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## Today's issue of PD

Pharmacy Daily today has three pages of the latest pharmacy news.

## Winter Spotlight is almost here

### PHARMACY Daily's

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# COVID crisis shows value of pharmacy

**EMERGENCY** dispensing measures introduced during Victoria's bushfire and COVID-19 crises, should be made permanent, a State MP believes.

Addressing a sitting of the State Parliament last week, Liberal Democrat MP, Tim Quilty, urged the Government to cull red-tape around continued dispensing saying the COVID experience had shown "a great deal of regulations are unnecessary or even harmful".

"If these regulations were never re-implemented, we could save more lives, not just in response to COVID-19 but in response to the hundreds of other illnesses that take lives every day," he said.

"With the reduced regulations, pharmacists would have greater power to issue routine scripts without the need for patients to visit a doctor, nurses would be

able to care for more patients and vaccines would be easier to provide.

"These changes have been made to save lives and reduce the burden on the healthcare system.

"Removing these regulations has undoubtedly saved lives, so the real question is: why did we ever implement them to begin with?"

"I call on the minister to refer each of these relaxed regulations to the red tape commissioner... to investigate ways to make this liberalisation permanent."

Speaking with *Pharmacy Daily* this morning, Pharmacy Guild of Australia Victorian Branch President, Anthony Tassone, also backed retaining some of the emergency measures on a permanent basis.

"A number of measures that have been introduced for the benefit of



patients and accessibility through the bushfires and the COVID pandemic, make a lot of sense to be ongoing," he said.

"It utilises the expertise of pharmacists it helps ensure patients have access to important medicines, this should be the case all the time, not just when there's an emergency."

## Guild stock management training

**PHARMACISTS** can brush up on their stock management skills through a new Guild Learning and Development (L&D) module designed to provide practical steps to improve stocktaking processes.

The 'Effective dispensary stock management and generic substitution' program, is focused on cycle stock control, and addresses how to use data to minimise the impact of medicine shortages, while strategies for improving generic substitution

rates are also discussed.

"Running out of stock of a dispensary item depletes patient care, and costs more than just the income from a prescription," a Guild L&D statement said.

"If a pharmacy can't give the customer what they want, it can erode the trust that consumers have in the business."

The module has been accredited for one hour of Group 1 CPD, and can be converted into one hour of Group 2 CPD credits upon completion of an assessment.

## TGA issues COVID infringement notices

**THE** Therapeutic Goods Administration (TGA) has issued infringement notices to three businesses and a Western Australia woman over breaches relating to COVID-19.

Celebrity chef, Pete Evan's company, Pete Evans Chef Pty Ltd, landed fines totalling \$25,200, linked to the alleged promotion of a 'BioCharger', for the treatment of "Wuhan Coronavirus" and "recovery from an injury, [and] stress". Queensland-based CK Surgitech

received a \$25,200 fine for allegedly making "a false or misleading statement in an application to have their IVD Rapid Test kits" for COVID-19, included in the Australian Register of Therapeutic Goods (ARTG).

Melbourne's Labtest Direct received a \$12,600 notice for alleged advertising of COVID-19 test kits, while a Western Australian woman has been fined \$2,520 over the importation of test kits that were not included in the ARTG.

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Reference: 1. Resolve Plus Product Information. Date of Most Recent Amendment 26 October 2018.



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## Pharmacy needs vax supply boost

A **SIZEABLE** proportion of the fresh stock of the influenza vaccines ordered by the Federal Government over a week ago for the private market, should be distributed to community pharmacies, Pharmacy Guild of Australia Victorian Branch President, Anthony Tassone, believes.

Speaking with **Pharmacy Daily**, Tassone said a number of pharmacies have reported difficulties in accessing additional doses of the vaccines, after exhausting their initial orders, due to increased demand for the flu jab as a result of the COVID-19 crisis.

Tassone noted the Government-ordered stock, which includes a total of three million doses, including a supply for the private market, had yet to be allocated to immunisers.

"It's [the Government order] still on its way and it's not expected until late May/early Jun, and it's



not clear how much of that will be allocated to the private market for community pharmacy," he said.

