

Today's issue of PD

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

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- Willach
- Glucojel

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Learn more on **page five**.

Guild marks 5,000 UTI services in Tas

THE Tasmanian branch of the Pharmacy Guild of Australia has celebrated 5,000 occasions of service under the urinary tract infection pilot, with the President of the branch Joe O'Malley joined by Minister for Women Jo Palmer and Minister Roger Jaensch to mark the milestone.

O'Malley said 5,000 occasions of service is a great outcome for Tasmanian women.

"This is a patient-focused program that is all about delivering more services for Tasmanian women, when they need it and close to where they live," O'Malley said.

"We thank the government for their collaboration on this great program, which shows what is possible when community pharmacy is supported to provide services for Tasmanians."

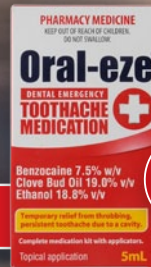
The program commenced in Tasmania earlier this year, with similar models operating across all mainland jurisdictions.

O'Malley added that the Guild

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was excited at the opportunities to continue working with the government on the recommendations of the Scope of Practice Review report.

"Community pharmacy can take pressure off our GPs and emergency departments by delivering more services for Tasmanians.

"This means better access to healthcare in our communities," O'Malley said.

"There is no doubt this program has already saved hundreds of GP appointments and potential hospitalisations since it began - not to mention the support for thousands of Tasmanian women who have been able to access healthcare when they need it, which saves them money and time.



"So we will keep working with the Government on expanding community pharmacy's scope of practice," O'Malley said. KB

Glucojel Glucojoy

GLUCOJEL is running a major campaign for a \$10,000 giveaway, so stock your shelves with the popular product to attract more customers in-store - more details **page six**.

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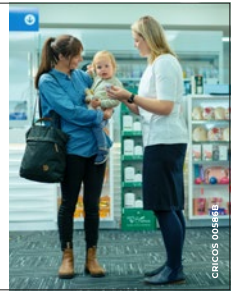
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IPE Colloquium early bird open

THE Australian Pharmacy Council (APC) has announced that the IPE Colloquium program is now online and earlybird registrations are also now open until 31 Mar 2025.

The event, which is being held in Melbourne on 13 May next year, builds upon APC's ongoing efforts to work towards an interdisciplinary approach to health profession education and assessment.

The IPE Colloquium aims to provide a platform for cross-disciplinary dialogue between health profession educators, policymakers and students.

Featuring local and international speakers, the theme will be 'Breaking boundaries: Education as an enabler of trust in healthcare'.

The program centres on preparing students for a future shaped by expanded scopes of practice, misinformation and planetary health.

See the program [HERE](#).

Call for palliative care EOIs

THE Pharmaceutical Society of Australia (PSA) successfully applied for a National Palliative Care Project grant from the Department of Health and Aged Care last year.

The projects work towards improving quality and access to critical support and treatment for people with life-limiting illnesses and their loved ones.

As a key component of this three-year project, the PSA will develop and deliver six service model pilots of pharmacists working within community-based palliative care teams.

Each pilot pharmacist will work as part of a multidisciplinary team alongside medical, nursing and allied health staff to support patients and their carers with medication management, quality use of medicines, transitions of care and timely access to medicines.

Pilot pharmacists will work either one day per week or two half-days



for a period of 12 months starting late Mar 2025, with project-specific training and ongoing support provided by PSA.

The pilot locations are Coffs Harbour and Orange in NSW, the Gold Coast, Hobart, and Melbourne and Shepparton in Victoria.

The PSA is currently seeking expressions of interest from Australian registered pharmacists who would like to be considered for the pilot.

Applications close 31 Dec - submit your interest [HERE](#). *KB*

A year of Audirie

THE Pharmaceutical Society of Australia (PSA) has marked its first year of partnership with software company, Audirie (*PD* 25 Jan).

The partnership has seen thousands of pharmacists, interns, and pharmacy assistants enhance their patient counselling and clinical communication skills through AI-powered simulations.

"Our collaboration with Audirie is boosting the capacity of our education programs to deliver real-world experience for pharmacists, interns and assistants, setting them up to succeed in new roles," said PSA National President Associate Professor Fei Sim.

"Integrating pharmacist prescriber simulations means learners will be able to practically apply knowledge, counselling and prescribing for an AI-driven patient in real-life clinical scenarios," she added, saying the PSA will expand the use of the simulations in 2025.

CDU topping out milestone

CHARLES Darwin University's (CDU) new \$25.8 million Centre for Better Health Futures in Darwin has marked a significant construction milestone, with the installation of the centre's roof.

The roof allows construction to continue throughout the wet season.

Once complete, the 3,684m², three-storey building will deliver practical learning facilities along with laboratory environments and research infrastructure.

The centre will include a simulated ED and a 12-bed hospital ward, as well as virtual reality technologies that can be used across CDU's NT campuses, better preparing students to join the Territory's growing health workforce.

