

Eczema awareness

COMVITA, maker of Medihoney, is reminding pharmacists that Eczema Awareness Week starts Mon. Pharmacists who would like to display Eczema Awareness posters, or to get some in-store eczema information brochures should email the Eczema Association at help@eczema.org.au.

WIN A MILKY FOOT PACK

Have you tried the easiest way to exfoliate your feet yet?



Each day this week **PD** is giving readers the chance to win a pack of **Milky Foot** - Australia's

easiest way to exfoliate your feet - no effort required!

Milky Foot is available in regular and large sizes at \$29.95 and is truly the easiest way to rid yourself of hardened, dead and tough skin including tough heels and calluses.

To win, simply be the first person send your answer to the following question to: comp@pharmacydaily.com.au

What happens after 3-4 days to your feet after using Milky Foot?

Visit www.milkyfoot.com.au

Congratulations to yesterday's lucky winner: **Julie Sage** of Plunketts Chemmart Pharmacy.

CHC defends CM compliance

THE Complementary Healthcare Council of Australia has hit back at claims made by the Australian National Audit Office (ANAO) that 90% of complementary products were not compliant with current regulations (**PD** yesterday).

The report looked at a TGA review of 31 randomly selected complementary drugs on sale in Australia, 90% of which were not compliant with regulatory requirements.

How old is your heart?

THIS month Discount Drug Stores (DDS) is asking its customers 'How Old Are You at Heart'.

The promotion will offer customers personalised cardiovascular health information via pharmacist consultations in over 90 of its stores nationwide.

The consultations calculate the customer's "heart age" and their 10 year risk of having a heart related illness, using DDS' own unique program which measures BMI and other health indicators - more at www.discountdrugstores.com.au.

Guild appointment

ANDREW Matthews has been appointed by the Pharmacy Guild of Australia as its new Director of Quality Assurance and Standards (QAS) Division at the organisation's National Secretariat in Canberra.

Matthews has been Acting Director for the past few months, and his appointment to the role is effective immediately.

According to the CHC however, this statistic should be treated with "severe caution" because of its small sample size.

Furthermore the CHC argued that the 90% statistic encompassed a myriad of issues, including missing full stops and wrong font sizes in labelling.

The CHC also said that 97% of the instances of non-compliance identified were almost immediately corrected to be totally compliant.

On the flip side the CHC acknowledged that there "is room for improvement in the regulatory framework of the Complementary Medicines Industry".

The CHC also agreed with the ANAO that there is a need to improve the enforcement of sanctions and penalties by the TGA.

"We strongly believe that all medicines, including Complementary Medicines, on the Australian market should be of high quality, safe, effective and readily available," a CHC statement said. "We will continue our proactive work with the TGA to ensure that this is continues to be the case," the CHC added.

Formulary allocations

THIS month a number of new drugs have been added to the Pharmaceutical Benefits Scheme's Formulary Allocations List including: Amiloride (delisted, was F1), Clotrimazole (delisted, was F1), ferrous fumerate (F1), ferrous sulfate (F1), fingolimod (F1), neomycin (delisted, was F1), sulindac (delisted, was F1) and zuclopenthixol decanoate (relisted to F1).

For more information on the September PBS changes visit www.pbs.gov.au.

New Sept AusPAR

THE Therapeutic Goods Administration has published a new Australian Public Assessment Report for Prescription Medicines (AusPAR) on its website for Novartis Pharmaceuticals Australia's Rasilamlo (aliskiren/amlodipine). See www.tga.gov.au.

Whooping cough site

PARENTS and healthcare workers wishing to learn more about whooping cough can now access a new website, dedicated to the subject.

Launched this week by Sanofi Pasteur the website includes: information on what whooping cough is, how it's spread, symptoms, complications, prevention and vaccine.

The site also features a video to help users recognise the symptoms of the disease, and to recognise its seriousness; as well as a state by state breakdown of the number of people diagnosed with whooping cough; a state by state breakdown of free adult whooping cough vaccination programs; and examples of national media stories on whooping cough.

