



SUBURBAN PHARMACY

Long-Term Care

January 2011



Welcome to the first edition of the Suburban Pharmacy LTC newsletter! In this issue you will find:

- Fending off Cold and Flu
- Info on SuburbanLTC.com
- FDA Safety Alerts
- Diabetes Management

Protecting against Cold and Flu

The influenza season is entering full swing and most facilities have initiated the vaccination process of both residents and staff to prevent the spread of influenza in the facility.

Each year, hundreds of millions of residents around the world are affected by health care-associated infections (HCAI). **Most of these health care-associated infections are preventable through good hand hygiene – cleaning hands at the right times and in the right way.**

Most studies show that adherence to hand hygiene is very low with an average of only 38 percent. The Centers for Disease Control and Prevention (CDC) and the World Health Organization (WHO) have issued guidelines in 2002 and 2009 for hand hygiene in health care settings.

According to the CDC: *“transmission of HCAI from one resident to another via the hands of Health Care Workers (HCW) requires the following sequence of events:*

- *Organisms present on the resident’s skin, or that have been shed onto inanimate objects in close proximity to the resident, must be transferred to the hands of HCWs.*
- *These organisms must then be capable of surviving for at least several minutes on the hands of personnel.*
- *Next, hand washing or hand asepsis by the worker must be inadequate or omitted entirely, or the agent used for hand hygiene must be inappropriate.*
- *Finally, the contaminated hands of the caregiver must come in direct contact with another resident, or with an inanimate object that will come in contact with another resident.”*

This transfer of organisms cannot only take place from infected or draining wounds but also from a resident’s intact skin when the healthcare worker is completing “clean” activities such as taking a pulse, blood pressure, or oral temperature; or touching a resident’s hand; or lifting the resident.

Reference “Healthcare Council of Illinois”

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FDA Safety Alerts

Prescription drugs:

Propoxyphene: Withdrawal - Cardiac Toxicity,
Fentanyl Transdermal System: Recall -
Potential for Faster Release, Heparin Sodium
(B. Braun) - Trace Contaminant, Methotrexate
Injection - Glass Particulates

OTC products:

Undeclared drug ingredients in Vigor-25, Duro
Extend Capsules for Men

Diabetes Management

Diabetes is one of the most pervasive and damaging diseases in the United States. According to the American Diabetes Association the following statistics define diabetes:

Data from the 2007 National Diabetes Fact Sheet (the most recent year for which data is available)

Total: 23.6 million children and adults in the United States—7.8% of the population—have diabetes.

Diagnosed: 17.9 million people

Undiagnosed: 5.7 million people

Pre-diabetes: 57 million people

New Cases: 1.6 million new cases of diabetes are diagnosed in people aged 20 years and older each year.

Total prevalence of diabetes Age 60 years or older:

- 12.2 million, or 23.1% of all people in this age group have diabetes

Deaths

Diabetes was the seventh leading cause of death listed on U.S. death certificates in 2006. This ranking is based on the 72,507 death certificates in 2006 in which diabetes was listed as the underlying cause of death.

Education Materials

Diabetes management can be a challenge in the assisted living arena. The American Diabetes Association provides education materials for use for free.

Visit: <http://professional.diabetes.org> for professional education materials on diabetes. Reference "ADA"



Thank you for a successful Holiday Food and Toy Drive!!!



Universal Influenza Vaccine Recommendations from CDC¹

Routine vaccination with the combined seasonal flu and H1N1 flu vaccine is recommended for everyone aged 6 months and older. Additional principle updates include the following:

- **All children aged 6 months to 8 years** receiving a seasonal influenza vaccine for the first time should receive 2 doses. Two doses are also appropriate for children aged 6 months to 8 years who are in their second flu vaccination year having received only one dose of seasonal flu vaccine during their first flu vaccination year, who did not receive any prior influenza A H1N1 2009 monovalent vaccine, or whose vaccine history (seasonal or influenza A H1N1 2009 monovalent) cannot be determined.

- **Expanded age ranges.** Previously approved inactivated flu vaccines with expanded age indications include: Afluria[®], now approved for people aged 6 months and older; and Fluarix[®], now approved for people aged 3 years and older. A new inactivated influenza vaccine, Agriflu[®], has been approved for people aged 18 years and older.

- **People age 65 and older** have an alternative inactivated vaccine option containing higher doses of hemagglutinin antigen. Those 65 and older receiving an inactivated vaccine may receive any standard-dose trivalent inactivated influenza vaccine (TIV) or the recently approved Fluzone High-Dose[®] vaccine. Those under age 65 receiving inactivated influenza vaccine should receive standard-dose TIV.

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