



CHAPTER NEWSLETTER
A SENIOR CARE PERSPECTIVE



Go to www.SENIORSYMPOSIUM.com and register for SS'05!!

Chapter Newsletter: Volume II,
Spring 2005

**Sodium Polystyrene for Oral Use in the Elderly:
some caveats to consider**

Dennis Chapron, RPh, MS

Sodium polystyrene sulfonate (Kayexelate®) is a useful medication for lowering elevated serum potassium concentrations, especially when the indication for its use is not life threatening. This medication is a cation-exchange resin that will exchange its sodium content for potassium. The primary site of cation exchange occurs in the ileum and colon. In patients with chronic renal failure, the ileum and colon assume a greater role in the elimination of absorbed potassium from the body. In patients with normal renal function, about 5-10% of their daily potassium intake is secreted into the bowel for elimination in the stools, whereas in chronic renal failure this secretory route of removal can account for as much as 25% of daily potassium losses. Because fecal potassium loss is also closely correlated with stool volume, constipation may impair potassium colonic elimination. Under an ideal system where there are no competing cations, one gram of anhydrous resin will exchange with 110-135 mg of potassium. Since potassium has a valence of one and an atomic weight of 39, this means that one gram of the sodium polystyrene will exchange for 2.8-3.5 mEq of potassium. As to be expected in any biological system there are other cations that will compete with potassium for exchange with sodium polystyrene. Competing cations include calcium, magnesium and iron. In general, sodium polystyrene has a higher affinity for divalent cations. Affinity also increases with increasing atomic weight. Thus the amount of potassium removed from the body with each gram of orally administer sodium polystyrene is considerably less than estimated under ideal conditions and quite

variable depending upon the type and amount of competing cations it encounters in the bowel. In general, it is estimated that for each gram of resin given orally, about 0.5-1.0 mEq of potassium is removed from the body.

In elderly patients with asymptomatic hyperkalemia, the resin is usually administered orally in 15 to 30 gram doses. Usually one dose, or two doses separated by 12-24 hours, will reduce the serum potassium into the normal range. The serum potassium should be measured 12-24 hours after the last dose. Orally administered sodium polystyrene is considered more effective than rectal use because the oral route provides a longer bowel residence time for cation exchange. Because most hyperkalemia in the elderly is episodic, often the result of renal dysfunction coupled with medications that impair potassium excretion (ACE-inhibitors, angiotensin receptor blockers, spironolactone, amiloride, triamterene, and trimethoprim), removing or adjusting downward the offending drug and perhaps modifying the potassium content of the diet, will prevent further rises. Since sodium polystyrene is constipating and may cause fecal impactions and concretions, it is co-administered with a hyperosmotic sorbitol solution. Furthermore, the sorbitol solution provokes a good stool output hence assuring adequate potassium removal. Sodium polystyrene should not be given to patients when ileus is present. In some patients with serious heart failure the sodium released from the resin may precipitate a congestive episode.

(continued on p. 5, "SPS")



**CT-ASCP Chapter
Communications
Committee:**

- Amy Huie-Li, PharmD, CGP
- Anna Egle, RPh, FASCP
- Kevin Chamberlin, PharmD
- Tom Lachapelle, PharmD

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Students: Consider Senior Care Pharmacy!

The American Society of Consultant Pharmacists (ASCP), founded in 1969, is the international professional association providing leadership, education, advocacy, and resources to advance the practice of consultant and senior care pharmacy practice.

The most important, and fastest growing component of consultant pharmacy practice is senior care pharmacy — the delivery of high quality

pharmaceutical care to at-risk seniors in home and community-based settings.

Consultant Pharmacists:

- Are experienced clinicians, savvy entrepreneurs, and committed patient advocates dedicated to serving the complex needs of at-risk seniors.
- Are essential members of the interdisciplinary team.
- Are crucial in identifying, resolving, and preventing medication-related problems.
- Are active in maintaining their clinical competence through life-long learning, including possible board certification in geriatric pharmacy.

Check out www.ctascp.org and www.seniorcarepharmacist.com for more information and to meet a consultant in your area!

