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## Today's issue of PD

Pharmacy Daily today has three pages of news plus the latest MIMS update.

## TGA adopts Int'l guidelines

THE Therapeutic Goods Administration (TGA) has announced it has adopted international scientific guidelines covering prescription, over-the-counter, complementary and some listed medicines.

The guidelines will ensure Australia is closely aligned to European Union guidelines.

They will provide guidance to medication sponsors to assist them to meet the legislative requirements and any deviation from a guideline relevant to an application to register or vary the registration of a medicine must be justified.

# TGA report highlights meds shortages

DETAILS highlighted in the Therapeutic Goods Administration's first annual medicines shortages report since mandatory reporting was introduced last year confirm what pharmacists have been saying for a long time, Pharmacy Guild of Australia Victorian Branch President, Anthony Tassone says.

The report revealed 1,797 new shortages were reported in 2019, up 290% on 2018, with 1,415 products affected.

Manufacturing issues were the primary cause of shortages (47%), while commercial changes accounted for 18% and an unexpected increase in demand was the reason behind 13% of shortages.

Of the products reported in 2019, 9% were classified as being of critical impact to patients.

"The findings of the TGA shortages report confirms what community pharmacists have been saying for a long while, things are not improving when it comes to out of stocks and if anything it's getting worse," he said.



"Whilst the mandatory reporting regime for manufacturers of critical shortages was a step in the right direction, it was just a first step.

"We urgently need the medicine shortage working group and key stakeholders to look at what can be done to address this worsening situation.

"Questions such as: should there be an ongoing supply guarantee for medications to be able to have a PBS listing? And, what are the unintended consequences of

ongoing price reductions with PBS reform? Is Australia no longer a viable market compared to other overseas countries?

"Pharmacists can't be expected to continue to pull the proverbial 'rabbit out of the hat' to ensure patients have continuity of supply in these unprecedented challenging times.

"If we don't recognise there is a major problem we can't expect to be able to find a solution and it will be patients that miss out."

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Reference: 1. Data held on file at Ego Pharmaceuticals Pty Ltd.

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## Pharmacists key to COVID-19 strategy

STATE, Territory and Federal Governments cannot afford to sideline pharmacists, as part of their plans to contain and manage the threat of the novel coronavirus (COVID-19), Pharmacy Guild of Australia National Vice President, Trent Twomey believes.

Speaking to the *Sydney Morning Herald* and *The Age*, Twomey said emergency measures should be implemented to enable pharmacists to provide common Schedule 4 medicines without a prescription, to alleviate pressure on GPs.

"The last thing you want to do in a pandemic is create a cluster where sick people congregate with people with the virus," he said.

"Frankly State and Federal Governments can't afford not to utilise the pharmacy workforce."

Twomey said taking advantage of the profession's geographic reach and 100,000-strong workforce made up of 35,000 pharmacists and 65,000 pharmacy assistants, "is something we should be doing anyway", noting Australia was an outlier in terms of the pharmacists' limited scope of practice compared to their peers in other developed countries.

"All of the evidence says that



community pharmacists are the most accessible component of the primary healthcare system in Australia, with 90% of Australians living within 2km of a pharmacy - and over half trade extended hours such as overnight and on weekends," he said.

Victorian Health Minister, Jenny Mikakos, has voiced support for having pharmacists actively involved in managing the threat posed by the virus.

"[Pharmacists] play a vital role in our health system and their involvement in our response to COVID-19 is being considered as

part of our broader contingency planning," she said.

Despite support for pharmacists playing a greater role in the health system, Australian Medical Association President, Tony Bartone, suggested the Guild was attempting to take advantage of a public health crisis, to enable its members boost their revenue.

"While the medical profession is getting on with trying to deal with the effects and help the Australian public to prepare for the oncoming epidemic, I'm really troubled by the Guild trying to expand the scope of their business," he said.

## NSW Health fake script warning

PHARMACISTS in NSW are being urged to contact the police if they receive prescriptions purportedly from two nonexistent medical centres.

In a message distributed yesterday, the NSW Ministry of Health said it had become aware of a number of websites that were providing forged prescriptions for Schedule 8 (S8) medications.

The notice warned the sites feature the names and contact details of the prescribers whose names appear on the forged scripts.

