



Tuesday 13 Mar 2018

Pain MedsCheck delayed

### King to visit APP

THE Pharmacy Guild of Australia has announced that Shadow Minister for Health and Medicare the Catherine King will address delegates at the APP2018 conference on Fri 04 May.

Guild national president George Tambassis said, "It is great news that the APP conference will again hear from the ALP Shadow Minister for Health and Medicare, Catherine King MP.

"Catherine King has a comprehensive knowledge of the health portfolio and a genuine understanding of the important role of community pharmacy in the health system.

"I know that Catherine has a vision for the next Community Pharmacy Agreement and I am pleased to say the Guild has an open dialogue with her and her office."

See more at appconference.com.

### Pregnancy database

THE TGA has updated its Prescribing Medicines in Pregnancy database, with the addition of 13 new entries including baricitinib, bezlotoxumab, cabozantinib, dupilimab, fofomycin trometamol, glecaprevir/pibrentasvir, iron [as ferric derisomaltose], lixisenatide with insulin glargine, meningococcal group B vaccine, nusinersen, patiromer, pegaspargase and ribociclib. Access at tga.gov.au.

### Pharmacist RA advice

PHARMACISTS play an important role in helping to reduce consumer anxiety about potential toxicity, managing side effects and reinforcing the benefits of lowdose methotrexate in patients with rheumatoid arthritis, says NPS MedicineWide.

The organisation is offering pharmacists a free interdisciplinary discussion webinar 'Getting the facts right about methotrexate' to be run 12 Apr 7.00 to 8.00 pm AEST.

NPS says that persistence with methotrexate therapy by people with rheumatoid arthritis is variable due partly to misconceptions about the medicine.- nps.org.au.

THE \$20 million Pain MedsCheck scheme under the Pharmacy Trial Program has been delayed, with an update to Guild members from president George Tambassis confirming the original timeline for the project will not be achieved.

Health Minister Greg Hunt announced in Jan that he would like Pain MedsChecks to be up and running last month.

However "as a research based grant activity, the program must comply with the Commonwealth Grants Rules and Guildlines and the Australian Code for the Responsible Conduct of Research.

"The Guild and the Government are working collaboratively to ensure that the Pain MedsChecks trial will commence in commnity pharmacies as soon as possible, with a date to be announced shortly," Tambassis said.

The Guild president said the delay was disappointing, however it is important to ensure the service being trialled is robust and is able to be assessed for clinical



**PROSTATE** cancer medicine Xofigo (radium-223 dichloride) should not be used with Zytiga (abiraterone acetate) and prednisone/prednisolone, due to an increased risk of death and fractures with this combination, according to a recommendation made by the European Medicines Agency (EMA).

EMA's Pharmacovigilance Risk Assessment Committee (PRAC) has reviewed the preliminary data from an ongoing clinical study in metastatic prostate cancer patients.

There was a slightly higher mortality rate in treated versus controls (35% vs 28%) while fractures also occurred more frequently with the Xofigo combination than the placebo combination (26% versus 8.1%). Go to ema.europa.eu for more.

effectiveness, cost effectiveness and comparative safety.

"Establishing sound outcomes from the trial provides further evidence to support the expanded role of community pharmacy within the primary health care team, which is in the long term interests of community pharmacies," he said.

**MEANWHILE** Tambassis also noted another delay, in relation to \$30 million which has been allocated to enable community pharmacies to participate in the Health Care Homes (HCH) trials.

He said over the last six months the Guild had been working with the Department of Health "to enable expenditure of the \$30 million over the remainder of the 6CPA in a way that enables community pharmacies to work with patients in developing and implementing personalised medication management plans".

Tambassis said the initiative would for the first time recognise the role of community pharmacy as an integral part of a patient's care team, and remunerate pharmacies for overall medicines support, planning and implementation.

"We had hoped that this work would be completed in time for pharmacies to commence delivering the HCH program from early April, but it is now clear that it is likely to be late April or May before the program will be able to commence on the ground.

"Again this is disappointing, but equally it is vital that we get this ground-breaking program right," Tambassis concluded.

# Meds error reduction

eRx≽

script exchange

**CLINICAL** decision support embedded in electronic medication management (EMM) systems offers an opportunity to reduce medication errors, according to a paper published in the American Journal of Health-System Pharmacy.

The authors concluded that standardisation, integration of patient-specific parameters and consideration of human factors are central to realising the benefits. Visit ajhp.org for the research.