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Membership Specials for SS'05 Attendees!

ASCP National is sponsoring a great deal for all new members that attended the Senior Symposium at Foxwoods Resort and Casino, April 21-22, 2005!

SS'05 Attendees that wish to become a new member of ASCP can get up to a 50% discount on their first year's dues. Go to: www.ctascp.org/Folder4/membership.htm and print off the form to get these great savings! Or, call 1-800-355-2727, and tell them you attended Senior Symposium 2005 and want to join ASCP as a new member!

Membership Categories

- Active Member** ~~\$210.00~~ **\$105.00**
Licensed pharmacists actively engaged in pharmacy practice.
- Active Spouse** ~~\$105.00~~ **\$52.50**
Member
Available only to a licensed pharmacist whose spouse is already enrolled as an active member. Enter ASCP ID# of spouse
- Pledge Member** ~~\$92.00~~ **\$46.00**
Individuals who have graduated from an accredited school of pharmacy within 12 months of application to ASCP.
- Associate** ~~\$113.00~~ **\$56.50**
Member
Non-pharmacist practitioner of any allied health professional.

Hurry now, these discounts for new members expire June 1, 2005!

STUDENTS – If you attend SS'05, the **CT-ASCP Chapter will pay your first year's membership** at no cost to you!!

CONSULTANT PHARMACIST'S CREED

- I take responsibility for my patients' medication-related needs.
- I ensure that my patients' medications are the most appropriate, the most effective available, the safest possible, and are used correctly.
- I identify, resolve, and prevent medication-related problems that may interfere with the goals of therapy.

Save this date!

Friday, April 22nd, 2005

Sixth Annual Senior Symposium

Foxwoods Resort Casino - Mashantucket, CT

Check the mail for your invitation and brochure!!

Registration is ONLINE this year at: www.seniorsymposium.com

For more information, please call: 860-640-0008

Foxwoods Resort Casino is offering a discounted ASCP room rate.

Please call 1-800-FOXWOOD to make your room reservations.

Provide the reservation agent with the
group code **F29636** at Grand Pequot Tower

*Earn up to 3.5 LIVE LAW CEs at sessions such as Modernizing Medicare and
Emergency Preparedness...don't miss the session on refining your Drug In-
formation searches or the COX-2 debate with a representative from Pfizer
Pharmaceuticals...and, as always the popular*

New Drugs Update will be the Opening General Session!

There will be both pre and post conference dinner symposiums
as well as a breakfast program, along with the opportunity
to meet with industry representatives

Don't gamble on your future. **Register now!**

Pharmacy Day at the Capital—February 9, 2005*

Dennis H. Cleary, CT-ASCP Lobbyist

Pictures submitted by Michel Fortin, RPh



Pharmacy students along with UCONN faculty members and pharmacists could be seen scattered throughout the House gallery to hear Governor Rell's budget message. Students spent the day performing health screenings for legislators, staff and visitors combined with health counseling.

The House Gallery was peppered with white coats to hear Governor Rell's biannual budget presentation first hand. Pharmacists and students spent the afternoon meeting with legislators on current pharmacy issues.

The day was capped off with a reception for legislators at the Officer's Club adjacent to the Legislative Office Building. The reception gave the pharmacy profession an opportunity to network with key legislators to expound on the pressing needs of pharmacy to be addressed in the current legislative session. This one on one discussion leads legislators to call on the profession as the most knowledgeable resource they have.

While the budget proposal had little good news and has reductions in pharmacy payments totaling nearly 20 million annually, this is only the beginning of the budget process to be completed by June 8th. The Appropriations Committee will be having a



public hearing on the budget bill #6688 in the upcoming month.

The public is invited to testify as to the impact of this budget proposal. Contact me at www.clearyassociates.com or CT-ASCP to keep abreast of the budget progress over the next four (4) months.

***NOTE:** Pharmacy Day at the Capital was held on Ash Wednesday, and was jointly sponsored by CT-ASCP, Connecticut Pharmacists Association (CPA), UConn School of Pharmacy and APhA-ASP Chapter, Connecticut Society of Health-System Pharmacists (CSHP), and the Connecticut Association of Community Pharmacies (CT Chains).

