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At Good Life Pharmacies, we care about our patients and want to provide you with quality information about your health. If you ever have questions or would like more information, please feel free to ask. We look forward to caring for you and your family.



Sincerely,

Jim Andreesen, R.Ph., Angie Svoboda, Pharm.D. FIACP, and Ray Scott, R.Ph

Compounding for Palliative Care/Hospice

Palliative care aims to relieve and manage symptoms - such as nausea & vomiting, pain, dry mouth, oral pain or inflammation, wound care, fatigue, loss of appetite, radiation mucositis, constipation and shortness of breath - without causing unwanted side effects such as excessive drowsiness, GI upset and constipation. Our compounding pharmacy is an important part of the patient care team, as we have resources that are not available at traditional pharmacies. Our patients' options not limited to one-size-fits-all medications.



Here are some of the ways that our compounding pharmacy can help patients nearing end of life:

- We can customize pain medications to control pain that has not responded to commercially available drugs.
- When a medication is only commercially available as an oral or injectable form, it can often be compounded as a different dosage form such as a topical or transdermal gel, suppository, troche, or lollipop.
- We can combine compatible drugs into a single dosage form to make it easier to take medications and manage schedules.
- When a patient is unable to tolerate the taste of a medication, we can compound oral preparations and flavor them specifically for each patient, masking bitterness. Coffee, root beer, watermelon, and margarita are just a few of the flavors we offer!
- If a patient is suffering from dry mouth (common after head and/or neck radiation), or has mouth tenderness or an infection, medicated dosage forms can be compounded which may enable the patient to enjoy eating again.
- Pressure sores (decubitus ulcers) can be very difficult to manage. Our

- professional compounding pharmacist can work with physicians and other members of the health care team to prepare the best formulation for each patient and relieve pain and speed healing.
- Wound odor can be extremely embarrassing for patients. Topical preparations can be compounded to reduce odor.

Life can be very challenging for those suffering from chronic illness and their families and caregivers. Adding the resources of our professional compounding pharmacy offers a greater spectrum of treatment options and allows the patient to live life more comfortably.

Various types of medications have been compounded to relieve problems that affect patients who are receiving palliative care or who have received chemotherapy or radiation therapy. Following are examples from the medical literature.

Topical Tranexamic Acid to Reduce Bleeding in Advanced BCC

Tranexamic acid (TXA) is a synthetic derivative of the amino acid lysine. Conventionally used orally or intravenously, when administered topically, TXA has the ability to reduce bleeding with minimal systemic absorption and, in turn, a reduction in the risk of systemic side effects. Clinical trials found that topical TXA reduces blood loss in cardiac, orthopedic, and otolaryngologic surgery. However, the hemostatic role of topical TXA for the skin has not been fully established. A case study discussed an elderly female with locally advanced basal cell carcinoma (BCC) of the scalp that was managed conservatively. Bleeding, which is usually caused by local vessel damage or invasion, is a common and distressing symptom in patients with advanced cutaneous malignancies. Various modalities such as dressings, cauterization, and radiotherapy are described in the literature for local hemostasis of patients with cutaneous malignancies. However, the primary aim in this case was palliative wound care, and successful hemostasis of the large bleeding malignancy was achieved using topical TXA. After a month of applying topical tranexamic acid 500 mg daily, the scalp tumor remained stable in size. Vascularity and bleeding of the tumor were significantly reduced. Wound dressings were continued, and topical TXA 500 mg was eventually decreased to every other day with continued good hemostatic effect. No systemic side effects were encountered during the course of the treatment. Topical TXA is a promising therapeutic option for the hemostasis of locally advanced BCC or other skin malignancies, especially as part of palliative care for patients who are unsuitable for surgery or radiotherapy. In terms of safety profile, a recent meta-analysis of studies involving topical TXA did not show increased risk of thromboembolic events such as myocardial infarction, stroke, pulmonary embolism, or deep vein thrombosis compared with the control groups involved.

JAAD Case Rep. 2016 Mar; 2(2): 162-163.

Pain from Oral Mucositis



Oral mucositis which results in severe pain is primarily due to cancer treatment but can also be related to immune-deficiency caused by infections and systemic inflammatory diseases. "The vast majority of patients undergoing radiation therapy with or without high-dose chemotherapy for head and neck cancer will develop oral mucositis in degrees ranging from minor erythema of the oral mucosa to large debilitating and painful ulcers." A pilot study investigated the location of anesthetic effect and duration of pain relief after a single dose administration of a 25 mg bupivacaine lozenge to reduce pain in the oral cavity and pharynx in patients with head and neck

cancer (HNC) and oral mucositis. The lozenge was compounded and included a sweetener and licorice powder to mask the taste. There was a significant reduction in pain in both the oral cavity and pharynx immediately after the lozenge was completely dissolved in the mouth. The mean time for maximal pain reduction after the lozenge was dissolved was 42 minutes. There was still a significant reduction in mean pain in the oral cavity after 180 minutes. "Results indicate that the bupivacaine lozenge has a clinically significant and long-lasting pain-relieving effect on pain because of oral mucositis in patients with HNC."

Pain Rep. 2016 Sep; 1(3): e571.

Pilocarpine Mouth Rinse for Xerostomia

Xerostomia (dry mouth) is a common condition that can significantly impair quality of life. Therapy with oral pilocarpine tablets can relieve dry mouth symptoms, but produces numerous adverse effects. Mouth rinsing with pilocarpine solutions at concentrations of 1 to 2% induced a significant objective and subjective dosedependent increase in salivary flow, similar to the results reported for oral 5 mg pilocarpine, but with fewer side effects. A systematic review and meta-analysis of 20 studies involving 1732 patients with xerostomia showed that pilocarpine should be one of the first lines of therapy in head and neck cancer survivors who had radiotherapy-induced xerostomia and reduced salivation.

Oral Oncol. 2017 Mar;66:64-74.

Braz J Med Biol Res. 2002 Jan;35(1):105-10.

Spec Care Dentist. 2015 Jul-Aug;35(4):164-9.

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125 So. 16th St. Ord, NE 68862 308-728-3295 308-728-3296 Fax

124 So. 4th St. Albion, NE 68620 402-395-3353 402-395-3354 Fax

727 "O" St. Loup City, NE 68853 308-745-1614 308-745-1614 Fax

www.GoodlifeRx.com







