

Editorial

Appreciation and Anticipation

of the fifth year of publication of The Pharmacist Activist (all issues are available on the website, www. pharmacistactivist.com. My motivation to continue publishing this newsletter is derived from the positive responses I receive from many readers. I very much appreciate these responses, the vast majority of which are supportive of the opinions I voice in editorials and the ratings I provide for new drugs. However, I also welcome the responses that do not agree with my opinions because the greater awareness of differing perspectives regarding challenging issues may bring us closer to solutions and courses of action that will better serve our patients, communities, and profession. If you know pharmacists and pharmacy students who are not presently receiving The Pharmacist Activist, please encourage them to go on the website and sign up to receive it. As an alternative, you could submit the necessary information for them and then inform them that you have provided them with a gift of a lifetime subscription to *The Pharmacist Activist*.

NEWS-Line Publishing produces this newsletter at its cost, and I wish to express my personal appreciation to Jeff Zajac, Joe Monte, John Buck, Chris Polli, and Patrick Polli for their expertise and enthusiasm in publishing *The Pharmacist Activist*. Although I do not receive compensation for my responsibility as author/editor, there are considerable expenses in producing this newsletter. I wish to express my deep appreciation to a friend who has provided financial support because of his commitment

to advance the profession of pharmacy through stimulation of discussion/debate on important issues and challenges, as well as objective information on new drugs.

Many of the topics considered in the editorials in *The Pharmacist Activist* represent problems that may seem impossible to resolve. Some of the problems that have continued over a period of years have more recently been joined by the challenges of health insurance reform legislation and the tightening of the job market for pharmacists. However, the value of the role of our profession and the expertise and services of pharmacists makes it imperative that we not give up in our efforts to convert problems into opportunities and, indeed, that we strengthen our efforts and our activism in achieving positive outcomes. One of the reasons for which I continue to be highly enthusiastic about the future of our profession and can strongly encourage young people to consider pharmacy as a career is that, in my long experience, there has not been another time when there has been a greater need for the expertise of pharmacists. Much remains to be done in obtaining respect, utilization, and compensation for our expertise but, for the sake of our patients and communities, as well as for our profession, we must do it! Therefore, it is with anticipation of greater progress toward this goal that I look forward to what we can accomplish in 2011.

Best wishes for a healthy and enjoyable new year!

Daniel A. Hussar

Contents New therapeutic agents marketed in the United States in 2010 Page 2 Indexes for Volume 1, 2006 through Volume 5, 2010 Page 3

Volume 5, No. 12 • December 2010

New therapeutic agents marketed in the United States in 2010

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Generic name	Trade name	Manufacturer	Therapeutic classification	Route of administration	FDA classification ^a	New Drug Comparison Rating
Cabazitaxel	Jevtana	Sanofi-Aventis	Antineoplastic agent	Intravenous	1-P	4
Carglumic acid	Carbaglu	Orphan Europe	Agent for hyperammonemia	Oral	1-P	4
Collagenase clostridium histolyticum	Xiaflex	Auxilium	Agent for Dupuytren's contracture	Intralesional	S _P	5
Dabigatran etexilate mesylate	Pradaxa	Boehringer Ingelheim	Anticoagulant	Oral	1-P	4
Dalfampridine	Ampyra	Acorda	Agent for multiple sclerosis	Oral	1-P	4
Denosumab	Prolia	Amgen	Agent for osteoporosis	Subcutaneous	S _P	4
Dienogest/estradiol valerate	Natazia	Bayer	Contraceptive	Oral	1, 4-5	3
Ecallantide	Kalbitor	Dyax	Agent for hereditary angioedema	Subcutaneous	P ^b , O	4
Eribulin mesylate	Halaven	Eisai	Antineoplastic agent	Intravenous	1-P	4
Fingolimod hydrochloride	Gilenya	Novartis	Agent for multiple sclerosis	Oral	1-P	4
IncobotulinumtoxinA	Xeomin	Merz	Agent for cervical dystonia	Intramuscular	S _P	3
Liraglutide	Victoza	Novo Nordisk	Antidiabetic agent	Subcutaneous	1-5	4
Pegloticase	Krystexxa	Savient	Agent for gout	Intravenous	S _P	4
Pitavastatin calcium	Livalo	Kowa; Lilly	Lipid-regulating agent	Oral	1-5	2
Polidocanol	Asclera	BioForm Medical	Sclerosing agent	Intravenous	1-5	4
Romidepsin	Istodax	Gloucester	Antineoplastic agent	Intravenous	1-S, O	3
Sipuleucel-T	Provenge	Dendreon	Antineoplastic agent	Intravenous	S _P	4
Tocilizumab	Actemra	Genentech	Antiarthritic agent	Intravenous	Z _p	4
Ulipristal acetate	ella	Watson	Contraceptive	Oral	1-5	3
Velaglucerase alfa	Vpriv	Shire	Agent for Gaucher disease	Intravenous	I-P	3

