

Friday's Comp winner FRIDAY'S lucky winner of

This week five readers will win a

Harvey: MA Code fail

collaborative consultative approach

taken by Medicines Australia (MA)

WHILE acknowledging the

in developing its 18th Code of

Conduct for the pharmaceutical

industry, academic and industry

watchdog Ken Harvey has said it

"failed to deliver on key principles

In a submission to the Australian

Commission Harvey said the edition

did not deliver on transparency

on individual payments made to

healthcare professionals as well

as on principles such as enabling

consumers to make well informed

healthcare decisions and covering

all transactions and transfers of

value between a company and a

The Code encouraged healthcare

disclosure but allowed them to opt-

related benefits of their interaction

with member companies, he said.

"This is Claytons transparency."

Harvey said the main reason for

this failure was MA's concern about

a lack of level playing field and

for more.

authorising the Code would be to

the public detriment - CLICK HERE

PHARMACY FOR SALE

with a Turnover of \$1.8M.

out while retaining financial and

healthcare professional.

professionals to consent to

agreed to by Medicines Australia

Transparency Working Group."

Competition and Consumer

RosehipPLUS Rosehip Oil was

Natalie Bubica from Priceline

Plunkett's moisturiser pack.

See Page 2 for details.

Pharmacy.



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### Call for CM database

**PSA** national president Grant Kardachi called for a centralised, independent database for complementary medicine evidence at the Blackmores Institute Symposium on Friday.

Kardachi said evidence was the key for pharmacists and under the PSA's code of ethics, the emphasis on evidence based products was a priority; the complementary medicines industry and pharmacy should work together to develop a comprehensive information service that was an all-encompassing resource accessed by health professionals and consumers.

"Such a resource would enable the pharmacist to instantly check on any evidence behind the complementary medicine, any interactions and any other information which may affect the consumer's health outcomes."

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# **Guild on location rules**

PHARMACY Guild of Australia national president George Tambassis has written to members to address concerns raised about pharmacy location rules.

Tambassis said members had voiced frustration with the process of Ministerial Discretion and that it was important that this was used "wisely and sparingly" by Guild members and "not seen as simply a right of appeal".

He said there were concerns in government about the increasing amount of time and cost entailed

### Morning-after pill ok

**EMERGENCY** contraceptives containing levonorgestrel or ulipristal acetate remain suitable for women of all body weights in preventing pregnancy, following a review by the Committee for Medicinal Products for Human Use, which recommended that these could be used, as the benefits outweighed the risks with effectiveness not significantly impaired by excess body weight.

An EU-wide review was prompted by changes to product information for Norlevo in 2013 on the basis of results from two clinical studies, which stated it was less effective in women weighing 75kg and not effective in women weighing 80kg or more (PD 03 Mar).

The Therapeutic Goods Administration said it was aware of the EMA's recommendation and that its review, which was "almost complete", would include consideration of this finding.

in administering Location Rule applications, including Ministerial Discretions.

"It has been brought to my attention that consultants may be openly encouraging the use of the Ministerial Discretion option and I am concerned that any perception that pharmacists are attempting to game the system in any way only serve to undermine the Location Rules and potentially the Government's ongoing support for them."

The Australian Community Pharmacy Authority also had concern about the large number of applications being lodged, including some which were deemed to be vexatious or intended to block other interests, Tambassis said.

"This is a matter which the Authority could be forced to deal with, including through the imposition of an application fee that would discourage disingenuous applications."

In the lead up to the Sixth Agreement, it was likely that aspects of the location rules would be reviewed and assessed and everyone had a responsibility to work under the rules and not engage in behaviour seen to undermine them, he said.

He said the Guild would continue to advocate strongly to ensure the rules were maintained and anomalies or deficiencies addressed, as well as at a Ministerial level regarding the issue of PBS scripts dispensed from unapproved pharmacies.

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Weekly Comment

Welcome to PD's

weekly comment

contributor is Dr

feature

This week's

## Poorer for co-pay increase

THE Grattan Institute has said the proposed increase to the **Pharmaceutical Benefits Scheme** (PBS) co-payment (PD 14 May) is the wrong way to save.

