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## SA Health Minister backs pharmacists

**SOUTH** Australian Minister for Health and Wellbeing, Stephen Wade (pictured), believes the case to empower pharmacists to work to their full scope is going to get stronger.

Wade was asked if he supported the use of pharmacy-based health checks as a "first step to encourage more people to visit their GP", by Labor Party MP, Tung Ngo, at a sitting of the South Australian Legislative Council last month.

"Pharmacists are an important part of the network of health professionals operating in our community," Wade said.

"I think the range of opportunities to use pharmacists to support health care going forward will become more and more strong."

"One of the issues that SA Health is finding is in relation to post-discharge management of medication."



"There is no doubt that pharmacists can provide a very valuable service in helping facilitate the successful discharge of patients, and helping them to review their medication post discharge."

"Often, prescriptions given in hospital need to be, shall we say, linked to pre-existing medications, and community-based pharmacists provide a very valuable service."

"In terms of the honourable member's question in relation to health checks, I completely agree that quality health checks by well-trained pharmacists will provide a valuable service within the network of South Australian health services," Wade said, according to the official Hansard record.

Wade also noted the success of pharmacist vaccination services in boosting uptake in the state.

## Mayne OC deal

**MAYNE** Pharma Group has signed a 20-year exclusive supply and license agreement with Mithra Pharmaceuticals to commercialise a novel oral contraceptive (OC) comprising Estetrol and drospirenone, in the US.

Launch is planned for the first half of 2021, with Mayne anticipating peak annual sales of more than US\$200m.

## Training for GP

**NEW** training to prepare pharmacists to improve health outcomes for patients in general practice settings is now available from the Pharmaceutical Society of Australia (PSA).

The program aims to prepare pharmacists for a career in general practice.

Pharmacists are being urged to complete the PSA *General Practice Pharmacist: Foundation Stage Training Program* first.

**CLICK HERE** for more.

## Opioid dr for jail

**US GENERAL** practitioner Dr Joel Smithers, aged 36, faces at least 20 years in jail after being convicted of illegally prescribing opioids, involving more than 500,000 doses over a two year period.

## Today's issue of PD

**Pharmacy Daily** today has two pages of news plus full pages from:

- Healthed
- MIMS Monthly Update

## Leading National Pharmacy Group

## Opportunities

- **Ararat (Regional VIC) – Full-Time Pharmacist.** Large Community Pharmacy close to the picturesque Grampians region, appx 2.5hrs drive from Melbourne CBD. Relocation package available plus location assistance.
- **Colac (Regional VIC) – Full-Time Pharmacist.** Busy community pharmacy store less than 2 hrs drive from Melbourne CBD. A stone's throw away from the world-renowned Great Ocean Road. Relocation package available plus location assistance.
- **Corio (VIC) – Part-time Maternity Relief Pharmacist (temporary).** Less than 1 hrs drive from Melbourne CBD. Shifts are every Tues 11:30am to 7:00pm & Wed 9:00am to 4:00pm.
- **Kangaroo Flat (Regional VIC) – Part-Time Pharmacist (Min. 50hrs FN).** Small community pharmacy store situated in the historic Bendigo region. Flexible hours.
- **Moree (Regional NSW) – Full-Time Pharmacist in Charge.** Exciting opportunity to lead a small community store in the Artesian water's region of NSW. Accommodation & relocation package provided.
- **Broken Hill (NSW) – Full-Time Pharmacist.** Community store located in the historic outback 'Silver City'. Accommodation & relocation package provided.
- **Alice Springs (Regional NT) – Full-Time Senior Clinical Pharmacist.** Rewarding opportunity for an experienced Pharmacist to manage our new store in the Central Desert region of Australia. Location allowance and relocation package provided.

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Travel & Cruise Weekly

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## Dispensary Corner

**WHAT** can't the mighty avocado do?

Whether in the news for causing millennials to squander their house deposits on the smashed version, or as a facial skin toner, the avocado pear, or alligator pear as it is also called, is now under excited scrutiny for its "superfood" qualities.

