

Today's issue of PD

Pharmacy Daily today features two pages of the latest industry news, plus the July MIMS Monthly Update.

Patients go online

THOUSANDS of Australians are turning to affordable online doctors as GP wait times blow out.

One of Australia's leading digital health services Medmate has recorded a 40% surge in cold and flu consultations over the past month, with influenza, RSV, and COVID-19 driving a sharp uptick in demand.

"This is about smart, accessible care," Medmate founder Ganesh Naidoo said.

"We're giving Australians a trusted clinical alternative that's safe, affordable, and aligned with robust national telehealth standards."

Qld pharms can amend scripts

FOR the first time in Australia, Queensland pharmacists can now swap a medicine for a suitable alternative without needing a doctor's approval, to help solve medicine-related issues.

An update to the *Medicines and Poisons (Medicines) Regulation 2021 (Qld)* on 01 Jul specifies that a pharmacist who is dispensing a medicine for a patient "may dispense an equivalent medicine as a substitute to the original medicine stated on the prescription where this is reasonably necessary for the therapeutic treatment of the patient".

An equivalent medicine is one that appears on the *Therapeutic Goods Act 1989* register for the same indication as the original medicine, and shares the same (or "substantially similar") chemical composition or pharmacological mechanism of action.

It must also be supplied in a dose and for a duration of treatment intended to achieve a therapeutic

effect equivalent to that of the original medicine, and cannot be a restricted medicine or diversion-risk medicine.

The pharmacist must first amend the prescription in accordance with section 117B in order to dispense an equivalent medicine.

"PSA advocated for this strongly in our submission to the consultation on the amendments to the medicines and poisons regulation," PSA Qld State Manager, Karen Castle told *Australian Pharmacist*.

"These activities are well within the scope of any pharmacist, and we shouldn't have to do any additional training to be able to do this."

Castle said that while the new regulation does mean more responsibility for pharmacists, it also generates several advantages.

"Patients benefit by having their medicine-problem resolved on-the-spot in the pharmacy, taxpayers benefit in reduced Medicare billing, and pharmacists benefit via increased autonomy." JM

Education adds life expectancy

A MONASH University study has found that completing a university degree results in several years' more life expectancy compared to those who did not complete Year 12.

The difference was greater for men, who lived an average of seven years longer, while for women it was four years.

Led by the Centre for Medicine Use and Safety (CMUS) within the Monash Institute of Pharmaceutical Sciences, the study also found an increased quality-adjusted life expectancy (QALE) among those with higher education.

"What we uncovered is significant inequalities in life expectancy and QALE among Australians depending on education attainment, which is concerning," said senior author Professor Zanfina Ademi.

Read the study [HERE](#).



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Dispensary Corner

THE sweet smell of success - at least a certain *kind* of success - can be yours with President Donald Trump's latest wheeze, Victory 45-47 fragrances.

The limited-edition scents for men and women come in 3.3-ounce (100ml) bottles topped with a golden statuette of a somewhat younger, fitter-looking version of the president.

"They're called 'Victory 45-47' because they're all about Winning, Strength, and Success," Trump posted on Truth Social.

"Get yourself a bottle, and don't forget to get one for your loved ones too," he continued.

"Enjoy, have fun, and keep winning!" he exhorted.

So what does victory actually smell like?

According to perfume expert and Trump supporter Elena Knezevic, the men's version is woody, with touches of geranium and cardamom.

"It is simple and inoffensive, rather quiet, office-safe, with a sweetish and smooth amber-woody finish," she wrote on her website, *FrAGRantica*.

"Cologne for Men smells familiar, like an average, passing casual masculine scent without remarkable details," she added.

And that's from a Trump fan...

The women's scent, meanwhile, she described as a blend of vanilla, gardenia, strawberry and citrus notes.

Overall, "likeable and general but not at all bad".

And the cost? US\$249 (A\$380) per bottle.

Leaders talk visions, challenges and opportunities

THE Pharmacy Careers Summit 2025 kicked off this morning with leaders from three pharmacy peak bodies coming together to share their visions for the future, including opportunities and challenges for the industry.

Prof Trent Twomey, President of the Pharmacy Guild of Australia, and Tom Simpson, President of Advanced Pharmacy Australia (AdPha), each presented their pitch as to why students should consider a career in community pharmacy and hospital pharmacy respectively.

Prof Twomey's vision for the future of community pharmacy is turning Australia's 6,000 community pharmacies into urgent care clinics and mini emergency departments.

Simpson shared AdPha's vision of every pharmacist practicing at the top of their scope, connected to their peers across the country, and having maximum impact on the patients they support and care for.

