



Hartley's Gripe Water helps reduce colic and wind in infants.

Available from Symbion, Sigma, API & CH2.

Australian made. Pharmacy only. Always read the label and follow the directions for use. 

Today's issue of PD

Pharmacy Daily today features two pages of news, plus the **November MIMS Update**, and full pages from:

- Dispense Assist
- Glucojel

Low-cost solution

SEE page three to learn how Dispense Assist can save pharmacy owners time and money at rates as low as \$6.37 per hour.

Gluco-joy ahead

GLUCOJEL, the original pharmacy jellybean, is giving customers the chance to win \$10,000 - for more information on the major giveaway, see **p4**.

Careers podcast

THE latest episode of Raven Recruitment's *Your Pharmacy Career* podcast is out not featuring Jenny Kirschner, Founder of Pharmacy Addressing Loneliness and Social Isolation (PALS).

In the episode, Kirschner shares her personal journey with listeners to gain insight into her extensive career, including her time in clinical pharmacy and health coaching.

Listeners will also learn how Kirschner's passion for human connection inspired her to create PALS - find the podcast **HERE** or on a podcast app.

Scope review revealed

THE *Unleashing the Potential of our Health Workforce - Scope of Practice Review* report, released yesterday, confirms barriers to care and inefficiencies in the current health system for pharmacists.

Some barriers identified were limited awareness of scope, less preparation of, and support for, health professionals to practice their skills, as well as restrictions placed on those professionals who were remunerated by a fee-for-service payment system.

The report also proposes reforms to allow pharmacists to practice to the full extent of their training.

Led by Prof Mark Cormack, the independent review reveals how legislative and regulatory settings restrict scope of practice in primary care, with drugs and poisons legislation "inconsistently" impacting scope across locations.

The review outlines principles to expand care access, improve productivity, and encourage cross-disciplinary collaboration.

It recommends technology use and scope of practice reforms to maximise the contributions of healthcare workers across Australia.

Conducted over a year, the review presents 18 recommendations for immediate and future action.

A/Prof Fei Sim, National President of the Pharmaceutical Society of Australia (PSA), endorsed the review's focus on dismantling barriers affecting pharmacists.

"This review confirms PSA's view that inconsistent regulations and unnecessary restrictions are limiting patient access to quality healthcare," she said.

"It's time to implement all 18 recommendations."

Sim noted the alignment between the review's recommendations and the PSA's vision, emphasising the critical role of pharmacies in primary care and advocating for a collaborative, multidisciplinary model. *JG*

To see the full scope of practice report, **CLICK HERE**.

PBS medicines listings deferred again

BETTER Access Australia is calling on patient and community groups to sign a petition demanding the Federal Government reverse its indefinite deferral of 44 medicines from the PBS.

The Department of Health recently informed pharmaceutical companies that 44 of the 77 medicines set for review in Mar 2025 by the Pharmaceutical Benefits Advisory Committee (PBAC) will face indefinite delays, citing

"workload and resourcing issues".

The PBAC's decision left patients uninformed about which treatments will be impacted, potentially including several cancer, chronic, or rare disease medications.

In 2011, a similar move met strong public and parliamentary opposition, securing bipartisan support for timely PBS listings.

Better Access Australia argued it is time to stand up for access to essential medicines once again.

New CPD tool

LRNRX has launched a new Continuing Professional Development (CPD) tool to simplify annual planning of education for pharmacists.

Offered free to all registered LRNRX users, the tool allows pharmacists to complete their CPD plans in just 15 minutes, via the LRNRX app or website.

Developed in response to feedback from over 700 users, LRNRX's founder and pharmacist, Krysti-lee Patterson, said the tool was designed to meet AHPRA registration requirements, especially with the deadline approaching this month.

"Our solution is straightforward and efficient, catering directly to the needs of pharmacists," Patterson said.

This release further underscores LRNRX's commitment to accessible, mobile-friendly resources that enhance professional growth and patient care for pharmacists nationwide.

While the CPD Plan Tool is a valuable new resource, LRNRX also acknowledged established education platforms like those from the Australasian College of Pharmacy, the Pharmaceutical Society of Australia, and Advanced Pharmacy Australia for comprehensive CPD recording.

LRNRX encourages pharmacists to continue using these platforms for in-depth tracking while benefiting from its streamlined planning tool.



