

START THE CONVERSATION CHANGE THE NARRATIVE

Your patients aged ≥ 50 years may be aware of shingles—but do they really understand its cause, risks and impact?

Nearly all adults aged ≥ 50 years are likely to be at risk of shingles, no matter how healthy they may feel.^{*1–3}

This **Shingles Awareness Week**, take the lead and start a conversation with your patients about preventing shingles.

Hypothetical patients. For illustration purposes only.

*Immunocompromise in people aged 18 years and older, caused by immunosuppressant drugs or immunodeficient conditions, may also cause immune system decline and increase their risk of shingles.^{1,3}

References: **1.** Centers for Disease Control and Prevention (CDC). Prevention of herpes zoster: recommendations of the Advisory Committee on Immunization Practices (ACIP). MMWR. 2008 June;57(RR-5):1–30. **2.** National Centre for Immunisation Research and Surveillance (NCIRS). Zoster (shingles) vaccines (Shingrix® [RZV] and Zostavax® [ZVL]) – frequently asked questions. Nov 2023. Available at: ncirs.org.au/zoster-shingles/zoster-shingles-vaccines-shingrix-rzv-and-zostavax-zvl-frequently-asked-questions [Accessed December 2024]. **3.** Australian Technical Advisory Group on Immunisation (ATAGI). Australian Immunisation Handbook, Australian Government Department of Health and Aged Care, Canberra, 2022. Available at: immunisationhandbook.health.gov.au [Accessed December 2024].

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"I'm fit and healthy—I can't be at risk of shingles."

MYTH



GSK

Today's issue of PD

Pharmacy Daily today features three pages of news, plus a front cover wrap from GlaxoSmithKline.

Shingles awareness

MOST adults aged 50 and over are likely to be at risk of shingles, but many may not understand its cause, risk and impact.

GSK is promoting Shingles Awareness Week, coming up at the end of this month, so now is a good time to have a conversation with patients about prevention.

A great start is dispelling the myth that if someone is fit and healthy, they are not at risk of contracting shingles.

The virus lies dormant in anyone who has had chicken pox, and it can reactivate even with a healthy lifestyle.

In fact, over 90% of adults aged 50 years and older already carry the virus that causes shingles, and over 30% of adults will develop shingles in their lifetime.

See the **cover page** for more.

Unique needs of remote Aus overlooked

THE Remote and Isolated Pharmacist Association Australia (RIPAA) is calling for greater recognition of the unique challenges facing pharmacists in remote communities in its pre-Budget submission.

These include the higher cost of delivering services and the difficulties of attracting pharmacists to the workforce.

While broadly welcoming measures proposed by the Pharmaceutical Society of Australia (PSA) to improve rural pharmacy supports in its latest pre-Budget submission (**PD** 07 Feb), RIPAA says more needs to be done to get the policies and funding right so that communities with the highest needs can implement full scope services.

RIPAA questioned whether a flat loading of 11.5% on rural services for pharmacies across MM2-7 is appropriate or adequate to address the specific challenges faced by rural and remote areas.

"How is it equitable for pharmacies in Cairns and Hobart to be receiving the same incentives on services as those in the more remote parts of Australia such as Longreach in Outback Qld

or Strahan in Western Tasmania?" said a spokesperson for RIPAA.

"The workforce costs alone in these locations are much higher and smaller communities lack the economies of scale that larger centres can benefit from.

"A flat loading will inadvertently support and strengthen the hubs while the disadvantaged areas and thin markets continue to flail."

RIPAA also questioned the relevance to real rural areas of models of care that involve inserting pharmacists into GP practices and ACCHOs.

"Parachuting pharmacists into GP practices and Aboriginal Community Controlled Health Organisations (ACCHOs) makes remote rural community pharmacy less viable and is a slap in the face to their commitment to their communities," the RIPAA spokesperson said.

"It is not an appropriate model



for small towns with one pharmacy and one medical practice where collaboration, not competition, between providers is essential."

RIPAA has called for improved capacity in community pharmacies to implement full scope of practice and provide care across settings - much like rural GP practices, which can also service hospitals and aged care facilities.

RIPAA said it has submitted its own proposal to "achieve better outcomes for thin markets and disadvantaged areas that is cost effective and focused on the role that pharmacists can play to strengthen primary health care in areas of greatest need". *KB*

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Overseas travellers urged to vaccinate

THE current global increase in measles has led the Victorian Department of Health to urge people travelling overseas to ensure they are fully vaccinated against measles and other vaccine-preventable diseases before they leave Australia.

These include hepatitis A, which has increased in returned travellers in recent months, and influenza and COVID.

Recent cases of measles in Australia have been linked with travel to Vietnam, while other popular travel destinations such as Thailand and India are also currently experiencing outbreaks.

The department says all travellers should ensure they have received two doses of measles-containing vaccine prior to travelling overseas.

Pharmacists in all states can provide the measles-mumps-rubella (MMR) vaccine to adults for the purposes of travel, although Victorian pharmacists can only do so if they are participating in

the Victorian Community Pharmacist Statewide Pilot.