Metabolites of the green berry, one of the plant family *lauraceae*, are now the subject of a review article assessing their potential for roles in the prevention and treatment of cancer, microbial, inflammatory, diabetes and cardiovascular diseases.

Also hailed for its "good fat" status, the widely praised fruit could well be in pharmacies before long - [CLICK HERE](#).



**AND** while we're on the subject of vegetables, a woman in the US has set a new world record by eating 50 slices of pumpkin pie in 10 minutes.

Molly Schuyler of Maryland, who describes herself as a "professional eater," took out the 10th annual Hands-Free World Pumpkin Pie Eating Contest at The Great Pumpkin Farm in Clarence, New York.

The surprisingly svelte Schuyler won \$1,000 for winning the contest, plus a \$500 bonus for setting a new record in the attempt.

## Rx codeine move success

**THE** move to prescription-only codeine in Australia has seen a 50% reduction in the monthly rate of codeine-related poisoning calls and halved codeine sales, according to new research led by the University of Sydney.

The study, published in *Addiction*, is the first peer-reviewed research to examine the short-term implications of the removal of over-the-counter sales of low-strength codeine in Feb 2018.

Sydney Pharmacy School and Director of Research at the NSW Poisons Information Centre and lead author, Dr Rose Cairns, said the data paints a positive picture of the impact of the legislative changes.

"We saw a massive and abrupt reduction in codeine poisonings following the 2018 move to prescription-only sales," Cairns said.



"Interestingly, and despite what many predicted, we didn't see an increase in poisonings with higher-strength codeine or stronger opioids, so it really is a good news story.

"The sales data also showed a similar picture.

"There were big reductions in sales of low-strength codeine, with no increase in sales of higher strength codeine."

[CLICK HERE](#) to access the study.

## LGBTQ+ pharmacy opens in The Castro

**TIN** Rx Pharmacy, an LGBTQ+ friendly pharmacy, has opened in San Francisco's Castro district.

The new pharmacy is the dream of pharmacist, Christina Garcia, and her partner Patricia Nachman, who wanted to establish a "stigma-free pharmacy" for the area's LGBTQ+ community.

TIN Rx will be the first independent pharmacy to operate in The Castro in more than 30 years, following the closure of the Star Pharmacy in 1985, and will celebrate the area's history.

"We're really excited to bring an independent pharmacy back to the LGBTQ+ community," said Garcia.

The pharmacy will provide



patients with access to pre-exposure prophylaxis, guidance for transgender patients undergoing hormone therapy, and support HIV-positive residents of The Castro with medication management support.

In addition to its work serving LGBTQ+ patients, TIN Rx will offer another convenience to customers: a 24-hour automatic drug dispensing (ADDS) machine, accessible via a phone scanner for pre-registered customers.



## Travel Specials

**WELCOME** to *Pharmacy Daily's* travel feature. Each week we highlight a couple of great travel deals for the pharmacy industry, brought to you by *Flo Travel Nasal Spray*.



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## Adriatic & Aegean Allure - Oceania

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Consult your travel agent and visit [oceaniacruises.com](http://oceaniacruises.com).

## Royal Caribbean Global Wow Sale

**BOOK** an exotic seven-night South Pacific Cruise, ex Sydney, with Royal Caribbean's *Ovation of the Seas* from just \$1,055 pp and receive up to 30% price discount for every guest plus a free balcony upgrade on selected sailings.

Consult your preferred travel agent and see [royalcaribbean.com](http://royalcaribbean.com) for more details.



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NT	5:30 – 7:00pm ACST
WA*	4:00 – 5:30pm or 7:00 – 8:30pm AWST

\*Special delayed session for WA viewers



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### Q Fever in GP – Recognition, Treatment and Prevention



#### Prof Andrew Lloyd

Infectious Diseases Physician, Prince of Wales Hospital, Sydney; Academic researcher, Kirby Institute, University of NSW; Practitioner Research Fellow, National Health and Medical Research Council Centre

Accreditation Number: A1910HED2\*

Q Fever is an emerging zoonotic infection worldwide, and presentations are non-specific, variable and often misdiagnosed. In this presentation, Prof Lloyd discusses the issues faced by medical practitioners in testing patients for Q Fever, its clinical features – which may present as acute or chronic infection or the post-Q Fever fatigue syndrome, and treatment and prevention.

