

Today's issue of PD

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

- Chemsave
- Maxofen

Do the maths

ALIGNING with Chemsave delivers bottom-line benefits for your pharmacy.

If you are looking to buy a pharmacy, consider joining Chemsave's Wealth 100 Club - membership is free.

Learn more on **page four**.

Maximise your day

NEW Maxofen from Nova Pharmaceuticals combines paracetamol and ibuprofen for double-action relief from acute pain and fever.

Available in packs of 12 and 30 tablets.

See details on **page five**.

AI in healthcare

THE Australasian Institute of Digital Health's premier AI data-driven healthcare event, AI.Care 2025, is taking place in Brisbane from 24-25 Nov.

The event brings together Australian healthcare leaders, senior clinicians, policymakers, researchers, innovators, and health tech experts to talk about some of the large and emerging issues in AI for healthcare - more **HERE**.

Code of ethics consultation opens



THE Code of Ethics for Pharmacists is up for renewal, with the Pharmaceutical Society of Australia (PSA) seeking feedback from pharmacists and health sector stakeholders as it begins the consultation phase of reviewing the code.

Last updated in 2017, the Code of Ethics is the key resource articulating the values of the pharmacy profession and expected standards of ethical behaviour, and underpins the professional practice of all pharmacists in Australia.

The revised Code of Ethics will better support pharmacists as they face increasingly complex ethical challenges as practice evolves and responsibilities increase.

Pharmacists are invited to provide their views on the current Code, in particular its reflection of values and ethical standards and on emerging ethical issues.

"At the heart of our profession is our shared commitment to care, competency, and integrity," said PSA National President Associate Professor Fei Sim.

"These ethical values define who we are as pharmacists, guiding our decisions, shaping our relationships with patients, and underpinning the trust our communities place in us.

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Dr Ayomide Ogundipe, who leads the project advisory group, further encouraged pharmacists from all areas of practice, all career stages and all parts of Australia to participate in consultation.

"Throughout this consultation phase we want to hear from a diverse range of pharmacists and stakeholders," Dr Ogundipe said.

"That includes both members and non-members, pharmacists in rural, regional and metropolitan areas and in a range of practice settings, students and interns."

Options for involvement include virtual workshops, a survey, or one-on-one consultation discussion with the team.

Learn more **HERE**. KB

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Pneumococcal vax update

THE new Prevenar 20 pneumococcal vaccine (20vPCV) has now replaced the Prevenar 13 and Pneumovax 23 (23vPPV) on the childhood immunisation schedule, and will protect against 20 prominent types of the disease.

The vaccine is free under the National Immunisation Program (NIP) for babies at two, four, and 12 months, and children 17 and under who are immunocompromised.

Aboriginal and Torres Strait Islander children will receive four doses at two, four, six and 12 months, making the program consistent across all states and territories.

It is now 20 years since the first pneumococcal vaccine, which covered seven types of the disease, was introduced.

The expanded vaccine strengthens the national effort to protect babies, and means stronger, broader protection from pneumococcal.

The pneumococcal chapter in the Australian Immunisation Handbook has been updated, and also includes information on transitional arrangements for kids who were previously recommended 23vPPV and those who have already completed their schedule - see the updated chapter [HERE](#).

There is also a free webinar on the updates for immunisation providers on 25 Sep - learn more [HERE](#).

Antimicrobial use rises

THE Australian Commission on Safety and Quality in Health Care has released its 2024 data for antimicrobial use in the community, describing the findings as "encouraging".

There were over 23 million antimicrobial prescriptions supplied in 2024 on the Pharmaceutical Benefits Scheme and Repatriation Pharmaceutical Benefits Scheme (PBS/RPBS) - almost all of which were for systemic antibiotics.

This represents an increase of 4.8% from 2023, but is still 20.8% lower than 2015.

Just over one-third of Australians had at least one antimicrobial dispensed in 2024, though the rates were much higher for older people.

Australians aged 65 and older in aged care homes received more than double the number of prescriptions than the same age group in the community, and there was an increase of 14.4% from 2023.

"The overall decline in antimicrobial use in the community [over the 10-year reporting period] is encouraging, despite high dispensing rates among older Australians and aged care home residents," the Commission said in the report.

"Despite recent increases, the volume of antimicrobial use in the community remains below pre-pandemic levels [which indicates that] lower levels of antimicrobial use in Australia are achievable long-term.

"However, urgent action is needed to reestablish the downward trend," it added.

Usage rates in Australia



remain higher than comparable European countries, and there are opportunities to improve prescribing practices locally.

The data did not include private prescriptions or antimicrobial medicines supplied over-the-counter, but were estimated to have captured more than 90% of prescriptions.

The Commission noted this was an "important gap in current surveillance of antimicrobial use in Australia, [especially] given the increasing proportion of private antimicrobial prescriptions issued in the community by medical and non-medical clinicians".

Read the report [HERE](#). *KB*

Sansom Lecture rego opens

THE Australian Pharmacy Council (APC) has announced that registrations for the 2025 Sansom Lecture are now open.

