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Call for Aus-made pain meds

PALLIATIVE Care Australia (PCA) has called on the Federal Govt to support the manufacture of opioid-based pain relief medication in Australia, reducing reliance on imports in the face of ongoing "heartbreaking" shortages.

Tasmania is the world's largest producer of poppies, the raw ingredient needed for many of these medicines.

"This is a significant competitive advantage for Australia as global supply chains falter and business models are challenged," said Camilla Rowland, CEO of PCA.

"Our experience during COVID also demonstrates that we have the skills and capacity to manufacture vaccines locally - at that time we were able to have some independence from supply shortages and global transport challenges and look after our own.

"A future made in Australia must include medicines.

"Using Australian-grown poppies

Today's issue of *PD*

Pharmacy Daily today features four pages of industry news, plus a full page from **Dispense Assist**.



to make pain relief medications for Australians just makes sense."

With the support of six other leading health and care organisations, including Advanced Pharmacy Australia and the Pharmaceutical Society of Australia, PCA has presented an 11 point plan to the Health Minster to resolve the ongoing shortage of pain relief medications (*PD* 19 Feb).

"We have seen heartbreaking shortages of pain relief medications for people of all ages at the end of life," Rowland said.

"Apart of making these medicines in Australia we are also advocating for a national stockpile to be established and for pharmaceutical companies to give more notice of impending shortages," she added. KB

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APP escapes worst of Alfred

IN THE wake of ex-Tropical Cyclone Alfred, the Pharmacy Guild of Australia has announced that APP2025 is to go ahead as planned, with no changes to the program, exhibition or social program.

The Guild's Queensland branch said it has been in constant communication with the Gold Coast Convention and Exhibition Centre and venue partners to ensure a seamless experience for all attendees.

Dispensary help

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Concerns over workers' comp opioid use

THOUSANDS of injured Victorian employees are receiving high-risk opioid prescriptions funded by the Victorian workers' compensation system, according to research led by Monash University.

The study looked at opioid prescriptions for injured employees and measured the number with early high-risk prescribing patterns, defined as a large volume prescribed within the first three months, long-acting opioids prescribed early, or other high-risk medicines being prescribed at the same time.

The data was based on around 30,000 employees with back and neck injuries between 2010 to 2019, who had time off work due to their injury and made a workers' compensation claim.

Of these, around 20% were prescribed opioids in the first three months of their claim.

It is generally recommended to avoid opioids if possible and use other pain relief methods first, and if opioids are prescribed, they should be used for a short time and in low doses.

Among those prescribed opioids in the first three months, two out of three workers (67%) had early high-risk opioid prescriptions, and nearly one in four (23%) continued using opioids after a year.

"We found that early high-risk prescribing doubled the chances of long-term opioid use," said first author Yonas Tefera, from Monash University's School of Public Health and Preventive Medicine Healthy Working Lives Research Group.

"Previous studies show that injured workers who use opioids early or for a long time tend to have more time off work and worse health outcomes."

The study also found that workers in rural and more economically disadvantaged areas were more likely to receive early high-risk opioid prescriptions and also to have long-term use.

Senior author Professor Alex

Collie said the results highlighted the extent of two potentially very harmful patterns among workers with common workplace injuries and compensation claims - early high-risk opioid prescribing and long-term opioid use.

"More than 120,000 Australians have workers' compensation claims involving more than a week off work every year, and many of these claims are for back and neck injuries," Professor Collie said.

"If the patterns we observe in Victoria also occur in other states and territories, then potentially thousands of workers are receiving high-risk opioid prescriptions funded by our workers' compensation systems," he said.

The study highlights the need for stronger monitoring of prescription patterns in our workers' compensation systems - however, most workers' comp regulators in Australia do not routinely capture data on prescription medicines.

Read the paper **HERE**. *KB*



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1. Goodman C et al. BMJ Open 2021;11(8):e043054. 2. Merenstein D et al. Nutrients 2021;13(8):2814. 3. Szajewska H, Kołodziej M. Aliment Pharmacol Ther 2015;42(7):793-801. 4. Can M et al. Med Sci Monit 2006 Apr;12(4):P119-22.





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Optimising pharmacy services for autistic people

EXCLUSIVE

THE National Roadmap to Improve the Health and Mental Health of Autistic People was released at the end of Feb as an adjunct to the National Autism Strategy (PD 15 Jan).

The Roadmap's aim was to address the breadth of issues faced by autistic people in the Australian healthcare system, and it outlined the path to improve the physical and mental health of Australia's growing autistic population.

While pharmacists and pharmacies were not specifically mentioned in the Roadmap, many autistic people have co-occurring conditions and may need to regularly interact with pharmacies and pharmacists.

Dr Tom Tutton is the Managing **Executive of the Autistic Friendly** team with Autism Spectrum Australia (Aspect), and works with organisations to facilitate better understanding and support of autistic people.

"We estimate that one in 40 people in Australia are autistic, and autistic people often have more mental and physical health challenges, and it's great to see the Roadmap acknowledge that," he told Pharmacy Daily.

After canvassing colleagues about their experiences with pharmacies, he shared with **Pharmacy Daily** some of the challenges autistic people may encounter, and how they could be addressed.

"It's really important to point out that we have had lots of good experiences as well as challenges, so there are some real strengths within pharmacies plus some things that we could keep working on," Dr Tutton said.

"The smaller pharmacies are really great, and we had some lovely stories from our team saying they have had good experiences, with beautiful, personalised care.

"But it's a sliding scale, and at the other end pharmacies can be almost the epitome of sensory overwhelm - they're really bright, it's chaotic and busy, it's smelly, there's tall, narrow aisles full of things everywhere.

