

### Monday 14 May 2018

# Vic intern program

THE Victorian Department of Health has confirmed an extension of the Victorian Hospital Pharmacy Intern Program, including an expansion of the scheme from 80 to 100 placements in 2021.

The Society of Hospital Pharmacists of Australia has welcomed the three-year extension of its partnership with the department, which was announced earlier this month as part of the 2017/18 Vic state budget.

SHPA ceo Kristin Michaels said the move provided more opportunities for the best and brightest young pharmacists.

More than 20 metropolitan and regional hospitals and healthcare services are participating in the program facilitated by the SHPA, which will host an information night on the scheme on Wed 30 May at Collingwood Town Hall.

For more details on the program and its possibilities see <a href="shpa.org.au">shpa.org.au</a>.

THE Australian College of Pharmacy has issued a statement questioning the new training agreement between the

Pharmaceutical Society of Australia and Chemist Warehouse (PD Fri). The deal has seen the PSA

appointed as the pharmacy retail juggernaut's preferred training provider, which college president Georgina Twomey suggests will not be welcomed by many pharmacy proprietors.

"I believe that PSA may have underestimated the depth of feeling pharmacy owners will have towards the PSA/Chemist Warehouse training partnership," Twomey said.

"PSA has always prided itself on its non-partisan support for pharmacists... is this a change in their approach?" she asked.

Twomey said if any owners felt disenfranchised by the PSA/CW

# Sigma defends sleep apnoea program

Sigma

SIGMA Healthcare has responded to concerns raised by sleep specialists about the new Guardian and Amcal pharmacy-based testing services (PD Fri), pointing out that the Australian Pharmacy Sleep Services program has been used in the community pharmacy setting in Australia since 2011.

The company said more than 450

pharmacies already offered the service which had been developed in

alignment with the Professional Practice Standards set down by the Pharmaceutical Society of Australia.

More than two million Australians are estimated to have uncomplicated Obstructive Sleep Apnoea, of whom 80% are undiagnosed, Sigma said.

"As the most accessible health care professionals, pharmacists are ideally placed to screen patients... in so doing pharmacists are playing an important role in re-engaging patients with their GP," the company added.

After an in-pharmacy consultation using clinically validated screening

tools, patients deemed to have a high likelihood of sleep apnoea are offered a home sleep test which is interpreted by a doctor, who is also responsible for treatment recommendations.

"Where the doctor identifies a sleep pathology other than uncomplicated obstructive sleep apnoea the patient is referred to a

sleep physician for a level 1 or level 2 sleep Healthcare test...at no point is CPAP therapy

initiated without the doctor's written recommendation." Sigma said pharmacists collaborated with the patient's other healthcare providers to ensure complete continuity of care.

"Pharmacists are ideally placed to offer ongoing support to their patients...the average Australian visits a community pharmacy 14 times per year and this enables pharmacist to regularly identify and screen patients for obstructive sleep apnoea, review adherence to therapy and refer a patient to their GP or trained sleep physician if any issues arise," the company said.

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# **ACP queries PSA-CW pact**

pact, "they and their staff will always be welcomed as valued members by the College.

"The strength of our clinical and management/business education makes the College the ideal alternative," she added.

She noted that over 40 years the Australian College of Pharmacy had built a strong reputation of excellence in pharmacist education, which was the organisation's main reason for being.

The ACP president also noted the long history the College had with pharmacy owners via the Australian Institute of Pharmacy Management which it absorbed in 2004.

"Our members want to belong to the College because of the quality of our education and the personalised service we provide to them...the College will always place the needs of our members at the very top of our reasons for doing what we do," Twomey added.

"I invite all pharmacists and people working in the pharmaceutical industry to join the College, and experience the benefits of belonging to a truly member focused organisation," she concluded.

# Advertising webinar

THE Therapeutic Goods Administration is conducting a webinar to update stakeholders on the recent therapeutic goods advertising reforms.

The topics covered will include new and enhanced penalties and sanctions that are now available to address advertising non-compliance, as well as the changes scheduled for 01 Jul 2018 with the introduction of the new Therapeutic Goods Advertising Code and complaints system.

The webinar will be held on Wed 23 May for one hour from 11am AEST - CLICK HERE to register.

