Pharmacy Daily
Monday 5th May 2025

Today's issue of *PD*

Pharmacy Daily today features three pages of all the latest industry news, plus the **May MIMS Update**.

Pall care award nominations open

NOMINATIONS are now open for this year's National Palliative Care Awards.

The presentation is hosted by Palliative Care Australia every two years, recognising excellence, innovation, and leadership in the sector.

Categories for 2025 include: Outstanding Work by a Team in Delivering Palliative Care; Innovation in Pall Care; Outstanding Achievement in Volunteering; Outstanding Achievement in Aboriginal and Torres Strait Islander Pall Care; and Outstanding Achievement by an Individual in Pall Care.

To nominate, click **HERE**.

Peak bodies congratulate Albanese

THE Pharmacy Guild of Australia and Advanced Pharmacy Australia (AdPha) have congratulated Prime Minister Anthony Albanese and Labor on their re-election.

"The Guild welcomed the focus on health in the campaign with historic investments in Medicare and cheaper medicines," Guild National President Professor Trent Twomey said.

Referring to the commitment to cutting the PBS general co-payment from $31.60 to $25, taking effect from 01 Jan 2026, Professor Twomey noted the change will benefit more than 20 million Australians who do not hold a concession card.

"Over four years, this puts $689 million back in the pockets of patients," he said.

Professor Twomey said Labor's policy to inject a record investment of $8.5 billion in Medicare will significantly build on Australia's health system which is "already the envy of the world".

"Cheaper medicines and free GP consultations can only mean better health outcomes for more Australians," Twomey said.

"We also look forward to continuing to work with the Albanese Government to build on its reforms to expanding Australian women's access to the frontline health services they depend on, such as contraception and menopause management."

AdPha President Tom Simpson also welcomed Labor's renewed commitments to Medicare through cheaper medicines, stronger bulk billing, and increased public hospital funding, but urged the government to go further.

"To truly relieve pressure on overcrowded hospitals and emergency departments, we must urgently invest in the hospital pharmacy workforce and support new, evidence-based models of care," Simpson said.

"The forthcoming Pharmacy Programs Agreement must champion innovative, multidisciplinary care to ensure Australians can access high-quality pharmacy services wherever medicines are needed - whether in hospitals, aged care, general practice or community settings."

AdPha also called for stronger investment in health and pharmacy workforce capacity to meet growing demand and manage the complexity of new medicines entering the Pharmaceutical Benefits Scheme (PBS), pointing out that the majority of new PBS medicines are used in acute or specialist settings. *KB*

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RSV antibody's real-world protection

MONOCLONAL antibody injection nirsevimab is highly effective in real-world conditions at preventing severe respiratory syncytial virus (RSV) infections in infants, new research has found.

Looking at 27 studies covering five countries - France, Italy, Luxembourg, Spain and the United States - the meta-analysis found on average that nirsevimab reduces the risk of hospitalisation due to RSV infection by 83%, intensive care admissions by 81%, and instances of lower respiratory tract infections by 75% in babies aged 12 months and younger.

In Australia, as part of the National RSV Mother & Infant Protection Program, the antibody is offered free of charge to babies born to mothers who did not receive the RSV vaccine (***PD*** 20 Jan).

CW bank transfer payments incentivised

CHEMIST Warehouse has announced a "win-win" opportunity for customers and businesses, with a new way to pay by direct bank transfer, securely and in real-time, instead of using a credit or debit card.

Said to be an Australian first for in-store experiences, the initiative is designed to tackle the $15 million problem of card surcharging, and can also earn customers cashbacks and rewards.

The new NAB solution, Pay by Bank, uses Australia's PayTo account-to-account functionality as an instant payments system, bypassing the high processing fees involved for businesses using traditional methods.

Chemist Warehouse currently spends around $15 million in surcharge fees each year, which it does not pass on to customers, and said having a competitive and efficient payment option is "very appealing".

The payment system can be accessed on every Chemist Warehouse payment terminal across Australia via the ShopBack app, which also helps users earn cashback rewards while reducing the cost of transactions.

"Having more payment options means a better service and ultimately, price, for customers," said Chemist Warehouse co-founder Jack Gance.

"The simplicity, security, and low cost of Pay by Bank, layered with ShopBack's Cashback rewards, meet our business objectives and give our customers greater choice and value.

"We are proud to lead the retail industry with this innovative, all-in-one solution," he said.

Chemist Warehouse has also added QR code functionality at the instore checkout to set up and then activate the payment through a customer's phone camera.

Chemist Warehouse introduced direct bank transfer QR code payments for customers in 2024

to get the jump on the Federal Government's plan to ban surcharges by 2026.

"As retailers, we really notice the difference," Gance said in relation to the surcharges.

"It's millions of dollars extra cost that's unnecessarily paid out on top of the sale price to process the transaction," he continued.