PDA classification of new drugs: 1 = new molecular entity; 4 = combination product; 0 = designated orphan drug; P = priority review; S = standard review

b A biological approved through an FDA procedure that does not assign a numerical classification
c New Drug Comparison Rating (NDCR): 5=important advance; 4=significant advantage(s); 3=no or minor advantage(s)/disadvantage(s); 2=significant disadvantage(s); 1=important disadvantage(s)

Volume 5, No. 12 ● December 2010

Index for Volume 1, 2006

January (No. 1)	The Sleeping Giant ● Editor's Note New Drug Review: Pregabalin (Lyrica)	
February (No. 2)	The Medicare Prescription Benefit?? • Letter to Senator Rick Santorum New Drug Review: Eszopiclone (Lunesta)	
March (No. 3)	A Tribute and a Warning ● Letter to President Bush New Drug Review: Ibandronate (Boniva)	
April (No. 4)	Independent Pharmacists-The Front Line of our Profession ● Distinguished Leadership New Drug Review: Lubiprostone (Amitiza)	
May (No. 5)	The Justice Department Should Not Settle with Medco! ■ Inspiration New Drug Review: Varenicline tartrate (Chantix)	
June (No. 6)	Shame on CVS! ● Target Provides some Good Examples New Drug Review: Insulin detemir (Levemir)	
July (No. 7)	Pfizer Should Pay Pharmacists to Counsel Patients about Exubera ● Sesquicentennial New Drug Review: Insulin glulisine (Apidra)	
August (No. 8)	When Price Controls are Established for Drugs, Big Pharma will have Only Itself to Blame A Positive Step New Drug Review: Rasagiline mesylate (Azilect)	
September (No. 9)	September 11 New Drug Review: Darunavir (Prezista)	
October (No. 10)	Wal-Mart's Generics Scam Ignores the Professional Role of Its Pharmacists It is Almost Election Day! Do You Know What Your Candidates Stand For? New Drug Review: Ranolazine (Ranexa)	
November (No. 11)	No More Excuses! Let's Get Cigarettes Out of Pharmacies! Paying \$155 Million Means Never Having to Say You are Sorry (or Admit to any Wrongdoing) New Drug Review: Sitagliptin phosphate (Januvia)	
December (No. 12)	A Christmas Letter • A Gift of Life New Drug Review: Telbivudine (Tyzeka)	

Index	for Volume 2, 2007		
January (No. 1)	A New Year, an Old Theme ● New Drug Review: Paliperidone (Invega) Editor's Note		
February (No. 2)	Ten Thousand and One Pfizer Employees Lose Jobs — But the "One" is Very Different Editor's Note ● The Gettysburg Address New Drug Review: Posaconazole (Noxafil) ● New Drug Review: Ranibizumab (Lucentis)		
March (No. 3)	Pharmacy Must Demand Fair and Immediate Payment for Medications and Services! New Drug Review: Aliskiren hemifumarate (Tekturna) The Angiotensin-Converting Enzyme Inhibitors (ACEIs) The Angiotensin II Receptor Blockers (ARBs)		
April (No. 4)	The 20/20 Report on Pharmacy Errors — An Indictment of Some Chain Pharmacies The Right Way to Practice Pharmacy New Drug Review: Lisdexamfetamine dimesylate (Vyvanse)		
May (No. 5)	Pharmacy Errors: Part 2 "More Prescriptions Faster" Policies of Some Chain Pharmacies Increase the Risk of Errors New Drug Review: Retapamulin (Altabax)		
June (No. 6)	If CMS and AMP do not Turn Pharmacists into Activists, What Will? New Drug Review: Rotigotine (Neupro)		
July (No. 7)	The Assault on Compounding Must be Rejected! New Drug Review: Bismuth subcitrate potassium (Pylera [with metronidazole and tetracycline])		
August (No. 8)	Let Your Conscience be Your Guide! (but some pharmacists are being denied this right) New Drug Review: Levocetinizine dihydrochloride (Xyzal)		
September (No. 9)	Save the Independent Pharmacists! New Drug Review: Maraviroc (Selzentry)		
October (No. 10)	Behind-the-Counter (BTC) — Long Overdue but, Let's Seize the Day! New Drug Review: Raltegravir (Isentress)		
November (No. 11)	More Profits or More Blindness? Genentech Should Rescind its Action Against Compounding Pharmacies! New Drug Review: Lapatinib (Tykerb)		
December (No. 12)	We are Blessed! To Whom Much is Given ● Editor's Note		

