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Today's issue of PD

Pharmacy Daily today features three pages of news and a cover page from **Vision Initiative**.

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THE Vision Initiative is offering free online CPD training for pharmacists, accredited by the Australian Pharmacy Council.

See **cover page** for more.

Xevudy PI update

THE Therapeutic Goods Administration (TGA) has updated the Product Information (PI) document for COVID-19 treatment, Xevudy (sotrovimab), to reflect uncertainty as to whether the approved dose of 500mg will be effective against the Omicron BA.2 sublineage.

GlaxoSmithKline (GSK) Australia Pty Ltd submitted an application to the TGA on 07 Apr for a higher (1000mg) dose of Xevudy for the treatment of the BA.2 sublineage.

CLICK HERE for more.

Guild rejects AMAQ's UTIPP-Q claims

CLAIMS that hundreds of patients, including a number of pregnant women, treated by pharmacists as part of the Urinary Tract Infection Pharmacy Pilot - Queensland (UTIPP-Q) experienced complications, are "false" the Pharmacy Guild of Australia says.

The Australian Medical Association Queensland Branch (AMAQ), released the findings of its *Survey Report UTIPP-Q and North Queensland Pharmacy Scope of Practice Pilot (NQPSPP)*, reporting that "at least 240 patients treated by pharmacists (as part of the UTIPP-Q) suffered complications from misdiagnosis".

AMAQ President, Professor Chris Perry, accused the State Government of being "careless with patient health in this UTI pilot", raising concerns that no evaluation of the program has been released to date.

"Women did not receive the care they needed and an alarming number became more ill due to their participation in the trial," Perry said.

"Bizarrely, three doctors reported seeing men with complications, despite the pilot being specifically limited to 'uncomplicated cystitis in

non-pregnant women'.

"At least six pregnant women were sold antibiotics that are unsafe in the first trimester.

"One of them had a potentially life-threatening ectopic pregnancy.

"At least nine patients ended up in hospital with sepsis or kidney and bladder infections due to ineffective or delayed treatment.

"Doctors had no way to report adverse outcomes to those overseeing the pilot.

"The only option was to report the individual pharmacist to the Office of the Health Ombudsman – in effect, blaming the pharmacist for the scheme's failings without being able to alert the scheme's designers to its flaws and risks to patient safety."

A spokesperson for the Guild's Queensland Branch told *Pharmacy Daily* that the AMAQ had attempted to "scare women about a safe and effective treatment option for an uncomplicated UTI", with "totally false claims".

"The pilot has been safely and successfully running since 2019," the spokesperson said.

"Only after the AMAQ pulled out of another pilot (the NQPSPP) did they start to bring forward



unfounded allegations for their own internal political purposes.

"It must be getting close to election time at the AMAQ.

"Patients don't want a turf war, they want safe and effective high-quality primary health care, but the AMAQ seems addicted to ancient turf wars instead of patient care.

"Pharmacists follow the same UTI protocol as doctors.

"As part of the protocol, if someone has unresolved symptoms 48 hours after commencing treatment, they are referred to a GP."

Queensland Health has previously described the UTIPP-Q as "a great success" (PD 31 Jan).

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Pharmacy gets access to schools' vax

PHARMACIES can now provide catch-up services under the NSW School Vaccination Program (SVP), for students who were unable to receive the shots in-school.

As part of the program the cost of the vaccines will be covered through the National Immunisation Program (NIP), but pharmacies will be able to charge an additional administration fee to cover costs associated with providing the service, Pharmaceutical Society of Australia (PSA) NSW Branch President, Chelsea Felkai, told *Pharmacy Daily*.

Under measures announced by NSW Health Minister, Brad Hazard, on Sat, pharmacists have been authorised to administer human papillomavirus (HPV) and diphtheria-tetanus-pertussis (dTpa) shots to children aged 12 years and older, and the meningococcal ACWY (MenACWY) vaccine to students aged over 14 years, through the SVP.

Felkai said the decision would significantly improve vaccine access

for children across the state.

"This is very welcome news for NSW pharmacist immunisers," Felkai said.

"Pharmacists have proven themselves time and time again through the COVID-19 pandemic as one of our most accessible healthcare workforces.

"They are trained and experienced in vaccinating younger age groups.