The rules for vaccinating children vary from state to state, with no age restrictions in South Australia (**PD** 07 Feb), and age minimums of two years in Queensland, 10 years in Tasmania, 15 years in Victoria and five years in other states and territories.

The department also recommends that routine vaccinations, including any boosters, are up to date.

This includes MMR, diphtheria-tetanus-whooping cough (pertussis), polio, and chickenpox (varicella) vaccines.

Some vaccine-preventable illnesses, such as hepatitis A and typhoid, occur more commonly in people returning to their country of birth or visiting friends and relatives, as they tend to stay longer, consume local food and drink, and have more interaction



with locals.

The department cautions that mpox continues to spread in many countries, including Australia, and the risk of transmission linked to international travel remains.

Vaccination is recommended for travellers who are at greater risk of contracting the virus, although only pharmacists in NSW and Victoria are permitted to administer the vaccine, and must meet certain conditions. **KB**

Tax hit for sunscreen cosmetics looming

THE Australian Tax Office (ATO) is cracking down on GST exemptions for sunscreen-containing cosmetics, such as moisturisers, foundation and lip balm.

The ATO says sunscreen products must have an SPF of 15 or more and an AUST L number, and be marketed principally as sun protection to remain GST-free.

Sunscreens claimed as an income tax deduction must also meet these criteria.

Skincare companies say that adding GST will increase the cost of their products, which will be passed onto consumers, and claim it will put people off using sun protection.

However, skin cancer experts say people tend not to use enough of the cosmetic products to provide proper sun protection and it may provide a false sense of security.

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[^]The recommended dose is a loading dose of 400 mg then 200 mg once or twice daily, as required for up to 5 days.

References: 1. CELEBREX RELIEF® (celecoxib) Product Information. 2. Ekman EF et al. Am J Orthop 2002; 31(8):445-451. 3. Petri M et al. J Rheumatol 2004; 31(8):1614-1620. 4. Ralha LV et al. Revista Brasileira de Medicina 2008; 65(11):378-387. 5. Bertin P et al. J Int Med Res 2003; 31(2):102-112. 6. Cheung R et al. Clin Ther 2007; 29:2498-2510.

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Dispensary Corner

THOSE leaders in pharmaceutical innovation - also known as celebrities - have graciously shared the benefit of their wisdom with us mere mortals, this time in relation to weight loss jabs.

The celebrity hack involves microdosing Ozempic, Mounjaro and the like, so you get all the weight loss benefits without the nasty side effects.

Microdosing sees patients take 10% of the typical dose with the aim of losing a small amount of weight - less than a kilogram - per week, or even just maintaining weight loss.

Amazing - why has no one else thought of doing this?

Perhaps that's because the long-term effects of the jabs are still unknown, and microdosing the jabs remains untested, and patients who DIY their dosage may inadvertently contaminate the drug, as spare medication is left lying around in vials, and is therefore at risk of accumulating bacteria.

But otherwise it's a brilliant idea - good job, Hollywood!

Nepal leads on tobacco warnings

NEPAL has recently introduced new rules for cigarette packaging, with graphic pictures of the health effects of smoking required to cover 100% of the back and front of cigarette packs, up from 90% front and back two years ago.

This makes Nepal the world leader in graphic warning size.

As in many low and middle income countries, smoking in Nepal contributes to poverty as well as illness and death.

Australia requires 75% of the front and 90% of the back to carry the images and warnings, and in the Canadian Cancer Society's *2023 Cigarette Package Health Warnings: International Status Report*, ranked 12th in the world based on the average of front and back graphic coverage.

New Australian laws coming into effect this year will require health promotion insert cards in cigarette packets and also a written health warning on the filter of every cigarette - a measure introduced in Canada last year.



Guild Update Affordable medicines for all

NO Australian should have to choose between food and essential medicine, but for many, this is an unfortunate reality.

Rising housing costs and grocery prices, paired with wages that are not keeping up, are making it harder to afford necessities, including essential prescription medication.

Independent research commissioned by the Guild shows in the past three years, 3.75 million Australians - around 21% of the population - have struggled to afford their medications.

To avoid serious consequences like worsening health, increased hospital visits and greater long-term costs, no one should have to

compromise their health - not in a country as lucky as ours.

Even small savings can make a big difference.

When the PBS co-payment was lowered in 2022, Australian patients saved over \$346 million, compared with the \$30 million saved from 60-day dispensing.

These numbers prove in black and white the positive impact lowering the maximum PBS co-payment has.

It is a practical, immediate solution that will deliver real relief without inflationary pressure.

Join us in calling for more affordable medicines - visit AffordableMedicines.com.au to take action.

BTC expands partnership with Arna Pharma

BTC Speciality Health has amended its existing license and distribution agreement for its Bronchitol and Aridol respiratory medicine products, and extended its partnership with Arna Pharma.

The agreement was initially

for 10 years, and has now been extended indefinitely.

In addition, Arna Pharma is building a pipeline of novel pharmaceutical products and has granted BTC the first right of refusal to commercialise them in the Australian and NZ markets.

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