"I think it's important that we make an incentive for customers, to make this new method available to them, and explain the benefits as providing a better, safer, cheaper method of making payments." *KB*

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Dispensary Corner

WHEN truck driver Tim Friede from Wisconsin started self-administering snake venom via injection and [*wince*] actual snake bite, he hoped he could somehow contribute to the development of a universal antivenom.

Now, more than 20 years and 856 envenomations later, that moment has arrived.

His mission has helped create a cocktail of antibodies which have been used in combination with a drug to protect against snakebites from 19 different species, including Australia's eastern browns, inland taipans and tiger snakes.

"What was exciting about the donor was his once-in-a-lifetime unique immune history," said immunologist Jacob Glanville who came across Friede's unusual quest in the media and invited him to team up.

"Not only did he potentially create these broadly neutralising antibodies, in this case, it could give rise to a broad-spectrum or universal antivenom."

With the antivenom cocktail proving effective in mouse models, the team is now looking to test its efficacy out in the field, starting with providing the antivenom to dogs brought into veterinary clinics for snake bites in Australia.

With millions of snakebites occurring in the developing world each year, the team is also looking for philanthropic, government and pharma company funding to produce the antivenom on a large scale.

Pharmacy-GP after hours partnership

NATIONAL Pharmacies has joined forces with a telehealth service provider, offering Australians 24/7 access to specialist GPs.

To use the service, National Pharmacies members and customers can book a GP appointment via the National Pharmacies website.

TeleWell's GPs can offer diagnosis, treatment and prescriptions, which are then sent electronically to a local National Pharmacies store.

"National Pharmacies is delighted to partner with Partnered Health to provide our members and customers access to expert healthcare when it's needed most and help relieve pressure on our health system," said National Pharmacies CEO Vito Borrello.

"We know from demand for our 24/7 pharmacy that health emergencies can occur any time of the day or night, and now, with TeleWell, we will be able to provide full-circle, quality health care that is patient-centred and links to your local expert pharmacist."

The community pharmacy group and TeleWell ran a successful six-month trial recently, offering patients services to GPs from Partnered Health.

Off the back of the trial, it was revealed that four out of every 10 customers accessed the service after hours (after 8pm during the week and after 6pm on weekends).

National Pharmacies, which runs 46 stores around SA, Vic and NSW, opened South Australia's first 24/7 community pharmacy last year (***PD*** 04 Feb).

The organisation is the first community pharmacy group to have access to TeleWell, by Partnered Health.

PICTURED: National Pharmacies CEO Vito Borrello, Partnered Health Medical Centres Chief Medical Officer Dr Shirley Fung and Partnered Health Primary Care CEO Michael Broadbent. *JHM*

Call for new approach to recording sex differences in health data

MEN are more likely than women to get sick and die from three common conditions - hypertension, diabetes, and HIV/AIDS - but less likely to get medical care, according to international researchers.

The team looked at global data and found males have higher rates of disease and higher rates of death compared to females, but in some countries are also less likely to seek health care and adhere to treatment.

In most countries, males are also more likely to smoke, while females are more like to be obese and engage in unsafe sex.

Overall, the study suggests that public health professionals need to develop strategies to encourage males to participate in preventive and health care services.

The researchers also highlighted the importance of examining health data by sex to understand health inequities and guide appropriate interventions.

The authors concluded that more comprehensive datasets are needed for these and other conditions so that sex differences can be monitored and equitable health care policies implemented.

Senior author Angela Chang said, "The evidence is clear: sex differences persist at nearly every point along the health pathway, from higher smoking rates in men to higher obesity prevalence in women, yet interventions rarely reflect this.

"Without sex-disaggregated cascade data, we're flying blind - unable to detect who is falling through the cracks in prevention, diagnosis, and care."

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MIMS Monthly Update

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New Products

- **Dexrazoxane (Dexrazoxane-Reach)** is an analogue of ethylene diamine tetra-acetic acid. The dose-dependent cardiotoxicity observed during anthracycline administration is due to anthracycline-induced iron-dependent free radical oxidative stress on the relatively unprotected cardiac muscle. Dexrazoxane is hydrolysed in cardiac cells to the ring-opened product ICRF-198. ICRF-198 is capable of chelating metal ions. It is generally thought that it can provide cardioprotection by scavenging metal ions, thus preventing the Fe^{3+}-anthracycline complex from redox cycling and forming reactive radicals. Dexrazoxane also inhibits topoisomerase IIb, which may also contribute to protection of anthracycline-induced cardiotoxicity. *Dexrazoxane-Reach is indicated for reducing the incidence and severity of cardiomyopathy associated with doxorubicin administration in women with metastatic breast cancer who have received a cumulative doxorubicin dose of 300 mg/m^2 and who will continue to receive doxorubicin therapy to maintain tumour control*. Dexrazoxane-Reach is contraindicated in children aged 0 to 18 years; in breastfeeding; and during vaccination with yellow fever vaccine. Dexrazoxane-Reach powder for infusion contains dexrazoxane 500 mg and is available in packs of 1 vial.

