



American Chinese Pharmaceutical Association Newsletter

美洲華人藥學會通訊

Editor: James W. Shaw, Pharm.D., M.S.

July 2002

Message from the President Jinn Wu, Ph.D.

Summer is already here, and I would like to wish all of our members a pleasant and enjoyable season.

ACPA is sponsoring several professional conferences and events, which are described in detail below. Our participation in these events is only made possible through the valued contributions of our members.

A joint ACPA/SAPA symposium entitled "Phytoceutical and Traditional Chinese Medicine" will be held on August 3, 2002 at the Edward Nash Theatre, Raritan Valley, New Jersey. The section program chairs include Qun Yi Zheng (SAPA) and Jinn Wu (ACPA). Detailed information regarding this symposium is available at <http://www.sapaweb.org>. Interested parties should contact Jinn Wu at jwu@xbl.com (609-799-2295 x 203). Further information may also be obtained from SAPA at announcement@sapaweb.org.

A joint ACPA/CAPA/ICSA/SCBA/TBA conference entitled "Symposium on Biomedical Technology Development" will be held September 28–29, 2002 at the University System of Maryland, Shady Grove Center, 9640 Gudelsky Drive, Building I-134, Auditorium 305, Rockville, MD 20850. The conference will feature four didactic sessions: 1) emerging biotechnology and vaccine development; 2) current biotechnology investment in Taiwan and Europe; 3) biochip technology and data mining; and 4) pharmacogenetics, pharmacogenomics, and biomarkers. There will also be one session devoted to discussing past experiences and future directions. For more information, interested parties should contact the program chair, Shiew-Mei Huang (ACPA), at HUANGS@cder.fda.gov.

The ACPA Annual Dinner Meeting will be held during the annual AAPS convention on Tuesday, November 12, 2002 at the Bright Pearl Seafood Restaurant, 346-348 Spadina Avenue, 3rd floor, Toronto, Canada. Further information about the restaurant may be obtained by calling 416-979-3988 or by visiting www.brightpearlseafood.com. Persons interested in attending the dinner should register at the exhibition booth for XenoBiotic Laboratories, Inc. by Monday, November 11, 2002.

Finally, the 6th ACPA International Conference and Workshop will be held in conjunction with a meeting honoring the 50th anniversary of the National Taiwan University School of Pharmacy. The conference is scheduled to be held August 1–3, 2003 at the school of pharmacy in Taipei, Taiwan. The theme for the conference is "Challenges in Modern Drug Discovery and Development." Other organizations have shown an interest in sponsoring the conference, and we are carefully evaluating our options. A preliminary program should be available with the next issue of newsletter.

Report from the Nomination Committee Marina Chang, R.Ph.

The election of officers (i.e., President and Treasurer) is coming up in October. Anyone who is interested in running for President or Treasurer or who wants to nominate someone for either of these positions should send their name to Marina Chang (Changm@CDER.FDA.GOV).

**Report from the Public Relations Committee
Eddie Hong, MBA**

Along with the April issue of the newsletter, we sent a questionnaire designed to collect demographic information from our members. Regretfully, the initial e-mail and mail responses were not ideal. Out of 163 questionnaires that were sent to members, we have received 10 e-mail responses and 23 mail responses (an overall response rate of 20%). We have elected to send our members another copy of the questionnaire with this issue of the newsletter. If you have not already done so, we ask that you complete the questionnaire and return it to Eddie Hong by e-mail (GlobalHealthcareUSA@yahoo.com) or fax (415-731-0838) prior to July 31, 2002. If you have any questions concerning privacy or the content of the questionnaire, please do not hesitate to contact Mr. Hong.

**Report on Past Meeting
Van Doren Hsu, Ph.D.**

The Washington, DC Metropolitan Chapter of ACPA held its spring CE dinner meeting on May 15, 2002. Close to 30 members attended the event. The title of the presentation was "Diffusing Thrombotic Risk: Update on Low Molecular Weight Heparin." Kathrin Kucharski, Pharm.D., BCPS, who is a Scientific Manager for Aventis Pharmaceuticals, was the speaker. Dr. Kucharski delivered a very informative as well as interactive presentation that generated much discussion among the attendees.

Our next CE dinner meeting will be held in the fall. If you would like more information, please contact David Chen (301-279-6156) or Van Doren Hsu (410-706-5396).

