

## Aspen withdrawal

**ASPEN** Nutritionals Australia Pty Ltd is withdrawing its S-26 Original Progress Formula with batch number 40727482A2, following a customer report of finding a lizard in one of the tins.

Gm Stephen Voordouw said Aspen was "very concerned" by the report and that the affected product would be returned to the NSW Food Authority, after which it would be tested as a matter of urgency, but that other S-26 products were not affected.

## Symbion: don't deregulate

**SYMBION** Pty Ltd has said the Australian community would not gain any benefit from deregulating the community pharmacy sector or opening it up to competition from grocery chains.

In its submission to the Competition Policy Review published yesterday, the company said instead it believed crucial services integral to the front line of the Australian health system would be lost if changes were made.

Symbion said ownership restrictions had led to a "dynamic and innovative market in a very competitive landscape", where pharmacies were free to move between groups.

It said current regulations had not resulted in a reduction in innovation or competition.

Symbion said the grocery sector was already encroaching into traditionally pharmacy-only areas, and that medicines represented more than a "simple sale of a product."

"The advice provided by a qualified pharmacist in a professional environment regarding the safe consumption of the medication has a significant impact on the health outcomes of the

patient."

Symbion said with no on-site professional advice at grocery stores, consumers were left to self-diagnose based on price.

"Some pharmaceutical products already available within supermarkets can be potentially dangerous if consumed incorrectly...this risk would likely grow further if the range available within supermarkets was increased."

In its submission to the Review, Woolworths said the lines between retail formats were becoming blurred as "pharmacies have moved from selling only prescription medicine into a wide range of baby care and health and beauty products including baby food and formula."

For more, **CLICK HERE**.

## Immunisation review

**AUSTENDER** is calling for tenders to review and report on the 10th Edition of the Australian Immunisation Handbook and other communication resources to ensure these meet the needs of the range of providers.

**CLICK HERE** for tender details.

## Anaphylaxis response

**RESEARCH** published in *BMJ Open* has said that pharmacists were not fully prepared for anaphylaxis medicines, as they had poor epinephrine autoinjector techniques and rarely discussed anaphylaxis action plans.

It looked at 300 pharmacies with 271 simulated patient visits from April to May 2012.

The research said pharmacists demonstrated reasonable knowledge of, and provided sound advice about, anaphylaxis symptoms and emergency care, but had a mean preparedness score of 2.39 out of a possible five points.

A Pharmaceutical Society of Australia spokesperson involved with the Queensland Pharmacist Immunisation Pilot said the study involved a sample size so it was difficult to extrapolate across the whole pharmacist population.

It did not show that pharmacists did not know how to manage anaphylaxis, they said.

"However, pharmacists who do deliver immunisations have training in management as part of the training modules, including the Australasian Society of Clinical Immunology and Allergy module on anaphylaxis for health pharmacists, and in the practical training."

**CLICK HERE** for the study.

## WHO HIV risk guide

**FIVE** 'key populations' of at-risk people are least likely to have access to HIV prevention, testing and treatment according to a World Health Organisation (WHO) report.

It makes recommendations to reduce new HIV infections and increase access to services, including that men who have sex with men should take antiretroviral medicines to prevent HIV infection as well as using condoms.

**CLICK HERE** to see the guidelines.



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## ASMI conference

**THE** Australian Self Medication Industry (ASMI) annual conference has the theme 'Self Care: A Brighter and Healthier Future' this year.

ASMI executive director Deon Schoombie said one of the organisation's key areas of focus over the last year had been building the evidence-base for self care by commissioning several research projects in "a range of areas that impact consumer access to medicines", the results of which would be presented at the conference.

It will be held on 28 Nov at Sydney Olympic Park.

**CLICK HERE** for more.

## Guild Update

### Extension of QLD immunisation trial

**WE CONGRATULATE** the Queensland branches of the Guild and the PSA on the extension of the State's pharmacist immunisation trial.

The outstanding success of the trial of pharmacist-delivered flu immunisations led last week to the Queensland Government extending the pilot to cover other vaccinations including measles and whooping cough for adults. Predictably there have been some critics of the extension of the pilot, notably from some sections of the medical profession who seem determined to fly in the face of common sense and the best interests of patients.

The trial has already seen more than 10,000 people vaccinated by pharmacists. The number of people who have been vaccinated and the fact that there have been no significant adverse events is testament to the robustness of the processes in place and to the professionalism of pharmacists delivering the vaccinations. This is an idea whose time has come, and we are proud to be part of this sensible expansion of the Australian primary health care system.



