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Cyber threats very real for pharmacy

PHARMACY owners are being urged to invest in measures to protect against malicious attacks, with Fred IT Managed Services General Manager, Andrew McManus, warning that cyber threats are real.

Speaking at the Australian Pharmacy Professional Conference (APP) last week, McManus said that since mandatory data breach notification legislation was introduced in 2017 the health sector experienced the highest volume of data breaches in Australia.

"You might think, 'how real is that threat, can it really happen to my pharmacy?'" he said.

"Well from our personal experience, I can say it does.

"The frequency is interesting, it tends to go in batches, we had two pharmacies have ransomware [attacks] on the same day two weeks ago.

"On average anywhere between three and five pharmacies every

six to eight weeks tend to get a ransomware attack, so the scale is significant."

Since launching a 24/7 cyber surveillance service last year, McManus said the company's security experts were taking steps to protect against high volumes of threats against pharmacies' data.

"We are now monitoring a few hundred pharmacies and what we're able to do is block malicious IPs," he said.

"And what's taken me is the sheer volume of malicious IPs trying to access pharmacy networks.

"We're blocking over 50,000 IPs a month, and that's only through a few hundred pharmacies."

In addition to investing in round the clock monitoring services, McManus advised pharmacy owners against "surfing the net" on computers used for dispensing to minimise exposure to threats.

McManus also warned owners that having antivirus software would not prevent malicious attacks from hackers.

Rural champion

DEPUTY Prime Minister, Michael McCormack, has been hailed as a champion of rural pharmacy for his support of measures in the 7CPA.

Guild National President, Trent Twomey, told APP delegates that the Deputy PM had been crucial to securing funding for rural pharmacy.

Today's issue of PD

Pharmacy Daily today features three pages of news plus full pages from:

- Willach
- BOD
- MIMs May update

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NPSA wants CSO COVAX distribution

PHARMACY wholesalers believe the broader industry needs to highlight their role as healthcare logistics experts to Federal Health Minister, Greg Hunt, to push for them to be used to distribute COVID-19 vaccines (COVAX).

National Pharmaceutical Services Association (NPSA) Chair, Richard Vincent, told delegates at the Australian Pharmacy Professional Conference (APP) that throughout the COVID-19 pandemic and the 2020 bushfires, the Community Service Obligation (CSO) wholesalers had supported the distribution of medicines across the country.

"In this industry we have an expertise [and] we have to be at the table when we're talking about

supply chain issues and major issues that impact the industry, as we should've been with the vaccine," he said.

"Whilst I know the Pharmacy Guild of Australia recognises what our role is and the value we add, it's obvious that we've a little more work to do with the Health Minister and the Department in that space."

Vincent also praised Pfizer Australia and New Zealand Managing Director, Anne Harris, for the decision to return to the CSO wholesalers (*PD* 20 May) after close to a decade of direct distribution.

"I think she's shown wisdom in bringing that back to the wholesalers," he said.

"I applaud Pfizer for doing that and I think from a pharmacist's



perspective it makes a whole lot of sense having things consolidated through their wholesalers.

"It's a very good move for the industry, it sends a good message about what we should be doing, and we just need the [COVID-19] vaccines to come through the pharmacy wholesalers."

Guild Update

Guild intern of the year at APP

DUBBO local, Angus Koerstz, is the 2020 MIMS/ Guild Intern of the Year at APP2021.

The national award supports the next generation of pharmacists and owners to build a strong foundation for their professional careers.

He currently works at Tim Koerstz Pharmacy in Dubbo, New South Wales and completed his intern year in ACT at Coleman Court Pharmacy.

The Pharmacy Guild of Australia National President, Adjunct Professor Trent Twomey said the award recognises dedicated and innovative intern pharmacists and their work in the community.

"Angus should be very proud of his achievements, and we congratulate him for being awarded 2020 Intern of the Year. His work in taking the Men's Health Initiative to Dubbo and setting up a satellite clinic is inspirational and was dedicated to taking monthly trips to Dubbo to continue the initiative's important work," he said.

Robert Best, CEO and Executive Director of MIMS Australia and New Zealand, congratulated Angus and said MIMS Australia was pleased to continue to sponsor an award that supported the future of Pharmacy.

Knitting for good is back at Guardian

GUARDIAN Pharmacy's Knitting for Good program aimed to support Australians experiencing homelessness and disadvantage, is back for its 23rd year.

The Sigma Healthcare banner project encourages the community to create warm

woollen garments which can be donated to people in need or sold through St Vincent de Paul, with proceeds going to support the charity's soup vans.

Knitters looking for inspiration can pick up the Guardian Angel Knitting Book [HERE](#).

TGA backs Pfizer storage changes

THE Therapeutic Goods Administration (TGA) has approved an application to change storage requirements for the Pfizer-BioNTech COVID-19 vaccines.

The move will allow unopened thawed vials to be stored at 2-8°C at the point of use from five days up to 31.

The change could pave the way for the vaccine to be administered in community pharmacies, once they are approved to join the national COVID-19 immunisation program.