## Inhalants and sprays

**THE** Therapeutic Goods Administration has posted details of application pathways and data requirements for registration of new generic medicines in the

inhaler and nasal spray class. The guidance covers



prescription metered-dose asthma inhalers and nasal corticosteroids visit tga.gov.au.



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#### VISITORS at a leading

contemporary art museum in Paris didn't just leave their coats in the cloakroom - they left behind all their clothes, but the building's heaters were left on.

The Palais du Tokyo museum opened its doors to nudists for a special visit on Saturday as part of an effort by France's "tiny" nudist community to encourage acceptance of clothes-free activities, after a nudist restaurant and nudist park opened in the French capital.

The occasion was arranged before normal opening hours so as not to clash with clothed visitors, while they examined contemporary works focused on the theme of Discord.



ANIMALS and weapons can be an almost deadly combination.

An Iowa man who, naturally, was wearing his loaded revolver on his belt while rough-housing with his pet bull-labrador, found himself the victim of a well aimed shot into his leg, placing him in hospital with questions to answer to police.

The playful oversized pup, when tossed off the couch where 51 year old Richard Remme was sitting, immediately bounded back up, flicking the safety switch off and stepping on the trigger.

Fortunately the injury only required a hospital day visit, but may trigger a rethink about where to wear his gun - maybe.

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## **Bod wafer trial**

LISTED natural medicines and health products company Bod Australia has settled on the R&D trial process for its sublingual wafer delivery form of medicinal cannabis and will commence manufacture of the stock in coming weeks ahead of Phase I Clinical trials.

The trial will test the safety, tolerability and pharmacokinetics of Bod's proprietary ECs315 extract in a sublingual wafer formulated by specialty pharmaceutical firm and exclusive partner, iX Biopharma.

Bod also expects to shortly receive the first shipment of ECs315 CBD in MCT oil from its Swiss partner Linnea, which is being imported following permission from the Office of Drug Control and will be distributed via the TGA's Special Access Scheme Category B.

The company promised to implement consistent education and support initiatives for all parties involved in the prescription and dispensing of CBD oils, including a professional education program for relevant specialists & pharmacies.

Australian Pharmaceutical Industries has a comprehensive Bod distribution deal (PD 06 Apr).

## MHR data framework

**HEALTH** minister Greg Hunt yesterday announced a framework defining how data collected in the My Health Record system can be used for research and public health purposes - while at the same time preserving privacy and the security of data in the platform.

Hunt said the My Health Record had significant potential, allowing health policy experts to better forecast emerging trends and develop better health strategies to benefit Australian patients.

Key aspects of the final framework include an opt-out provision by individual consumers who have a My Health Record (MHR) to block the use of their data for secondary purposes - allowing them to have a MHR but elect for their information not to be used for research and public health purposes.

Data cannot be used for commercial or non-healthrelated purposes, including direct marketing to consumers, insurance assessments and eligibility for welfare benefits, and in particular insurance companies will not be able to access the information.

Datasets will be managed and released by the Australian Institute of Health and Welfare, which must first consult with stakeholders on planned ethics and approvals processes to ensure protection of individuals' privacy.

Hunt said it was expected that the first release of secondary data would not occur until at least 2020 - more info at health.gov.au.

# Win with SkinB5

This week Pharmacy Daily & SkinB5 are giving away each day the Acne Control Mousse and Moisturiser.

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Weekly Comment

Welcome to PD's weekly comment feature. This week's contribution is from Centaine Snoswell,



Pharmacy and PhD Candidate, University of Queensland.

## Finding the evidence for evidence based practice

**EVIDENCE** based practice is a term that gets used in pharmacy all the time. We are an evidencebased profession.

However it can be difficult to stay on top of the most current research or find relevant and reliable research when you need to answer a specific question. Here's a quick recap on evidence hierarchy and what to look for with regard to reliability.

A systematic review is considered to be the highest form of reliable evidence in the NHMRC evidence hierarchy.

When looking for specific information I'd suggest starting your searches by coupling your question topic with the term 'systematic review'.

Randomised controlled trials are the next most reliable, followed then by other study types without randomisation or blinding, and ending with case studies.

It is important to critically appraise while you read anything you find. Think about how the findings apply to your specific patient.

Do they align with what you expected? Look at how many participants were in the study and whether the findings were statistically significant.

Statistical significance does not ensure the findings apply to your patient, but it does ensure that the results were not the result of random chance during the research trial.

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