"We've seen the wonderful evolution of new roles often started in hospitals, such as clinical pharmacy services and medication reviews; and stewardship programs, such as analgesic and antimicrobial stewardships," Simpson said.

Meanwhile Assoc Prof Fei Sim, President of the Pharmaceutical Society of Australia (PSA), focused on the PSA's vision of seeing the full potential of pharmacists unleashed.

With an ageing population and medication use on the rise, as well as a health system under pressure, she pointed out that pharmacists' skill sets can go a long way to ensuring patients access the care they need, while also improving the way medications are used.

As custodians of standards and guidelines for all registered pharmacists in Australia, as well as education and training provider, the



PSA is about ensuring pharmacists meet the highest standards of patient care, she said.

The leaders panel then turned their focus to opportunities and challenges presented by sweeping changes currently affecting pharmacy, from expanded scope of practice and digital integration, to workforce reform and shifting community expectations.

Hospitals are where the most complex patients and medicines are, Simpson said, highlighting the opportunities for speciality practice in pharmacy, such as oncological pharmacy or paediatric pharmacy, particularly with the new pathways for specialisation now available.

Meanwhile, challenges arising from recent medicines shortages and supply chain disruptions have given pharmacists even more input into what medicines are used.

All agreed technology presents

both opportunities and challenges.

Simpson pointed out that with technology, the role of the pharmacist will become more important rather than less.

"As technology can check for dose interactions, bring in medication histories and so on, the role of the pharmacist is by the bedside, practising patient-centred care."

For community pharmacy, Prof Twomey said embracing technology, enabling online access to advice and products, will allow pharmacists "to be there when our patients want, and how our patients want".

For Assoc Prof Sim, "the biggest opportunity is to actively allow ourselves to really contribute to improving patients' access to care, but also really helping to improve the use of medicines, whenever and wherever they are used".

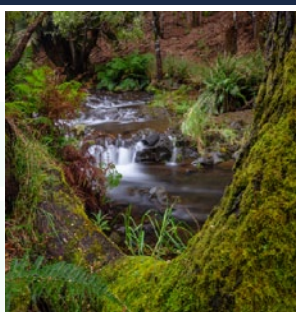
The biggest challenge, she said, given the evolution of pharmacy, is to ensure pharmacists are supported through these changes.

"However, in Australia, we're quite lucky to have very strong pharmacy bodies representing us, and when we work together collaboratively, we can create a very strong future for pharmacists," she concluded. KB