Paracetamol 500mg

RAPID RELEASE

Put pain in the past, **FAST.**

LIMITED OFFER!

Special Pharmacy Deal Available Now

P011124aS2v1.0 Always read the label and follow the directions for use. Incorrect use could be harmful. For details on health warnings please see <https://novapharm.com.au/disclaimer-detail/medichoice-paracetamol-rapid-release-500mg/>



Call Haven Hall
on (02) 9316 9810





Dispensary Corner

US SCIENTISTS say yoga may help improve chronic lower back pain, even if it's delivered via live-streaming online.

They took 140 Cleveland Clinic employees and split them into two groups: 71 lucky ones who got to do live-streamed yoga classes for 12 weeks, dubbed Yoga Now, and 69 others on a Yoga Later waitlist who just watched from the sidelines.

The Yoga Now folks enjoyed weekly, hour-long classes from their living rooms, stretching, breathing, and hopefully not startling their pets.

By the end of 12 weeks, their back pain intensity and daily function had significantly improved compared to those in the waitlist group.

The bonus was that Yoga Now participants also slept better, and their painkiller use dropped by over 20%.

The improvements didn't just vanish after the classes stopped.

By the 24-week mark, those who did the yoga continued to show reduced pain and better sleep, suggesting virtual yoga is more than a passing fad.

The researchers said this study is a win-win for anyone with back pain who doesn't want to leave home for relief.

So, if you're on the fence about trying yoga from your couch, this study says go ahead - just maybe move the coffee table first.



Aged care report approved

THE Older Persons Advocacy Network (OPAN) has expressed support for the Senate's recent report on the *Aged Care Bill 2024*, which aims to prioritise older Australians' legislative rights.

OPAN CEO Craig Gear described the report as a major advancement in securing legal protections for older people.

"I congratulate the Senate Committee for releasing its main report on the *Aged Care Bill 2024*," Gear said.

This Bill implements 58 recommendations made by the Royal Commission into Aged Care Quality and Safety, and establishes a modern, rights-based legislative framework, he explained.

"We have long called for an Act that focuses on the rights, safety, health and wellbeing of older people in the country.

"This Bill provides those building blocks," he added.

Gear also supported the Committee's suggestions for refining hardship provisions, and emphasised the need to prepare providers and families for the Bill's Jul 2025 implementation.

"On balance, it's now time to move forward.



"We need the support for transitioning all parties, including older people, families and providers," Gear said.

"There is much work that needs to be done to ensure aged care providers are ready for the 01 Jul 2025 start date, but this can be done," he added.

Gear also acknowledged the contributions of older Australians who shared their experiences during the Senate inquiry.

"I'd like to thank everyone who contributed to the Senate's inquiry, and our advocates who gave evidence at the hearings," Gear said.

"I look forward to engaging with the government on the implementation of this Bill." JG

Pertussis test

UNSW Sydney and the University of Technology Sydney (UTS) researchers have developed a genomic test to identify specific whooping cough strains (*Bordetella pertussis*) as cases surge.

This new tool has shed light on past whooping cough epidemics in Australia and abroad, with findings published in the *Journal of Clinical Microbiology*.

Led by UNSW's Prof Ruiting Lan, and UTS Chancellor's Research Fellow Dr Laurence Luu, the team aimed to use this test to pinpoint the strain behind Australia's current whooping cough outbreak.

"This study paves the way for real-time surveillance of whooping cough strains, overcoming current testing limitations," said Dr Luu.

"Our results provide important baseline data to understand how whooping cough has changed in Australia and could be used to help guide us through the current outbreak," he said.

To learn more about the new research, **CLICK HERE**.

Fights superbugs

A SURVEY of a waterway on Wurundjeri land in Victoria has uncovered new viruses that target the superbug *Klebsiella*.

Led by Monash University and traditional owners, the study, published in *mBio*, suggests small waterways could hold viruses capable of combating drug-resistant superbugs expected to cause 10 million annual deaths by 2050 - learn more, **CLICK HERE**.

DID YOU KNOW?

That we regularly publish **Health Professional only** editions of *Pharmacy Daily*?

CLICK HERE TO UPDATE YOUR DETAILS

Pharmacy Daily



**STAFF SHORTAGES?
OVER-WORKED?
WAGES INCREASING?**



GIVE YOUR DISPENSARY THE HELP IT NEEDS

Dispense Assist is a revolutionary way of dispensing prescriptions in your pharmacy for a fraction of your normal cost.