Sodium Polystyrene Sulfate, *(cont. from page 1)*

Although there are no published reports, the stoichiometry of the exchange suggest that about 90 mEq of sodium may be released with each 30 gram dose of resin. Failure to respond to sodium polystyrene treatment may be due to the inadvertent use of competing cationic drugs in close proximity to resin administration. Medications which provide competing cations include iron salts (e.g., ferrous sulfate), magnesium hydroxide, antacids, and calcium supplements (calcium carbonate or citrate preparations). Hyperkalemic patients who have a colectomy may respond sub-optimally because of the loss of a colonic site for cation exchange, and may require repeated sodium polystyrene administration.

Dennis J. Chapron, RPh, MS is an Associate Professor at the University of Connecticut School of Pharmacy and has a Clinical Clerkship site at the Hebrew Home and Hospital in West Hartford, Connecticut.

Don't forget to Register for Senior Symposium 2005!!



SENIOR
SYMPOSIUM

**Thursday Evening, April 21st
and
Friday, April 22nd**



Foxwoods Resort Casino
Mashantucket, Connecticut

Located in
The Grand Pequot Tower

Presented by
Connecticut Chapter of
the American Society of
Consultant Pharmacists

Notes and Votes from Feb Board Meeting

MEMBER NAME & TITLE	Attendance
Tom Lachapelle, President 2004	X
Sandy Wojciechowski, President-Elect 2004	X
Jim Conklin, Immediate Past-President / PAC Chair	X
Michel Fortin, Secretary / Treasurer	X
Mark Wrabel, Board 2002 / Programs Chair	X
Peggy Memoli, Board 2002	X
Dennis Chapron, Board 2003	X
John Cannarella, Board 2003	X
Kevin Chamberlin, Board 2004 / Communications Committee	X
Anna Egle, Board 2004 / Communications Co-Chair	X
Sean Jeffery, Education Chair	X
Amy Huie-Li, Communications Co-Chair	X
Larry Sobel, President Emeritus / Legislative Chair	X
James Ryan, Legislative Committee	
Gene Memoli, Past President	X
David Cooper, Past President	
Jack Ziskin, Past President	X
Sheldon Sones, Past President	
Brian Lentini, Programs Committee	X
Brian Pelletier, Programs Committee	X

REVIEW OF PAST MINUTES—The minutes of the Jan meeting were accepted as written.

FINANCIAL REPORT—Financial Report for 2004 was reviewed and approved as submitted. Mark W. questioned whether the BOD had voted to donate this past November's \$2,000 ASCP raffle winnings back to the ASCP PAC & Foundation. A review of past minutes for 2004 did not reveal any such discussion.

PRESIDENT'S REPORT—Tom L. attended the Chapter Council Meeting at ASCP offices in Alexandria, VA. He distributed handouts related to Chapter procedures for obtaining CE credit through ASCP along with various other ASCP announcements about upcoming meetings.

LEGISLATIVE UPDATE—Larry S., Tom L., Dennis Cleary and Mark Brennan of Levin, Powers, Brennan & Shea, (the Long Term Care Pharmacy Alliance lobbyist) met to discuss reimbursement issues related to Medicare-D and dual eligible nursing home residents. Current projection is for a loss in the Medicaid and Medicare-D programs to equal \$350 million. Senator Chris Murphy has sponsored a bill which would allow Canadian, Irish & British Pharmacy Benefit Management (PBM) companies to provide drugs to CT citizens. Dennis Cleary suggested all BOD members review the bill tracking feature on his website for more details. Dis-

cussed a bill on controlled drugs that requires collection of information that most pharmacies are not collecting (i.e., name of person picking up the RX). The RX drug working group appointed by the commissioner only includes 1 pharmacist in this group of 10 appointees. Pharmacy Day at the Capitol was discussed. Dennis Cleary invited legislators via email to the event and to the reception from 5pm – 7pm at the Officers Club. Jim C. suggested that CT ASCP should offer an educational program at next year's Pharmacy Day at the Capitol. Gene M. discussed the cost sharing of this program's expenses with the other groups (CPA, CSHP). Dennis Cleary reminded the Board that reporting of these expenses would be required. Jim C. discussed visits to legislators and how we could "tag team" with students or others who are not familiar with how to lobby. Tom L. asked about a rumor that consulting pharmacy would be separated from vending pharmacy in CT. Larry S. stated that no bill had been introduced to date. Gene M. suggested that this may be confusion about Medicare-D's requirement for a separate review of therapy by PBM's. The next Legislative Committee meeting will be held on February 18, 2005 at 12:00PM at the Officers Club in the State Armory Building, Hartford, CT.

