

Modernized Reference Drug Program

Histamine₂ Receptor Blockers (H₂ Blockers)



Fully Covered (Reference Drugs)

- Ranitidine

Partially Covered (Non-Reference Drugs)

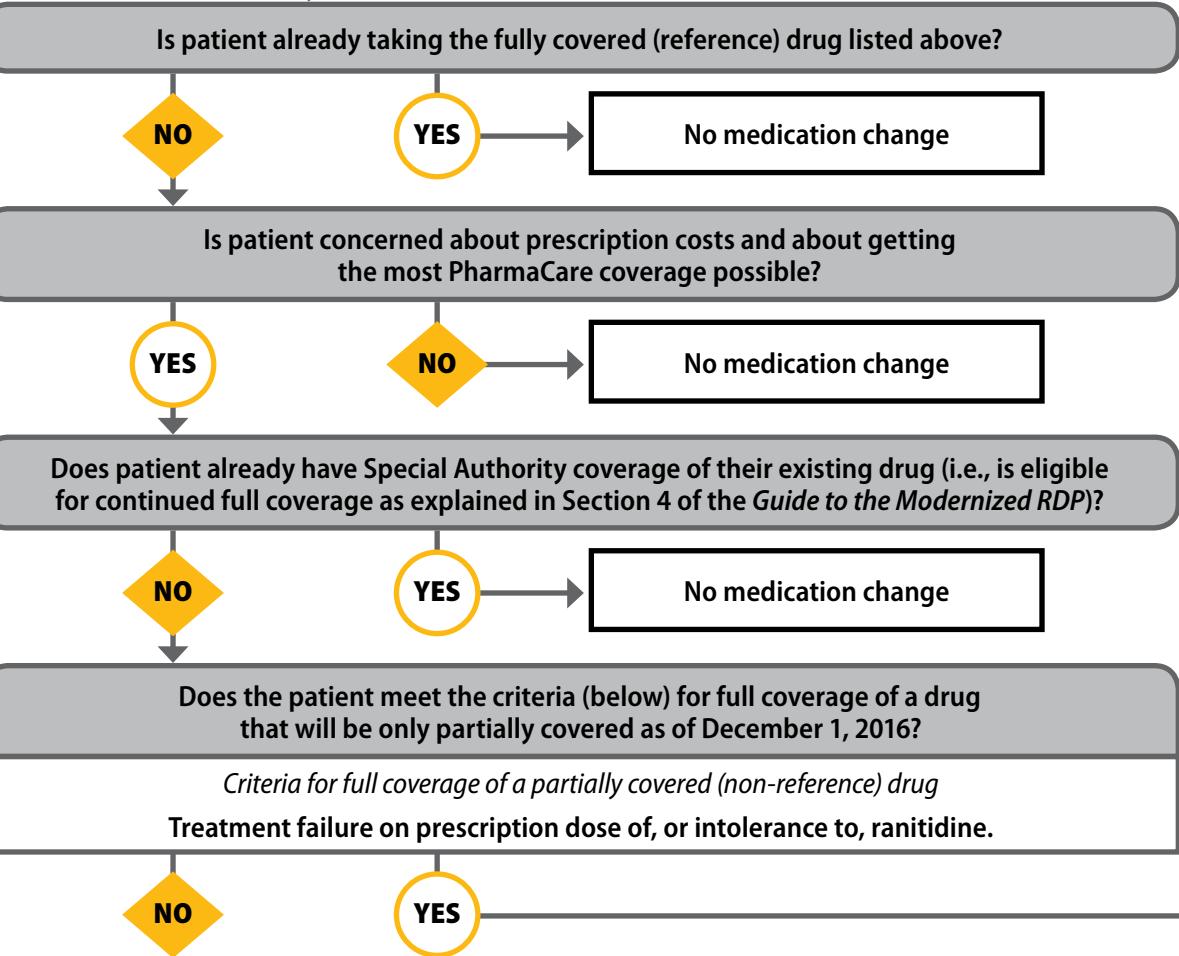
- Cimetidine

- Famotidine

- Nizatidine

Information provided is not intended as a substitute for professional judgement.

Step 1 – Does your patient need to switch medications to retain PharmaCare coverage?



Pharmacists

To confirm Special Authority coverage for patient's current medication, call the PharmaCare HelpDesk and select the Self-Service Option

Prescribers

To confirm Special Authority coverage for the patient's current medication, call 1-866-905-4912

Prescribers

Submit a Special Authority Request
Specialty Exemptions from submitting Special Authority Requests: paediatric cardiologists, pediatrics, paediatric general surgery.

Pharmacists

If the patient meets the criteria, refer to prescriber who can submit a Special Authority Request for coverage

Step 2 – Making the switch

- Consider the following precautions:*
- Patients with renal impairment—Dosing adjustments of ranitidine are required based on the patient's renal function.
 - There is no washout period for these drugs, and patients can switch at the next fill of their prescription. Switch the patient to the fully covered H₂ blocker at a therapeutically appropriate dose as shown below.

Recommended Dosage – Ranitidine¹

Indication	Dose
Gastroesophageal reflux disease (GERD), prevention of recurrence. Other indications e.g. Zollinger-Ellison, erosive esophagitis	<ul style="list-style-type: none"> 150 mg PO BID See product monograph
Renal impairment	<ul style="list-style-type: none"> CrCl 10-15 mL/min: max 150 mg PO per day CrCl < 10 mL/min: 75-150 mg PO per day
Hepatic impairment	No adjustment required

Equivalent doses of H₂ Blockers²

Drug	Approximate equivalent dose
Ranitidine	150 mg
Cimetidine	400 mg
Famotidine	20 mg
Nizatidine	150 mg

Inform the patient of the changes made, of any self-monitoring required, and of plans for follow-up.

Prescribers

Check patient progress at next scheduled appointment.

Pharmacists

Communicate therapeutic substitution information to the appropriate prescriber according to the requirements of PPP-58.
Check patient progress at next pharmacy visit.

REFERENCES:

1. CPS [Internet]. Ottawa (ON): Canadian Pharmacists Association; c2016 [updated 2013 Oct; cited 2016 Apr 12]. Histamine H₂-receptor Antagonists (H₂RA) [CPhA monograph] Available from www.e-therapeutics.ca. Also available in paper copy from the publisher.

2. Treatment of Non-Ulcer Dyspepsia in Adults: Common Questions about H₂-blockers. Therapeutics Initiative, Therapeutics Letter. October 1994.