Pharmacy Daily

Fri 4th March 2022

Today's issue of *PD*

Pharmacy Daily today features two pages of news plus the **MIMS March Update**.

Pharmacy fined

MELBOURNE-BASED business, MEPH Pharmacy Pty Ltd, is the latest to fall foul of regulations relating to the advertising of nicotine vaping products, landing a $39,960 fine from the Therapeutic Goods Administration (TGA).

The TGA alleged the company breached the *Therapeutic Goods Act 1989* by promoting the Schedule 4 products on its website and through its social media accounts.

Since nicotine vaping products were listed as prescription-only products on 01 Oct 2021, the TGA has issued infringement notices to five companies and three individuals totalling close to $400,000.

Guild seeks UK training recognition

REGULATORS will be urged by the Pharmacy Guild of Australia to recognise the training of pharmacists in a number of international jurisdictions, including the UK, to alleviate workforce shortages.

Addressing staffing issues being reported by pharmacy owners across the country, Guild National President, Trent Twomey, said there was a need to get more pharmacists from more countries into Australia's overseas pipeline.

"We're doing a big review of overseas skilled workforce migration into Australia," he said.

"As you know, New Zealand is the only country with professional reciprocity [with Australia].

"We'd like that expanded - bring back the UK... [and] there are other countries, like Singapore, that probably should be in that mid-tier category like Europe and Ireland, for example, that are not.

"We'll be meeting with the Australian Pharmacy Council (APC) and the Pharmacy Board of Australia, later this week [to raise these suggestions]."

Twomey's call for greater reciprocity for overseas training came after the APC announced that it was offering pharmacists trained in other jurisdictions access to a free skills assessment as part of the Federal Government's Migrant Skills Incentive Program (***PD*** 02 Mar).

Under the scheme migrants who have "unrecognised or under-recognised skills" in pharmacy will be able to gain the necessary approval to join the workforce and contribute to Australia's post-COVID-19 economic recovery.

To be eligible for a free skills assessment with APC, individuals must: have not previously submitted a skills assessment application with APC, be living in Australia when they submit their application, and be on a permanent family, partner, humanitarian or refugee visa that was granted on or after 01 Jan 2019.

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Dispensary Corner

FUELLED by an interest in herbal medicines, British pharmacist, Tatenda Chiposi, is now launching his own brand of gin.

Chiposi teamed up with the Colchester-based East Coast Distillery in 2020 to produce his carefully crafted beverage combining Italian juniper with rooibos from South Africa, and baobab from Zimbabwe.

Having signed off on the recipe, Chiposi named the drink, Matopos, which translates as 'the rocks', a brand that fits perfectly with his initial aim, "to make a gin so good you could drink it Matopos".

While the 33-year-old is confident that his gin will put a grin on people's faces as they enjoy a drink, it is not clear whether he will be dispensing the product through local pharmacies.

With *Gazette News* reporting that just 2,000 bottles are expected to be sold in 2022, Chiposi is unlikely to be hanging up his white coat any time soon.

TWC takes home top retailer award

TERRYWHITE Chemmart (TWC) has won the top honour at the 2022 Retailer Awards, claiming the Customer Experience of the Year title in a medium to large business.

The judging panel noted the way TWC pharmacies implemented COVID-19 vaccination services led to further business benefits for the stores.

TWC saw off the challenge of big brands including, Rebel, Cotton On, Retail Prodigy Group and Bowen & Pomeroy, to claim the award.

TWC Executive General Manager, Nick Munroe, said the honour topped off "what has been and still is one of the most challenging yet rewarding periods in pharmacy history".

"Our network, and everyone behind the scenes, has worked incredibly hard to deliver what we have always believed is the most professional and convenient vaccination experience for Australians," he said.

"We are thrilled to accept this award on behalf of our more than 1,500 hard-working vaccinating pharmacists and their teams.

"TWC is the largest vaccinating pharmacist network in the country and we are now recognised as the premium healthcare provider of vaccination services in community pharmacy."

MEANWHILE, TWC and Symbion's pharmacy has signed a new generic medicine supply agreement with Sandoz/Viatris, which will commence on 02 Jul.

"We are thrilled with the positive response from network partners to this market-leading deal," a spokesperson for TWC told ***Pharmacy Daily***.

"We acknowledge and thank Arrotex for the long-standing partnership."

Viatris has also entered into similar five-year agreements with pharmacy wholesaler, Symbion's Pharmacy Choice and healthSAVE brands, which will come into effect on 01 Apr.

Viatris Country Manager, Sylvain Vigneault, said the deals would help to provide a secure supply of high-quality medicines to pharmacies across the country.

"Viatris is well positioned to bring medicines to Australians when and where they need them," he said.

Raven's recruitment

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...see more info

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New Products

- **Alpelisib (Piqray)** is a class I phosphatidylinositol3kinase (PI3K) inhibitor with higher activity against PI3Kα than other members of class I PI3K. Class I PI3K lipid kinases are key components of the PI3K/AKT/mTOR (mammalian target of rapamycin) signaling pathway. PI3K inhibition by alpelisib treatment has been shown to induce an increase in ER transcription in breast cancer cells, therefore, sensitizing these cells to estrogen receptor (ER) inhibition by fulvestrant treatment. *Piqray in combination with fulvestrant, is indicated for the treatment of postmenopausal women, and men, with hormone receptor positive, HER2-negative, advanced or metastatic breast cancer with a PIK3CA mutation as detected by a validated test following progression on or after an endocrine-based regimen*. Piqray tablets contain alpelisib 50 mg, 150 mg or 200 mg and are available in packs of 56 (150 mg), 28 (200 mg) and a composite pack containing 56 (28 of each 200 mg and 50 mg) tablets.

