Pharmacy Daily
Fri 4th February 2022

Today's issue of *PD*

Pharmacy Daily today features two pages of news, plus full pages from:

- **Nova Pharmaceuticals**
- **MIMS February Update**

Teething relief

EASE teething pain with Nova Pharmaceuticals' sugar and alcohol-free Bubs & Co gel.

See **page three** for more.

TGA warning

THE Therapeutic Goods Administration (TGA) has added a new warning about the nephrotoxic potential of clindamycin capsules and injections to the Australian Product Information.

The issue was not a previously known adverse event associated with the medication.

Give pharmacists MBS funding: PSA

PHARMACISTS should be given access to Medicare Benefits Schedule (MBS) service payments to ensure pharmacy-based immunisation services remain viable, the Pharmaceutical Society of Australia (PSA) believes.

In its pre-Budget submission, the PBS has urged Treasurer, Josh Frydenberg, to launch an MBS payment to pharmacists for administering National Immunisation Program (NIP) vaccinations, warning that current rates paid to pharmacies for providing COVID-19 shots are insufficient.

"Currently, pharmacists receive far lower rates of remuneration for assessing the suitability [of patients] and administering COVID-19 vaccines than other immunisation providers such as GPs," the PSA said.

"These low rates of remuneration, particularly in relation to paediatric vaccinations, make vaccination services unviable for many community pharmacies.

"Introducing a single MBS service payment to pharmacists for assessing suitability and administering vaccinations funded through the NIP will ensure that vaccines such as COVID-19 and influenza remain viable through community pharmacy."

The PSA also called for pharmacists to be paid for their participation in multidisciplinary care conferences through the MBS.

"Despite playing a key role in medicine safety, pharmacists remain the only allied health providers who are not remunerated for their participation in case conferences," the PSA noted.

"Ensuring pharmacists' eligibility for case conferencing payments is crucial to connect GPs, pharmacists and the broader multidisciplinary team."

PSA National President, Associate Professor Chris Freeman, added that Federal Government funding

is needed to embed pharmacists in residential aged care facilities, to improve medication management and reduce medication-related harm.

"This will ensure that aged care facilities can consistently deliver a patient-centred, multidisciplinary service aimed at identifying, resolving and preventing medication-related problems such as polypharmacy and chemical restraint," he said.

"Every day that a pharmacist is not working alongside aged care staff in caring for older Australians, is a day residents are in danger from medication harm."

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Cut pharmacy: RACGP

MOVING away from the community pharmacy model of dispensing to a centralised supplier could cut healthcare costs, the Royal Australian College of General Practitioners (RACGP) believes.

In its submission to the Review of the National Medicines Policy (NMP), the RACGP noted "there are alternative models to community pharmacy dispensing that offer efficiencies and reduced costs to the consumer and the broader health system that should be considered", to improve access to medicines.

"For example, a central supplier would take on the role of drug storage and supply of drugs for non-urgent illness medication, rather than pharmacies as is now the case, and medication delivery would utilise IT and transport systems taking the drugs straight to the patient's door," the RACGP said.

"In such models, computer decision support, quality use of medicine (QUM) with practice-based pharmacist support could be effective mechanisms for patient education and safety monitoring."

The College also called for the NMP to support the removal of the Authority Prescription System,

saying the move would "increase efficiency and productivity without any impact on safety".

While the RACGP has recommended shifting away from the community pharmacy network for dispensing medicines, it has called on the NMP to advocate for investment in GP-pharmacist services to support quality use of medicines.

"As a key component of a multidisciplinary team, practice-based pharmacists allow general practices to increase their capacity to offer medication management and education services to patients. Increasing capacity for these services will reduce fragmentation of care and increase medication safety," the RACGP said.

Text reminders a vax booster

DATA from a large-scale study of 689,693 Walmart pharmacy customers in the US shows that text messages prompting patients to get influenza vaccination, boosts uptake.

The researchers tested 22 different SMS reminders, and found that they increased vaccination rates by an average of 2 percentage points.

The authors found that the most successful prompts advised patients that a vaccine was "waiting" for them.

"In terms of message content, communicating that a vaccine is 'waiting for you' may increase the perceived value of vaccines, in accord with research on the endowment effect showing that we value things more if we feel they already belong to us," the authors said.

The study was published in the *Proceedings of the National Academy of Sciences of the United States of America.*

Dispensary Corner

CANBERRANS are used to seeing flocks of protesters arrive in the city to air their grievances over a range of issues.

However, recent anti-vaccination rallies have been compared to "an alien visitation from another world of alternative unreality", by *Canberra Times* reporter, Steve Evans.

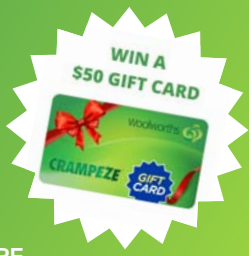
With 98.6% of eligible Canberrans having received two doses of COVID-19 vaccines, Evans said the protest by interstate antivaxxers, showed "contempt for the citizens who have done the right thing".

He added that Canberra "is a city of science... so to have this bunch of science-denying ignoramuses in our midst feels offensive.. the sooner they take-off and return to their own planets, the better."