However, the Pharmaceutical Regulation Unit confirmed the My Choice Medical Centre at Suite 103, 135 Macquarie Street, Sydney, and the Wellington Road Medical Practice, Level 1/46 Wellington Road, South Granville, did not exist.

Pharmacists were also warned not to dispense scripts where the contact numbers 02 8006 5051 or 02 8091 4544 were listed.



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## Dispensary Corner

WITH shopkeepers around the globe, rationing toilet paper as the public braces for repeats and severe bowel movements linked to the novel coronavirus (COVID-19), one Irish pharmacist has taken to the local airwaves to dispel some myths.

During a question and answer session on radio station, Midlands 103, Eamonn Brady, explained that while garlic is a healthy food to eat, COVID-19 is not a vampire, and there was no evidence that it would ward off the virus.

With good hygiene constantly being promoted as a key strategy to minimise risk of infection, Brady was asked if hand dryers were effective in killing off the virus.

While the Dyson Airblade dryers are pretty impressive, the pharmacist patiently explained that no matter how strong the air pressure coming out of the machine was, it would offer no protection, adding that people should frequently wash their hands with soap and water, or use an alcohol-based hand rub.

The next question posed to the pharmacist was, "can spraying alcohol or chlorine all over your body kill the new coronavirus?"

At this point we have no idea whether or not Brady was put his head in his hands and wept for humanity, as the transcription simply notes he said "NO".

A similar response was provided when asked if UV lamps could be used to kill the virus.

## Customer experience prime at TWC

PHARMACISTS within the TerryWhite Chemmart (TWC) network are being urged to build strong customer connections, at the group's annual Masterclass event in Melbourne.

Speaking at the event yesterday, TWC CEO, Duncan Phillips, stressed the importance of delivering a positive customer experience.

"The retail landscape is changing at an incredible pace and we have seen many examples this year of retailers without strong customer connections suffering," he said.

"Our annual Masterclass event is critical to empowering our pharmacists to not only be better health professionals but to build stronger and more lasting connections with their customers.

"In this new decade, personal delivery is key."

Phillips added that pharmacists needed to be prepared to provide their patients with a positive experience with the arrival of e-scripts later this year, and the growth of the online prescription marketplace.



"We want to see our pharmacies continue to lead in the areas of immunisation, pharmacist accessibility, medication safety and in our destination categories such as pain and weight but we are also focussed on ensuring the customer experience is the best it can be.

"We are doing this by providing convenience through such things as our health app, a strong focus on DAAs, home delivery and click & collect.



"Our network of pharmacists are 100% committed to strengthening the ties in their local communities."

**Pictured**, TWC CEO, Duncan Phillips, addressing delegates at the TWC Masterclass in Melbourne.

**Inset**, delegates, Mary Pernes, Julia Hlevnjak, Dana Abu-Geras, Tim Siv and Kamal Zadeh.

## Rowlands plans to cut opening hours

BRITISH pharmacy group, Rowlands Pharmacy, is considering reducing opening hours across its network as a cost saving measure.

The group's parent company, Phoenix Medical Supplies, said 75% of its stores were currently operating more than the 40 hours a week they were contractually required to noting it could "no longer sustain" the costs.

The Pharmaceutical Journal reported that Rowlands had entered talks with branch staff to



cut trading hours by 10 hours per store each week.

"Government funding for community pharmacy in England has been capped over the next five years which, in real terms, taking account of rising costs and inflation, means a reduction in funding," it said.,

## Pfizer names new ANZ MD

PFIZER Australia and New Zealand has named Anne Harris as its new Managing Director.

In a statement released yesterday, the company said Harris would assume the position immediately.

Harris brings 25 years' experience to the role, having most recently held the title of Commercial Lead for Pfizer's Vaccines Business Unit for Developed Asia, over the last three years.

