

Examining the Current Landscape of Idiopathic Pulmonary Fibrosis: Reducing the Health and Economic Burden of Disease

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Pharmacy Credit

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Sample of Online Posttest

Choose the best answer for each of the following:

1. **Which characteristics are associated with shorter survival time in patients with idiopathic pulmonary fibrosis (IPF)?**
 - A. Younger age and female sex
 - B. Older age and female sex
 - C. Younger age and male sex
 - D. Older age and male sex
2. **After an in-depth review of both medication and environmental exposure histories, what is the next step in the diagnostic process for a patient suspected of having IPF?**
 - A. Bronchoalveolar lavage fluid analysis
 - B. Surgical lung biopsy
 - C. High-resolution computed tomography scan (HRCT)
 - D. Echocardiogram
3. **What can cause a reduced systemic exposure to pirfenidone or nintedanib, thereby altering the efficacy of these agents?**
 - A. Alcohol use
 - B. Cigarette smoking
 - C. CYP3A4 inhibitor
 - D. CYP1A2 inhibitor
4. **Which adverse event (AE) is commonly associated with the use of nintedanib?**
 - A. Dyspepsia
 - B. Nausea
 - C. Diarrhea
 - D. Rash
5. **Clinical vignette: A 72-year-old Hispanic man, ex-smoker (10 pack years and quit at age 32), with several years of progressive dyspnea, dry nonproductive cough, and shortness of breath with exertion (walking to his mailbox). He has worked in computer repair and had parakeets for 10 years in his 40s. He has no family history of interstitial lung disease; he has a maternal aunt with rheumatoid arthritis. He denies gastroesophageal reflux disease, fever, chills, sweats, or joint pain. Serological laboratory studies were negative. His IPF was diagnosed following HRCT showing definite usual interstitial pneumonia and pulmonary function test with restrictive pattern and severely decreased diffusing capacity of the lungs for carbon monoxide. He was initiated on treatment with pirfenidone. According to the titration schedule when initiating pirfenidone, by day 10 of treatment, what dose and how many capsules should this patient be taking?**
 - A. 2 capsules by mouth (PO) tid (1602 mg daily)
 - B. 3 capsules PO bid (1602 mg daily)
 - C. 1 capsule PO tid (801 mg daily)
 - D. 2 capsules PO bid (1068 mg daily)
6. **Which common comorbidity is associated with IPF?**
 - A. Hepatic cancer
 - B. Asthma
 - C. Obsessive-compulsive disorder
 - D. Lung cancer

7. Which statement best describes the potential for drug-drug interactions with nintedanib?

- A. As a substrate for P-gp and CYP3A4, nintedanib may interact with other P-gp and CYP3A4 substrates, inhibitors, and inducers.
- B. As a substrate for P-gp and CYP2D6, nintedanib may interact with other P-gp and CYP2D6 substrates, inhibitors, and inducers.
- C. As a substrate for CYP1A2, nintedanib may interact with other CYP1A2 substrates, inhibitors, and inducers.
- D. Nintedanib has no appreciable potential for drug-drug interactions.

8. WW is a 68-year-old man who recently received a confirmed diagnosis of IPF. Comorbidities include type 2 diabetes (managed with metformin and canagliflozin) and obstructive sleep apnea (managed with continuous positive airway pressure). With the new diagnosis of IPF, which of the following best describes the therapeutic approach for WW?

- A. Wait until symptoms progress before initiating therapy.
- B. Immediately start therapy with pirfenidone at a dose of 534 mg per day.
- C. Immediately start therapy with nintedanib at a dose of 100 mg per day.
- D. Consider therapy of nintedanib or pirfenidone after consultation with patient and analysis of disease status.

9. How could the safety of pirfenidone be described?

- A. Arthralgia and insomnia are the most common AEs associated with pirfenidone.
- B. Serum creatinine elevation is a concern with pirfenidone therapy.
- C. Nausea and rash are the most common AEs associated with pirfenidone.
- D. AEs associated with pirfenidone are on par with those observed with placebo.

10. Which of the following is a benefit of using a care management program in managing a patient with IPF?

- A. Therapeutic decisions are transferred to the patient and available caregiver.
- B. A patient-centered approach can be used to improve health outcomes and health-related quality of life.
- C. Patients become eligible for additional rebates in a care management program.
- D. Patient complaints are handled by the care management coordinator rather than a clinician.

SAMPLE
POSTTEST