**The Levmetamfetamine Controversy
Jialynn Wang, Pharm.D.**

On March 21, 2002, the International Olympic Committee (IOC) Executive Board reached a decision in the doping case of Alain Baxter (Great Britain), a bronze medallist in men's alpine skiing slalom in the XIX Olympic Winter Games. As a medallist, Mr. Baxter was selected to undergo a doping test after this event, and his urine tested positive for methamphetamine. The Executive Board subsequently ruled to disqualify him

from the men's alpine skiing slalom event and withdraw his bronze medal and diploma.

According to the Controlled Substances Act, methamphetamine is considered a Schedule II substance, one which has a high abuse potential with severe psychic or physical dependence liability. Commonly referred to as "ice" or "speed," methamphetamine is a powerful stimulant derived from its parent drug, amphetamine. Originally developed as a nasal decongestant and bronchial inhalant, it was found to have effects on the central nervous system, causing increased activity, decreased appetite, and a general sense of well-being. Smoking or injecting the drug produces a brief, but intense rush, while oral ingestion or snorting produces a long-lasting high that can continue for as long as half a day. It is also very addictive, with side-effects including depression, anxiety, fatigue, and paranoia. Current medicinal uses of methamphetamine are limited, but it can have benefits in the treatment of narcolepsy, attention-deficit disorder, and obesity.

As is the case with all chemicals, methamphetamine exists in two forms, the d-isomer and l-isomer. This distinction is especially important for methamphetamine since it is the d-isomer that has the powerful stimulant properties. The l-isomer, levmetamfetamine, is also known as l-desoxyephedrine or l-methamphetamine. In the US, it can be found in Vicks Inhaler, an over-the-counter topical decongestant marketed by Procter and Gamble. Unlike other methamphetamine inhalers, which are controlled substances, Vicks Inhaler only contains the l-isomer and is therefore considered an excluded nonnarcotic product. Under the Federal Food, Drug and Cosmetic Act (21 U.S.C. 301) the product may be lawfully sold without a prescription over-the-counter and is excluded from all schedules pursuant to section 201(g)(1) of the Act (21 U.S.A. 811 (g)(1)). If used heavily enough, however, the product can lead to a positive urine test for methamphetamine. Tests can be done on urine samples to determine the percentages of l-vs. d-isomers present, and thus indicate whether an individual had used an illegal substance. Mr. Baxter maintains his innocence regarding the doping charge, saying that he had used a Vicks Inhaler prior to his competition and not the stimulant methamphetamine. Unfortunately, the IOC does not differentiate between the two isomers, and a positive methamphetamine finding in urine is grounds for disqualification and medal stripping. No additional test will be conducted to support or refute Mr. Baxter's claim.

This doping case raises an important question—What are the stimulant effects and abuse potential of levmetamfetamine, if any? One would assume that since

Vicks Inhaler is an excluded non-narcotic product, strong data would exist to disassociate it from the effects and abuse potential of the d-isomer. Surprisingly, a search of the available literature does not reveal much on this issue. It seems that levmetamfetamine is generally accepted to have very little stimulating effects on the brain and only acts as a mild decongestant. The University of California at San Francisco is currently recruiting volunteers to participate in a study to address the effects of levmetamfetamine and how it is broken down in the body. Volunteers will receive levmetamfetamine in increasing doses (up to four times the recommended dose) for four test sessions at intervals of at least one week. Data collection will include physiologic and subjective measures, heart function using a stress echocardiogram, and vascular resistance using impedance cardiography. Results of this study should be helpful in determining what effects, if any, levmetamfetamine has beyond its vasoconstrictive decongestant effects.

Abuse of Vicks Inhaler appears to be relatively uncommon. Although conversion of chemicals from the l-isomer to the d-isomer can be done in a laboratory, the difficulty of doing so with levmetamfetamine appears to limit its success. Another potential avenue for misuse of Vicks Inhaler is more indirect and lies in its strong menthol properties. Abusers of other drugs, such as ecstasy (methylenedioxymethamphetamine, often seen at rave parties and abused by adolescents and young adults), desire the menthol properties since they enhance the effects of the drug.

Like a few other over-the-counter medications, Vicks Inhaler is effective but is associated with unresolved questions regarding its potential for abuse. The public should be made aware of these concerns, and pharmacists are in a unique position to make these interventions. Until clear answers are obtained and the abuse (both direct and indirect) of Vicks Inhaler is curbed, pharmacists should be attentive to large quantity purchases of this product and alert patients to the possibility for positive methamphetamine drug test results.

**US Department of Health and Human Services
(HHS) Promotes Diabetes Awareness¹**

HHS Secretary Tommy G. Thompson [recently] launched a nationwide campaign to raise women's awareness about diabetes, a serious condition that affects more than 17 million Americans, more than half of them women.