Speaking at the Australian Pharmacy Professional Conference last week, Queensland CHO, Dr Jeannette Young voiced support for pharmacists to give the vaccine.

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Dispensary Corner

TAKING on the role of Pharmacy Guild of Australia National President seems to be a sleepless task, with Deputy Prime Minister, Michael McCormack, revealing he almost blocked the organisation's boss after being woken up by a text from Trent Twomey.

Speaking at the Australian Pharmacy Professional Conference (APP) on Thu, McCormack, revealed "Trent does, from time-to-time text me at ungodly hours of the morning, and I wish he wouldn't."

"In fact when he did that recently, I was at my wits end with this particular person who texts me repeatedly all day - but only during the day," McCormack said.

"The phone started buzzing at 4am, and I thought, 'today's the day I'm going to block this bloke', and I don't think I've ever blocked anyone in my life.

"But in my sleepy stupor, I looked over and it was Trent Twomey, and you can't block the newly crowned President of the Guild."

The Deputy PM added that he wouldn't have considered blocking former Guild President, George Tambassis, "but George wouldn't have sent me a text at 4am".



APC seeks Intern Year Blueprint views

PHARMACY preceptors and interns in the ACT, Victoria and South Australia, are being asked to share their thoughts on the usability and practicality of proposed new assessment tools for pharmacy interns.

The six tools developed by the Australian Pharmacy Council (APC) and the Pharmacy Board of Australia cover the three assessments - in-training assessment (ITA), case-based discussion (CbD), and entrustable professional activities (EPA), as part of its Intern Pharmacy Blueprint document.

For ITA activities the APC has developed a health promotion, health services and public health tool, which provides structured guidance and templates to help interns support initiatives designed to maintain or improve the health of members of the public, while a



reflection tool has been designed to give interns a means of learning by looking back at incidents or observations during their intern training.

Under the EPA assessment the APC has an intern and preceptor guide which describes why and how to adopt an EPA-based framework and develop to support assessments on dispensing medicines, compounding

pharmaceutical products, and providing counselling.

The APC said the CbD tool was designed to give interns and preceptors a structured guide to support learning and facilitate assessment from discussion of a case encountered in the workplace.

The APC will pilot the tools in hospital and community pharmacies in the ACT, Victoria and South Australia later this year.

Federal funding boosts APP sponsors

SPONSORS and exhibitors who attended the Pharmacy Guild of Australia's Australian Pharmacy Professional Conference (APP) last week have secured a combined total of \$1.36 million from the Federal Government's Business Events Grant Program.

The funding provided up to 50% in grants to companies that spent at least \$20,000 to attend the Guild's showpiece event.

APP Convenor and former Guild National President, Kos Sclavos, thanked the Morrison Government's \$50 million program.

"The Federal Government's Business Events Grant supported many in the pharmacy industry

after what was a tough 2020 during the COVID-19 pandemic," he said.

Speaking to *Pharmacy Daily*, Sclavos said there had been an "enormous financial investment from all our sponsors and the Guild" to host APP.

"A lot of people have come to the conference confident [and] it's been great for the industry to show we can come together," he said.

"But I think the lesson for Australia is we need more certainty with borders, because we're still running enormous risk.

"These events are important, face-to-face is still an important element of pharmacy."

New PA Panadol training module

PHARMACY Club and GSK are rolling out a new Quality Care Pharmacy Program (QCPP) approved training module designed to help pharmacy assistants identify the cause and typical signs and symptoms of common childhood ailments.

The hour-long course also shows how the Panadol Children's range can assist with the treatment of pain and fever in children.

The module is available through the new GSK Pain Hub on www.pharmacyclub.com.au.

The hub also hosts activities from other GSK pain brands.

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1. The endocannabinoid system: Overview of an emerging multi-faceted therapeutic target. Dipanjan Chanda, Dietbert Neumann, Jan F.C. Glatz, s.l. : Prostaglandins, Leukotrienes and Essential Fatty Acids, 2019, Vol. 140, pp. 51-56.

