell but only in the HIV is a major advantage for the class of ARV because this decreases the number of possible adverse events. The non-existence of integrase in human cells means the drug will not be blocking any enzymatic reactions in humans that are integrase dependent.

Other integrase inhibitors

Clinical trials are currently being conducted for two other integrase inhibitors namely, elvitegravir (GS-9137) by Gilead Sciences which is in advanced clinical trials and a third compound currently known as GSK-572, by ViiV Healthcare's which is in Phase II studies.

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