\*This activity has been accredited for 1.5 hrs of Group 1 CPD (or 1.5 CPD credits) suitable for inclusion in an individual pharmacist's CPD plan which can be converted to 1.5 hrs of Group 2 CPD (or 3 CPD credits) upon successful completion of relevant assessment activities. All Australian pharmacists can convert their group one credits to group two credits by completing the assessment component of this activity on the Australian College of Pharmacy (ACP) website: <http://www.acp.edu.au>. The assessment will be accessible via the ACP website once registered as a complimentary member (non-member) for free.

### Is there an Opioid Epidemic in Australia?



#### Prof Stephan Schug

Professor and Chair of Anaesthesiology and Pain Medicine, University of WA; Former Director of Pain Medicine, Royal Perth Hospital

Accreditation Number: A1910HED2\*

Is there an opioid crisis in Australia? While the situation here is not yet at the levels seen in the USA, there is cause for concern. Prof Schug presents facts and observations suggesting that we need to take steps now to prevent a similar crisis on our own doorstep.

### The Significant Impact of Cancer on the Family – What Can GPs Do About It?



#### Ms Sandy Cham

Clinical Psychologist Registrar; General Manager, CanTeen

Accreditation Number: A1910HED2\*

GPs often see families at the beginning of their cancer experience, and this provides an invaluable opportunity to support not only the patient, but the entire family unit in coping better with the journey ahead. This talk addresses the primary needs of families going through a cancer experience: information, how to talk about cancer, and connection with peers who understand.

## New Indications

- **Atezolizumab (Tecentriq)**, in combination with carboplatin and etoposide, is indicated for the first-line treatment of patients with extensive-stage small cell lung cancer (ES-SCLC).
- **Ibrutinib (Imbruvica)** is now indicated for the treatment of Waldenström's macroglobulinaemia in adults: as a single agent in patients who have received at least one prior therapy, or in first-line treatment for patients unsuitable for chemo-immunotherapy; or in combination with rituximab. Ibrutinib, as a single agent, or in combination with obinutuzumab, is now indicated for the treatment of previously untreated chronic lymphocytic leukaemia/small lymphocytic leukemia (CLL/SLL) in adults with or without deletion 17p. Ibrutinib, as a single agent, or in combination with bendamustine and rituximab, is now indicated for the treatment of CLL/SLL in adults with or without deletion 17p who have received at least one prior therapy.
- **Pembrolizumab (Keytruda)** is now indicated as monotherapy for the first-line treatment of patients with non-small cell lung cancer expressing PD-L1 (tumour proportion score  $\geq 1\%$ ), with no EGFR or ALK genomic tumour aberrations, and is stage III where patients are not candidates for surgical resection or definitive chemoradiation, or metastatic.
- **Ribociclib (Kisqali)** is now indicated for the treatment of patients with hormone receptor-positive, human epidermal growth factor receptor 2 (HER2)-negative advanced or metastatic breast cancer, in combination with an aromatase inhibitor or fulvestrant, as initial endocrine-based therapy or following prior endocrine therapy. In pre- or perimenopausal women, the endocrine therapy should be combined with a luteinising hormone-releasing hormone agonist.

## New Contraindications

- **Diphenhydramine HCl/paracetamol (Mersynonight Night Time Pain Relief)** is now contraindicated in severe hepatocellular insufficiency.
- **Efavirenz (Stocrin)** is now contraindicated with elbasvir/grazoprevir.
- **Levothyroxine sodium (Oroxine, Eutroxsig)** is now contraindicated in acute myocarditis and acute pancarditis.

*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.*