"We are delighted that pharmacists will now be able to contribute to increasing vaccine accessibility and immunisation rates across our school population.

"It is essential that all NSW children have timely access to HPV, dTpa and MenACWY vaccines.

"Vaccination is the best way to ensure these susceptible populations and their families are protected against vaccine-preventable diseases - they will now have the convenient option of protecting themselves through local pharmacies.



"PSA has been advocating for this for some time, as highlighted in our most recent budget submission."

Felkai said further steps needed to be taken to support pharmacists to boost vaccination rates, while also ensuring appropriate funding is made available.

"We must continue to remove barriers to vaccination and ensure that pharmacists are properly remunerated for the vaccination services they provide," she said.

Green-light for remdesivir use

THE Therapeutic Goods Administration (TGA) has granted Gilead Sciences Pty Ltd provisional approval to extend the use of the COVID-19 treatment, Veklury (remdesivir).

These uses now include adult and paediatric patients (at least four weeks old and weighing at least 3kg) who have pneumonia due to SARS-CoV-2 and require oxygen support, as well as adult and paediatric patients (weighing at least 40kg) who do not require oxygen support but are at high risk of advancing to severe COVID-19.

The US Food and Drug Administration (FDA) has also approved remdesivir for these extended uses, while the European Medicines Agency (EMA) has yet to approve the use of the medication to include children.

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Dispensary Corner

PEOPLE make poor life choices all the time, but Dispensary Corner is baffled by a Boston-based pharmacist's decision to distribute falsified COVID-19 vaccination (COVAX) certificates. The ill-considered decision has cost the unnamed pharmacist their job, and with the Massachusetts Board of Registration in Pharmacy now investigating, they could be fined or booted from the profession, *Boston 25 News* reported.

The pharmacist's fraud was uncovered by a colleague at a Stop and Shop store, who noticed that the pharmacy had more doses of COVID-19 vaccines than it should based on the number of patients who had supposedly been vaccinated there.

A search through the pharmacy's records revealed that dozens of vaccine cards had been issued to people who had not filled out consent forms.

Strangely for a health profession this was not the first time when pharmacists have fraudulently produced COVAX certificates (*PD* 11 Mar).



Guild marks 7m COVAX

THE seven millionth COVID-19 vaccination (COVAX) was administered by a community pharmacist on 06 May, marking a milestone for community pharmacies around Australia.

The National President of the Pharmacy Guild of Australia, Trent Twomey, said, "community pharmacies have proven to be pivotal in helping to reach maximum national uptake of COVID-19 vaccines" since being brought into the vaccination program rollout in Jul 2021.

"Reaching that maximum uptake has enabled governments across the country to ease restrictions and help businesses and the community get on with life."

Twomey credited pharmacies' longer opening hours and their ability to "provide vaccinations where people want them, and when they want them", as the reason behind the significant uptake of community pharmacies as vaccination centres, in addition



to community pharmacists and their staff "being trusted members of the communities they serve".

He encouraged people who are yet to have a booster dose, to contact their local pharmacy or make a booking via www.findapharmacy.com.au.

Twomey also urged people to get their flu shot administered at their local pharmacy, warning that this year's flu season was likely to be "particularly severe" due to the "combination of the flu and COVID-19".



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.**



Xerosis or very dry skin.

ARE you suffering from skin dryness when your regular moisturising doesn't provide adequate relief?

Xerosis or very dry skin is not a myth. It can result from exposure to extremely dry weather conditions, be a side effect of certain medication such as acne or cancer treatment, or effect of a disease state on your skin such as diabetes which can alter your sweat production.

Furthermore, skin conditions such as dermatitis, psoriasis, keratosis pilaris or ichthyosis can result in very dry skin too.

Xerosis is normally characterised by scaly and flaky skin, especially on the arms and legs, feeling of extreme tightness, redness with irritation, itch, and appearance of fine cracks.

Treating early is very important to manage this condition and prevent further complication such as infection. A range of moisturisers are available to treat dry skin, but when xerosis is concerned a keratolytic moisturiser with an emollient and exfoliant synergy is preferred. Dermal Therapy offers a range of keratolytic moisturisers and cleansers to manage xerosis related very dry skin effectively.



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