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Today's issue of PD

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

- Dispense Assist
- Glucojel

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See **page four** for details.

Attract customers

GLUCOJEL jellybeans can help reel more customers into your pharmacy.

Learn more about a discount offer on these customer favourites on **page five**.

NSW pharmacist receives reprimand

THE Federal Minister for Health and Ageing has reprimanded New South Wales pharmacist Jebconss Pty Ltd for improper claiming of payment from the Commonwealth for PBS medicines that were not supplied at or from its approved premises.

This constituted a breach of PBS approval, contravening Part VII of the National Health Act 1953 and was deemed "an abuse of its approval", according to the Minister's delegate.

CWH raises \$1.27m for Gotcha4Life

CHEMIST Warehouse has raised \$1.27 million to support the Gotcha4Life Foundation as part of its 2025 Men's Health Campaign, a national initiative to promote mental fitness and work towards reducing suicide rates in Australia.

The campaign was launched during Men's Health Month in Jun, with money raised through customers and supplier partners, thanks to in-store donations, the sale of Gotcha4Life Men's Care Boxes, and 5% of sales from selected partner brands donated throughout the campaign period.

Founded in 2017 by Gus Worland after the loss of a close friend, Gotcha4Life is dedicated to ending suicide by building mental fitness and strong social connections.

Funds raised by Chemist Warehouse will directly support



the charity's preventative programs in schools, sporting clubs, workplaces, and communities across the country.

"Chemist Warehouse has been with us since the very beginning, and to see how this campaign has grown and genuinely changed lives is incredible," Worland said.

He thanked Chemist Warehouse, its customers, and its suppliers, saying their ongoing support builds the mental fitness of men as they work towards zero suicides.

"Gotcha4Life is a cause that truly resonates with us at Chemist Warehouse," said Mario Tascone, CWH Chief Operating Officer.

"Our support goes beyond fundraising, it's driven by a deep commitment from our entire team both in stores and head office to help shift the conversation around mental health in Australia.

"We're incredibly proud to stand behind Gotcha4Life year after year and we remain passionately dedicated to helping them reach more people, spark more conversation, and save more lives.

"Together, we're changing lives, one conversation at a time."

Xolair advice

SOME pharmacies have had problems with prescribing and claiming omalizumab PBS items since 01 Aug and the Department of Health and Aged Care has launched a search for a solution.

For existing omalizumab prescriptions dated prior to 01 Aug, suppliers can dispense either 150mg syringe Omlyclo or 150mg pen device Xolair.

The patient does not need to obtain a new prescription for the 150mg pen device.

Lately, some pharmacies have faced issues such as receiving PBS Online claim rejections R738 (the item provided was not a PBS benefit at the date of prescribing), due to the incorrect bio grouping between the Private Hospital and Public Hospital omalizumab 75mg item codes.

Services Australia will monitor and honour eligible PBS claims with the rejection R738 in a separate payment after the data is corrected in the 01 September 2025 schedule update.

The Online PBS Authorities application is also not correctly assessing that the patient has an authority in their history for the "same drug".

If prescribers receive a rejection RC820 via HPOS, phone Services Australia to override the rejection.

Services Australia is currently implementing an urgent ICT fix for this and will advise when it is resolved.

NEW

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Qld flu warning

QUEENSLAND has recorded nearly 44,000 confirmed cases of influenza so far in 2025, with health authorities urging people to see their pharmacist to get their flu vaccination.

Pharmacy Guild of Australia Queensland President Chris Owen said almost 90% of flu hospitalisations are from people who have not had a jab.

"Eighty-six percent of people hospitalised with flu weren't vaccinated and 90 percent of reported cases hadn't had the vaccine," Owen said.

"The message is clear: get to your community pharmacy and get vaccinated."

The Guild added that the surge in infections is putting a great strain on the health system that is preventable.

Experts are warning that Aug is a peak month for influenza activity, highlighting a point that the flu season is not yet over and vaccination remains critical for all Queenslanders.

More than 1,200 community pharmacies across the state are providing free shots to anybody aged six months and up, with extended trading hours, walk-in appointments and online bookings all able to make the process quick.

"With flu season expected to continue for at least another month, Queenslanders are strongly encouraged to book their free flu vaccination as soon as possible," Owen added.

"Getting vaccinated not only protects individuals but also helps prevent the spread of influenza within the community, including the elderly, children and people with chronic health conditions."

GLP-1RAs link with eye conditions confirmed

TWO large studies published today have confirmed links between GLP-1RAs, the group of diabetes and weight loss drugs that includes Ozempic, and eye conditions.

One study, using data from more than 1.5 million people, found there was an increased risk of optic nerve disorders in people with type 2 diabetes taking the drugs semaglutide or tirzepatide.

The patients, who had no prior eye disorders, had an increased risk of nonarteritic anterior ischemic optic neuropathy and other optic nerve disorders after taking the GLP-1RAs compared with other diabetes drugs.