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New Products

- Canakinumab (rmc) (Ilaris)** is a human monoclonal anti-human interleukin (IL)-1beta antibody of the IgG1/kappa isotype. Excess production of IL-1beta in inflammatory diseases leads to local or systemic inflammation, increased production of the inflammatory markers C-reactive protein or serum amyloid A, and fever. Canakinumab binds with high affinity to human IL-1beta and neutralises its biological activity by blocking its interaction with IL-1 receptors, thereby preventing IL-1beta-induced gene activation and the production of inflammatory mediators such as IL-6 or cyclooxygenase-2. Canakinumab is therefore suited to treat diseases and pathologies characterised by local or systemic overproduction of IL-1beta. *Ilaris is indicated for the treatment of the following autoinflammatory periodic fever syndromes in adults, adolescents and children aged 2 years and older: cryopyrin-associated periodic syndromes including familial cold autoinflammatory syndrome/ familial cold urticaria, Muckle-Wells syndrome, neonatal-onset multisystem inflammatory disease/ chronic infantile neurological, cutaneous, articular syndrome; tumour necrosis factor receptor associated periodic syndrome; hyperimmunoglobulin D syndrome/ mevalonate kinase deficiency; and familial mediterranean fever in combination with colchicine, if appropriate. Ilaris is also indicated for the treatment of active systemic juvenile idiopathic arthritis in patients aged 2 years or older.* Ilaris solution for injection contains canakinumab 150 mg per 1 mL and is available in packs of 1 vial.
- Crisantaspase (recombinant asparaginase Erwinia chrysanthemi) (Enrylaze)** catalyses the conversion of the amino acid L-asparagine into L-aspartic acid and ammonia. The pharmacological effect of Enrylaze is based on the killing of leukaemic cells due to depletion of plasma asparagine. Leukaemic cells with low expression of asparagine synthetase have a reduced ability to synthesise asparagine and therefore are dependent on an exogenous source of asparagine for survival. *Enrylaze is indicated as a component of a multi-agent chemotherapeutic regimen, for the treatment of acute lymphoblastic leukemia and lymphoblastic lymphoma in adults and paediatric patients (1 month and older) who have developed hypersensitivity or silent inactivation to E. coli-derived asparaginase.* Enrylaze is contraindicated in patients with severe pancreatitis and history of severe pancreatitis, thrombosis and haemorrhagic events during previous asparaginase therapy. Enrylaze solution for injection contains crisantaspase 10 mg per 0.5 mL and is available in packs of 3 vials.
- Donanemab (cho) (Kisunla)** is an IgG1 monoclonal antibody directed against an insoluble, pyroglutamate N-terminal truncated form of amyloid beta (N3pE Aβ) present only in brain amyloid plaques. Donanemab binds to N3pE Aβ and aids plaque removal through microglial-mediated phagocytosis. *Kisunla is indicated for the treatment of patients with mild cognitive impairment due to Alzheimer's disease and mild Alzheimer's dementia (early symptomatic Alzheimer's disease) that are apolipoprotein E ε4 heterozygotes or non-carriers.* Kisunla is contraindicated in patients with baseline MRI findings of prior intracerebral haemorrhage greater than 1 cm, more than 2 microhaemorrhages, superficial siderosis or vasogenic oedema, which are suggestive of cerebral amyloid angiopathy; in patients with severe white matter disease; and in patients with any finding that could prevent a satisfactory MRI evaluation for safety monitoring. Kisunla concentrate for infusion contains donanemab 350 mg per 20 mL and is available in packs of 1 vial.
- Leniolisib (phosphate) (Joenja)** selectively inhibits phosphoinositide 3-kinase delta (PI3Kδ) by blocking the active binding site of PI3Kδ. In cell-free isolated enzyme assays, leniolisib was selective for PI3Kδ over PI3K alpha (28-fold), PI3K-beta (43-fold), and PI3K-gamma (257-fold), as well as the broader kinome. In cell-based assays, leniolisib reduced phosphorylated protein kinase B (pAkt) pathway activity and inhibited proliferation and activation of B and T cell subsets. Gain-of-function variants in the gene encoding p110δ catalytic subunit (resulting in activated phosphoinositide 3-kinase delta syndrome (APDS) 1) or loss-of-function variants in the p85α regulatory subunit (resulting in APDS2) both lead to hyperactive PI3Kδ signalling leading to increased production of phosphatidylinositol 3,4,5 trisphosphate (PIP3) and downstream pAkt. Through inhibiting PI3Kδ thus decreasing production of PIP3, leniolisib reduces hyperactivity of the downstream Akt/mammalian target of rapamycin pathway, subsequently modifying dysregulation of B and T cell populations and disease progression. *Joenja is indicated for the treatment of APDS in adults and adolescents 12 years of age and older.* Joenja tablets contain leniolisib 70 mg and are available in packs of 60.

New Indications

- Belzutifan (Welireg)** is now indicated for the treatment of adult patients with advanced renal cell carcinoma following a programmed cell death 1/ligand 1 and a vascular endothelial growth factor-targeted therapy.
- Elexacaftor + tezacaftor + ivacaftor and ivacaftor (Trikafta)** is now indicated for the treatment of those who meet the diagnostic criteria of cystic fibrosis in patients aged 2 years and older who have at least one mutation in the cystic fibrosis transmembrane conductance regulator gene that is responsive based on clinical or *in vitro* evidence.
- Incobotulinumtoxin A (Xeomin)** is now indicated in adults for the treatment of unilateral spasticity of the lower limb affecting the ankle joint.
- Ipilimumab (rch) (Yervoy) and Nivolumab (rch) (Opdivo)** are now indicated in combination for the treatment of adult patients with unresectable or metastatic colorectal cancer that is microsatellite instability high or mismatch repair deficient as determined by a validated test.
- Tirzepatide (Mounjaro)** is now indicated for the treatment of moderate to severe obstructive sleep apnoea in adults with obesity.

- **Tislelizumab (Tevimbra)** is now indicated in combination with gemcitabine and cisplatin for the first-line treatment of adult patients with recurrent or metastatic nasopharyngeal carcinoma.
- **Venetoclax (Venclexta)** is now indicated in combination with obinutuzumab for the treatment of patients with chronic lymphocytic leukaemia or small lymphocytic lymphoma, regardless of suitability for chemo-immunotherapy.

New Contraindications

- **Mefloquine (hydrochloride) (Lariam)** is now also contraindicated in patients with a history of blackwater fever; for prophylactic use in patients with a recent history of suicide attempts, suicidal ideations and self-endangering behaviour; and for concomitant use with halofantrine during mefloquine chemoprophylaxis or treatment of malaria or within 15 weeks after the last dose of mefloquine.

*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.*