## New Products

- **Brigatinib (Alunbrig)** is a tyrosine kinase inhibitor of multiple kinases including anaplastic lymphoma kinase (ALK), ROS1 and insulin-like growth factor 1 receptor (IGF-1R), with most activity against ALK. Brigatinib inhibited autophosphorylation of ALK and ALK-mediated phosphorylation of the downstream signaling protein STAT3 in *in vitro* and *in vivo* assays. Alunbrig is indicated for the treatment of adults with ALK-positive advanced non-small cell lung cancer (NSCLC) previously treated with crizotinib. Alunbrig tablets contain 30 mg, 90 mg or 180 mg brigatinib and are available in a pack size of 28, and as an initiation pack containing 7 x 90 mg tablets and 21 x 180 mg tablets.
- **Brolucizumab (rbe) (Beovu)** binds with picomolar affinity to vascular endothelial growth factor (VEGF)-A isoforms (e.g. VEGF110, VEGF121, and VEGF165), thereby preventing binding of VEGF-A to its receptors VEGFR-1 and VEGFR-2. This suppresses endothelial cell proliferation, thereby reducing pathological neovascularisation and decreasing vascular permeability. Beovu is indicated for the treatment of neovascular (wet) age-related macular degeneration. Beovu is contraindicated in patients with active or suspected ocular or periocular infections, or with active intraocular inflammation. Beovu solution for injection contains 19.8 mg/0.165 mL ( $\equiv$  120 mg/mL) brolucizumab and is available in a pack size of 1 pre-filled syringe.
- **Inactivated quadrivalent influenza vaccine (surface antigen), adjuvanted (Fluad Quad)** contains 15 mcg haemagglutinin (HA) per dose of each of four influenza virus surface antigens representative of the influenza virus types expected to circulate in the Southern Hemisphere winter according to WHO recommendations for the 2020 season: A/Brisbane/02/2018 (H1N1)pdm09-like virus (A/Brisbane/02/2018 IVR-190), A/South Australia/34/2019 (H3N2)-like virus (A/South Australia/34/2019 IVR-197), B/Washington/02/2019-like virus (B/Victoria/705/2018 BVR-11), B/Phuket/3073/2013-like virus (B/Phuket/3073/2013 BVR-1B). Fluad Quad is indicated for the active immunisation against influenza in persons 65 years of age and older. It is contraindicated in individuals with known severe allergic reactions to any component of the vaccine, except egg proteins, or to a previous dose of any influenza vaccine. Fluad Quad suspension for injection contains 60 mcg HA/0.5 mL and is available in a pack size of 10 needle-free prefilled syringes.
- **Upadacitinib (Rinvoq)** is a selective and reversible inhibitor of Janus kinase (JAK)-1. Janus kinases are intracellular enzymes that transmit cytokine or growth factor signals involved in a broad range of cellular processes including inflammatory responses, haematopoiesis and immune surveillance. JAK1 is important in inflammatory cytokine signals. Rinvoq is indicated for the treatment of moderate to severe active rheumatoid arthritis in adults who have responded inadequately to, or who are intolerant to, one or more disease-modifying anti-rheumatic drugs (DMARDs). Rinvoq may be used as monotherapy or in combination with methotrexate or other conventional synthetic DMARDs. Rinvoq must not be used in combination with biologic DMARDs. Rinvoq modified release tablets contain 15 mg upadacitinib and is available in a pack size of 28.

## New Indications

- **Fentanyl (Durogesic)** is now indicated for the management of pain associated with cancer, palliative care, and other conditions in patients where: other treatment options have failed, are contraindicated, not tolerated or are otherwise inappropriate to provide sufficient management of pain, and the pain is opioid-responsive and severe enough to require daily, continuous, long term opioid treatment. Durogesic is not for use in opioid-naïve patients.
- **Rocuronium bromide (Esmeron)** is now indicated as an adjunct to general anaesthesia to facilitate endotracheal intubation during routine induction, to provide muscle relaxation and to facilitate mechanical ventilation in paediatric patients from term newborn infants to adolescents.

## New Contraindications

- **Fentanyl (Durogesic)** is now contraindicated in patients with acute respiratory disease and respiratory depression.
- **Morphine sulfate pentahydrate (Kapanol)** is now contraindicated in patients with hypersensitivity to opioid analgesics; obstructive airway diseases; cor pulmonale; acute alcoholism or delirium tremens; convulsive disorders, severe CNS depression; increased cerebrospinal or intracranial pressure; head injury; brain tumor; suspected surgical abdomen; severe liver disease; incipient hepatic encephalopathy; severe renal dysfunction; and history of alcohol or substance abuse.
- **Somatropin (rbe) (Omnitrope)** is now contraindicated in patients with extensive burns; and with Prader-Willi syndrome who are severely obese or have severe respiratory impairment.

*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.*