The campaign, which is sponsored by HHS' Food and Drug Administration (FDA), the American Diabetes Association (ADA), and the National Association of Chain Drug Stores (NACDS), emphasizes that women—the family's primary caregivers—can make a positive difference to the whole family's health, including their own.

As part of the kickoff, about 500 local screening events also will take place in 10 key cities where residents have a high incidence of diabetes. Local pharmacies will offer free risk assessment and clinical testing, free educational materials and a Diabetic Management Kit.

"Women need to recognize that diabetes is a growing health hazard they can and should do something about," Secretary Thompson said. "Because more than 5 million people are undiagnosed, we want women, who serve as primary caregivers in the family, to learn about the early signs of diabetes and see their doctor about detection."

Today, about 9 million women have diabetes, including an estimated 3 million women who do not even know they have the disease. Women are at somewhat higher risk than men for diabetes and pre-diabetes—disorders that can lead to complications such as heart attack or stroke, as well as blindness, kidney disease and loss of limbs. (Pre-diabetes occurs when blood glucose levels are higher than normal, but not high enough for a diagnosis of diabetes.)

"This campaign will help women recognize the warning signs for diabetes, so that they and their families can take proactive steps to improve their health," said FDA Deputy Commissioner Dr. Lester M. Crawford. "Armed with the key facts, all Americans can take steps to prevent type 2 diabetes and to ensure that they get appropriate, effective treatments once diagnosed."

[The] announcement is part of HHS'...effort to highlight disease prevention as the primary way that Americans can improve their health and personal well-being while reducing their health care costs. Secretary Thompson has made disease prevention and health promotion a top priority, and the President's budget for fiscal year 2003 proposes a \$20 million new pilot program, "Healthy Communities," to help deliver community-wide prevention support. Overall, HHS would spend more than \$16 billion for all disease prevention activities under the President's budget.

Diabetes affects the body's ability to produce or respond to insulin, a hormone that allows blood glucose to enter the cells and be used for energy. Diabetes can cause difficulties during pregnancy and raises women's risks of heart attacks and strokes, as well as blindness, kidney failure and loss of limbs.

"With the nation facing a growing epidemic of diabetes, pharmacists are critical not only to helping patients manage their disease, but also providing information about risks," said Craig L. Fuller, NACDS president and CEO. "We are partnering with the FDA and the ADA in this national campaign because nearly one in 10 women over 20 have diabetes, but one-third are unaware they have the disease. It is imperative they understand their risk factors and we encourage them to participate in over 250 free diabetes risk assessment events that will be conducted at chain pharmacies in 10 cities."

"The Take Time to Care" campaign is an important collaborative effort to get valuable health information out to women who are at risk or who have diabetes," said Anne Daly, president, Healthcare & Education, ADA. "The American Diabetes Association is proud to be part of this important public awareness effort."

The main tools of the campaign—diabetes-related brochures, wallet-sized calendars, and cards with recipes for nutritious meals—will be distributed in grocery stores and pharmacies in the 10 cities: Atlanta, Baltimore, Chicago, Dallas, Detroit, Los Angeles, Miami, New Orleans, Indianapolis and Philadelphia. The brochures are being provided in English and Spanish. NACDS alone will distribute 5 million brochures.

The brochure highlights the warning signs that women need to recognize including fatigue, frequent urination, unusual thirst, extreme hunger, unusual weight loss and irritability. Recurring skin, gum, and bladder infections, blurred vision, cuts and bruises that are slow to heal are also potential signs and symptoms.

Three key messages are highlighted:

- Get tested for diabetes,
- Watch what you eat and get exercise,
- Use medicines wisely.

Additional information about the "Take Time to Care" campaign will be available on a newly created web site <http://www.fda.gov/womens/taketimetocare/diabetes>. The site provides information about the campaign and diabetes and is being linked to the web sites of all the partners and HHS agencies, including the Centers for Disease Control and Prevention (CDC), National Institutes of Health (NIH), Health Resources and Services Administration (HRSA) and Centers for Medicare & Medicaid Services (CMS).

Consumer information about diabetes is available through the National Diabetes Education Program, an effort sponsored jointly by NIH and CDC, and 200 public and private partners, at <http://www.ndep.nih.gov>, or from the ADA at <http://www.diabetes.org> or by calling 1-800-DIABETES (1-800-342-2383).

¹Anonymous. HHS Launches Campaign to "Take Time to Care About Diabetes". Free Risk Assessments for Women Offered in 10 Cities. *HHS News* 2 May 2002. <http://www.hhs.gov/news/press/2002pres/20020502.html> (10 Jul. 2002).

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