Win with Crampeze

Crampeze and Pharmacy Daily are this week giving away a $50 Woolworths gift card each day.

Crampeze is an effective multi-combination solution vs. magnesium alone for cramp relief. For chronic cramp sufferers, ideal for long term use. Contains Viburnum Opulus (Cramp Bark), an antispasmodic traditionally used in western herbal medicine to help relieve muscle cramps, mild muscle spasms & twitches.



To learn more, CLICK HERE

True or false – Crampeze Night Cramps provides more than just a magnesium supplementation.

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

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AUST R 339845

New Products

- **Dinutuximab beta (Qarziba)** is a chimeric monoclonal IgG1 antibody that is specifically directed against the carbohydrate moiety of disialoganglioside 2 (GD2), which is overexpressed on neuroblastoma cells. Dinutuximab beta has been shown *in vitro* to bind to neuroblastoma cell lines known to express GD2 and to induce both complement dependent cytotoxicity (CDC) and antibody dependent cell-mediated cytotoxicity (ADCC). In the presence of human effector cells, including peripheral blood mononuclear cells from normal human donors, dinutuximab beta was found to mediate the lysis of human neuroblastoma and melanoma cell lines expressing GD2 in a dose dependent manner. Additionally, *in vivo* studies demonstrated that dinutuximab beta could suppress liver metastasis in a syngeneic liver metastasis mouse model. *Qarziba is indicated for the treatment of high-risk neuroblastoma in patients who have previously received induction chemotherapy and achieved at least a partial response. It is contraindicated in acute grade 3 or 4, or extensive chronic graft-versus-host disease (GvHD).* Qarziba solution for infusion contains dinutuximab beta 20 mg/4.5 mL and is available in a pack size of 1 vial.

- **Larotrectinib (Vitrakvi)** is an orally-bioavailable, adenosine triphosphate (ATP)-competitive, potent and highly selective TRK kinase inhibitor that was rationally designed to avoid activity with off-target kinase. The target for larotrectinib is the TRK family of proteins inclusive of TRKA, TRKB, and TRKC that are encoded by NTRK1, NTRK2 and NTRK3 genes, respectively. Larotrectinib demonstrated potent inhibition of TRK proteins and inhibition of proliferation of tumor cells in a concentration-dependent manner. In TRK fusion-driven mouse xenograft models larotrectinib treatment induced a significant reduction of tumor growth. *Vitrakvi has provisional approval in Australia for the treatment of adult and paediatric patients with locally advanced or metastatic solid tumours that: have a neurotrophic tyrosine receptor kinase (NTRK) gene fusion without a known acquired resistance mutation; are metastatic or where surgical resection is likely to result in severe morbidity; and have either progressed following treatment or who have no satisfactory alternative therapy*. Vitrakvi capsules contain larotrectinib 25 mg or 100 mg and are available in pack sizes of 56. Vitrakvi oral solution contains larotrectinib 20 mg/mL and is available in a pack size of 100 mL.

- **Onasemnogene abeparvovec (Zolgensma)** is a gene therapy medicinal product that expresses the human survival motor neuron (SMN) protein. It is a non-replicating recombinant adeno-associated vector serotype 9 (AAV9) containing the cDNA of the human SMN gene under the control of the cytomegalovirus enhancer/chicken-β-actin-hybrid promoter. SMA is caused by a bi-allelic mutation in the SMN1 gene, which results in insufficient SMN protein expression. Onasemnogene abeparvovec utilises the AAV9 capsid to deliver a stable fully functional copy of the transgene encoding the human survival motor gene (SMN1) protein. The SMN1 gene present in onasemnogene abeparvovec is designed to reside as episomal DNA in the nucleus of transduced cells and is expected to be stably expressed for an extended period of time in post-mitotic cells. *Zolgensma is indicated for the treatment of paediatric patients less than 9 months of age with symptomatic or pre-symptomatic spinal muscular atrophy with bi-allelic mutations in the survival motor neuron 1 (SMN1) gene and 1 to 3 copies of the SMN2 gene*. Zolgensma injection for intravenous infusion contains onasemnogene abeparvovec 20 trillion vector genomes/mL and is available in 5.5 or 8.3 mL volumes in packs of 2 to 9 vials (combination/ number of vials required for each patient is calculated according to the patient's weight).

New Indications

- **Empagliflozin (Jardiance)** is now indicated in adults for the treatment of symptomatic heart failure with reduced ejection fraction, as an adjunct to standard of care therapy.

- **Lorlatinib (Lorviqua)** is now indicated for the treatment of patients with anaplastic lymphoma kinase (ALK) positive locally advanced or metastatic non small cell lung cancer (NSCLC).

- **Recombinant varicella zoster virus glycoprotein E antigen (Shingrix)** is now indicated for adults 18 years of age or older at increased risk of herpes zoster.

New Contraindications

- **Heparin sodium** (**Baxter Heparin Sodium in 0.9% Sodium Chloride)** is now contraindicated in patients who have had a diagnosis of heparin-induced thrombocytopaenia (HIT) (with or without thrombosis) within the previous 6 months, and while they test positive for HIT antibodies.

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.