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## Biosimilars: "Now is the time to act"

HEALTH leaders at the recent Sandoz Medicines Access and Biosimilar Policy Summit in Canberra have united in the call for practical reform around biosimilar medicines that reduces costs for patients, simplifies administrative complexity for clinicians and pharmacists, and supports broader access to medicines.

"It is clear Australia must better harness the value of biosimilar medicines, which until now has been an unrealised opportunity across the Australian health system," said Sandoz GM Australia and New Zealand Clint Holland.

"Clinicians, pharmacists, patient advocates and policy leaders are strongly aligned on the immediate actions required to deliver meaningful system-level change.

"Now is the time to act to strengthen the long-term sustainability and resilience of the PBS in line with the objectives of the National Medicines Policy.

"Together, we can reduce the cost burden for patients, remove unnecessary administrative complexity, and ensure the PBS can continue to fund access to medicines into the future."

OECD data shows that uptake of key biosimilar medicines in Australia's retail pharmacy setting is 39%, lagging behind the OECD average of 67%, with some countries approaching 90%.

This gap limits competition, constrains PBS savings, and delays patient access to medicines that are standard practice elsewhere.

Canberra-based community pharmacist Samantha Kourtis, who attended the summit, said: "Biosimilar medicines represent a real opportunity, for both government and clinicians alike, to improve access and reduce the

burden on our patients.

"With such strong evidence behind them, embracing biosimilar medicines more fully in Australia feels like a natural and necessary next step - one I'm confident championing in my own practice."

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### Today's issue of PD

Pharmacy Daily today features three pages of news plus a full page from Glucojel.



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CommBank iQ Market Monitor iQ. Health industry spending between 01 February 2025 and 31 January 2026.

1. Australian Government, Department of Health, Disability and Ageing, Australian Immunisation Handbook. Available at <https://immunisationhandbook.health.gov.au>. Accessed March 2026. sanofi-aventis australia pty ltd trading as Sanofi. All rights reserved. ABN 31 008 558 807. Sydney, Australia. [www.sanofi.com.au](http://www.sanofi.com.au). MAT-AU-2600393 V1. Date of preparation: March 2026.

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## Finfluencers are not your friends

**THE** Council of Small Business Organisations Australia (COSBOA), alongside other finance and business industry bodies, is urging small businesses to actively engage their trusted advisers as cost pressures intensify and key regulatory changes approach.

Rising input costs, fuel volatility, high interest rates, and upcoming reforms such as Payday Super and changes to payment surcharging are adding to the complexity and challenge of the small business operating environment.

Knowing how to respond, particularly when decisions around pricing, staffing, cashflow and investment are highly interconnected, is critical.

"In this environment, the difference between a sound decision and a costly one often comes down to having access to the right advice at the right time and acting on it early," said COSBOA CEO Skye Cappuccio.

The alliance is encouraging small businesses and sole traders to engage with their accountants, bookkeepers, and finance and mortgage brokers for advice on managing their finances, accessing funding and planning ahead.

"Engaging with a trusted adviser not only helps ensure compliance, it can also save time, reduce stress and support better business decisions," Cappuccio stated.

## Asthma management stuck in the 1980s

**AUSTRALIA'S** 2.8 million asthma sufferers are receiving outdated, fragmented care that is leading to outcomes that have stalled or worsened over the last decade, according to a landmark blueprint on the future of asthma care.

*A Bold Blueprint for Asthma Reform in Australia* calls for urgent, system-wide reform of how asthma is diagnosed, managed and treated, and was authored by some of the country's leading respiratory experts, with input from a range of stakeholders, including the Pharmaceutical Society of Australia and the Pharmacy Guild of Australia.

"Asthma costs the health system hundreds of millions each year, particularly in primary care and pharmaceuticals, yet outcomes aren't improving," said blueprint co-author Professor Christine Jenkins from the George Institute for Global Health.

"It's time to move from outdated, fragmented care to consistent implementation of evidence-based approaches that improve health outcomes and make every dollar count," she stated.

The blueprint highlights a system still operating on clinical practices from the 1980s, some now considered potentially harmful.

Patients are being overtreated with outdated reliever inhalers and oral corticosteroids that cause serious long-term harm, while proven preventive treatments remain underused.

Meanwhile, just one in four people with asthma has a written action plan, and only half had a



routine GP review in the past year.

First Nations people bear a disproportionate burden, with emergency department visits and death rates two to three times greater than non-Indigenous Australians.

The blueprint sets out five priorities for reform as well as actions that can be implemented now, referring to best practice as detailed in the Australian Asthma Handbook which had a major update last year (**PD** 17 Sep 2025).

