With this issue we mark the completion of the fifth year of publication of *The Pharmacist Activist* (all issues are available on the website, www.pharmacistactivist.com. My motivation to continue publishing this newsletter is derived from the positive responses I receive from many readers. I very much appreciate these responses, the vast majority of which are supportive of the opinions I voice in editorials and the ratings I provide for new drugs. However, I also welcome the responses that do not agree with my opinions because the greater awareness of differing perspectives regarding challenging issues may bring us closer to solutions and courses of action that will better serve our patients, communities, and profession. If you know pharmacists and pharmacy students who are not presently receiving *The Pharmacist Activist*, please encourage them to go on the website and sign up to receive it. As an alternative, you could submit the necessary information for them and then inform them that you have provided them with a gift of a lifetime subscription to *The Pharmacist Activist*.

NEWS-Line Publishing produces this newsletter at its cost, and I wish to express my personal appreciation to Jeff Zajac, Joe Monte, John Buck, Chris Polli, and Patrick Polli for their expertise and enthusiasm in publishing *The Pharmacist Activist*. Although I do not receive compensation for my responsibility as author/editor, there are considerable expenses in producing this newsletter. I wish to express my deep appreciation to a friend who has provided financial support because of his commitment to advance the profession of pharmacy through stimulation of discussion/debate on important issues and challenges, as well as objective information on new drugs.

Many of the topics considered in the editorials in *The Pharmacist Activist* represent problems that may seem impossible to resolve. Some of the problems that have continued over a period of years have more recently been joined by the challenges of health insurance reform legislation and the tightening of the job market for pharmacists. However, the value of the role of our profession and the expertise and services of pharmacists makes it imperative that we not give up in our efforts to convert problems into opportunities and, indeed, that we strengthen our efforts and our activism in achieving positive outcomes. One of the reasons for which I continue to be highly enthusiastic about the future of our profession and can strongly encourage young people to consider pharmacy as a career is that, in my long experience, there has not been another time when there has been a greater need for the expertise of pharmacists. Much remains to be done in obtaining respect, utilization, and compensation for our expertise but, for the sake of our patients and communities, as well as for our profession, we must do it! Therefore, it is with anticipation of greater progress toward this goal that I look forward to what we can accomplish in 2011.

Best wishes for a healthy and enjoyable new year!