This website will help parents to know what to look for and when to act," said Paediatrician Dr Chris Ingall. See www.whoopingcough.com.au.

How do I love MIMS



Let me count the ways:-
(With apologies to Elizabeth Barrett Browning!)

lovableMIMS

UBM Medica **MIMS**
100% pure knowledge

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CPD Calendar

WELCOME to *Pharmacy Daily's* Continuing Professional Development Calendar, featuring upcoming events and opportunities to earn CPE and CPD points.

If you have an upcoming event you'd like us to feature, email info@pharmacydaily.com.au.

07 Sep: MS Lecture; PSA Office, Unley, SA; www.psa.org.au

15-17 Sep: Pharmacy 2011 Management Conference, Fairmont Resort Leura NSW - pharmacyconference.com.au

17-18 Sep: PharmacyLIVE! clinical information conference at Sydney Showground. More information 02 9431 1100.

06-09 Oct: PAC11, Melbourne Convention Centre pac11.com.au

13-15 Oct: Pharmacy Assistant National Conference, Gold Coast - pharmacyassistants.com.au

10-13 Nov: SHPA's Medicines Management 2011 conference in Hobart - www.shpa.org.au.

Do the elderly take advice?

OLDER Australians who receive community care whilst living in their own home are the least likely to enter permanent care within two years of undergoing an Aged Care Assessment (ACA), according to a new report by the Australian Institute of Health and Welfare.

ACA's are undertaken when older Australians want to access certain aged care programs, and they include recommendations on whether the participant should seek care in their own home or in a residential setting.

"The care needs of people can vary considerably when they first seek assistance from a government program, and so even at this early stage different people require different services—from limited assistance in a community care program to high-level care in a residential facility," said AIHW spokesperson Dr Phil Anderson.

The report, which examines whether older Australians follow

recommendations from ACAs, found that 54% of older Aussies who were recommended to live in low-level residential aged care, who had not used community care or residential respite, were admitted to permanent residential care within six months of the ACA.

In comparison 26% of people who lived in low-level residential aged care, and who used both residential respite and community care, accessed permanent residential aged care within six months.

"This means that people who did not use community care were more likely to access residential aged care shortly after their Aged Care Assessment," Anderson said.

Researchers also found that around one quarter (or one in six) older Australians who underwent an ACA and were advised to live in low-level residential care did not do so in the two years after their first assessment.

DISPENSARY CORNER

MEDICAL miracle.

Two Austrian teenagers who walked away from a fall which would have killed anyone else, after their car tumbled down a 900-foot precipice.

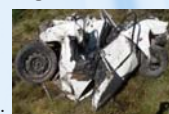
According to several reports, the car landed so hard at the bottom of the valley that it folded entirely in half.

The alarm was raised by a local hunter who noticed the fresh skid marks leading off the road, and then following the trail, found the car related debris scattered all the way down the sheer drop.

The teens were airlifted to the hospital shortly after, with medics convinced they had sustained massive internal injuries.

The pair however only suffered superficial cuts and grazes, and were released from hospital two days later.

The duo's car (right).



September MIMS Monthly Medicine Update

NEW PRODUCTS

Tobi (**tobramycin**) is an aminoglycoside antibiotic solution for inhalation. Tobramycin is produced by *Streptomyces tenebrarius*. It acts primarily by disrupting protein synthesis, leading to altered cell membrane permeability, progressive disruption of the cell envelope, and eventual cell death. When inhaled, tobramycin is concentrated in the airways. Tobi is indicated for the management of cystic fibrosis patients with *Pseudomonas aeruginosa* infections. The recommended dosage for both adults and paediatric patients 6 years of age and older is 300 mg administered twice daily by inhalation in alternating periods of 28 days (28 day on/28 day off cycle). Tobi is available as single use 5 mL (300 mg) ampoules of 4's (sample) and 56's.