2. <https://www.tga.gov.au/access-medicinal-cannabis-products-1>

3. <https://www.tga.gov.au/sites/default/files/foi-1425-01.pdf>

New Products

- **Elexacaftor/tezacaftor/ivacaftor and ivacaftor (Trikafta)** contains elexacaftor and tezacaftor, which are cystic fibrosis transmembrane conductance regulator (CFTR) correctors that bind to different sites on the CFTR protein and have an additive effect in facilitating the cellular processing and trafficking of *F508del*-CFTR to increase the amount of CFTR protein delivered to the cell surface compared to either molecule alone. Ivacaftor potentiates the channel open probability (or gating) of the CFTR protein at the cell surface. The combined effect of elexacaftor, tezacaftor and ivacaftor is increased quantity and function of *F508del*-CFTR at the cell surface, resulting in increased CFTR activity as measured by CFTR mediated chloride transport. Trikafta is indicated for the treatment of cystic fibrosis in patients ≥ 12 years who have at least one *F508del* mutation in the CFTR gene. Trikafta tablets are available as a composite pack of 56 morning tablets (containing elexacaftor 100 mg, tezacaftor 50 mg and ivacaftor 75 mg as a fixed-dose combination), and 28 evening tablets (containing ivacaftor 150 mg).
- **Esketamine (HCl) (Spravato)**, the *S*-enantiomer of racemic ketamine, is an antidepressant with a novel mechanism of action. It is a non-selective, non-competitive antagonist of the *N*-methyl-*D*-aspartate (NMDA) receptor, an ionotropic glutamate receptor. Evidence within the literature suggests that through NMDA receptor antagonism, esketamine produces a transient increase in glutamate release leading to increases in α -amino-3-hydroxy-5-methyl-4-isoxazolepropionic acid receptor (AMPA) stimulation and, subsequently, to increases in neurotrophic signaling that restore synaptic function in these brain regions. Esketamine's primary antidepressant action does not directly involve monoamine, GABA, or opioid receptors. Spravato is indicated for treatment resistant depression (major depressive disorder in adults who have not responded adequately to at least two different antidepressants of adequate dose and duration to treat the current moderate to severe depressive episode). It is to be initiated in conjunction with a newly initiated oral antidepressant. Spravato is contraindicated in patients for whom an increase in blood or intracranial pressure poses a serious risk: patients with known aneurysmal vascular disease (including intracranial, thoracic or abdominal aorta, or peripheral arterial vessels), or patients with known history of intracerebral haemorrhage. It is also contraindicated in patients with hypersensitivity to ketamine. Spravato nasal spray contains esketamine 28 mg/2 actuations (equivalent to 0.2 mL) and is available in a pack size of 1, 2 or 3 single-use devices.
- **Ofatumumab (Kesimpta)** is a recombinant human anti-CD20 monoclonal immunoglobulin G₁ (IgG₁) antibody. It binds to a distinct epitope encompassing both the small and large extracellular loops of the CD20 molecule giving rise to a slow off-rate and high binding affinity. The CD20 molecule is a transmembrane phosphoprotein expressed on B lymphocytes from the pre-B to mature B lymphocyte stage. The CD20 molecule is also expressed on a small fraction of activated T cells. The binding of ofatumumab to CD20 induces lysis of CD20+ B-cells primarily through complement-dependent cytotoxicity and to a lesser extent, through antibody-dependent cell-mediated cytotoxicity. Ofatumumab has also been shown to induce cell lysis in both high and low CD20 expressing cells. CD20-expressing T cells are also depleted by ofatumumab. Kesimpta is indicated for the treatment of adults with relapsing forms of multiple sclerosis to delay the progression of physical disability and reduce the frequency of relapse. Kesimpta solution for injection contains ofatumumab 20 mg/0.4 mL and is available in a pack size of 1 prefilled pen.

New Indications

- **Enzalutamide (Xtandi)** is now indicated for the treatment of patients with metastatic hormone-sensitive prostate cancer.
- **Fulvestrant (Faslodex)** is now indicated for the treatment of postmenopausal women with hormone receptor positive, human epidermal growth factor receptor 2 negative, locally advanced or metastatic breast cancer who have not been previously treated with endocrine therapy.
- **Inactivated quadrivalent influenza vaccine, split virion (influenza virus haemagglutinin) (Vaxigrip Tetra)** is now indicated for the active immunisation of pregnant women and passive protection of infants from birth to less than 6 months of age following vaccination of pregnant women against the two influenza A virus subtypes and two influenza B virus types contained in the vaccine.
- **Lacosamide (Vimpat, Vimpat Injection)** is now indicated as add-on therapy in the treatment of primary generalised tonic-clonic seizures in patients ≥ 4 years with idiopathic generalised epilepsy.
- **Olaparib (Lynparza Tablets)** is now indicated as monotherapy for the treatment of adults with *BRCA*-mutated (germline and/or somatic) metastatic castration-resistant prostate cancer who have progressed following prior therapy that included a new hormonal agent. *BRCA* mutation status should be determined by an experienced laboratory using a validated test method.
- **Omalizumab (rch) (Xolair)** is now indicated as add-on treatment in adults ≥ 18 years with severe chronic rhinosinusitis with nasal polyps with inadequate response to intranasal corticosteroids.

New Contraindications

- **Levonorgestrel/ethinylestradiol and ethinylestradiol (Seasonique)** is now contraindicated with the concomitant use of glecaprevir/pibrentasvir and sofosbuvir/velpatasvir/voxilaprevir.
- **Melphalan (Alkeran, Alkeran Injection)** is now contraindicated during lactation.

- **Siponimod** (Mayzent) should not be administered to patients who in the last 6 months had myocardial infarction, unstable angina pectoris, stroke/transient ischemic attack, decompensated heart failure (requiring in-patient treatment), or New York Heart Association Class III/IV heart failure; or with second-degree Mobitz type II atrioventricular (A-V) block, third-degree A-V block, sino-atrial heart block or sick-sinus syndrome, if they do not have a pacemaker.

*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.*