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## Today's issue of PD

*Pharmacy Daily* today features four pages of news plus a **front cover page** from **Johnson & Johnson** and a full page from **Pharmacium**.

## Tylenol in stock

**JOHNSON & JOHNSON** has confirmed supplies of its Tylenol paracetamol ranges are available through all major pharmacy wholesalers. See **cover page** for more.

## Make it happen

**TRANSFORM** your dream store lay-out into a reality with **Pharmacium**.

The pharmacy design specialists can help create spaces that help generate creative efficiencies throughout the store.

See **page five** for more.

# PBS leaves Aussies out of pocket

**ANNUAL** increases to the Pharmaceutical Benefits Scheme (PBS) general co-payment are putting essential medicines out of reach for many Australian, Pharmacy Guild of Australia National President, Trent Twomey, warns.

Under the latest increase to the co-payment general patients have to pay up to \$42.50 for PBS-listed medicines - up from \$41.30 last year.

Twomey noted that data collected by independent research firm, Insightful, on behalf of the Guild, found more than 10% of Australians have gone without prescribed medicines because they could not afford it.

"What this means is that there is no real universal access to the Pharmaceutical Benefits Scheme (PBS) which is the foundation of our health system," he said.

"At present the situation is damning.

"Research shows that more than 20% of people aged from 18 to 64

describe prescription medication as unaffordable.

"Most people in this age group are general patients, who are paying up to \$42.50 every month for each PBS medicine they are prescribed since the co-payment went up again on 01 Jan.

"At the current rate of increase, these Australians will find themselves paying nearly \$50 a month for some PBS medicines in the next five years."

"With the cost of living outpacing the wage increases, more and more Australians are going to find themselves having to choose between buying the medicines they and their families need and paying the rent, mortgage or other household essentials."

Twomey added that the hike in the co-payment was adversely impacting the health of patients who require multiple medications, but do not qualify for concessional rates.



"There is a danger in people not being able to afford their medicines," he said.

"As community pharmacists at the front line of healthcare, we are concerned about the implications for the individuals and their families."

The Guild has previously called for the general PBS co-payment to be slashed to \$19, in a bid to make medicines more affordable (**PD** 15 Sep 2021), a move some have suggested would stifle competition (**PD** 27 Sep 2021).

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## Doctors outraged by Qld Rx pilot

**PLANS** to launch a pilot program that will expand the scope of practice of pharmacists in North Queensland is being criticised by medical professional bodies.

Responding to reports published by *Australian Doctor*, about the proposed North Queensland Pharmacy Scope of Practice Pilot (NQSPSP), Australian Medical Association President, Dr Omar Khorshid, warned the project would deliver "second-rate healthcare".

"If this goes ahead, we will see pharmacists becoming de facto GPs, encouraged to diagnose and treat a range of potentially serious health conditions – including prescribing and dispensing a range of medicines despite a lack of training," he said.

"Pharmacists are not doctors. They are experts in medication and a key part of community health care but lack the necessary training and experience that makes General Practice such a critical part of our health system.

"When a patient visits their GP, all their health needs are taken into consideration in arriving at a diagnosis and treatment plan.

"The Pilot proposes a very disease-specific approach, which means there is a very high chance that serious underlying health conditions will be overlooked or simply misdiagnosed.

"There are serious conflicts of interests involved in this proposal, with pharmacists encouraged to not only diagnose conditions, but also sell patients medications based on this diagnosis."

Under the proposed pilot, pharmacies will be able to charge patients up to \$55 for health consultations, with any medications initiated being dispensed as private prescriptions.

A spokesperson for Queensland Health confirmed it has been working with the Pharmacy Guild of Australia, the Pharmaceutical Society of Australia and other stakeholders "to design and



implement a pilot of pharmacists working to full scope in North Queensland".

"The scope of the pilot is exploring an expanded role for community pharmacists across multiple areas, including medication supply and dispensing, prescribing and medication administration," the spokesperson told *Pharmacy Daily*.

"This work is being carried out in collaboration with key stakeholders. "[And] timeframes for the commencement of the pilot are currently under review."

## COVAX milestone

**QUEENSLAND** pharmacies have surpassed the one million COVID-19 vaccine (COVAX) doses administered milestone today.

Pharmacy Guild of Australia Queensland Branch President, Chris Owen, said the achievement reflected the sector's accessibility and the trust the community has in the profession to deliver vaccines safely.