The Pharmacy Guild of Australia

## 1,000 strokes per week

**THERE** are almost 1,000 cases of stroke in the country per week, a report commissioned by the National Stroke Foundation (NSF) has said.

'Stroke in Australia, No postcode untouched July 2014', conducted by Deloitte Access Economics, found that while almost 12,000 people will die from a stroke in 2014, two thirds of those who survive will be disabled, adding to the almost 440,000 Australians currently living as stroke survivors.

Assistant Minister for Health Fiona Nash said the good news was that stroke deaths per 100,000 had been falling over the last three decades and said the government made a "considerable" investment to prevent, detect and treat stroke.

The cost to the economy was about \$5b with SA and Tasmania carrying the highest stroke burden per head of population at a rate of 256 and 246 per 100,000 residents, compared with the national average of 217, the report found.

The report called upon the

government to support the community with awareness campaigns to help identify and manage their health risks.

The report was funded by an unrestricted educational grant from Boehringer Ingelheim.

An Australian Institute of Health and Welfare report from 2013 found stroke death rates had declined in Australia by 70% between 1979 and 2010, causing 8,300 deaths in 2010.

More people were surviving a stroke, with an estimated 375,800 surviving in 2009, it said.

**CLICK HERE** for NSF's study.

## Managing risky meds

**'HIGH-RISK** medicines: how to avoid errors', published in *Health News and Evidence*, focuses on 'Practice Points' around managing medicines most associated with the most severe adverse events.

In the latest systematic review, the medicines digoxin, warfarin, aspirin and the drug classes beta blockers, NSAIDs and opioids were among those accounting for the largest percentage of fatal and non-fatal events.

Non-fatal outcomes included disability, life-threatening conditions, hospitalisations and extended hospitalisations.

**CLICK HERE** to view the paper on NPS MedicineWise's site.

## RGH Ebulletin

**THE** RGH Ebulletin this week is about Choosing Wisely, an initiative aimed at promoting conversations between providers and patients by helping patients choose care that is supported by evidence.

To read it, **CLICK HERE**.

## WIN A CAROLINE'S SKINCARE GIFT PACK

This week **Pharmacy Daily** is giving five readers the chance to win a **Caroline's Skincare** pack, containing two tubes of the New Caroline's Cream.

The New Caroline's Cream has been reformulated, making it more effective in offering symptomatic relief for skin conditions such as eczema, nappy rash, sensitive and acne prone skin.

The addition of Aloe Vera, Vitamin A and Colloidal Oatmeal with the existing powerful natural ingredients makes it a formidable formulation. Australian made, it's an absolute must for every bathroom cabinet.

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To win, be first to send in the answer to: [comp@pharmacydaily.com.au](mailto:comp@pharmacydaily.com.au)

Can the New Caroline's Cream be used on the face as well as the body?

Congratulations to yesterday's winner, **Gurjeet Kaur** from **UFS Brunswick West Pharmacy**.



## DISPENSARY CORNER

**ETYMOLOGY**, oh my!

Ever wondered about where the words of your profession come from?

The **Pharmacy Daily** office took to wondering where the word 'pharmacist' comes from and why the 'ch' in 'chemist' is hard.

So strap into the Knowledge Bus for a ride to Learning Town!

According to [Wikipedia](http://Wikipedia), that hallowed repository of reliability, apparently 'pharmacist' comes from the Greek term 'pharmakos', the ritualistic sacrifice or exile of a human scapegoat or victim, which evolved into 'pharmakeus', or 'pharmakon', a term meaning sacrament, remedy, poison, cosmetic, perfume or intoxicant, and from this, 'pharma' was used in the 15th to 17th centuries as a practitioner of general medical advice and services.

The etymology of 'chemist' is apparently a debatable issue, but it is agreed that it derives from 'alchemy', which comes from an Arabic term, derived from the Greek term 'χημία' which itself is derived from the ancient Egyptian name of Egypt, so alchemy was the Egyptian art, according to the Oxford English Dictionary and [Wikipedia](http://Wikipedia).

For those interested, Wiki says the term 'journalism' comes from the French term 'journal', which in turn comes from the Latin 'diurnal', or 'daily' and the first newspaper, the *Acta Diurna* ('Daily Acts'), was put up in the Roman Forum daily.

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