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Today's issue of PD

Pharmacy Daily today features four pages of news, including our **Beauty & Wellness** feature.

New easy read health resources

THE Australian Commission on Safety and Quality in Health Care has released three new Easy Read resources to help people with intellectual disability improve their understanding and knowledge of health care.

These resources have been designed to support the User Guide for the Health Care of People with Intellectual Disability which aims to provide equitable healthcare by improving access to safe and high-quality health care for people with intellectual disability.

People with intellectual disability experience significant barriers in accessing safe, quality care evident through a higher mortality rate, increased incidence of preventable illness and more frequent hospital admissions, the Commission observed.

New easy read fact sheets are:

- Good communication and positive behaviour support
- Transitions of care for people with intellectual disability
- Information about polypharmacy.

Find the fact sheets **HERE**.

Infinity under administration

WESFARMERS Health Chief Customer Officer Richard Pearson yesterday informed Priceline Pharmacy franchisees that receivers and administrators have been appointed for 54 Infinity pharmacies (**PD** breaking news).

"As many of you are aware, we have worked tirelessly with the Infinity Pharmacy Group (Infinity) over many years to support them to trade through significant financial challenges," Pearson said in an open letter to franchisees.

"Despite these efforts, Infinity's failure to meet their financial obligations over a prolonged period, as well as their worsening debt position, has placed them in an untenable situation, threatening their ability to continue trading."

Receivers and managers KPMG and administrators Teneo will now take responsibility for the day-to-day operation of the pharmacies.

"This approach will also enable Infinity pharmacies to benefit from the strong performance other Priceline pharmacies are experiencing, with the brand's continued focus on value, range and service," Pearson pointed out.

KPMG told **Pharmacy Daily** that the stores will continue to operate as normal while the receivers undertake an assessment of the business, and at present all employees will be retained and will be paid normally through the receivership process.

"These pharmacies provide essential goods and services to



communities across Australia which is why we will be focussed on ensuring they continue to trade with minimal disruption to customers," said KPMG Australia's Turnaround & Restructuring Services Partner and Receiver, David Hardy.

"As well as stabilising the operations of these pharmacies, we will be commencing an orderly sale process in the New Year.

"We will be working with all stakeholders, including pharmacists, employees, suppliers and customers, to maximise the outcome for all parties," Hardy concluded.

Pearson stressed that the pharmacies within the Infinity group are viable, and at the end of this process should be on a more stable and sustainable footing for the future.

"To summarise, this is a difficult situation which has unfortunately become unavoidable," Pearson said.

"We have approached this in the most prudent and responsible manner to enable a sustainable outcome for all stakeholders and especially our franchisees, who have worked to maintain the premium reputation of our brand," he concluded. **KB**

PSA2026 last chance to save

REGISTRATIONS for PSA26 are now open, with PSA Professional Plus members able to take up a special launch offer until 24 Dec - more **HERE**.

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Immunisation handbook updates

THE COVID-19 chapter of the Australian Immunisation Handbook has been updated to include new vaccine formulations and the latest information on immunogenicity and adverse events.

The outdated formulation Comirnaty XBB.1.5 (Pfizer) has been removed, and information about Comirnaty LP.8.1 added.

Factual and editorial updates classify adverse events based on age groups rather than individual vaccine products, as well as providing the most recent data on immunogenicity, efficacy and effectiveness of Comirnaty JN.1 and JN.1-derived sublineage formulations where available.

Read more [HERE](#).

Naked Sundays sunscreen recall

THE Therapeutic Goods Administration (TGA) has advised that 14 batches of Naked Sundays Collagen Glow 100% Mineral Sunscreen SPF50+ are being recalled.

Testing evidence indicates that the SPF levels of sunscreens that are made in Australia may be lower than what is claimed on the label.

Goods made in the US are not being recalled.

"Naked Sundays is a company founded on community, love and sun safety," the company stated in its announcement of the recall.

"We've put our heart and soul into our mission to change the way you wear and use sunscreen.

"We remain deeply committed to the safety and efficacy of everything we create, and in light of the recent issues facing sunscreens in Australia, we hope there's a positive outcome that emerges for all sun-loving Australians."

Helping those who fall through the cracks

IN AN eye-opening and inspiring session at the recent AdPha Medicines Management 2025 (MM2025) conference, the medical director of the Uniting Medically Supervised Injecting Centre (MSIC) in Sydney, Dr Marianne Jauncey (pictured), shared lessons in practical support pharmacists can provide for members of society who have fallen through the cracks.

Dr Jauncey told attendees that the MSIC has many regular clients with complex health conditions who live with homelessness and have difficulties with medication adherence.

One way MSIC helps such clients is by holding onto their medication to administer when the client visits.

Having identified someone who could benefit from this assistance, the MSIC connects with the registered prescriber who provides the team with a written request and full identifying details of the person, the script including any supported administration processes such as Webster-pak, information on potential side effects/interactions, and an agreement about nature and frequency of feedback required from the MSIC along with any other necessary information.

"It basically allows us to act rather like a carer - so as someone who is assisting someone to take their medicines by the equivalent of handing it to them across the kitchen table," Dr Jauncey told *Pharmacy Daily*.