In a submission made to the Senate Standing Committee on Community Affairs regarding the proposed increase and restrictions on access to the safety net, the Institute said there was strong evidence that out of pocket costs for people stopped them getting healthcare, particularly for copayments for medicines.

#### Methadone suspended

EUROPE'S Coordination Group for Mutual Recognition and Decentralised Procedures - Human (CMDh) has endorsed the recommendation to suspend the marketing authorisation of methadone oral (by mouth) solutions containing high molecular weight povidone (K90).

The safety of the combination was following reports of serious adverse events in Norway which led to the suspension of methadone oral solutions containing povidone K90

Oral tablets containing povidone of lower molecular weight (e.g. K25 and would remain on the market.

This would result in savings in the short term but some people missing out on needed care, it said. Out of pocket costs for

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Pharmacy training?

prescription drugs had tripled between 1991 and 2007 and the proposal would see a jump of 15% in out of pocket patient fees, it said. The argument that the increase would stop people from seeking unnecessary care was "dubious" particularly when applied to PBS co-payments, the Institute said. "PBS co-payments apply to

medicine that a doctor has ordered. "Unless the doctor is wrong, the

medicine is necessary."

The Institute suggested other ways to cut PBS spend, including saving \$580m in matching prices for 20 drugs in England.

While this would create challenges for community pharmacy, it would be manageable if pharmacists could provide more services and "if necessary, receive temporary, targeted industry support," it said.

The Pharmacy Guild also made a submission saying increases could discourage patients from taking medication and strategies to address this should be put in place.

Increases in price signals should be accompanied by greater commitment to funding of medication management services, it said - to read more, CLICK HERE.

## DISPENSARY CORNER

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#### MYTHBUSTING Coke.

We have you covered.

Part of the Blackmores Institute Symposium that was a little easier going at 4pm on a Friday was the MythBusting section about Coca Cola.

Sure, it doesn't seem very pharmacy oriented but Coke has all kinds of pharmacy history.

For instance, everyone knows it used to contain Cocaine, right up until 1929.

It was also apparently originally intended as a patent medicine and was invented in the late 1800s by a pharmacist.

However, apparently a Coke and an aspirin won't give you a lift we can't say we've heard that one before.

NOW that's a mouthful.

Yikes! Thankfully, Ashik Gavai shouldn't be needing any more pain relief following the removal of a record 232 teeth in a seven hour operation.

The unfortunate patient had suffered for some 18 months before being brought by his parents to Mumbai's JJ Hospital dental department, according to BBC News.

The surprised doctors described the boy's condition as a very rare "complex composite odontoma where a single gum forms lots of teeth.

"It's a sort of benign tumour." The medical team said the previous record number of teeth extracted in such a situation was 37, the BBC reported.

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are giving five readers the chance to win a Plunketts moisturiser pack.

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& Alternative Medicine at the School of Medicine, University of Tasmania

#### **Complementary Medicines in** Pharmacy

**OVER** two-thirds of Australians regularly use Complementary Medicines (CMs) as part of their healthcare regime. This contributes to an industry turnover in excess of \$1.8 billion spent in Australia on CMs each year. Interestingly, most CMs in Australia are sold from community pharmacies, yet many pharmacists report being uncomfortable when dealing with CM-related enquiries and believe they lack sufficient knowledge and expertise to appropriately advise their customers on CM-related topics. The end result is that many CMs, even those sold within pharmacies, are sold without professional guidance or advice.

Recent Australian research has suggested that CMs and prescription medicines are taken concurrently by a substantial proportion of pharmacy customers equating to a significant risk of deleterious CM-drug interactions. This research also suggested that many pharmacy customers believe that pharmacists should provide safety information about CMs, be conversant with evidence of efficacy, and routinely check for CM-drug interactions. However, most pharmacists are currently inadequately prepared for these tasks.

Due to their level of consumer trust and their prime market position, pharmacists are in a unique positon to provide quidance on OTC CM products and help mitigate potential deleterious CMdrug interactions, but they will be able to do so only if they improve their knowledge and confidence in the field of Complementary Medicine.

#### reviewed by the Pharmacovigilance **Risk Assessment Committee**

from the Norwegian market.

and K30) were successfully excreted