Pharmacy Daily
Tue 8th December 2020



## Today's issue of *PD*

***Pharmacy Daily*** today features two pages of news, plus a full page from **Essity**, and the **December MIMS monthly update**.

## AHPRA report

**THE** Australian Health Practitioner Regulation Agency (AHPRA) has released its *Cost of Accreditation in the National Registration and Accreditation Scheme: 2020 Supplementary* report.

The report includes data from the 2016/17 and 2017/18 financial years.

**CLICK HERE** to see the report.

# HMR eligibility criteria change key

**POLICY-MAKERS** are being urged to look at options to improve access to home medicines reviews (HMR) for patients taking multiple medications, by a group of leading Australian pharmacists and health economists.

In an article published in the *Journal of the Australian Healthcare and Hospitals Association*, the authors reported that the adjusted rate of polypharmacy in Australia was 1,389 per 100,000, with the authors warning there "may be a disconnect between the current level of service provision and population health needs".

The authors including, Pharmaceutical Society of Australia National President, Professor Chris Freeman, Queensland University of Technology Faculty of Health Head of School, Professor Lisa Nissen, and Griffith University Menzies Health Institute Co-Lead, Amanda Wheeler, noted polypharmacy was a risk factor of medication related problems.

"Given that polypharmacy is a risk factor for medication-related problems, and that medication review is one of the few targeted strategies currently available to address medication-related problems in the population, service provision may be inadequate," the authors said.

"Policy options to improve service provision could include interventions to increase workforce productivity and relaxing the current eligibility criteria for review, especially in rural and remote areas."

The authors noted the paper provided a representative population-based rate of polypharmacy in Australia, using a needs-based analysis of service provision and workforce adequacy to provide HMR services.

## Health sector needs to adapt to climate

**AUSTRALIA'S** health sector needs to adapt to the reality of climate change, a report from the Grattan Institute says.

The authors said plans and protocols to minimise harm caused by climate disasters were urgently needed.

"Millions of Australians, including in Sydney, Melbourne, and Canberra, were affected by bushfire smoke," they said.

"The smoke alone caused more than 400 additional deaths and sent thousands of people to hospital emergency departments with respiratory and heart problems.

"Although we are too late to prevent climate change from harming our health, we can act now to prevent greater damage.

"The health sector should set an example by cutting its greenhouse gas emissions to help minimise further damage.

"State and Territory public health sectors should have net-zero emissions plans in place by the end of 2023.

"For health departments, hospitals, and local healthcare networks, responding to climate change is not an optional extra, it is core business.

"Climate change is damaging Australians' health and wellbeing right now, and things are only going to get worse.

"Unfortunately, the black summer of 2019-20 won't be a one-off.

"In 2020, Australia listened to the science and acted on the health advice to prevent some of the catastrophic health consequences of COVID-19.

"Now we must do it again."

## Bushfire fact sheets released by DoH

**THE** Commonwealth Department of Health has released two bushfire fact sheets to help people stay safe from smoke, based on the latest evidence.

One of the fact sheets covers general information, with the other specifically designed for vulnerable groups who may have an increased risk due to pre-existing conditions.

**CLICK HERE** for more.

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## Dispensary Corner

**PHARMACIES** selling Sex in the City star, Sarah Jessica Parker's 'Lovely' perfume may need to provide a warning after the fragrance was linked to a kangaroo attack on the outskirts of Melbourne.

Jogger, Tracy Noonan, told *3AW's Ross and Russel* show that she was "stalked and attacked" by the roo on Sat, with a local ranger suggesting her decision to spray some of the perfume before going out in the morning may have triggered the animal.

Noonan said she was used to seeing the marsupials while out running, but usually they kept their distance.

However, her attacker jumped a number of fences to get closer to her before thumping her in the back and knocking her to the ground.

"I put my head back down because I thought 'Oh my goodness, this is now going to claw me to death'," Noonan said.

"It all sort of happened so fast.

"It was something out of a horror movie. It just kept coming and coming.

"I thought, 'Oh my God, this kangaroo is going to kill me'."

# Telepharmacy no-brainer

**IMPLEMENTING** legislation to allow telepharmacy to become a permanent feature of healthcare is a "no-brainer" South Australian MP, Connie Bonaros, believes.

Speaking in the State Legislative Council, the SA-Best MP, backed the Health Practitioner Regulation National Law (SA) (Telepharmacy) Amendment Bill, which will allow the Pharmacy Regulation Authority SA (PRASA) to authorise the remote supervision of pharmacies by pharmacists in the State.

Bonaros said the Bill did not appear to create any loopholes of new business models to operate entirely by remote means, and would benefit remote patients.

"Telepharmacy services will only be authorised in certain circumstances, namely, when a person would not otherwise be able to access pharmacy services in a timely and direct manner and when all reasonable steps have been taken for code of conduct compliance by the provider," she said.

"Again, as 2020 has proven, the delivery of pharmacy care via telecommunication has proven to be an invaluable healthcare tool.

"Remote consultations were already gaining traction in the pre-COVID era but...I think it is fair to say that the events of this year have cemented the future of these practices as part of the healthcare sphere.