- **Edaravone (Radicava)** is a free radical scavenger to reduce oxidative stress. *Radicava is indicated in adults with a diagnosis of amyotrophic lateral sclerosis who are independent in activities of daily living with normal respiratory function and where treatment is initiated within two years of disease onset.* Radicava concentrate for infusion contains edaravone 30 mg per 20 mL and is available in packs of 10 ampoules.

- **Epcoritamab (rch) (Epkinly)** is a humanised IgG1-bispecific antibody that binds to a specific extracellular epitope of CD20 on B cells and to CD3 on T cells. CD20 is expressed on most human B cell lymphomas and leukaemias and on B cells in peripheral blood, but not haematopoietic stem cells or plasma cells. The activity of epcoritamab is dependent upon simultaneous engagement of CD20-expressing cancer cells and CD3-expressing endogenous T cells by epcoritamab that induces specific T cell activation and T cell-mediated killing of CD20-expressing cells, as epcoritamab does not have direct immune effector mechanisms. The Fc region of epcoritamab is silenced for direct immune effector mechanisms, such as antibody-dependent cellular cytotoxicity, complement-dependent cellular cytotoxicity, and antibody-dependent cellular phagocytosis. *Epkinly has provisional approval for the treatment of adult patients with relapsed or refractory diffuse large B cell lymphoma after two or more lines of systemic therapy*. Epkinly concentrate for injection (dilute to use) contains epcoritamab 4 mg per 0.8 mL and is available in packs of 1 vial. Epkinly solution for injection (ready to use) contains epcoritamab 48 mg per 0.8 mL and is available in packs of 1 vial.

- **Iptacopan (Fabhalta)** is a proximal complement inhibitor that targets Factor B (FB) to selectively inhibit the alternative pathway while leaving the direct signalling from the lectin and classical pathways intact. Inhibition of FB prevents the activity of alternative pathway related C3 convertase and the subsequent formation of C5 convertase. In paroxysmal nocturnal haemoglobinuria (PNH), intravascular haemolysis (IVH) is mediated by the downstream membrane attack complex, while extravascular haemolysis (EVH) is facilitated by opsonisation with C3 fragments. Iptacopan acts proximally in the alternative pathway of the complement cascade to control both C3-mediated EVH and terminal complement-mediated IVH. *Fabhalta is indicated for the treatment of adult patients with PNH*. Fabhalta is contraindicated in patients who are not currently vaccinated against Neisseria meningitidis and Streptococcus pneumoniae unless the risk of delaying Fabhalta treatment outweighs the risk of developing an infection from these encapsulated bacteria; for initiation in patients with unresolved serious infection caused by encapsulated bacteria, including *Streptococcus pneumoniae, Neisseria meningitidis,* or *Haemophilus influenzae* type B; and for use in combination with other complement inhibitor therapies for PNH, unless medically justified. Fabhalta capsules contain iptacopan 200 mg and are available in packs of 56.

- **Lutetium (^{177}Lu) vipivotide tetraxetan (Pluvicto)** is a radionuclide which is linked to a targeting moiety that binds to prostate-specific membrane antigen (PSMA), a transmembrane protein that is highly expressed in prostate cancer, including metastatic castration-resistant prostate cancer (mCRPC). Upon the binding of Pluvicto to PSMA-expressing cancer cells, the beta-minus emission from lutetium-177 delivers therapeutic radiation to the targeted cell, as well as to surrounding cells, and induces DNA damage which can lead to cell death. Pluvicto is indicated for the treatment of adult patients with PSMA-positive mCRPC who have been treated with androgen receptor pathway inhibition and taxane-based chemotherapy. Pluvicto solution for injection contains lutetium (^{177}Lu) vipivotide tetraxetan 1000 MBq per 1 mL and is available in packs of 1 vial.

- **Rozanolixizumab (rch) (Rystiggo)** is a humanised IgG4 monoclonal antibody which decreases serum IgG concentration by inhibiting the binding of IgG to neonatal Fc receptor, a receptor that normally protects IgG from intracellular degradation and recycles IgG back to the cell surface. By the same mechanism, rozanolixizumab is expected to decrease the concentration of pathogenic IgG autoantibodies associated with generalised myasthenia gravis (gMG). *Rystiggo is indicated as an add-on to standard therapy for the treatment of gMG in adult patients who are anti-acetylcholine receptor or anti-muscle-specific tyrosine kinase antibody positive.* Rystiggo solution for infusion contains rozanolixizumab 280 mg per 2 mL and is available in packs of 1 vial.