Daniel A. Hussar
## New therapeutic agents marketed in the United States in 2010

<table>
<thead>
<tr>
<th>Generic name</th>
<th>Trade name</th>
<th>Manufacturer</th>
<th>Therapeutic classification</th>
<th>Route of administration</th>
<th>FDA classification¹</th>
<th>New Drug Comparison Rating²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cabazitaxel</td>
<td>Jevtana</td>
<td>Sanofi-Aventis</td>
<td>Antineoplastic agent</td>
<td>Intravenous</td>
<td>1-P</td>
<td>4</td>
</tr>
<tr>
<td>Carglumic acid</td>
<td>Carbaglu</td>
<td>Orphan Europe</td>
<td>Agent for hyperammonemia</td>
<td>Oral</td>
<td>1-P</td>
<td>4</td>
</tr>
<tr>
<td>Collagelase clostridium histolyticum</td>
<td>Xiaflex</td>
<td>Auxilium</td>
<td>Agent for Dupuytren’s contracture</td>
<td>Intraleisional</td>
<td>5°</td>
<td>5</td>
</tr>
<tr>
<td>Dabigatran etexilate mesylate</td>
<td>Pradaxa</td>
<td>Boehringer Ingelheim</td>
<td>Anticoagulant</td>
<td>Oral</td>
<td>1-P</td>
<td>4</td>
</tr>
<tr>
<td>Dalfampridine</td>
<td>Ampyra</td>
<td>Acorda</td>
<td>Agent for multiple sclerosis</td>
<td>Oral</td>
<td>1-P</td>
<td>4</td>
</tr>
<tr>
<td>Denosumab</td>
<td>Prolia</td>
<td>Amgen</td>
<td>Agent for osteoporosis</td>
<td>Subcutaneous</td>
<td>S°</td>
<td>4</td>
</tr>
<tr>
<td>Dienogest/estradiol valerate</td>
<td>Natazia</td>
<td>Bayer</td>
<td>Contraceptive</td>
<td>Oral</td>
<td>1, 4-S</td>
<td>3</td>
</tr>
<tr>
<td>Ecallantide</td>
<td>Kabitor</td>
<td>Dyax</td>
<td>Agent for hereditary angioedema</td>
<td>Subcutaneous</td>
<td>P°, O</td>
<td>4</td>
</tr>
<tr>
<td>Eribulin mesylate</td>
<td>Halaven</td>
<td>Eisai</td>
<td>Antineoplastic agent</td>
<td>Intravenous</td>
<td>1-P</td>
<td>4</td>
</tr>
<tr>
<td>Fingolimod hydrochloride</td>
<td>Gilenya</td>
<td>Novartis</td>
<td>Agent for multiple sclerosis</td>
<td>Oral</td>
<td>1-P</td>
<td>4</td>
</tr>
<tr>
<td>Incabotulinumtoxin A</td>
<td>Xeomin</td>
<td>Merz</td>
<td>Agent for cervical dystonia</td>
<td>Intramuscular</td>
<td>5°</td>
<td>3</td>
</tr>
<tr>
<td>Liraglutide</td>
<td>Victoza</td>
<td>Novo Nordisk</td>
<td>Antidiabetic agent</td>
<td>Subcutaneous</td>
<td>1-S</td>
<td>4</td>
</tr>
<tr>
<td>Pegloticase</td>
<td>Krystexxa</td>
<td>Savient</td>
<td>Agent for gout</td>
<td>Intravenous</td>
<td>5°</td>
<td>4</td>
</tr>
<tr>
<td>Pitavastatin calcium</td>
<td>Livalo</td>
<td>Kowa; Lilly</td>
<td>Lipid-regulating agent</td>
<td>Oral</td>
<td>1-S</td>
<td>2</td>
</tr>
<tr>
<td>Polidocanol</td>
<td>Asclera</td>
<td>BioForm Medical</td>
<td>Sclerosing agent</td>
<td>Intravenous</td>
<td>1-S</td>
<td>4</td>
</tr>
<tr>
<td>Romidepsin</td>
<td>Istodax</td>
<td>Gloucester</td>
<td>Antineoplastic agent</td>
<td>Intravenous</td>
<td>1-5, O</td>
<td>3</td>
</tr>
<tr>
<td>Sipuleucel-T</td>
<td>Provenge</td>
<td>Dendreon</td>
<td>Antineoplastic agent</td>
<td>Intravenous</td>
<td>5°</td>
<td>4</td>
</tr>
<tr>
<td>Tacizumab</td>
<td>Actemra</td>
<td>Gementech</td>
<td>Antiarthritic agent</td>
<td>Intravenous</td>
<td>5°</td>
<td>4</td>
</tr>
<tr>
<td>Ulipristal acetate</td>
<td>ella</td>
<td>Watson</td>
<td>Contraceptive</td>
<td>Oral</td>
<td>1-S</td>
<td>3</td>
</tr>
<tr>
<td>Velaglucerase alfa</td>
<td>Vpriv</td>
<td>Shire</td>
<td>Agent for Gaucher disease</td>
<td>Intravenous</td>
<td>1-P</td>
<td>3</td>
</tr>
</tbody>
</table>

¹ FDA classification of new drugs: 1 = new molecular entity; 4 = combination product; O = designated orphan drug; P = priority review; S = standard review
² A biological approved through an FDA procedure that does not assign a numerical classification
³ New Drug Comparison Rating (NDCR): 5=important advance; 4=significant advantage(s); 3=no or minor advantage(s)/disadvantage(s); 2=significant disadvantage(s); 1=important disadvantage(s)
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