# **Opioid monitoring in** community pharmacy

NHMRC is collaborating with other research groups to investigate the role of screening for key painrelated outcomes and emerging problems with pharmaceutical opioids in community pharmacy practices, with the results due for release in Mar 2019.

"Community pharmacists represent an understudied and highly skilled group of health professionals that have an important role to play in addressing pharmaceutical opioid related problems," researchers say.

This project aims to evaluate "a pilot model of care which will include the development of unique pharmacy software that will enable tablet (iPad) based screening and referral.

"Those with chronic pain are prevalent in mortality data, yet little focus has been placed on changing policy and practice to respond to their treatment needs.

Details at ndarc.med.unsw.edu.au.





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## 18 Willach Pharmacy Solutions

# **Digital health consultation**

IT'S a commendable ambition to want to keep in shape and

Dispensary

to want to keep in shape and feel good, but just make sure you don't have to drug too many people along the way to do it.

January Neatherlin, 32, had been running an illegal childcare operation called Little Giggles in Bend, Oregon when police discovered she was administering melatonin to the kids so they would fall asleep and she could go tanning and participate in CrossFit training sessions.



**PERHAPS** exercise a greater level of caution when accepting chocolate treats from new mums.

We know that sounds like unusually specific advice, but stay with us for a second.

A new mum from Georgia in the United States recently decided to merge childbirth with her passion for being a chocolatier by turning her placenta into a batch of "tasty" chocolate truffles.

The bizarre culinary act involved steaming and dehydrating the organ, before grinding it into a fine powder and then mixing it with crushed Oreos.

Not content with merely appearing to be a misguided Martha Stewart, the woman then sealed the deal by posting a snap on Facebook of her eating the chocolate errrgh...item, with the accompanying caption: "The final result? "Yummy!" We've suddenly lost our sweet tooth. THE Australian Digital Health Agency is inviting input from interested groups and individuals on the Australian National Digital Health

Strategy in order to gain "collaboration on co-producing its implementation plan – the Framework for Action".

The strategy document 'Safe, Seamless and Secure' was approved in 2017 by the Council of Australian Governments (COAG) Health Council in an effort to put "the consumer at the centre of their healthcare and providing choice, control and transparency".

A consultation draft describing the vision for digital health 2018 to 2022 is now available for comment, the agency says.

"It reflects what consumers, healthcare providers and a range of organisations told us during last year's consultation on the development of the National Digital Health Strategy, and has been developed with assistance from all the governments of Australia." The vision proposed in the document prioritises digital health activity designed to avoid hospital admissions, reduce

adverse drug events, reduce duplication of medical tests, better co-ordinate care for people with chronic and complex conditions, and better inform treatment decisions.

Feedback will be accepted in the form provided until Fri 06 Apr 2018. Visit digitalhealth.gov.au to access the feedback form.

### **Pill prescribing**

**PHARMACISTS** in the US state of New Mexico are now able to prescribe and dispense birth control drugs to women.

The move follows approval of new regulations last year by the New Mexico Board of Pharmacy, along with new protocols and training.

A nine hour course must be undertaken by a pharmacist prior to prescribing oral contraceptives, with New Mexico joining Oregon, California and Colorado as states that allow pharmacist prescribing.

# Win with PARA'KITO™

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

#### Is the product waterproof?

Congratulations to yesterday's winner, Juliana Kobryn from Blooms the Chemist, Springwood.



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# Opioids and addiction

THE Pharmacy Guild of Australia believes a nationally co-ordinated real-time monitoring system is essential to deal effectively with opioid abuse and misuse in Australia.

In a submission to the Therapeutic Goods Administration's *Prescription strong (Schedule 8) opioid use and misuse in Australia – options for a regulatory response*, the Guild also calls for an opioids roundtable to bring together all stakeholders to do whatever is in their respective powers to solve the problems of opioids in Australia.

Calling for real-time monitoring, the Guild said while there was an urgent need to address the opioid problem in Australia, the TGA's could only make recommendations within its powers contained in the Therapeutic Goods Act.

It said it did not believe the TGA's suggestions would "effectively address the problems of the opioid crisis as they do not include a nationally consistent real time monitoring system which is the responsibility of the respective State and Territory health departments."

The Guild believes that there is an urgent need for an Opioids Roundtable to be re-convened as part of the TGA's current project.

Pharmacy Daily Tuesday 13th March 2018

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