The lecture will feature Assoc Prof Sue Kirska exploring the development of workplace support, training and assessments across a range of practice areas to ensure that the pharmacy workforce has the skills and capability to provide consistent, high-quality care.

"Each year, we are enlightened by leading changemakers in the pharmacy profession," said APC CEO, Bronwyn Clark.

"Sue's broad experience and expertise make this a must-attend event.

"Her insights into workplace-based learning and assessment are especially timely as the profession evolves to meet new healthcare demands."

Learn more [HERE](#).

Your views about biosimilars

Researchers are looking for pharmacists to complete a short survey on their views and experience with biosimilar substitution.

You will have the chance to receive a summary of the results and go into the draw for one of four \$100 gift vouchers.

[CLICK HERE](#) to find out more about the survey



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Dispensary Corner

AI HAS already changed lives in many ways, and now it is helping to save hearts.

Researchers from London have found that an AI-powered stethoscope can assist medical professionals in the early detection of heart disorders.

The device can pick up on subtle differences in heartbeats and blood flow that are not detectable to the human ear using a traditional stethoscope, leading to early intervention in heart failure, heart valve disease and abnormal heart rhythms.

Led by Imperial College London and Imperial College Healthcare NHS Trust, the study trialled the AI stethoscope in 96 GP surgeries involving 12,725 patients with heart failure symptoms, comparing them to patients from 109 GP surgeries where the tech was not used.

The AI device was 2.33 times more successful in diagnosing heart failure, 3.45 times more likely to detect atrial fibrillation and nearly twice as likely to spot heart valve disease.

"This is an elegant example of how the humble stethoscope, invented more than 200 years ago, can be upgraded for the 21st century," said Dr Sonya Babu-Narayan, Clinical Director at the British Heart Foundation.

There are plans to roll out the AI stethoscopes to GP practices in some British regions.



Educating patients on pain

WITH new regulations around the scheduling of paracetamol pack sizes and the down-scheduling of COX-2 inhibitors coming in this year, consumers are faced with a growing - and potentially confusing - range of pain relief options.

Dr Rose Cairns, Senior Lecturer at Sydney University's School of Pharmacy, has authored a new resource for pharmacists, *The future of pain management in Australia*, so they can assess everyday pain - from muscular aches to inflammation-based conditions - and match consumers with the most appropriate treatment.

Dr Cairns told *Pharmacy Daily* that while it could be read by a general audience as well, the main target is pharmacists.

"This year's changes around pharmacy-level pain management mean pharmacists play an essential role in educating patients," she said.

"As highly trusted, accessible healthcare professionals, it is important that pharmacists are on top of the most recent evidence around what effective options are out there, especially when it comes to over-the-counter medicines."

The resource summarises the latest evidence in terms of the role of inflammation in pain, explains the contribution of intentional and accidental overdose to the recent changes to paracetamol scheduling, and outlines the various options for the different types of pain the average person might experience.

Dr Cairns said one problem is that people may be taking something that is not particularly effective for them, so they may keep taking more and more.

"If we can try and tailor what pain people have in their lives and get them taking the thing that's



most likely to work based on the evidence, then potentially that would reduce the risk of people taking too much," she said.

"They could try something different, or even try non-pharmacological approaches," she suggested.

There is also the issue of people taking multiple over-the-counter products, not realising they all have the same ingredient in them - so there is an educational role for the pharmacist there as well, she said.

The resource highlights the importance of inflammation literacy - understanding inflammation as a key driver behind many common pain conditions - and how this knowledge can improve treatment outcomes.

Dr Cairns told *Pharmacy Daily* that dental pain is one of the biggest drivers of unintentional paracetamol overdose, being overrepresented compared to other types of pain.

"People take two tablets every two hours because it's not working, and they're still in pain."

"Maybe there's an inflammatory component that's not being treated, so it's definitely worth trying an NSAID or even a combination product."

You can find the resource **HERE**. KB

No CVD benefit from daily aspirin

HEALTHY older adults who take a low-dose of aspirin daily may experience a higher risk of a major haemorrhage without any overall cardiovascular benefit, according to research led by Monash University.

Researchers studied outcomes in over 15,000 Australian and American adults aged mostly 70 and older with no history of cardiovascular disease events who took either 100mg aspirin or placebo daily.

Initial results were published in 2018 after a median 4.7 years of treatment, with the current study looking at a further median 4.3 years follow-up.

During the combined 8.3 year study period, there was no evidence overall of cardiovascular prevention with aspirin, but there was evidence of increased major haemorrhage risk in the group randomised to receive aspirin compared to those randomised to placebo.

It was also found in the extension study that those in the aspirin group had a 17% increased risk of cardiovascular events compared to placebo.

"Our findings suggest that individuals taking aspirin for possible primary prevention of cardiovascular events should discuss with their doctors possibly stopping the drug, noting that this advice would not apply to anyone taking aspirin who had already experienced a cardiovascular event and was taking it to prevent recurrent events," said first author Professor Rory Wolfe of Monash University.

Read the study **HERE**.

Do The Math(s)!

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