

REINVENTING YOUR PRACTICE

For an Electronic 'Right-Hand Man,' Think PDA

Dr. Arnold Jay Simon doesn't go anywhere without his personal digital assistant, commonly known as a PDA...

There's no need to buy a handheld personal computer with all the wireless Internet bells and whistles, he added. As long as it has a scheduler and alarm reminder, you're good to go.

"Being an office-based primary care physician responsible for nursing home residents, I've found my PDA most useful in keeping track of patient international normalized ratios, which [are] an important part of nursing home care," he said

in an interview. Forgotten INRs "can have disastrous consequences for patients on Coumadin." After ordering Coumadin, and requesting a repeat patient INR 2 weeks later, he enters into his PDA the patient's name and "INR" in a time slot on a PDA alarm.

When the alarm sounds, the screen opens and displays the information. Dr. Simon taps the screen with a stylus to ac-

knowledge the reminder and calls the nursing home, or, if he's busy with a patient, taps "snooze" and the alarm replays its tune a short time later.

"Once I have given the repeat patient INR order, I can press 'go to,' which will bring me to the scheduler, [into which] I copy the line containing the patient's name and 'INR,' and paste those data into the next scheduled time slot," he explained, adding that using the call schedule and the "find" function of the PDA allows that patient's previous and scheduled INR days to be retrieved easily and quickly.

"Or if I'm working in the hospital and want a patient's pending lab results, I just put his or her name into the scheduler and set it to remind me in an hour or so when I'm back in my office and have access to a computer," Dr. Simon said in an interview.

The physician's PDA also makes a great idea bank. Instead of putting his thoughts into the memo file, Dr. Simon prefaces his entries with the word "idea" and stores them in his scheduler for easy retrieval using the "find" function.

"The PDA is well designed for idea storage and as a reminder because this handy device is with me during waking hours and goes off at convenient scheduled times. But don't be misled by its small size. ... These are wonderfully powerful computers with untapped potential for your practice," he said.

By Bruce K. Dixon, Chicago Bureau

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Table listing various pharmaceutical companies and their products, including Abbott Laboratories, Amlyn Pharmaceuticals, Astellas Pharma, Bayer HealthCare, Forest Pharmaceuticals, Eli Lilly, Novartis, Novo Nordisk, Ortho McNeil Neurologics, Pfizer, Sanofi Aventis, Sepracor, Takeda, and Wyeth.

References: 1. Data on file, Novartis Pharmaceuticals Corp. 2. Chobanian AV, Bakris GL, Black HR, et al, and the National High Blood Pressure Education Program Coordinating Committee. The Seventh Report of the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure—the JNC 7 Report. JAMA. 2003;289:2560-2572.

Diovan HCT®

(valsartan and hydrochlorothiazide, USP) Combination Tablets 80 mg/12.5 mg; 160 mg/12.5 mg; 160 mg/25 mg; 320 mg/12.5 mg; 320 mg/25 mg

Rx only BRIEF SUMMARY: Please see package insert for full prescribing information.

USE IN PREGNANCY: When used in pregnancy, drugs that act directly on the renin-angiotensin system can cause injury and even death to the developing fetus.

INDICATIONS AND USAGE: Diovan HCT® (valsartan and hydrochlorothiazide, USP) is indicated for the treatment of hypertension.

CONTRAINDICATIONS: Diovan HCT® (valsartan and hydrochlorothiazide, USP) is contraindicated in patients who are hypersensitive to any component of this product.

Fetal/Neonatal Morbidity and Mortality: Drugs that act directly on the renin-angiotensin system can cause fetal and neonatal morbidity and death when administered to pregnant women.

Valsartan - Hydrochlorothiazide in Animals: There was no evidence of teratogenicity in mice, rats, or rabbits treated orally with valsartan at doses up to 600, 100 and 10 mg/kg/day, respectively.

Valsartan in Animals: No teratogenic effects were observed when valsartan was administered to pregnant mice and rats at oral doses up to 600 mg/kg/day and to pregnant rabbits at oral doses up to 10 mg/kg/day.

Hydrochlorothiazide in Animals: Under the auspices of the National Toxicology Program, pregnant mice and rats that received hydrochlorothiazide at doses up to 3000 and 1000 mg/kg/day, respectively, on gestation days 6 through 15 showed no evidence of teratogenicity.

Hypotension in Volume- and/or Salt-Depleted Patients: Excessive reduction of blood pressure was rarely seen (0.7%) in patients with uncomplicated hypertension treated with Diovan HCT in controlled trials.