New Presentations

- **Macitentan and tadalafil (Opsynvi)** is a single tablet combination therapy containing two oral components with synergistic mechanisms of action to improve pulmonary arterial hypertension (PAH): macitentan, an endothelin receptor antagonist, and tadalafil, a phosphodiesterase 5 inhibitor. *Opsynvi is indicated for the maintenance treatment of PAH (World Health Organization (WHO) Group 1) in adult patients of WHO functional class II and III whose PAH is idiopathic, heritable or associated with connective tissue disease or congenital heart disease with repaired shunts. Opsynvi is intended as substitution treatment only for*

patients currently treated concomitantly with stable doses of macitentan 10 mg and tadalafil 40 mg as separate tablets. Opsynvi is contraindicated in women who are or may become pregnant; in women of child-bearing potential who are not using reliable contraception (women must not become pregnant for at least 3 months after stopping treatment with macitentan); in patients with severe hepatic impairment (with or without cirrhosis); in patients with baseline values of hepatic aminotransferases (AST and/or ALT) greater than 3 times the upper limit of normal; for concomitant use with nitric oxide donors, organic nitrates or organic nitrites (e.g. glyceryl trinitrate (injection, tablets, sprays or patches), isosorbide salts, sodium nitroprusside, amyl nitrite, nicorandil) in any form either regularly or intermittently (where nitrate administration is deemed medically necessary in a life-threatening situation, at least 48 hours in most patients and 4-5 days in the elderly (approximately 4-5 half-lives) should have elapsed after the last dose of Opsynvi before nitrate administration is considered); for concomitant use with guanylate cyclase stimulators such as riociguat; in patients who have loss of vision in one eye because of non-arteritic anterior ischemic optic neuropathy, regardless of whether this episode was in connection or not with previous PDE5 inhibitor exposure; in patients who had acute myocardial infarction within the last 90 days; in patients with severe hypotension (< 90/50 mmHg), unstable angina, uncontrolled arrhythmias, uncontrolled hypertension; and in patients with a stroke within the last 6 months. Opsynvi tablets contain macitentan 10 mg and tadalafil 40 mg and are available in packs of 30.

- **Pegcetacoplan (Syfovre)** binds to complement protein C3 and its activation fragment C3b with high affinity thereby regulating the cleavage of C3 and the generation of downstream effectors of complement activation. Overactivation of the complement system is strongly associated with the progression of geographic atrophy (GA). Increased levels of complement activity have been found in patients with GA, specifically in lesions and surrounding areas including photoreceptors. The complement C3 protein plays a role in driving the downstream damaging effects of complement overactivation in the progression of GA, which include uncontrolled inflammation, opsonisation, and retinal cell death. Pegcetacoplan acts centrally in the complement cascade by regulating C3, thereby exerting broad control of complement activation, and of the complement effectors that are involved in the pathogenesis of GA. *Syfovre is indicated for the treatment of adult patients with GA secondary to age-related macular degeneration with an intact fovea and when central vision is threatened by GA lesion growth.* Syfovre is contraindicated in patients with ocular or periocular infections and active intraocular inflammation. Syfovre solution for injection contains pegcetacoplan 15 mg per 0.1 mL and is available in packs of 1 vial.

New Indications

- **Benralizumab (Fasenra)** is now indicated as an add-on treatment for relapsing or refractory eosinophilic granulomatosis with polyangiitis in adult patients aged 18 years and over.

- **Isavuconazole (sulfate) (Cresemba)** is now indicated in paediatric patients from 1 year of age for the treatment of invasive aspergillosis and mucormycosis in patients for whom amphotericin B is inappropriate.

- **Ribociclib (succinate) (Kisqali)**, in combination with an aromatase inhibitor, is now indicated for the adjuvant treatment of patients with hormone receptor-positive, human epidermal growth factor receptor 2-negative stage II and III early breast cancer at high risk of recurrence.

- **Trastuzumab deruxtecan (Enhertu)** is now indicated (with provisional approval) for the treatment of adult patients with locally advanced or metastatic HER2-positive gastric or gastroesophageal junction adenocarcinoma who have received a prior anti-HER2-based regimen.

- **Venetoclax (Venclexta)**, in combination with ibrutinib, is now indicated for the treatment of adult patients with previously untreated chronic lymphocytic leukaemia/ small lymphocytic lymphoma.

New Contraindications

- **Nirmatrelvir and ritonavir (Paxlovid)** is now contraindicated for concomitant use with cariprazine.

- **Ribociclib (succinate) (Kisqali)** is now contraindicated in patients who are at significant risk of developing Torsades de Pointes (including uncontrolled hypertension, high degree atrioventricular block, severe aortic stenosis, uncontrolled hypothyroidism).

Safety Related Changes

- **Ganirelix (acetate) (Orgalutran)** is no longer contraindicated in patients with hypersensitivity to dry natural rubber/ latex.

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.