Wegovy and Mounjaro go head-to-head

THE first head-to-head comparison of the efficacy of Mounjaro (tirzepatide) and Wegovy (semaglutide) in adults with obesity or who are overweight with weight-related comorbidities has found in favour of Mounjaro, reports Mounjaro manufacturer Eli Lilly.

The top-line results, which have not yet been published in a peer-reviewed journal, showed that Mounjaro delivered a clinically meaningful benefit and statistically significant weight loss, with patients experiencing a 47% greater relative weight loss compared to Wegovy at 72 weeks.

The SURMOUNT-5 trial included around 750 adults with obesity, or who are overweight without diabetes but with at least one of the following comorbidities: hypertension, dyslipidaemia, obstructive sleep apnea or



cardiovascular disease.

The trial found that, on average, participants using Mounjaro lost 20.2% (22.8kg) of body weight and participants on Wegovy lost 13.7% (15kg) over the 72 weeks.

Kelly Frankel of Eli Lilly Australia and New Zealand said, "The dual action of Mounjaro on GIP and GLP-1 has been shown superior in terms of weight loss to sole GLP-1 inhibition in this important head-to-head trial".

"These new data add to the body of evidence that Mounjaro

is superior among its respective indications," Kelly added, with an earlier trial having demonstrated superior HbA1c reduction for those treated with Mounjaro, compared to semaglutide (Ozempic), in patients who had type 2 diabetes.

Lilly dropped the recommended retail price of Mounjaro last week to \$285 (*PD* 02 Dec), and Frankel said, "we will continue to work with all stakeholders to secure a path to affordable and equitable access to Mounjaro in Australia".

Dispensary Corner

AS WITH red wine, there seems to be no shortage of health study outcomes finding in favour of chocolate.

Huzzah! Chocolate (and wine) lovers rejoice!

Unfortunately, any good news study published is invariably followed shortly by bad news.

This latest chocolate study has good and bad news, depending on whether you prefer dark or milk chocolate.

Scientists found that eating five servings of dark chocolate a week may reduce your risk of type 2 diabetes, but the same is not true for milk chocolate.

The findings were based on data from questionnaires comparing food consumption with health outcomes for over 100,000 health professionals.

Those who ate at least five servings a week of dark chocolate were 21% less likely to develop type 2 diabetes than people who rarely or never ate any type of chocolate.

That people who ate more dark chocolate had a bigger risk reduction than those who ate just a little suggests dark chocolate may be playing a role, potentially due to its flavanols.

People who ate five or more servings of milk chocolate not only didn't benefit from it, but were more likely to gain weight.

Before we all engage in a dark-chocolate-eating frenzy, one important caveat is the definition of "serving", which is only 30g.

On the other hand, they do say five *or more* servings - so, licence to go nuts!

Tegen's vision for rural pharmacy

EXCLUSIVE

PHARMACISTS working in rural and regional areas continue to face unique challenges their city-based counterparts do not, and may not even be aware of.

In an interview with *Pharmacy Daily*, National Rural Health Alliance CEO Susi Tegen (pictured) said pharmacists are relied upon heavily, but were under-supported and undervalued by those who do not live and work in rural and regional Australia, yet are highly utilised by communities and by other clinicians.

"We need pharmacists in rural communities, as they are part of the fabric that makes up communities," said Tegen.

"Like any clinician working in rural areas, they are part of a multidisciplinary team which is sometimes spread across tens, hundreds or thousands of kilometres," she said.

"We need acknowledgment for effort, and support for what is needed where the market fails or is thin - or where there is no market."

Rural pharmacists also need time and support for professional development, as well as locum support, she says, in addition to "support and camaraderie from others in health community, and an understanding of rural situations - without 'geographic narcissism'."

It's important to understand that rural communities "are different, and often do not have the networks, the infrastructure and funding that those in the city have.

"Make policy and funding for rural pharmacists and communities fit for purpose, otherwise it is a waste," she says.

"We need consistent rural funding that reflects place, the tyranny

of distance, the cost of service delivery and the fact that it is harder to cross-subsidise."

And that funding has to be equitable.

"We have seen pharmacists in the same town receive different treatment in funding and support, despite being around the same size and serving a vast region."

Attracting more pharmacists to live and work in rural communities is another area to be addressed.

"Support for rural training, accommodation and moving to a community while they are still paying for their city rental property are needed.

"If this does not exist, why should anyone be interested?"

"Defence, the police force and mining industry do this well, so why can't health?"

Tegen would also like to see more students with a rural background selected into university



training programs, "as they are exponentially more likely to stay rural or move [back]."

"This is particularly so for Indigenous students and trainees."

Ultimately, she says, "rural is not down and out, but resilient and amazing." KB

You can read the full interview with Susi Tegen in the *Pharmacy Daily Year in Review*.

Featuring interviews with pharmacy leaders and a wrap of this year's top stories, the *Year in Review* is hitting inboxes today.

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