Hydrochlorothiazide: Impaired Hepatic Function: Thiazide diuretics should be used with caution in patients with impaired hepatic function or progressive liver disease.

PRECAUTIONS: Serum Electrolytes: Valsartan - Hydrochlorothiazide: In the controlled trials of various doses of the combination of valsartan and hydrochlorothiazide the incidence of hypotensive patients who developed hypokalemia (serum potassium <3.5 mEq/L) was 3.0%.

Hydrochlorothiazide: All patients receiving thiazide therapy should be observed for clinical signs of fluid or electrolyte imbalance: hypotension, hypochloremic alkalosis, and hypokalemia.

Impaired Hepatic Function: Valsartan: As the majority of valsartan is eliminated in the bile, patients with mild-to-moderate hepatic impairment, including patients with biliary obstructive disorders, showed lower valsartan clearance (higher AUCs).

Impaired Renal Function: Valsartan: As a consequence of inhibiting the renin-angiotensin-aldosterone system, changes in renal function may be anticipated in susceptible individuals.

Information for Patients: Pregnancy: Female patients of childbearing age should be told about the consequences of exposure to drugs that act on the renin-angiotensin system.

Drug Interactions: Valsartan: No clinically significant pharmacokinetic interactions were observed when valsartan was coadministered with amlodipine, atenolol, cimetidine, digoxin, furosemide, glyburide, hydrochlorothiazide, or indomethacin.

Carcinogenesis, Mutagenesis, Impairment of Fertility: Valsartan - Hydrochlorothiazide: No carcinogenicity, mutagenicity or fertility studies have been conducted with the combination of valsartan and hydrochlorothiazide.

Pregnancy Categories C (first trimester) and D (second and third trimesters): See WARNINGS, Fetal/Neonatal Morbidity and Mortality.

Pediatric Use: Safety and effectiveness in pediatric patients have not been established.

Geriatric Use: In the controlled clinical trials of Diovan HCT, 764 (17.5%) of patients treated with valsartan-hydrochlorothiazide were ≥65 years and 118 (2.7%) were ≥75 years.

ADVERSE REACTIONS: Diovan HCT® (valsartan and hydrochlorothiazide, USP) has been evaluated for safety in more than 5700 patients, including over 990 treated for over 6 months, and over 370 for over 1 year.

Cardiovascular: Palpitations and tachycardia. Ear and Labyrinth: Tinnitus and vertigo. Gastrointestinal: Dyspepsia, diarrhea, flatulence, nausea, abdominal pain, abdominal pain upper, and vomiting.

Valsartan: In trials in which valsartan was compared to an ACE inhibitor with or without placebo, the incidence of dry cough was significantly greater in the ACE inhibitor group (7.9% than in the groups who received valsartan (2.6%) or placebo (1.5%).

Post-Marketing Experience: The following additional adverse reactions have been reported in post-marketing experience: Hypersensitivity: There are rare reports of angioedema.

Hydrochlorothiazide: Other adverse experiences that have been reported with hydrochlorothiazide, without regard to causality, are listed below: Body As A Whole: weakness; Digestive: pancreatitis, jaundice (intrahepatic cholestatic jaundice), sialadenitis, cramping, gastric irritation; Hematologic: aplastic anemia, agranulocytosis, leukopenia, hemolytic anemia, thrombocytopenia; Hypersensitivity: purpura, photosensitivity, urticaria, necrotizing angitis (vasculitis and cutaneous vasculitis), fever, respiratory distress including pneumonitis and pulmonary edema, anaphylactoid reactions; Metabolic: hyperglycemia, glycosuria, hyperuricemia; Musculoskeletal: muscle spasm; Nervous System/Psychiatric: restlessness, renal, renal failure, renal dysfunction, interstitial nephritis; Skin: erythema multiforme including Stevens-Johnson syndrome, exfoliative dermatitis including toxic epidermal necrolysis; Special Senses: transient blurred vision, xanthopsia.

Clinical Laboratory Test Findings: In controlled clinical trials, clinically important changes in standard laboratory parameters were rarely associated with administration of Diovan HCT. Creatinine/Blood Urea Nitrogen (BUN): Minor elevations in creatinine and BUN occurred in 2% and 15%, respectively, of patients taking Diovan HCT and 0.4% and 0%, respectively, given placebo in controlled clinical trials.

Electrolytes: See PRECAUTIONS. Storage: Store at 25°C (77°F); excursions permitted to 15-30°C (59-86°F) [see USP Controlled Room Temperature]. Protect from moisture. Dispense in tight container (USP).

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