- **Cemiplimab (Libtayo)** is a fully human immunoglobulin G4 (IgG4) monoclonal antibody that binds to the programmed cell death-1 (PD-1) receptor and blocks its interaction with its ligands PD-L1 and PD-L2. Engagement of PD-1 with its ligands PD-L1 and PD-L2, which are expressed by antigen presenting cells and may be expressed by tumour cells and/or other cells in the tumour microenvironment, results in inhibition of T cell function such as proliferation, cytokine secretion, and cytotoxic activity. Cemiplimab potentiates T cell responses, including anti-tumour responses, through blockade of PD-1 binding to PD-L1 and PD-L2 ligands. *Libtayo as monotherapy is indicated for the treatment of adult patients with locally advanced basal cell carcinoma (BCC) previously treated with a hedgehog pathway inhibitor or for whom a hedgehog pathway inhibitor is not appropriate; and for the first-line treatment of adult patients with non-small cell lung cancer (NSCLC) expressing PD-L1 tumour proportion score (TPS) ≥ 50% as determined by a validated test, with no EGFR, ALK or ROS1 aberrations, who have: locally advanced NSCLC and who are not candidates for surgical resection or definitive chemoradiation, or metastatic NSCLC. Libtayo as monotherapy has provisional approval for the treatment of adult patients with metastatic or locally advanced cutaneous squamous cell carcinoma (mCSCC or laCSCC) who are not candidates for curative surgery or curative radiation and for the treatment of adult patients with metastatic BCC (mBCC) previously treated with a hedgehog pathway inhibitor or for whom a hedgehog pathway inhibitor is not appropriate*. Libtayo concentrate for solution for infusion contains cemiplimab 350 mg/7 mL and is available in a pack of 1 vial.

- **Molnupiravir (Lagevrio)** is a prodrug that is metabolized to the ribonucleoside analogue NHC. NHC distributes into cells where it is phosphorylated to form the pharmacologically active ribonucleoside triphosphate (NHC-TP). NHC-TP incorporation into viral RNA by the viral RNA polymerase, results in an accumulation of errors in the viral genome leading to inhibition of replication. This mechanism of action is known as viral error catastrophe. *Lagevrio has provisional approval for the treatment of adults with COVID-19 who do not require initiation of oxygen due to COVID-19 and who are at increased risk for hospitalisation or death*. Lagevrio capsules contain molnupiravir 200 mg and are available a pack size of 40 capsules.

  Molnupiravir (Lagevrio) has received last minute approval for inclusion on the Pharmaceutical Benefits Scheme commencing 1st March 2022. It will be Authority Required (Streamlined) on the s85 General Schedule. Not all prescribing software may have been updated to allow for ePrescribing and prescriptions may be unable to be uploaded to the Prescription Exchange Service. A standard paper-based Authority prescription may be supplied.

  Adults who have mild to moderate COVID-19 confirmed by a PCR or medically verified RAT and who can start treatment within 5 days of symptom onset, can be prescribed PBS-subsidised Lagevrio (PBS Code 12910L in a quantity of 40 capsules with no repeats) by their doctor if:

  they are immunocompromised, regardless of vaccination status **(streamlined authority code 12583)**; or

  they are 75 years of age or older, with one other risk factor for severe disease **(streamlined authority code 12582)** or;

  they are 65 years of age or older, with two other risk factors for severe disease **(streamlined authority code 12582)** or;

  they are of Aboriginal or Torres Strait Islander origin, 50 years of age or older, with two other risk factors for severe disease **(streamlined authority code 12584)**.

  Further information from the Department of Health may be accessed using the following link: COVID-19 Treatment FAQ

- **Nirmatrelvir and ritonavir (Paxlovid)**. Nirmatrelvir is a peptidomimetic inhibitor of the SARS-CoV-2 main protease (Mpro), also referred to as 3C-like protease (3CLpro) or nsp5 protease. Inhibition of SARS-CoV-2 Mpro renders the protein incapable of processing polyprotein precursors which leads to the prevention of viral replication. Ritonavir inhibits the CYP3A-mediated metabolism of nirmatrelvir, thereby providing increased plasma concentrations of nirmatrelvir. *Paxlovid has provisional approval for the treatment of coronavirus disease 2019 (COVID-19) in adults 18 years of age and older, who do not require initiation of supplemental oxygen due to COVID-19 and are at increased risk of progression to hospitalisation or death*. Paxlovid is contraindicated in patients with severe renal impairment; severe hepatic impairment; and with drugs that are highly dependent on CYP3A for clearance and for which elevated concentrations are associated with serious and/or life-threatening reactions. Paxlovid is also contraindicated with drugs that are potent CYP3A inducers where significantly reduced nirmatrelvir or ritonavir plasma concentrations may be associated with the potential for loss of virologic response and possible resistance. Paxlovid also cannot be started immediately after discontinuation of apalutamide, carbamazepine, phenobarbital, phenytoin, rifampicin or St. John's wort. Paxlovid tablets are available in a composite pack containing nirmatrelvir 150 mg 20 tablets and ritonavir 100 mg 10 tablets.

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