The team also acts as advocates for the client.

"Sometimes this means contacting prescribers with client's permission to ask if there is anything they can do to assist and ask if dose alterations would be something they agree could be safe/useful, including providing them information about compliance as we know it, and/or risks with current medication pattern," Dr Jauncey explained.

As for paying for the medicines, the Department of Health, Ageing and Disability has a Medication Program for Homeless People which can provide funding for

Pharmaceutical Benefits Scheme (PBS) medication.

In terms of what a pharmacist could do around medication assistance, Dr Jauncey suggested two possible options.

"[Under the Staged Supply Program] medications can be held at the pharmacy and provided to the patient at intervals/times deemed appropriate by their prescriber," Dr Jauncey explained, although she acknowledged it was not often done due to the work required and potential risk involved.

"A second option would be pharmacists working in partnership with other organisations or individuals that can assist, using similar systems to the one we use to improve adherence/compliance.

"It does take a pharmacist being proactive and likely values-aligned, which is hard when you are basically running a business, but nevertheless has its own rewards in terms of job satisfaction."

She told *Pharmacy Daily* that pharmacists have a unique role in being able to support members of the community who are struggling, particularly those with opiate dependence and other addictions.

"First and foremost from a harm reduction point of view, we would hope that all pharmacists sign up to the Commonwealth Take Home Naloxone program.



"And secondly we would be keen to see them consider involvement in medications for opiate dependence - methadone and buprenorphine," she said, highlighting that "these are life-saving medicines considered 'essential' medicines by the World Health Organization".

"One final point would be that they get involved in helping to change the narrative around people who use drugs, away from fear and towards dignity."

Additional useful measures could include proactively contacting other stakeholders involved in their care, forming partnerships with organisations that may have funds to pay for scripts, or providing Webster-paks at reduced fees.

"We are really looking forward to seeing if and how we can embed a pharmacist within our service to improve medication access and support for our clients," Dr Jauncey added. *KB*

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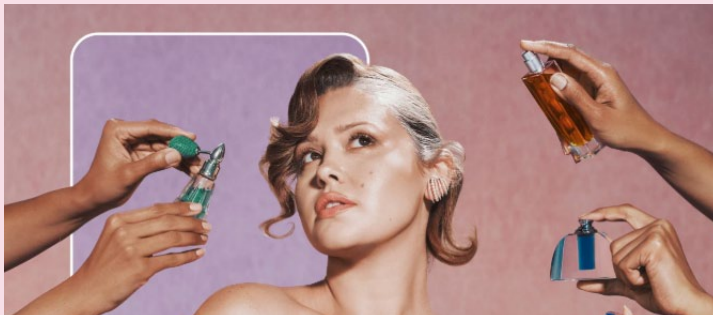
Editor's Choice: Pinterest predicts biggest beauty trends for 2026

FROM scent-stacking to vampy, after-dark vibes and glacier-inspired palettes, social media platform Pinterest has released its style predictions for 2026.

According to Pinterest, the report is an analysis of searches on the platform and the visual content that users engage with, combined with predictive analytics, data insights and observations from external partners.

According to the report, Gen Z and Millennials next year will be scent-stacking - layering different fragrances to create their own unique scents.

Searches for 'niche perfume collections' have increased by 500%, while 'perfume layering



combinations' is up 125%.

Meanwhile, searches on Pinterest for cool blue tones and frosted make-up have been on the rise as consumers bring "a subzero sophistication to absolutely everything in 2026".

Mismatched beauty will also be

on the agenda, as seen through bright dual-toned lipstick and vibrant two-toned manicures, the Pinterest report said.

On the other hand, goths will make a comeback with a return to jet black nails and smoky eyes, with a touch of glamour.

The gift of Synergie Skin

AUSTRALIAN brand Synergie Skin has released a number of limited-edition products just in time for the festive season.

Highlights include The Daily Duo (RRP \$122), a two-step system suitable for all skin types, featuring the UltraCleanse gel cleanser, Dermiotic pro-serum elixir, and a face cloth.

There is also the Pro-Ageing Renewal Edit (\$249), which focuses on improving elasticity, boosting luminosity and minimising the appearance of wrinkles.

The kit includes the SuperSerum, lightweight facial oil Lumi Balance and a stainless steel gua sha.

Synergie Skin was founded by cosmetic chemist Terri Vinson Jones, who has a background in microbiology, immunology and formulating chemistry.



No ordinary moisturiser

SCIENCE-BACKED affordable skincare brand The Ordinary is set to release a new formulation in Jan, Rice Lipids + Ectoin Microemulsion.

The intensely hydrating moisturiser features a lightweight, milky formula that combines molecules that hold onto water with nourishing, occlusive ingredients like rice lipids and jojoba oil.



Aussie brand Circa offers the scent of Christmas



AUSTRALIAN fragrance brand Circa has released a limited-edition range of festive gifts inspired by the scent of the holiday season.

