

Today's issue of PD

Pharmacy Daily today features three pages of news, plus full pages from:

- **MediChoice**
- **Hey Sister!**
- **Maxofen**

Mini-mise pain

MEDICHOICE'S new Ibuprofen Mini liquid capsules provide rapid pain relief in an easy-to-swallow format. Learn more on **page four**.

Plant-based relief

THE Hey Sister! range of women's health products provide clinically proven relief for PMS, menopause and more. See **page five** to learn about a special pharmacy deal.

Maximise your day

NEW Maxofen from Nova Pharmaceuticals combines paracetamol and ibuprofen for double-action relief from acute pain and fever. Further details on **page six**.

A year of growth and delivery

THE Pharmaceutical Society of Australia (PSA) has released its 2024/25 Annual Report, chronicling a year characterised by strong growth and delivery in terms of membership numbers, member support, training and education products and services, policy submissions, partnerships and general investment income.

The organisation reported a surplus of \$2.167 million for FY24-25, while member numbers approached 20,000 by the end of the period and have continued to grow in the months since then.

As the PSA becomes the professional home for all pharmacists from all areas of practice, the 10% increase is the highest membership growth PSA has achieved as a national organisation since its inception.

The PSA said it is committed to expanding the scope of practice and workforce capability, thereby improving health outcomes for Australians, and made strategic decisions to invest in the development of new education products that will deliver on these goals, including full scope prescribing and clinical training, MMR and ACOP credentials, and

new specialty communities.

The PSA's other key achievements also included growth in the PSA Foundation's asset value and activities, the launch of the Hospital Pharmacy Community of Specialty Interest, the inaugural PSA General Practice Pharmacist Symposium, and the launch of the MMR and ACOP credentials.

Reflecting on the fiscal year, PSA National President and Board Chair, Associate Professor Fei Sim, said she was incredibly proud of the progress made and encouraged all pharmacists to come together to transform the profession.

"Our strength lies in the collective expertise, passion, and dedication of our members," Assoc Prof Sim said.

"PSA is owned and led by our members [and] will continue to focus on delivering member value and supporting our workforce as our scope evolves," she added.

PSA CEO Steve Morris highlighted the year's strong financial results, noting that, "Growth means that PSA can deliver more for members, advocate more strongly for the profession and ultimately do more to positively impact the health and wellbeing of Australians".

Read the report **HERE**. KB

eNRMConformance stay of execution

THE transitional arrangement for the use of Electronic National Residential Medication Charts (eNRMConformance) has been extended again (**PD 03 Oct**), with systems that are non-conformant now no longer able to be used for prescriptions after 01 Apr 2026.

While residential aged care homes can continue to use a non-conformant system for administration purposes, prescribers will need to use a paper NRMConformance or create separate electronic or paper PBS prescriptions, creating extra work, while pharmacists will need to dispense from these alternative scripts.

As it currently stands, only Telstra Health's MedPoint and StrongCare by StrongRoom Technology are non-conformant.

The Department of Health, Disability and Ageing states that clinicians and pharmacists continuing to use non-conformant products will need to consider and manage any potential clinical risks associated with them.



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TGA acts to restrict B6 with new S3 category

THE Therapeutic Goods Administration (TGA) has announced its decision to strengthen safety controls for products containing vitamin B6, with the aim of reducing the risk of nerve damage associated with the long-term consumption of high doses (**PD** 05 Jun).

Products with low doses of vitamin B6 (50mg or less) will continue to be available for general sale, while products containing higher doses will require advice from a pharmacist or a prescription from a doctor, depending on the dose.

A new Schedule 3 category will apply to oral preparations containing more than 50mg but not more than 200mg per recommended daily dose, which will be available over the counter with the advice of a pharmacist.

Oral preparations containing more than 200mg per daily dose will continue to require a prescription (**S4**).

The Poisons Standard for vitamin B6 has been amended accordingly.

"The decision strikes a balance between the benefits of vitamin B6, where some people may need low-dose supplementation, and the risks of prolonged ingestion of high doses, which can include damage to peripheral nerves," said a TGA spokesperson, noting that deficiency is uncommon among the Australian population.

The final decision is a confirmation of the interim decision, which was opened to public comment in Jun (**PD** 30 Jun).

Around half of the submissions supported the proposed changes, while the rest said they were either too strict or not strict enough.