"Ensuring as much of that allocation can go towards community pharmacy for the private market as possible will be of great public benefit given the great acceptance that patients have had for vaccinations from community pharmacists."

Tassone noted community pharmacies have played a critical role in supporting the public during the COVID-19 crisis,

ensuring their doors remained open.

**MEANWHILE**, one pharmacy group manager highlighted flu vaccine shortages on Twitter, noting he had been unable to source any through the major wholesalers or minor distributors.

"There are no vaccines," he said in a tweet, adding requirements for all aged care facility staff and visitors was currently "not practical or possible".

"We haven't had systematic deliveries for weeks," he said.

## HMR, RMMR program update

**THE** Pharmacy Programs Administrator (PPA) has confirmed that claiming for follow-up Home Medicine Review (HMR) and Residential Medication Management Review (RMMR) services will be available by the middle of next month.

The changes to the programs (**PD 21 Apr**) are part of the response to the Interim Report of the Royal Commission into Aged Care Safety and Quality, and introduce up to two remunerated follow-up services within nine months of the initial patient interview.

This will enable Service Providers to follow up with both the patient and the referring Medical Practitioner.

See [ppaonline.com.au](http://ppaonline.com.au).

## Mandatory reporting crucial to safety

**HEALTHCARE** regulators need to implement mandatory requirements for the reporting of errors and "near-misses" to boost patient safety.

Speaking during an International Pharmaceutical Federation (FIP) webinar on Fri night, Pharmapod (a patient safety software provider) Pharmacy Director, Daniel Burns, stressed the importance of systematic recording of medication errors and near-misses, if the profession is to make strides in meeting the World Health Organization's Patient Safety Challenge of reducing medication errors by 50% over the next five years.

"What is needed [to achieve this] is a mandatory requirement for errors and near-misses to be recorded with an emphasis on shared learning and improvement," he said.

"Everyone has a part to play in this... people in leadership positions who are dedicated to making change happen and also

pharmacists on the frontline have a responsibility to encourage an open and transparent approach to reporting and learning from errors.

"From our experience coming to a consensus and taking a national system-wide approach will deliver adoption and improvements at pace."

Burns urged pharmacists and regulators to take a holistic approach to medication safety management, highlighting the need to record incidents, and use the information.

"If you don't have the data you can't generate the improvements," he said.

"And then analysing the data in real-time, identifying trends and risks to then put plans in place to mitigate those risks and create actions for improvement."

He added that reporting systems needed to provide meaningful feedback to ensure pharmacists feel there is a benefit to reporting errors and near-misses.

## Home delivery in demand: MedAdvisor

**LISTED** health technology provider MedAdvisor has seen a rapid uptake of its new on-demand home delivery features (**PD 08 Mar**) with more than 9,000 items already processed in the last two weeks.

The delivery platform is now available to pharmacies in Sydney, Melbourne and Brisbane in partnership with Kings, with the aim of helping pharmacies leverage the Federal Government's recently announced \$25 million package to deliver medications to those at risk in the community.

MedAdvisor has discounted the 5km radius fee for each delivery through Kings to \$7.77 during the COVID-19 crisis, meaning it costs pharmacies nothing to deliver to eligible patients once a month because they can claim the full amount for the service.

More than 12,000 delivery claim forms, available through MedAdvisor's PlusOne professional services module, have already been completed,

while activation of the company's Pay in Advance functionality has now expanded to almost 80% of its pharmacy clientele which are now offering the contactless feature to their patients.

MedAdvisor yesterday also announced that its telehealth service was now live, through an extension of its GP Link technology which enables MedAdvisor patients to access a GP from the convenience of their own home.

That means MedAdvisor's platform now facilitates end-to-end remote medical consultation, pharmacy engagement and medication delivery.

The company has seen an increase in the rate of new user activations on the MedAdvisor platform during the coronavirus pandemic "and is proud to offer Australians and the Australian health system assistance as we work together to address the challenges that are present in these trying times," said MD Robert Read.



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## Dispensary Corner

**BELGIUM** is famous for its fried potato “frites” but surely the often-greasy goodness should be a “sometimes food” rather than a staple.

However a glut reported by Belgian potato producers has seen officials ask the country’s citizens to have an extra serve of chips each week during the COVID-19 pandemic.