EDUCATIONAL COMMITTEE - Senior Symposium 2005 (SS05)—Website: www.seniorsymposium.com. Gene M. stated rosters of all CT licensed RPh names, infusion nurses, NP's, PA's, AMDA, APRN's, Medical Directors,

Notes and Votes, (cont. from page 6)

EDUCATIONAL COMMITTEE (cont.)

RI & MA RPh's will be forwarded to Solomon & Assoc. for entry to our data base for invitations. The deadline for mailing of invitations is mid February. The "Save the Date" cards will only be sent via e-mail this year. Sales for exhibitors have been moderate so far possibly due to consolidation in the industry, although some new sponsors have stepped forward. Sean J. stated speakers have been finalized, although the Friday night inside symposium is not yet confirmed due to lack of funding. Gene M. volunteered to call Rachael Chilson from Forest to confirm their wish to sponsor Friday night. Sean J. discussed the plan for having 2 sessions per hour this year versus 4/hr last year. This should help reduce crowd control problems. Tom L. stated SS04 cost us \$136,000 for 940 attendees or an average of about \$140.00 per attendee, therefore sponsorship is vital to our success.

NEWS FROM UCONN—Dennis Chapron discussed the new pharmacy school move occurring in June 2005 with a dedication weekend on 10-21-05. The White Coat Ceremony was a success once again. He asked that CT ASCP offer more CE's to membership and asked BOD members to email him with requested topics

PAC COMMITTEE—Jim C. is working on a PAC fundraising postcard and he suggested that a future PAC raffle may be considered. Dennis Cleary suggested the PAC needs to raise enough \$ for several ads in ad books to be effective with legislators. Jim C. agreed to educate members about this need and why the PAC needs donations.

COMMUNICATIONS COMMITTEE—Amy H. stated the March newsletter will include a full page add for SS05. She also asked for a summary from Pharmacy Day at the Capitol and a contributed article from the PAC chairman.

LONG RANGE PLANNING COMMITTEE (LRPC)—Larry S. suggested that the chapter donate money to UCONN School of Pharmacy, perhaps as much as \$10 - \$25,000. Gene M. suggested the chapter should fund a scholarship, either endowed or committed to and funded annually. Tom L. suggested putting these proposals on the agenda for the LRPC meeting in March. Sandy W. agreed to do so.

MEMBERSHIP—Jack Z. will email to the BOD a list of past due member names in order that we may choose to contact those people we know to ask them to pay their annual dues. ASCP will begin providing students with a no cost E-membership which would provide only electronic mailings (no journal or mailings)

ASCP HALL OF FAME AWARD—Jim C. wants to keep this tradition moving forward and will email membership. Michel F. suggested it might be a good time to recognize a leader from UCONN Pharmacy School. Sean J. and Gene M. suggested Fred Rowland, President of AMDA, receive recognition. John C. suggested having an "advancement of pharmacy" award also. Mark W. suggested we need award criteria before this can move forward.

OPEN DISCUSSION—The CPA Mid-Winter Conference had about 400 attendees at the Aquaturf, the home base for this conference for several years now. Almost all of the 10 vendors present at this event expressed interest in exhibiting at SS05.

NEWS FROM PFIZER—Glenn T. discussed the upcoming COX II FDA advisory committee meeting. Discussed study findings and commented on the complexities regarding this subject. The BOD officially recognized Glenn & Christina for providing us with the opportunity to meet with them as a group.

Next Meeting: Monday, March 7, 2005—Location: TBA

Respectfully submitted, Michel Fortin, Secretary