"Those sorts of places are very, very hard, and then the section where you have to pick something up is right at the back - so you have to navigate all this to get there."

However, Dr Tutton said, there is a lot that can be done to make such environments more friendly and welcoming for autistic people.

"The hidden disability sunflower lanvard is a nice way for people to make invisible disability much more visible, and means that pharmacists can identify people quickly and know they may need a bit more time, support and understanding.

"And if pharmacies sign up, and have the sunflower on their website and doorway, it gives people more confidence that they will have their needs met."

Dr Tutton also suggested making sensory adjustments in store, so they're not so bright, less noisy, and less cluttered and busy, and perhaps having quiet pathways through to certain areas, such as prescriptions, can be helpful.

He pointed to supermarkets'



"quiet hours", where the tannoy is off, the lights are dimmer, people stop stacking shelves and so on.

"If pharmacies were able to have a guiet session where people knew they could come in and it would be a little easier to access, that would facilitate people coming in to have a bit more predictability, and a calmer environment."

Click and collect can also be a useful option, he said, as it allows people to buy what they need without having to walk around the store to find it.

Autistic people communicate differently, Dr Tutton pointed out, and even those who can speak well have moments when they are stressed and may not communicate or process information as well.

Then there are autistic people who don't use verbal language and communicate in other ways.

"Pharmacists could provide clear, written instructions, for example, about how to take a particular

medication, so people don't have to remember it all," he said, adding it would probably be helpful for a lot of people who might struggle with memory or planning.

"We know many of the things we talk about and recommend as part of our autistic-friendly model are good for lots of people who struggle with things like busy environments, sensory overwhelm and communication, so there's benefits for many people here."

Finally, pharmacist education and training came up as a potential area for development.

"It is clear that pharmacists do have knowledge of autism, but many want more knowledge, they want more training, they want to be able to better understand the people who come in," Dr Tutton said.

"In turn, if autistic people know that staff are trained, it would give them more confidence that they will have a better experience in pharmacies." KB

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Dispensary Corner

WHILE there is never a good day to experience a medical emergency, there is, apparently, a day that is extra bad for it and that is a Friday.

A new study has revealed that patients admitted to hospital for surgery on the last day of the working week are 10% more likely to die, with the alarming statistic applying to those undergoing both emergency and elective operations.

The discovery was made by researchers at Houston Methodist Hospital in Texas, who analysed data from nearly half a million patients who underwent a common surgical procedure in Ontario, Canada, between 2007 and 2019.

Researchers assessed shortterm (30 days), intermediate (90 days), and long-term (one year) outcomes for patients following their operation, including deaths, surgical complications and length of hospital stay.

They found patients undergoing surgery immediately before the weekend were 5% more likely to experience complications, be readmitted or die within 30 days.

Risk of death was 9% more likely at 30 days among those who underwent surgery at the end of the week, 10% at three months and 12% after a year.

The researchers believe the higher death rates are due to patients in need of treatment closer to the weekends being more likely to be sicker, but conceded a 'weekend effect' may also exist, where a lack of senior staff operating on Fri vs Mon could also play a role.

Mental health risks in chronic pain



ABOUT 40% of adults with chronic pain also have anxiety or depression, according to new research covering data from more than 50 countries.

The research team, including experts from Australia, looked at 376 studies comprising almost 350,000 people with chronic pain around the world.

Chronic or persistent pain affects an estimated 20-30% of the population, and it disproportionately affects women and people with disabilities.

The team found that among adults with chronic pain, 37% met diagnostic criteria for major depressive disorder and 17% for generalised anxiety disorder, markedly higher than population norms (10% and 2% respectively), highlighting the prevalence of diagnosable conditions requiring targeted treatment.

Those most likely to have depression and anxiety were women, younger people, and people with certain types of chronic pain (called nociplastic pain) where there is no tissue damage, such as fibromyalgia and temporal mandibular disorder.

The team said systematically

screening for mental health conditions in people with chronic pain is critical, as is making sure people receive equitable access to care and innovative treatment.

"Changes in chronic pain care are needed at the individual clinician and systems levels to address the co-occurrence of chronic pain and depression and anxiety," wrote the authors in JAMA Network Open.

"Not only are few treatments available for these comorbidities, but people with mental health comorbidities are frequently rejected from chronic pain clinics and excluded from clinical trials," they continued.

"For physicians treating individuals with chronic pain in primary care and specialty practice, systematic screening of depression and anxiety is critical, as is having a network of mental health referral sources when a positive screening result is detected.

"Short-term, cost-effective, and remotely delivered psychological treatments for chronic pain are becoming increasingly available and can be recommended to individuals with chronic pain," the authors concluded.

Read the paper HERE. KB



THE Guild Corporate Health Program is expanding in 2025, making it easier than ever for employers to protect their workforce against vaccinepreventable diseases.

This year's program includes egg-based flu vaccines and whooping cough vaccinations, with plans to introduce Hepatitis A and B vaccinations.

Guild Corporate Health, the Pharmacy Guild of Australia's corporate vaccination program, provides a convenient and costeffective solution for employers managing staff vaccinations.

Unlike traditional workplace vaccination programs that require a healthcare provider to set up on-site, Guild Corporate Health brings corporate vaccination into pharmacies.

Employees book appointments online - directly into the pharmacy's system - at a time and location that suits them.

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- Pharmacies: Registration is now open via MyGuild.
- Employers: Learn how Guild Corporate Health can benefit your staff by visiting quildcorporatehealth.com.au to request a call back.

The 2025 program launches on Mon, 31 Mar, just in time for the winter season.

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