However, the overall risk was low, with around 100 patients out of 80,000 experiencing optic nerve damage.

The authors said the findings highlight the need for close monitoring of these conditions in this patient group.

A second study in over 185,000 people found a link between taking a GLP-1 drug and a slightly higher risk of diabetic retinopathy - although the absolute risk was still low.



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Reference: 1. <https://compliance.health.gov.au/artg/search=melatonin> cited 09/05/2025.



Interestingly, however, fewer patients experienced sight-threatening diabetic retinopathy complications, including blindness, even among those who had the condition prior to taking the medication, suggesting a protective effect.

The study findings suggest that all patients with T2D treated with GLP-1 RAs, regardless of preexisting diabetic retinopathy, should be regularly screened and monitored for potential complications of T2D.

An accompanying editorial discussing the two studies said they support a link between these drugs and eye outcomes, and suggested "a strong synergy between diabetes care practitioners and eye care specialists is essential for coordinated management of high-risk patients".

"The path forward is one of balance: preserve the broad advantages of [the medications] and their successors while prospectively elucidating, stratifying, and mitigating ocular risk.

"Doing so will ensure that the millions of people with cardiometabolic disease who stand to gain from these agents do so with clear eyes, literally and figuratively," they concluded.

Learn more [HERE](#). KB

New tech tool solves admin headaches

SOFTWARE company Modeus has launched cloud-based tool Ware S8 Premium, eliminating the need for physical receipts between warehouses and pharmacies.

In turn, this significantly reduces administrative time and the process of managing manual documentation, while providing a digital trail and creating a unified and transparent supply chain for S8 medications, said the brand.

"The manual, paper-based

process for S8 medication receipts has long been a bottleneck for both warehouses and pharmacies, consuming valuable time and introducing potential for error," said Carl Zuffi founder and CEO, Modeus.

"Ware S8 Premium directly addresses these pain points, offering a seamless, secure, and fully digital solution.

It's about empowering our clients to focus on patient care and operational excellence."

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Dispensary Corner

IN THE land of gargantuan food servings, the next big thing is...small.

With an estimated one in 10 Americans now using Ozempic, Mounjaro, and other weight loss drugs, the hospitality industry is starting to feel the pinch, with people eating out less often, and eating less food when they do dine out.

With a keen eye for a business opportunity, coupled with concern about food waste, some US restaurants and bars have started offering tiny versions of popular foods and drinks, such as bite-sized hamburgers and mini martinis.

One fast-food chain even has what it calls a GLP-1 support menu, "intended to empower guests with great tasting, nutritional choices that complement their unique needs".

While the economics of the trend are uncertain at this point, there's also some question as to whether it's even a trend - some have dismissed it as a coastal phenomenon that is yet to catch on in the Midwest.

MHR serious allergy info shortfall

THE accuracy of patients' medication allergy documentation for severe allergies in My Health Record (MHR) is low, creating risk of harm from inadvertent re-exposure to allergenic medications, recent research from Alfred Health suggests.

A research team comprising specialists, pharmacy and nursing staff set out to investigate the accuracy and completeness of documentation in MHR of confirmed medication-related anaphylaxis and severe cutaneous adverse drug reactions (SCAR), and to determine barriers and facilitators to documentation.

They looked at allergy documentation for 88 patients who had been referred to a multidisciplinary Adverse Drug Reaction Review Committee (ADRR) and/or allergy clinic, and who had an accessible MHR.

The overall accuracy of MHR was 15.9%, with anaphylaxis reactions more likely to have accurate documentation than SCAR (25% versus 5% respectively).

Similarly, there were higher rates of accurate documentation when allergic events were followed up in an allergy clinic, and when the reaction was life-threatening.

The authors speculated that this may be due to patients being more likely to remember the information, and because the additional contact triggers a second round of correspondence to GPs about critical allergy history.

Of the patients who did not have accurate MHR allergy documentation, 28% had the information available in an uploaded discharge summary, but not in the prominently displayed and easily accessible MHR allergy section.

The paper's authors provided suggestions for improving the accuracy of documentation, including the use of hospital electronic medical record software that allows data from discharge summaries and event summaries to be uploaded automatically to the MHR allergy section.

They also noted that very few patients with validated severe allergic reactions are reporting this themselves on MHR, and



suggested that "central to ensuring safer use of medicines is for patients to be empowered to use this new health technology".

"Increasing uptake of digital health, such as the MHR, brings opportunities to enhance patient care, but it is equally important to evaluate that its functionality is fit-for-purpose and user-friendly," wrote the authors.

"Where the culprit medication for a severe allergic reaction has been determined, communication of this information to an individual and their treating team via a shared platform, such as MHR, is vital," they added.

The paper was published in *Australian Health Review* [HERE](#). KB

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