## Wizard expands

**WIZARD** Pharmacy group is set to add a new store to its network in the coming weeks, with the addition of a pharmacy in Geraldton, Western Australia.

The store, which was previously an Optimal Pharmacy, is owned by Wizard Pharmacy Livingston proprietor, Peter Santos, who said the group's patient-centric values were key to his decision to rebrand the pharmacy.

With the addition of the Geraldton store, Wizard Pharmacy now has 38 outlets across WA and the NT.

## Electrical fault sparks pharmacy fire

**A QUICK-THINKING** security guard is being lauded for helping to save the Biloela Medical Centre Pharmacy, after an electrical fault sparked a blaze in the store on Fri night.

In a post of the pharmacy's Facebook page the store's management noted that it would not be open for trading this week as a result of damage sustained during the fire.

"Fortunately no one was hurt and we are lucky that the damage was contained just to our store," the store's owners said.

"All scripts on file were unharmed and have been taken

to Biloela Discount Chemist, and will be available to collect there.

"We would like to say a big thank you to Brad from security and our local emergency services for their quick actions to help save our shop.

"Thanks also in advance to our loyal customers for your patience. We will update you all when we have information about when we can get up and running again."

Queensland Police have confirmed that the fire was caused by an electrical fault and it was not suspicious, *The Courier Mail* reported.



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## UTIPP-Q 'a great success': Qld Health

**CRITICISM** from medical groups of the Urinary Tract Infection Pharmacy Pilot - Queensland (UTIPP-Q) is not putting the State's health authorities off the program (*PD* 27 Jan).

A spokesperson for Queensland Health told *Pharmacy Daily* that the program, which authorises pharmacists participating in the pilot to prescribe antibiotics for women with UTIs, "has been a great success".

In a joint statement criticising the State Government's decision to extend the trial until 30 Jun, the Urological Society of Australia and New Zealand (USANZ) and the Royal Australian College of General Practitioners (RACGP) warned the program could expose women to a "wide range of health repercussions".

However, Queensland Health has

continued to back the program.

"The UTIPP-Q was part of a suite of regulatory changes that was undertaken to improve and support the health of Queenslanders," the spokesperson said.

"The UTIPP-Q has been a great success - over 6,000 women have accessed the service throughout the state and received immediate review and management or a referral to a general practitioner if required.

"Queensland Health has extended its engagement for the UTIPP-Q for an additional six months, until 30 Jun, while the outcomes of the evaluation are considered.

"Over the next six months, the Department of Health will consider the outcomes of the UTIPP-Q evaluation including whether the service should continue.



"Findings from the evaluation of the pilot will be provided to the Queensland Government in due course."

Despite Queensland Health's positive views about the trial USANZ Vice President, Professor Helen O'Connell, said the program did not represent "best practice for women".



## Dispensary Corner

**FREE** advice from pharmacy workers is often underappreciated by patients. However, English pensioner, Rose Doyle will forever be grateful for the life-saving words of wisdom offered by pharmacy assistant (PA) Claire Twyman.

The friendly PA spotted a potential blood clot on the 75-year-old's leg and insisted that she go straight to hospital to have it looked at.

"Rose came over to the pharmacy for advice on her leg," Twyman said.

"I looked down and told her it was really swollen, and then asked to look at her foot.

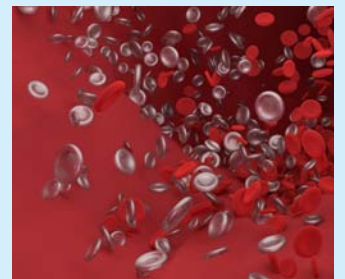
"I thought straightaway that it was a thrombosis, a blood clot.

"Her toes were very white, but I didn't want to alarm her.

"I said that she really needed to get it checked out straight away and she kept saying 'It'll be alright', but I made her promise me that she would go which, thankfully, she did.

"It was a very severe blood clot and they kept her in for five days while she received treatment."

Twyman's boss, Bob Ellender, described her as "a true superstar".



