PEDIATRIC NEWS

JPPT Index in IPA

The Journal of Pediatric Pharmacology and Therapeutics is now covered in the International Pharmaceutical Abstracts (IPA). This indexing service was established in 1964 and was launched electronically in the 1970s. Its mission is to cover all pharmacy and health related literature worldwide and to provide an in-depth indexed reference. IPA draws material from over 850 primary pharmaceutical, medical, and health-related journals and provides a comprehensive collection of information on drug use and development. Key features of the database include extensive indexing, drug trade names linked to generic names, a hierarchical pharmacological/therapeutic classification which allows searches by drug classes, human studies limiting feature, all CE articles tagged, and the identification of review articles. In-depth indexing averaging 10 subject term entries plus numerous cross-references are included with each abstract.

Call for Nominations PPAG BOD

The Pediatric Pharmacy Advocacy Group (PPAG) Board of Directors (BOD) is seeking nominations for one Board position that will begin October 2005 and end October 2008. To be eligible as a candidate must: 1) be a member of PPAG in good standing for at least three years; 2) be committed to attend all Board Meetings; 3) actively participate throughout the year; 4) support the mission, vision, values, and goals of PPAG; and 5) have made contributions to the practice of pediatric pharmacy. Any member of PPAG may nominate an individual including self-nomination. Visit www.ppag.org for additional information about the duties and responsibilities of a board member. The deadline for submitting nominations is *March 21, 2005, 5 pm CST.* Submit all nominations electronically to Matthew Helms, Executive Administrator of the PPAG at matthew.helms@ppag.org.

PPAG Best Practice Awards

Each year the Pediatric Pharmacy Advocacy Group (PPAG) awards up to two Best Practice Awards. The awards are given to innovative and creative pharmacy programs that advance the mission, vision, and goals of PPAG. Awards are evaluated based upon innovation, creativity, cost effectiveness, and improvement in practice and leadership. Pediatric pharmacy practitioners are eligible. To be considered, practitioners must submit a 500-word summary of their pharmacy program. Submission should include: 1) Introduction —a summary of the program including length of time for development and implementation; 2) Background—a description of the impetus for the program and the establishment of its goals; 3) Program Description/Methods —a description of the development process, including timeline; 4) Discussion and Conclusion—a discussion of the program and its outcomes. Submissions should include any pictures, graphs, figures or tables that support the summary. Each description must be *electronically* submitted as a single-spaced document on 8 $^{1}/_{2}$ x 11" paper with 1" top and bottom margins and 1 $^{1}/_{2}$" side margins, font size 10 or more, page numbered. Include the name of the practice site, city and state in a heading only. Include a curriculum vitae of the primary author responsible for the development of the program. Send program summaries and the curriculum vitae of each participating practitioner to the Executive Administrator of PPAG: matthew.helms@ppag.org by *May 15, 2005, 5 pm CST. You will be able to submit Best Practice Submissions online in March 2005.* Recipients of the award receive a plaque for the practice site and a certificate recognizing each contributor to the program. Award recipients will share their best practice during a platform and poster presentation during the Annual Meeting. Registration and one night hotel will be provided for one representative of each award.

Call for Abstracts: 14th Annual Pediatric Pharmacy Advocacy Group International Conference

All practitioners/investigators in the field of pediatric clinical pharmacy, whether members of PPAG or not, are invited to submit abstracts for

Downloaded from https://prime-pdf-watermark.prime-prod.pubfactory.com/ at 2025-06-03 via free access

consideration as a platform or poster presentation at the 14th PPAG Annual Conference, October 9–12, 2005, Renaissance Chicago Hotel. All submissions with preliminary or final results may be submitted in any of the following categories: Original Research, Innovative Pediatric Pharmacy Practice, or Encore Presentation. Accepted abstracts will be published in the Journal of Pediatric Pharmacy and Therapeutics (JPPT). Students, Residents and Fellows whose research projects are ongoing at the time of submission are encouraged to submit in the Research-in-Progress category. Abstracts accepted in this category will not be published in JPPT. All submissions, except those in Research-in Progress and encore categories, will be eligible for the Young Investigator or Best Original Paper award. The finalists will be determined by a panel of judges during the poster and platform presentation sessions. For further information on how to submit your abstract and detailed description of various categories please visit the PPAG web site at www.ppag.org. Deadline for Submission of abstracts is May 31, 2005. *You will be able to submit Abstracts online in March 2005.*

FDA Statement on Recommendations of the Psychopharmacologic Drugs and Pediatric Advisory Committees

The Food and Drug Administration (FDA) generally supports the recommendations that were recently made to the agency by the Psychopharmacologic Drugs and Pediatric Advisory Committees regarding reports of an increased risk of suicidal thoughts and actions associated with the use of certain antidepressants in pediatric patients. FDA has begun working expeditiously to adopt new labeling to enhance the warnings associated with the use of antidepressants and to bolster the information provided to patients when these drugs are dispensed.

In summary, the members of the advisory committees:

- endorsed FDA's approach to classifying and analyzing the suicidal events and behaviors observed in controlled clinical trials and expressed their view that the new analyses increased their confidence in the results;
- concluded that the finding of an increased risk of suicidality in pediatric patients applied to all the drugs studied (Prozac, Zoloft, Remeron, Paxil, Effexor, Celexa, Wellbutrin, Luvox and Serzone) in controlled clinical trials;
- recommended that any warning related to an increased risk of suicidality in pediatric patients should be applied to all antidepressant drugs, including those that have not been studied in controlled clinical trials in pediatric patients, since the available data are not adequate to exclude any single medication from an increased risk;
- reached a split decision (15-yes, 8-no) regarding recommending a "black-box" warning related to an increased risk for suicidality in pediatric patients for all antidepressant drugs;
- endorsed a patient information sheet ("Medication Guide") for this class of drugs to be provided to the patient or caregiver with every prescription;
- recommended that the products not be contraindicated in this country because the Committees thought access to these therapies was important for those who could benefit; and
- recommended that the results of controlled pediatric trials of depression be included in the labeling for antidepressant drugs.

New Warning for Strattera

Food and Drug Administration (FDA) is advising health care professionals about a new warning for Strattera, a drug approved for attention deficit hyperactivity disorder (ADHD) in adults and children. The labeling is being updated with a bolded warning about the potential for severe liver injury following two reports (a teenager and an adult) in patients who had been treated with Strattera for several months, both of whom recovered. The labeling warns that severe liver injury may progress to liver failure resulting in death or the need for a liver transplant in a small percentage of patients. The labeling also notes that the number of actual cases of severe liver injury is unknown because of under-reporting of post-marketing adverse events. The bolded warning indicates that Strattera should be discontinued in patients who developed jaundice or laboratory evidence of liver injury. See www.ppag.org for complete information provided by FDA.

Downloaded from https://prime-pdf-watermark.prime-prod.pubfactory.com/ at 2025-06-03 via free access