Key calls include restricting over-the-counter access to outdated reliever inhalers, mandating warning

labels on reliever packaging, establishing team-based care as the national standard and funding a respiratory research mission with a dedicated asthma stream.

The blueprint also describes the elements of an optimal asthma consultation and calls for the development of a national patient charter and nationally agreed standards of care for asthma.

With pharmacists playing a key role in medication adherence and optimising pharmacotherapy, the blueprint recommended building and sustaining the asthma workforce through targeted investment, incentives, expanded scope-of-practice and professional upskilling.

"We now know that a life without asthma symptoms is possible," said Professor Jenkins.

"Yet this remains out of reach for most - we can, and must, do better," she concluded.

Access the blueprint **HERE**. *KB*

## Semaglutide pill helps in depression

**DIABETES** and weight-loss drug oral semaglutide has been shown to help people with major depressive disorder (MDD) increase their willingness to exert physical effort, according to research published in *JAMA Psychiatry* today.

The Canadian team conducted the trial over 16 weeks with 72 participants who had MDD and were overweight, with half receiving the semaglutide pill and the other half a placebo.

In this first-of-its-kind study,

the researchers said semaglutide significantly improved measures of motivation in patients with MDD, reducing the perceived cost of effort relative to the reward they received.

A loss of interest in activities is common in MDD, and the researchers said their results could have implications for the treatment of multiple neuropsychiatric disorders that come with issues relating to effort and reward.

Access the paper **HERE**.

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### Dispensary Corner

IT'S time to put down the egg and bacon roll, folks.

A new report has revealed the leading causes of six million cardiovascular deaths around the world in 2023.

The Global Burden of Disease Study found that diet remains the leading modifiable cause of the disease, with the top "dietary villains" including high sodium intake, low fruit consumption and a lack of whole grains.

The research found that ischemic heart disease and stroke were the primary outcomes of those poor habits, with men experiencing a higher diet-attributable burden than females across the world.

"While we are seeing a decline in age-standardised mortality rates due to better health care, the total absolute burden is staggering," said author Guoshuang Feng from Beijing Children's Hospital, China.

"We are essentially in a race against an ageing population that is... vulnerable to the harms of high-salt & low-nutrient diets."

## EU drug landscape feeling Trumpian tumult

AS US pricing policies disrupt the world's pharmaceutical sector, Europe is at a pivotal moment of ensuring future access to new drugs, the head of the European Medicines Agency (EMA), Emer Cooke (pictured) told attendees at last week's Reuters Pharma Europe 2026 event.

President Donald Trump's most-favoured-nation drug pricing policy introduced last May was intended to cut the cost of medicines for people in the US, but has instead led pharma companies to push for higher prices elsewhere or delay launches, Cooke explained.

As a result, the number of drug launches in Europe has fallen by more than a third, potentially hindering patient access to the latest innovative medicines.

However, Europe is the second biggest global market for pharmaceuticals, and is a "very strong place in terms of access" with its universal healthcare systems, Cooke noted.

While pricing is a matter for the individual member states, rather than the EMA, Cooke noted that measures such as collective procurement negotiations within the EU for critical medicines are currently in progress.

"Bigger markets are more attractive to innovators - we're talking about joint procurement, to market [medicines] in several countries at the same time."

While China has experienced biotech industry-breaking records in new global licensing deals, Cooke said it was too soon to say whether it was becoming a more viable medicine supplier for Europe.

"It's clear that there's a lot of innovation happening in China, and there are a lot of clinical trials happening there as well.

"But at the moment, we're seeing very little of that coming to the European Medicines Agency.

"I've worked with the Chinese authorities for quite a long time and there's been impressive development in how they assess medicines, and how they look at trials - we need to understand that and see what it means then for the European regulatory system."

In terms of its own pharmaceutical industry, Cooke strongly rejected the contention that drug development in Europe is falling behind the US and China, particularly in the life sciences sector - while also hinting at an upside to the Trumpian tumult.

"I think we have a lot of very



positive things going on in Europe," she said.

"Yes, it is a difficult time, yes, there are challenges, yes, we have to look at the life sciences industry, and yes, we have to look at the regulatory system - but we're doing it."

Cooke pointed out that other changes in the US science and medicine landscape are driving the country's scientists to Europe.

"This is one of the messages, that we are open for business in Europe - we are stable and predictable, we support science, we support independence, we support the regulatory system," she said.

"Scientists who used to work in US institutions find the European environment very attractive.

"And I think we're getting some already quietly." KB



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