"It is a practical solution to the tyranny of distance, immobility and disease control.

"It means pharmacists can see more patients, work more flexible hours and continue to operate extended business hours without requiring the physical attendance of staff.

"In my view, the Bill is a no-brainer."

Bonaros also backed pharmacists to play a greater role, saying they were "perfectly positioned to identify mental health risk factors, especially for the most isolated and vulnerable".

## Win with Plunkett's

Everyday this week Pharmacy Daily and Plunkett's are giving away a Plunkett's 99% Pure Certified Organic Aloe Vera set worth RRP $51.80 including their 99% Pure Aloe Vera gel and 99% Pure Aloe Vera spray.

Aloe Barbadensis 'natures medicine plant' is renowned for its soothing, cooling and hydrating properties. Australian made, Plunkett's 99% Pure Aloe Vera is fragrance, colour and alcohol free and contains pure certified organic Aloe Vera extracted from Aloe Barbadensis Leaf - rich in vitamins, minerals, amino acids and anti-oxidants to soothe, cool and restore dry, damaged skin. To learn more click **HERE.**


**Q: Does Plunkett's 99% Pure Aloe Vera contain any artificial colour?**

To win be the first to send the correct answer to comp@pharmacydaily.com.au

## Guild Update

### Buying/selling a pharmacy guide

**BUYING** a pharmacy is a major investment and the need for careful and considered steps in preparing to enter pharmacy ownership is critical to the long-term success of such a venture.

Likewise, selling a pharmacy needs careful planning and thought to ensure the best outcomes.

To help pharmacy owners and prospective pharmacy owners the Pharmacy Guild has updated its invaluable Buying and Selling a Pharmacy Guide.

This Guide outlines a seven-step guide on the process for pharmacists who may be buying or selling their pharmacy, from finding the right pharmacy to purchase, through to considerations such as pharmacy management, financial and legals.

The Guide provides advice on practically every aspect of establishing and running a pharmacy business from market research, ownership structures and small business management, right through to information and business technology systems, appointing an agent and financial and legal considerations.

The guide is a free resource for Guild members and can be purchased by non-members. Click here to access.

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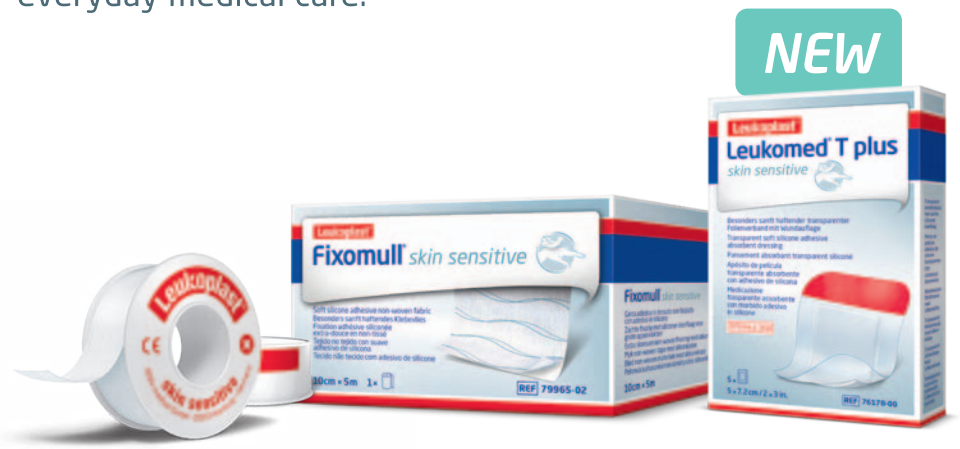


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MIMS Monthly Update

December 2020

## New Products

- **Beclometasone dipropionate/formoterol fumarate dihydrate (Fostair)** combines beclomethasone dipropionate, a glucocorticoid anti-inflammatory, and formoterol, a selective $\beta_2$-adrenergic agonist. Fostair is indicated in adults (18 years and older) in the regular treatment of asthma where use of a combination product (inhaled corticosteroid and long-acting $\beta_2$-agonist) is appropriate: patients not adequately controlled with inhaled corticosteroids and 'as needed' inhaled rapid-acting $\beta_2$-agonist, or patients already adequately controlled on both inhaled corticosteroid and long-acting $\beta_2$-agonist. It is also indicated for the symptomatic treatment of adults with severe COPD ($FEV_1$ < 50% predicted normal) with a history of repeated exacerbations, who have significant symptoms despite regular therapy with long-acting bronchodilators. Fostair metered dose inhaler with dose counter contains beclomethasone dipropionate 100 mcg/dose and formoterol fumarate dihydrate 6 mcg/dose (equivalent to a delivered dose of beclomethasone dipropionate 84.6 mcg and formoterol fumarate dihydrate 5 mcg), and is available in a pack size of 120 doses.