Restaurant closures and a lack of tourists have seen demand for the salty treat plummet, and the farmers are likely to have to destroy surplus stock if things don’t pick up.

“By eating an extra portion during this crisis [consumers] could collaborate with farmers and the industry to avoid food losses,” said a spokesman for Belgapom, the country’s association of potato producers.

**WE’VE** all heard about President Trump’s “sarcastic” suggestion that disinfectant injections may be a way to treat COVID-19 - but less well known is a suggestion by an Iranian man calling himself an “Islamic prophetic medicine healer”.

Mehdi Sabili has produced a video in which he recommends drinking camel urine to both prevent and cure coronavirus.

Sabili says the urine must be taken “fresh and warm,” with the video sparking many social media reactions ridiculing the suggestion and highlighting the dangers of drinking it.

That’s in line with a 2015 World Health Organization policy which also urged people to avoid the traditional treatment.

## SHPA’s COVID concerns

**PLANS** for the return of elective surgeries will put hospital pharmacies under severe pressure, the Society of Hospital Pharmacies of Australia (SHPA) warns.

Outlining the results of the first weekly COVID-19 Hospital Pharmacy Capacity Snapshot survey, SHPA CEO, Kristen Michaels, said hospitals’ orders for medicines needed to support ventilated beds were not being met.

Michaels said access to key medications including propofol and cisatracurium, has emerged as a factor that could hamper Australia’s capacity to treat a surge in COVID-19 cases.

“Propofol is a key medicine used in the intubation of patients who require ventilation,” she said.

“In our snapshot on Fri 17 Apr hospital respondents only had enough propofol to treat patients in less than half the hospital beds they have been asked to set up.

“Just as Australia was asked to come together and increase ventilated intensive care capacity, SHPA has been working with partners to ensure we have enough medicines to provide care for Australians receiving care in these hospital beds.

“Hospitals have reported not having their orders filled for several

weeks, with 80% of orders only supplied in part, regardless of hospital size, location or patient cohort, highlighting a supply chain in distress.”

Michaels said the findings suggested the health system would struggle to cope in the event of a surge of COVID cases alongside the return of elective surgeries.

“Stocks of these drugs are a tightly guarded secret nationwide and hospitals are poorly informed as to what stock they should expect to receive in coming weeks and months.

“Hospitals are implementing the national response to COVID-19 – including doubling their intensive care beds in many cases, which requires an increase in medicines to be operationalised – only to have commercial wholesalers and manufacturers unable to provide access to key medicines.”

“We appreciate medicine wholesalers may have the best intentions, but they are not clinicians and do not have access to the information about pandemic scenarios and hospital service planning and delivery that must guide medicine orders.”

Michaels said ensuring patients have access to the medications required for ventilation if needed.

## Guild Update

### Heart meds & COVID risk

**THE** Heart Foundation has provided advice for pharmacists over concerns about a possible link between some heart medications and an increased risk of contracting the COVID-19 virus.

Heart Foundation Risk Reduction Manager Natalie Raffoul said the foundation was aware of concerns about a possible link between ACE inhibitor medications, increased risk of infection with COVID-19 and worsened outcomes.

“For many Australians, pharmacists are uniquely placed as the most accessible point of contact with the healthcare system. As trusted medicine experts, they have a vital role in informing and advising patients who are concerned about their medication or treatment in relation to COVID-19.

“Patients may need to be informed of the known dangers of suddenly stopping their blood pressure medications compared with the interaction of these types of medicines with COVID-19, which at this stage is hypothetical and unproven.

“Pharmacists are well aware of the health needs within their community and their role in supporting the safe and appropriate use of medicines has never been more important.”

## Brazil cuts chloroquine COVID trial

**A BRAZILIAN** study to assess the potential use of chloroquine for the treatment of patients with COVID-19 has been abandoned, before it reached the half-way point, after 22 patients died.

A total of 81 patients with confirmed or suspected COVID-19 were randomised

into low or high-dose daily chloroquine regimens.

Researchers had hoped to review outcomes after 28 days, however, the study was cut short less than two weeks in, when 16 of the 41 patients on the high-dose regimen died, while six of the 40 low-dose patients also died.