Featured in the collection are a refreshing Raspberry and Rhubarb Fragrance Diffuser (\$52.95); a trio of Christmas candles (\$64.95); and a Gingerbread Cookies Soy Candle (\$49.95) which comes in a reusable jar and features warm, cosy notes of cinnamon and ginger.

The highlight of the range is Circa's 12 Days Advent Calendar, packed with 12 60g candles, featuring signature fragrances and limited edition scents.

Fragrances include sea salt and vanilla; mango and papaya; rose and lychee; pear and lime; amber and sandalwood; jasmine and magnolia, and more.

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Dispensary Corner

HERE'S a fun new word for you: scromiting.

A portmanteau of screaming and vomiting, this is one of the nightmare symptoms reported to the *New York Post* by US dope smoker Sydni Collins, yet apparently not nightmarish enough to make her stop using it.

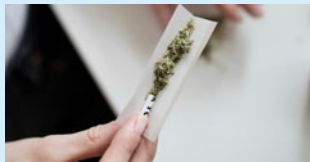
Collins was suffering from cannabis hyperemesis syndrome (CHS), an increasingly common and debilitating condition that triggers episodes of relentless nausea, abdominal pain and severe vomiting in chronic weed users.

One particularly bad episode triggered seven ER visits in one month, with intermittent symptoms interrupting Collins' ability to live a normal life.

She wasn't able to eat a full meal for weeks, and when her weight got down to 40kg she was admitted to hospital and given a feeding tube.

While the exact cause of CHS is unknown, one theory is that long-term overstimulation of receptors in the endocannabinoid system may affect the body's natural control of nausea and vomiting.

As is so often the case, Collins found most effective relief from CHS symptoms was more dope, creating a vicious cycle that she did finally, after many years and a lot of work, manage to escape once and for all.



AI meets ADHD prescribing reform

OPINION

AI expert **Alexander Amatus (pictured)** provides insights into what pharmacists should watch for as GP access to ADHD medication prescribing expands.

Got an opinion or experience to share? Let us know in up to 400 words via email to info@pharmacydaily.com.au.

AUSTRALIA'S ADHD treatment landscape is shifting, and community pharmacy will be one of the first places those changes become visible.

At the same time, generative AI is being introduced into prescribing and dispensing workflows, often as a documentation or decision-support layer.

This raises a practical question for pharmacists: how do we protect safety, supply continuity and patient experience when more prescribers enter the pathway and more software sits between the clinician and the script?

In NSW, reforms are strengthening the role of general practice in ADHD management, enabling appropriately authorised GPs, for defined cohorts and criteria, to issue psychostimulant prescriptions for patients with a prior diagnosis and stable treatment, subject to program requirements and prescriber status.

In parallel, pharmacists are seeing "system" change through PBS process updates.

The Royal Australian and New Zealand College of Psychiatrists has outlined PBS authority amendments effective 01 Jun 2025 that alter the information required when seeking stimulant approvals via the Online PBS Authorities system.

Because these changes have been discussed widely and inconsistently, patient-facing summaries generally

describe them as expanding GP prescribing in defined circumstances rather than allowing unrestricted first-line initiation.

The operational effect is predictable: more ADHD medication prescribing activity will be initiated or continued in general practice, increasing the number of handovers and the administrative variability pharmacies need to manage.

However, there is a supply backdrop pharmacists cannot ignore, with access reform arriving in an environment of constrained supply for some ADHD drugs.

The TGA continues to publish shortage updates, which should be checked before advising substitutions or expected availability.

Expanded prescribing access can expose fragility in supply earlier and more widely, particularly in regional areas where substitution options are limited and timely prescriber contact can be harder.

And now AI is entering the workflow.

Most AI pharmacists encounter sits in drafting and triage layers: documentation tools that summarise consult notes, prescribing systems that suggest doses or PBS pathways, patient-facing chatbots that shape expectations, and pharmacy tools that draft counselling points or follow-ups.

The risk is not their existence, but that they are treated as authoritative.

Health-system evaluations show large language models can still generate fluent but misleading health content despite safeguards.

In ADHD care, where medicines are tightly regulated, "almost right" is not good enough.

There are two practical risk areas for pharmacy, the first being administrative mismatch.

As GP continuation prescribing expands, pharmacies may see



more variation in authority details, documentation and handover timing.

A consistent approach to verification and escalation is critical, particularly for first presentations from newly authorised prescribers or when care is transitioning.

The second area of risk is AI-amplified expectations.

When patients arrive with AI-generated prompts about specific stimulants or early supply, pharmacists often become the first point of friction and need clear pathways for prescriber clarification.

A pragmatic approach includes pharmacist verification of any AI-drafted content, avoiding identifiable patient data in unapproved tools, hard-stop checks for first fills and transitions, shortage-aware counselling, and documentation of interventions.

Expanded GP participation is likely to improve access for stable patients, particularly outside major cities, but it also increases interfaces, handovers and variability, and with AI on top, the risk comes less from a single error than from accumulated friction.

Pharmacies can reduce that risk by standardising checks, remaining shortage-literate, and using AI as a drafting aid, not a decision-maker.

Alexander Amatus is Business Development Lead at national mental health service TherapyNearMe.com.au.