- **Defibrotide (Defitelio)** is an oligonucleotide mixture with demonstrated antithrombotic, fibrinolytic, anti-adhesive and anti-inflammatory actions. It primarily acts through reducing excessive endothelial cell activation (endothelial dysfunction), thereby modulating endothelial homeostasis and maintaining the thrombo-fibrinolytic balance. However, the exact mechanism of action of defibrotide is not fully elucidated. Defitelio is indicated for the treatment of severe hepatic veno-occlusive disease (also known as sinusoidal obstruction syndrome), with haematopoietic stem-cell transplantation (HSCT) therapy in adults, adolescents, children and infants (1 month of age and above). Defitelio is contraindicated with the concomitant use of thrombolytic therapy, e.g. tissue plasminogen activator. Defitelio concentrated solution for infusion contains defibrotide 200 mg/2.5 mL per vial and is available in a pack size of 10.

- **Selexipag (Uptravi)** is an oral, selective, prostacyclin (IP) receptor agonist, and is structurally and pharmacologically distinct from prostacyclin and its analogues. The vasculo-protective effects of prostacyclin (PGI2) are mediated by the IP receptor. Decreased expression of IP receptors and synthesis of prostacyclin contribute to the pathophysiology of pulmonary arterial hypertension (PAH). Stimulation of the IP receptor by selexipag and the active metabolite leads to vasodilatory, anti-proliferative and anti-fibrotic effects. Uptravi is indicated for the treatment of idiopathic or heritable PAH, or PAH associated with connective tissue disease, congenital heart disease with repaired shunts, or drugs and toxins in patients with WHO functional class II, III or IV symptoms. Uptravi is contraindicated in patients with severe hepatic impairment (Child-Pugh class C); severe coronary heart disease or unstable angina; myocardial infarction within the last 6 months; decompensated cardiac failure not under close medical supervision; severe arrhythmias; cerebrovascular events, e.g. transient ischaemic attack, stroke, within the last 3 months; congenital or acquired valvular defects with clinically relevant myocardial function disorders not related to pulmonary hypertension; and with concomitant strong CYP2C8 inhibitors, e.g. gemfibrozil. Uptravi tablets contain selexipag 200 mcg (available in packs of 10, 60 and 140), 400, 600, 800, 1000, 1200, 1400 or 1600 mcg (available in packs of 60).

- **Tafamidis (Vyndamax)** is a selective stabiliser of transthyretin (TTR). It binds with negative cooperativity to the two thyroxine binding sites on the native tetrameric form of TTR preventing dissociation into monomers, the rate-limiting step in the amyloidogenic process. Vyndamax is indicated for the treatment of adults with wild-type or hereditary transthyretin amyloid cardiomyopathy (ATTR-CM). Vyndamax capsules contain micronised tafamidis 61 mg and are available in a pack size of 30.

## New Indications

- **Apalutamide (Erlyand**) is now indicated for the treatment of metastatic castration-sensitive prostate cancer.

- **Dolutegravir (as sodium)/lamivudine (Dovato 50/300)** is now indicated for the treatment of HIV-1 infection in adults and adolescents (from 12 years of age weighing at least 40 kg) to replace current antiretroviral regimen in those who are virologically suppressed (HIV-1 RNA < 50 copies/mL) on a stable antiretroviral regimen with no history of treatment failure and with no known or suspected resistance to the integrase inhibitor class or lamivudine.

- **Pembrolizumab (rch) (Keytruda)**, as monotherapy or in combination with platinum and 5-fluorouracil chemotherapy, is now indicated for the first-line treatment of patients with metastatic or unresectable recurrent head and neck squamous cell carcinoma (HNSCC), and whose tumours express PD-L1 [Combined Positive Score (CPS) ≥ 1] as determined by a validated test. Keytruda is also indicated as monotherapy for the treatment of patients with metastatic or unresectable recurrent HNSCC with disease progression on or after platinum-containing chemotherapy and whose tumours express PD-L1 [CPS ≥ 1] as determined by a validated test.

- **Rifampicin (Rimycin)** is now indicated for the treatment of Mycobacterium ulcerans infections (Buruli ulcer). Rimycin must be used in combination with another anti-Mycobacterium ulcerans antibiotic.

## New Contraindications

- **Alemtuzumab (rch) (Lemtrada)** is now contraindicated in patients with severe active infection; uncontrolled hypertension; history of arterial dissection of the cervicocephalic arteries, stroke, angina pectoris or myocardial infarction; or with known coagulopathy or on concomitant anticoagulant therapy.

- **Dolutegravir (as sodium)/lamivudine (Dovato 50/300)** must not be administered concurrently with medicinal products with narrow therapeutic windows that are substrates of organic cation transporter 2 (OCT2), including fampridine.

- **Ibuprofen/paracetamol (Mersynofen)** is now contraindicated in patients with severe dehydration (caused by vomiting, diarrhoea or insufficient fluid intake).
- **Orlistat (Xenical)** is now contraindicated during pregnancy and breastfeeding.
- **Teriflunomide (Aubagio)** is now contraindicated in patients who have or have had a drug reaction with eosinophilia and systemic symptoms.
- **Voriconazole (Vfend)** is now contraindicated with concomitant ivabradine.

*This list is a summary of only some of the changes that have occurred over the last month.*
*Before prescribing, always refer to the full product information.*