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## Hunt advisor joins PM's office

**WITH** a Federal Election on the horizon, Prime Minister, Scott Morrison, has added outgoing Health Minister, Greg Hunt's senior adviser, Sam Develin to his team, *BioPharmaDispatch* reports.

Develin has worked for Hunt over the last four years, playing a significant role in negotiations with health bodies, including the Pharmacy Guild of Australia throughout the COVID-19 pandemic.

Prior to joining the Health Minister's team, Develin was a Government and Policy Division Project Officer at the Guild in 2010, and a Senior Government Affairs and Policy Advisor for GSK between Dec 2016 and Feb 2018.

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## Pharmacy run 'like a dictatorship'

**NSW-BASED** pharmacist, Peter Foster, claims the domineering personality of a pharmacy owner led him to engage in professional misconduct and dispense thousands of tablets of oxycodone to patients at risk of misusing the Schedule 8 medicine.

The Civil and Administrative Tribunal NSW heard that Foster was an employee pharmacist at the David Wilson Day Night Chemist, Kirrawee, since 2001, and between 14 Oct 2015 and 15 Mar 2018 he and other pharmacists - including the store's owners, Dillan Lal and Priya Patel, dispensed large volumes of Schedule 8 medicines to eight patients.

Over the course of the two-and-a-half-year period, Foster was personally responsible for dispensing more than 5,300 oxycodone tablets of varying strengths, to the eight patients, while also providing 200 alprazolam 2mg tablets to one patient and 15 fentanyl patches to another - many of which were dispensed privately, despite the medications being listed on the Pharmaceutical

Benefits Scheme (PBS).

Suspending Foster's professional registration for six months, the Tribunal noted that during an interview with Health Care Complaints Commission investigators in Aug 2019, he said, "the pharmacy was essentially a dictatorship with Dillan Lal the only dominant personality in the business".

"While I would try to maintain appropriate standards of practice... and tried to make my own decisions independent of him, I acknowledge and accept that his influence meant that I was placed in situations that I otherwise would not have been, and I also accept that his dominance over me may have influenced some of my decision-making," Foster said.

However, the Tribunal noted that in the case of Patient A, Foster had dispensed inappropriate quantities of drugs of addiction prior to Lal becoming an owner of the business.

Reviewing extensive documentation gathered by NSW Police and the Pharmacy



Regulation Unit, University of Technology Sydney Pharmacy Practice Lecturer, Dr Helen Benson, noted that the volume of private prescriptions issued to the patients "should have raised a red flag to Foster as patients with clear addiction and tolerance issues should be managed with PBS authority prescriptions that are tracked and registered with Medicare to reduce the chance of doctor shopping".

In addition to having his professional registration suspended, the Tribunal also imposed conditions requiring that he attend treatment by a psychologist, submit to an audit, take a formal mentor and complete further study in ethics.



### Weekly Comment

Welcome to Pharmacy Daily's weekly comment feature. This week's contributor is **Amit Saha, M-Pharm, MBA, MPS Group Technical Manager, LaCorium Health.**



#### Cracked heel?

**YOUR** regular moisturiser might not work!

Cracked heel or heel fissures occur predominantly as a result of dry skin (xerosis), which can have many contributing factors.

During walking, the heels support the entire body weight. To absorb shock and soften the load, a fatty pad exists under the heel bone. Normal skin is flexible but dry and hardened skin is not. Walking places stress on the fat pad - especially if the skin is dry - increasing the likelihood of cracking.

There are many heel specific products on the market but little published evidence to guide the selection of a particular preparation. The key ingredient in most products is urea within a varied range of 5-30%. Urea increases the water content of the epidermis by drawing water from the dermis. Urea also has keratolytic properties to remove the dead skin cells & soften the skin.

Other ingredients in heel repair products include occlusive agents that form a physical barrier to prevent water loss and various amino acids as skins own moisturising factor (NMF) also help. Achieving a synergy between these ingredients in a particular formulation is critical for a superior outcome.

### Booster eligibility

**AN ADDITIONAL** 4.2 million Australians have become eligible for a COVID-19 booster vaccination today.

The bump in the numbers able to get their top-up shot follow the implementation of a recommendation from the Australian Technical Advisory Group on Immunisation (ATAGI) to cut the time required between an individual's second primary dose and their booster to at least three months, instead of four months.

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