Medication Management in Diverse Populations

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**Medication Management in Diverse Patient Populations**

**Patient: JD**

**Medication Management Plan:**

1. **Cardiovascular Risk Reduction:**
   - Metformin 1000 mg BID

2. **Hyperglycemia Management:**
   - BP: 146/88 mmHg
   - HR: 68 bpm
   - Other options include:
     - Metformin 1000 mg BID
     - Start Sulfonylurea
     - BP: 142/90 mmHg
     - 20 mg daily

3. **Dyslipidemia:**
   - BMI: 36
   - Wt: 10 mg daily
   - BMI: 30.7
   - HDL: 25
   - LDL: 135
   - HFA 110 mcg 1 puff BID

4. **Other options include:**
   - Nausea/vomiting, pancreatitis indicating need for significant glucose reduction

**Reasoning for GLP-1 agonist:**

- Efficacious: patient’s A1c currently 9.5% indicating need for significant glucose reduction
- Inexpensive: patient’s recent job loss
- Patient’s strong desire to avoid insulin.

**Patient: RS**

**Medication Management Plan:**

1. **Hyperglycemia Management:**
   - Glipizide 5 mg BID prior to meals

2. **Dyslipidemia:**
   - TC: 180
   - TG: 190
   - HDL: 45
   - LDL: 97
   - eGFR: 95 ml/min
   - ASCVD 10-Year Risk: 2.2%

**Reasoning for Glipizide:**

- Highly efficacious: patient’s A1c currently 8% indicating need for moderate glucose reduction
- Inexpensive: patient’s recent job loss
- Patient desires to avoid concentrated insulin.

**Patient: EG**

**Medication Management Plan:**

1. **Hyperglycemia Management:**
   - Stop current insulin therapies
   - Start SGLT-2 inhibitor

2. **Obesity:**
   - Refer to Bariatric Program

3. **Health Maintenance:**
   - Immunizations as indicated

**Reasoning for SGLT-2 inhibitor:**

- Highly efficacious: patient’s A1c currently 9.5% indicating need for significant glucose reduction
- Inexpensive but potential for weight gain and hypoglycemia; patient desires for weight loss and avoidance of weight gain
- Concerns with concentrated insulin: cost, weight gain, hypoglycemia
- Benefits: cost, ability to produce insulin

**Patient: MA**

**Medication Management Plan:**

1. **Hyperglycemia Management:**
   - Insulin lispro U-100 30 units AC
   - Insulin glargine U-100 95 units QHS

2. **Obesity:**
   - Start Sulfonylurea

3. **Health Maintenance:**
   - Immunizations as indicated

**Reasoning for Insulin:**

- Highly efficacious: patient’s A1c currently 41.1% indicating need for moderate glucose reduction
- Inexpensive: patient’s recent job loss
- Requires ability of pancreas to produce insulin
- Patient’s 2 year history of diabetes
- Concerns with Sulfonylureas: hypoglycemia and weight gain
- Other options include:
  - T2D: highly effective A1c reducer and inexpensive but potential for weight gain

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