NEW INDICATIONS

Sutent (**sunitinib malate**) is now indicated for the treatment of unresectable, well differentiated pancreatic neuroendocrine tumours (pancreatic NET) at a recommended dose of 37.5 mg taken orally once daily without a scheduled rest period.

NEW FORMULATIONS

Suboxone (**buprenorphine hydrochloride and naloxone hydrochloride at a ratio of 4:1 buprenorphine : naloxone**) is now available as a sublingual film. It is indicated in the treatment of opiate dependence within a framework of medical, social and psychological treatment. It is contraindicated in children less than 16 years of age; severe respiratory or hepatic insufficiency (Child-Pugh B or C); acute intoxication with alcohol or other CNS depressants; pregnancy and breastfeeding. Suboxone sublingual film is placed under the tongue and kept there until completely dissolved, which takes on average between 4 and 8 minutes. Suboxone sublingual film is available in two strengths of 2/0.5 mg and 8/2 mg in sachets of 28's.

SAFETY RELATED CHANGES

When Exjade (**deferasirox**) and theophylline are used concomitantly, monitoring of theophylline concentration and possible theophylline dose reduction should be considered.

A causal relationship between tamsulosin and sulfa allergy has not been established, however there is a

theoretical risk of an allergic reaction when tamsulosin is taken by patients with a history of sulfa allergy. If a patient suffers a serious or life threatening sulfa allergy, caution is warranted when administering Flomaxtra (**tamsulosin hydrochloride**).

Serious rash, including vesiculobullous rash has occurred in patients receiving Gabitril (**tiagabine hydrochloride monohydrate**).

Although there are no data to establish that patients with pre-existing liver disease are at increased risk to develop elevated liver function tests (LFTs) when taking Gilenya (**fingolimod**), caution in the use of Gilenya should be exercised in patients with a history of significant liver disease.

Klacid (**clarithromycin**) should not be given to patients with history of QT prolongation or ventricular cardiac arrhythmia, including torsades de pointes; Colchicine is also contraindicated in patients with renal or hepatic impairment who are taking a p-glycoprotein inhibitor or a strong CYP3A4 inhibitor.

Severe, life threatening, systemic hypersensitivity reactions such as drug rash with eosinophilia and systemic symptoms (DRESS) have been reported in patients taking anti-epileptic drugs including Neurontin (**gabapentin**).

Risperdal (tablets, Quicklet and Consta) (**risperidone**) and Zeldox (capsules and IM) (**ziprasidone**) are now listed as pregnancy category C. Neonates exposed to antipsychotic drugs (including risperidone and ziprasidone) during the third trimester of pregnancy are at risk of experiencing extrapyramidal neurological disturbances and/or withdrawal symptoms following delivery.

Postmarketing safety data from Australia have identified the likelihood of a small increased risk of intussusception shortly after the administration of the first dose of RotaTeq (**rotavirus vaccine, live, oral, pentavalent**). No increased risk of intussusception was observed among infants receiving RotaTeq in two large postmarketing safety studies conducted in the United States. No increased risk of intussusception was observed in clinical trials following administration of RotaTeq compared with placebo.

Xydep and Zolof (**sertraline hydrochloride**). Exposure during late pregnancy to SSRIs may have an increased risk for persistent pulmonary hypertension of the newborn (PPHN). In a retrospective case control study of 377 women whose infants were born with PPHN and 836 women whose infants were born healthy, the risk for developing PPHN was approximately six-fold higher for infants exposed to SSRIs after the 20th week of gestation compared to infants who had not been exposed to antidepressants during pregnancy.

Cases of new onset diabetes mellitus have been reported in patients receiving SSRIs including Xydep and Zolof (**sertraline hydrochloride**). Loss of glycaemic control including both hyperglycaemia and hypoglycaemia has also been reported in patients with and without pre-existing diabetes. Diabetic patients especially should have their glycaemic control carefully monitored since their dosage of insulin and/or concomitant oral hypoglycaemic drug may need to be adjusted.

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.