Utilising the latest technology, software and security, Dispense Assist technicians work on your workstation to dispense prescriptions and perform any other task you require.



We are available 24/7/365 at a moment's notice whenever needed for sessions of 30mins to 24hrs.

Rates as low as \$6.37 per hour with the same rates for days, nights, weekends and public holidays.

PERFECT FOR DISPENSING AND OTHER TASKS FOR:



DAA



Compounding



Cannabis



Private Hospitals



Online Sales

and much more

Curious to see if it's a fit for your pharmacy?

Sign up for a FREE Trial Now:





GLUCOJEL™

The Original Pharmacy Jelly Bean

**GLUCO
JOY!**

**WIN
\$10K***

10,000 REASONS TO SMILE

We're giving your customers a chance to **WIN \$10K*** when they purchase Glucojel. Make sure your shelves are fully stocked!

OUR PROFIT IS YOUR PROFIT.

Go to goldx.com.au/glucojel for more information.

*Terms and conditions apply



New Products

- **Dapagliflozin (propanediol monohydrate) and sitagliptin (phosphate monohydrate) (Sidapvia)** is a combination of the sodium-glucose cotransporter 2 (SGLT2) inhibitor, dapagliflozin, and the dipeptidyl peptidase 4 (DPP4) inhibitor, sitagliptin, with distinct and complementary mechanisms of action to improve glycaemic control. Inhibition of SGLT2 by dapagliflozin reduces reabsorption of glucose from the glomerular filtrate in the proximal renal tubule with a concomitant reduction in sodium reabsorption leading to urinary excretion of glucose and osmotic diuresis. Sitagliptin improves glycaemic control in patients with type 2 diabetes by enhancing the levels of active incretin hormones. Incretin hormones, including glucagon-like peptide-1 (GLP-1) and glucose-dependent insulinotropic polypeptide (GIP), are released by the intestine throughout the day, and levels are increased in response to a meal. By enhancing active incretin levels, sitagliptin increases insulin release and decreases glucagon levels in a glucose-dependent manner. In patients with type 2 diabetes mellitus with hyperglycaemia, these changes in insulin and glucagon levels lead to lower HbA1c and lower fasting and postprandial glucose concentrations. *Sidapvia is indicated as an adjunct to diet and exercise to improve glycaemic control in adults with type 2 diabetes mellitus when treatment with both dapagliflozin and sitagliptin is appropriate. It should be used in combination with metformin unless contraindicated or not tolerated.* Sidapvia tablets contain dapagliflozin 10 mg and sitagliptin 100 mg and are available in packs of 28.

New Indications

- **Empagliflozin (Jardiance)** is now indicated in the treatment of type 2 diabetes mellitus to improve glycaemic control in children aged 10 years and above as monotherapy when diet and exercise alone do not provide adequate glycaemic control in patients for whom use of metformin is considered inappropriate due to intolerance, and as add-on combination therapy with other glucose-lowering medicinal products including insulin, when these, together with diet and exercise, do not provide adequate glycaemic control.
- **Empagliflozin and metformin hydrochloride (Jardiamet)** is now indicated as an adjunct to diet and exercise to improve glycaemic control in children aged 10 years and above with type 2 diabetes mellitus when treatment with both empagliflozin and metformin is appropriate.]
- **Faricimab (Vabysmo)** is now indicated for the treatment of macular oedema secondary to retinal vein occlusion.

New Contraindications

- **Disulfiram (Antabuse)** is now contraindicated in patients with hypertension, suicidal risk, psychosis and severe personality disorder.
- **Promethazine hydrochloride (Phenergan)** is now contraindicated for use in children under 6 years of age.
- **Sotalol hydrochloride (Sotacor)** is now contraindicated in patients with hypersensitivity to sulfonamides and hypokalaemia.
- **Voriconazole (Vfend)** is now contraindicated for concomitant use with finerenone.

Safety Related Changes

- **Atezolizumab (Tecentriq and Tecentriq SC)** is no longer indicated for the treatment of patients with locally advanced or metastatic urothelial carcinoma who are considered ineligible for platinum-containing chemotherapy (other than cisplatin-ineligible with PD-L1 expression \geq 5% of tumour area).

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.