In handing down the final decision, the delegate to the Secretary of the Department of Health, Disability and Ageing noted that some submissions argued for products containing 50-200mg to be classified as **S2** Pharmacy medicine.

However, the delegate said they remained "concerned that the widespread availability of vitamin

B6 through multiple sources classifying high-dose vitamin B6 products as Pharmacy medicines will continue to pose risks to the consumer as professional advice is not required to be provided at the point of sale".

"For those in clinical need of vitamin B6 supplementation, high-dose preparations will still be available with pharmacist consultation or a prescription," they added.

At the moment there at least 125 medicines providing 50-200mg vitamin B6, of which 116 are listed complementary medicines.

"To continue to be available on the Australian market, these medicines will need to be registered on the Australian Register of Therapeutic Goods and their labels updated," the delegate noted.

The changes in vitamin B6 content will be implemented on 01 Jun 2027, allowing stakeholders time to enact changes and manage stock.

Read the final decision **HERE**. **KB**

PBS revocation

THE Minister for Health and Ageing has advised that the Pharmaceutical Benefits Scheme (PBS) approval of Woodberry Community Chemist with Sokeo Seng as its sole director, has been revoked, effective 26 Sep 2025.

An inquiry found serious and repeated breaches of the *National Health Act 1953*, including false PBS claims, misuse of Commonwealth funds, and failure to attend a duly convened hearing.

The revocation safeguards the integrity of the PBS in terms of public trust and Commonwealth expenditure, and ensures that approvals are held only by pharmacists who comply with legislative requirements.

The Department of Health, Disability and Ageing reminded pharmacists of the need to strictly adhere to PBS requirements.

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Dive into our latest podcast episode featuring **Emily Turkovic**, an early career pharmacist and harm reduction advocate - "Turning Grief into Purpose; How lived experience can shape an entire career".

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Dispensary Corner

KNOWN for their high concentrations of protein and nutrients such as iron, zinc, vitamin B12, vitamin A, coenzyme Q10 and riboflavin, organ meats can provide a useful nutritional hit, especially for perimenopausal women who may be low in these essentials.

The trouble is, well, it's organ meat, and many people consider offal awful.

Thankfully the supplement industry has come to the rescue by putting dehydrated powdered animal livers, hearts and kidneys in a pill, making the concept a little easier to swallow (and making a dollar or two in the process).

The *New York Post* has reported that women are increasingly turning to these supplements, hoping they will ease menopause symptoms and improve overall health.

However, party pooper nutrition experts - including one consulted by the *Post* - point out that people are better off eating the real stuff, which contains proteins, fats and vitamins often missing from supplements.

"The nutrients can be helpful, but they're not magic bullets," said registered dietician and nutritionist Amy Shapiro, adding that when food intake is poor, supplements are best taken after testing and guidance from a clinician.

In recommending a "food first approach", Shapiro suggested "tossing organs into stews or mixing them with ground beef" to make them more palatable.

PRODUCT SPOTLIGHT

Suppliers wanting to promote products in this feature should email advertising@pharmacydaily.com.au

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Our Hey Sister! range is powered by **Khapregesic®** – an Australian-grown, clinically proven preparation of *Khaya senegalensis*. A gold-standard trial showed **136% greater pain reduction** vs placebo, plus **significant improvements in PMS symptoms** and reduced need for rescue medication. **Non-hormonal, NSAID-free** and **pharmacy-exclusive**, our products deliver **safe and effective**, stage-specific support for women from first period through to menopause.



A *Khaya senegalensis* preparation known as Khapregesic®.

Scientific evidence: Lopresti A. et al. "An examination into the safety and efficacy of *Khapregesic®*, a *Khaya senegalensis* preparation, on pain, physical and emotional wellbeing in women experiencing menstrual distress: a randomised, double-blind, placebo-controlled trial". To request clinical trial early access insights before publication, contact us. **Traditional paradigm:** Traditionally used in western herbal medicine to: [PERIOD] relieve menstruation pain, reduce occurrence of abdominal bloating, relieve symptoms of mild anxiety, reduce mood swings associated with premenstrual tension, [MENOPAUSE] reduce occurrence of menopausal symptoms, relieve symptoms of mild anxiety, reduce heavy menstruation (during peri-menopause). **Always read the back of the pack and if symptoms persist, seek the advice of a healthcare professional.**



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