

Tandem widens recall

TANDEM Diabetes Care in the US has expanded its voluntary recall of insulin cartridges used with the t:slim Insulin Pump, the US Food and Drug Administration (FDA) said.

The cartridges could be at risk of leaking, potentially resulting in delivering too much or too little insulin.

The affected lots represent roughly 13,000 boxes of cartridges at 10 cartridges per box, or 130,000 cartridges in total.

Previously the company reported that about 4,746 boxes, or 47,460 cartridges, had been affected (**PD** 10 Feb).

Tandem ceo Kim Blickenstaff said testing continued after the company's previous announcement, with the result that further cartridge lots were thought to be possibly at risk.

To view lot numbers, **CLICK HERE**.

PBA revises guidelines

THE Pharmacy Board of Australia, as one of the National Boards regulating registered health practitioners in Australia through the National Registration and Accreditation Scheme (the National Scheme), has published its revised guidelines, code & policy.

The document covers advertising guidelines, mandatory notifications guidelines, the revised code of conduct and a new social media policy all of which come into effect from mid-March 2014.

Pharmacy Board of Australia Chair, adjunct associate professor Stephen Marty said that the documents are the result of extensive consultations late last year on the draft versions, part of a scheduled review three years into the National Scheme and are the first set of revised documents to be released this year, with more to come later in 2014.

"The National Boards have an ongoing focus on best practice regulation in the public interest, and in public protection," he said.

"The experiences from the first three years of the National Scheme were applied when these documents were being reviewed to make sure that they are clear and

make it easier for practitioners to understand their obligations, and for members of the community to understand what is expected of health practitioners."

Australian Health Practitioner Regulation Agency (AHPRA) chief executive officer, Martin Fletcher, also reinforced that the decision was made to publish the documents now to help practitioners, employers and members of the community understand what National Boards expect from practitioners.

BI bleeds from NOAC

GERMAN pharmaceutical manufacturer Boehringer Ingelheim told *Reuters* it is facing more than 2,000 lawsuits in the United States over claims its blockbuster drug Pradaxa, one of a new class of stroke prevention therapies (novel anticoagulants - NOACs), caused severe and fatal bleeding.

"We are certain that we can show in the legal cases that we have worked very carefully and responsibly in research, development and marketing of Pradaxa," the company said in a written statement.

CHC nods hemp food

FOOD Standards ANZ (FSANZ) has recommended that low THC (tetrahydrocannabinol) hemp be approved as a food, however while the final government decision is still pending, the Complementary Healthcare Council of Australia (CHC) is optimistic that the application will be approved by the Council of Australian Governments (COAG) later this year.

CHC ceo Carl Gibson, will visit the Hemp Foods Australia factory in Bangalow this week to be briefed on the latest developments in the industry.

"Hemp food is gaining global popularity and has a great potential for Australia's economy", he said.

The hemp industry is already responsible for around \$13 million of trade in Australia with over 350% growth from 2012 to 2013 and estimated at \$1b internationally.

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Weekly Comment

Welcome to PD's weekly comment feature.

This week's contributor is **Anthony Huxley**, Managing Director of Covad.



Starts with M, ends with G, and changes lives

No, it's not meditating. It's far more profound than that.

But it's THE definitive solution for pharmacy, and doesn't involve discounting.

It's marketing. And most of us are appalled at it.

A harsh statement perhaps, but largely a true one.

We can't expect consumers to transact with us if they don't know what we have to offer them, let alone that we exist.

Hardly a paradigm shifting assertion but it's also so fundamentally true that it hurts.

One of the shortcomings of any retail presence (pharmacy included) is there is no entitlement with it. There is no outcome, unless we bring it about.

Moreover, today, this is all the more problematic because the retail landscape isn't what it used to be a year ago, let alone a decade ago.

So how do we respond? It isn't complicated, it's called marketing, or communicating.

It's annoyingly obvious, but so is much of life. The trick however being that just doing it produces a result. The more we do it, the more results we achieve.

The more we tell people we exist, the more we tell them what we have to offer, the more likely they are to engage and transact with us.

Maddening isn't it.

Guild addresses changes

THE Pharmacy Guild national president George Tambassis has addressed reactions to the changes made to the Community Pharmacy Agreement deal struck between the Guild and the federal government (PD 12 Feb).

"The simple fact is that the Government has made clear there is no more money for these medication management programs and that we must work within the existing Agreement budgets."

He said the Guild had tried to find the fairest possible solution, ensuring the services were available throughout the Agreement and accessible by patients in the greatest need.

There was not sufficient funding to meet patient demand and rather than cancel the program after all the money was spent, the only viable path was to introduce caps, which ensured other areas

would not be adversely affected by overruns in these programs, he said.

A dilemma was that as community pharmacy moved towards a greater emphasis on professional services, limits to management services redirect the industry inappropriately.

"But there was no viable option other than to make these very difficult decisions."

When asked about possible conflicts of interest, a Guild spokesman said there was none.

"They are agreement funds and the Agreement is between the Government and the Guild.

"Normal audit requirements will apply."

TGA acts on Orielton

THE Therapeutic Goods Administration (TGA) has ordered Orielton Laboratories Pty Ltd to withdraw an internet advertisement for Macular Health with Saffron and publish a retraction on its website.

The TGA Delegate reviewed the matter and found that the indications listed on the Australian Register of Therapeutic Goods did not match the advertisement, that the advert was misleading or likely to be misleading and that it contained unverified and misleading representations about a serious disease.

The Delegate ordered Orielton to, among other actions, withdraw any representations that the product was a saffron supplement to assist sufferers of macular degeneration and that it was based on recipes that were thousands of years old.

NPS for a hearty chat

NPS MedicineWise has reminded health professionals that statins were one of the most effective strategies for reducing the risk of cardiovascular disease (CVD).

'Heart and stroke risk: a catalyst for conversation' looks at the latest evidence about determining absolute CVD risk, and treatment options including statins.

To read it, **CLICK HERE**.

Professional conduct

THE Pharmaceutical Society of Australia has reminded pharmacists that though they may have a conscientious objection to providing oral contraceptives, they should always act professionally and ensure consumers were informed as to where they could access these items.

This follows reports that a Victorian pharmacist had been asking customers to shop elsewhere for birth control pills.

National president Grant Kardachi said under the PSA Code of Ethics, a pharmacist could decline provision of care based on conscientious objection, as they could under the Australia Health Practitioner Regulation Agency, but that this right should not prevent a consumer from accessing healthcare they were entitled to.

The PSA supported pharmacists finding appropriate means of communicating their positions, such as in-pharmacy signage that a service would not be provided.

"They should also always identify another pharmacy or source for the medicine or health service."



DISPENSARY CORNER

AURICULAR agony

Taiwan doctors at the Tri-Service General Hospital in Taipei found a woman's severe pain was due to a fruit-fly larva living in her left aural canal eroding sections of the skin lining the canal.

Dr. Cheng-Ping Shih of Tri-Service General Hospital in Taipei told *NBC News* via email, "The larva was still alive in the ear while the patient visited our emergent department," reported the *New England Journal of Medicine* (NEJM).

According to the NEJM article, most animals invading ear canals are flying objects or cockroaches making the larva "relatively unusual."

The larva was safely removed and with antibiotic treatment, within two weeks the ear was healed and the pain gone.