New Drugs of 2007

Index for Volume 3, 2008

January (No. 1)	Happy New Year! Resolutions for our Profession New Drug Review: Nebivolol hydrochloride (Bystolic)
February (No. 2)	Medication Errors (Again)—We Must be More Accountable New Drug Review: Etravirine (Intelence)
March (No. 3)	The Chaos of Prescription Drug Benefit Programs ● New Drug Review: Ciclesonide (Omnaris)
April (No. 4)	Health Insurance Threatens the Quality of Health Care New Drug Review: Desvenlafaxine succinate (Pristiq)
May (No. 5)	Consumer Reports' Readers Rate Independent Pharmacists as the Best (but Some Opportunities are Being Missed) • Neat Mistakes New Drug Review: Certolizumab pegol (Cimzia)
June (No. 6)	A Mail-Order Myth ● New Drug Review: Sinecatechins (Veregen)
July (No. 7)	Concern for Patients or Protection of Profits? Legislation Regarding Generic Antiepileptic Drugs is Not Needed • Synergies from Working Together New Drug Review: Methylnaltrexone bromide (Relistor)
August (No. 8)	2015—When the Shortage of Pharmacists Becomes a Surplus! (Unless Major Changes Occur in the Practice of Pharmacy Very Soon) New Drug Review: Alvimopan (Entereg)
September (No. 9)	North Dakota has it Right! Challenges to its Pharmacy Ownership Law must be Rejected! • APhA's Executive Search New Drug Review: Sapropterin dihydrochloride (Kuvan)
October (No. 10)	January 1, 2010—Make This Date the Goal to Get Cigarettes Out of All Pharmacies! New Drug Review: Difluprednate (Durezol)
November (No. 11)	The Health Care Pretenders—Health Insurance Companies Should Stick to Providing Insurance and Not Attempt to be Health Care Providers New Drug Review: Tetrabenazine (Xenazine)
December (No. 12)	Editorial Updates and Perspectives • Editor's Note

Index for Volume 4, 2009

New Drugs of 2008 (table)

11100011			
January (No. 1)	A New Year, an Old Theme: Can our National Pharmacy Associations Reach Nome? New Drug Review: Fesoterodine fumarate (Toviaz)		
February (No. 2)	Pfizer Should Not be Permitted to Acquire Wyeth New Drug Review: Milnacipran hydrochloride (Savella)		
March (No. 3)	Coupons, \$4 Generics, and Free Generic Antibiotics — Disservices to Patients and Insults to Pharmacists New Drug Review: Silodosin (Rapaflo)		
April (No. 4)	Dear Legislator: New Drug Review: Febuxostat (Uloric)		
May (No. 5)	CVS Caremark — An Alliance that Must be Broken New Drug Review: Golimumab (Simponi)		
June (No. 6)	Prescription Benefit Programs — A New Model is Needed New Drug Review: Besifloxacin hydrochloride (Besivance)		
July (No. 7)	The Acetaminophen Challenge (and Recommendations) New Drug Review: Lacosamide (Vimpat)		
August (No. 8)	Addiction — Pharmacy Should Assume a Leadership Role in Addressing this Devastating Problem New Drug Review: Tapentadol hydrochloride (Nucynta)		
September (No. 9)	Prescription Benefit Programs — Classes of Pharmacies Should be Established New Drug Review: Prasugrel hydrochloride (Effient)		
October (No. 10)	The Influenza Follies New Drug Review: Saxagliptin hydrochloride (Onglyza)		
November (No. 11)	What are They Doing to our Profession? — And Who Cares? New Drug Review: Dronedarone (Multaq)		
December (No. 12)	No Vacancy ◆ Congratulations and Appreciation! ◆ Editor's Note New Therapeutic Agents Marketed in the United States in 2009 The Top 10 New Drugs of the Decade (Millenium) ◆ Index		

Volume 5, No. 12 ● December 2010

Index for Volume 5.

January (No. 1) Health Care Reform — Let's Start Over

and Do It Right!

New Drug Review: Asenapine (Saphris)

Dispensing Error — And a Pharmacist in Prison February (No. 2)

New Drug Review: Iloperidone (Fanapt)

Tobacco Sales in Pharmacies — A Historic Decision March (No. 3)

by APhA Delegates

New Drug Review: Ustekinumab (Stelara)

Pharmacy Must Develop Opportunities Now! April (No. 4)

(Before Health Insurance "Reform" Limits

our Role)

New Drug Review: Liraglutide (Victoza)

Herb Denenberg — The Ultimate Activist and a May (No. 5)

Great Friend of Pharmacy

New Drug Review: Dalfampridine (Ampyra)

June (No. 6) CVS Caremark's Participation in Medicare

> Prescription Programs should be Terminated! New Drug Review: Pitavastatin calcium (Livalo)

July (No. 7) We Have TOO MANY Colleges of Pharmacy!

New Drug Review: Denosumab (Prolia)

August (No. 8) Who are Pharmacy's Leaders?

New Drug Review: Tocilizumab (Actemra)

September (No. 9) CARE is Missing in Health Insurance Reform!

Independent Pharmacists are Well Positioned to

Provide It!

New Drug Review:

Dienogest/estradiol valerate (Natazia)

October (No. 10) Prescription Benefit Programs — Pharmacy Needs

> Greater Strength and New Strategies! New Drug Review: Polidocanol (Asclera)

November (No. 11) Strike 3 — CVS Should be OUT!

New Drug Review:

Dabigatran etexilate mesylate (Pradaxa)

December (No. 12) Appreciation and Anticipation

New Therapeutic Agents Marketed in the United

States in 2010

Index for 2006 - 2010*

*All issues of The Pharmacist Activist are available without charge at www.pharmacistactivist.com.



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It is important that the development and distribution of *The Pharmacist* Activist be as cost efficient as possible. Therefore, we prefer to send the monthly issues to you via e-mail.

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