

## Today's issue of PD

*Pharmacy Daily* today features two pages of the latest industry news.

### GP access barrier to men's health

**THE** Pharmacy Guild of Australia is urging men to "think pharmacy first" when it comes to health, as new research highlights growing frustration with GP wait times and strong support for extended pharmacy hours.

The Guild said Australian men are facing barriers to GP-centred healthcare, with research showing that 16% of people wait more than three weeks for a GP appointment, and increasingly look to community pharmacies.

The survey found that 87% of men support pharmacies opening 6am - midnight, and 79% back 24-hour access, while 56% of men aged 18 - 34 would pay for an immediate pharmacist consultation for everyday or long-term health conditions.

Guild national president Professor Trent Twomey said the findings show the need to rethink how healthcare is delivered.

"Men don't need more motivation to see their GP - they need access," Professor Twomey explained, pointing to the accessible care and trusted advice offered by community pharmacy.

## Record pertussis cases stress need for action

**WITH** Australia experiencing its biggest rise in whooping cough cases in 35 years, alongside the lowest rates of childhood immunisation in a decade, doctors and public health experts are imploring the Australian community to get vaccinated.

During 2024 and 2025, over 82,000 whooping cough cases were recorded nationwide, the largest number since monitoring began in 1991.

While the condition does have cyclical peaks that occur every few years, the recent large spike has been linked to relatively low transmission during the COVID pandemic as well as low childhood vaccination rates.

In a press conference alongside members of doctors peak bodies, Health Minister Mark Butler said that health ministers around the country are focused on the issue.

"We want to see two things," Butler said.

"The first thing we want to see



is as many pregnant mums take advantage of the free whooping vaccination in their third trimester as possible.

"That's good for your protection, but it's also good for protecting your newborn baby in those first several weeks of their life before they get their first whooping cough jab at the age of two months.

"But we are also seeing childhood immunisation rates slip right across the immunisation system.

"This is not particular to Australia, we're seeing that right across the world - the World Health Organization is talking about it."

RACGP president Dr Michael Wright said doctors are also worried about the drop in vaccination rates.

"And there is concern that people aren't as confident in getting vaccines as they used to be.

"It's something that, as a community but also as individual health professionals, we're really taking it seriously to try and encourage our patients to get on board and get vaccinated."

While the pertussis vaccine is available for free on the National Immunisation Program (NIP) for babies, adolescents and pregnant women, others in the community - including vulnerable adults and

close contacts of babies too young to be vaccinated - have to pay.

Minister Butler has indicated that he would be willing to support broader inclusion on the NIP if recommended by the Pharmaceutical Benefits Advisory Committee (PBAC). KB

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### Gluten support med wins award

**GLUTEGUARD** gluten protection tablet has been recognised with a New Product Award in Canada, following its launch in 2024 into the Canadian pharmacy market.

The Australian innovation supports people following a strict gluten free diet who may accidentally eat gluten, and is now available in over 4,300 pharmacies nationwide.

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### Dispensary Corner

**THERE** is a rare medical condition called auto-brewery syndrome (ABS), where people get drunk without drinking due to gut bacteria producing alcohol from food.

While normal digestion can create trace amounts of alcohol in anyone, people with ABS can produce levels high enough to have a noticeable effect.

Free drinks permanently on tap might sound like fun, but people with ABS face social stigma, medical complications, and even legal problems due to unexplained intoxication.

To determine the biological roots of the disorder, US researchers looked at the makeup and activity of gut microbes in 22 people diagnosed with ABS, along with 21 unaffected household partners and 22 healthy controls.

Stool analyses suggested several bacterial species as key contributors, including *Escherichia coli* and *Klebsiella pneumoniae*, although the researchers said that identifying the exact causative microbes in individual patients is far from straightforward.

The good news is that a faecal transplant trialled in one ABS patient was a success, rendering them symptom-free for more than 16 months.

"Auto-brewery syndrome is a misunderstood condition with few tests and treatments," said Dr Elizabeth Hohmann of Mass General Brigham.

"Our study demonstrates the potential for faecal transplantation," she added.

## Meds continuity barriers

**RESEARCH** looking into factors related to continuity of medication when patients transfer from hospitals to residential aged-care facilities (RACFs) has highlighted shortcomings in transition-of-care processes, resulting in missed or delayed doses of medication for nearly one in four patients.

The team, led by Adjunct Assoc Prof Rohan Elliott from the Pharmacy Department at Austin Health, reviewed cases for 397 patients from 11 hospitals in Victoria two days after they were discharged from hospital.

They found that 23% of patients had one or more missed or significantly delayed doses, with 5% missing out on one or more high-risk medications (such as opioids, anticoagulants, levodopa and insulin), and 13% on moderate-risk medication (such as antimicrobials and non-opioid pain killers).

The risk of missed or delayed doses was reduced when hospitals supplied discharge medications in original packs and an interim medication administration chart (IMAC), and when community pharmacies delivered repackaged medications on the day of discharge.

However, only 52% of patients had their aged care medication charts prepared or updated on the day of transfer, with updated medications delivered to the RACF from their community pharmacy provider (packed in DAAs) for only 46% patients.

Interestingly, they found that having a GP or locum do patients' RACF medication charts on the day of discharge increased the risk of



missing or delayed doses, likely due to GPs being unavailable until later in the day.

"Hospitals should be encouraged and supported to provide IMACs to facilitate timely and safe administration of medications, and RACFs should be encouraged and supported to use them routinely," the researchers suggested.

The team pointed to a lack of clear guidance and support for the use of IMACs from state and Commonwealth Governments and their respective health and aged care safety and quality bodies, as well as a lack of standardisation of IMAC procedures, as major barriers to wider implementation.

With a median time from discharge to first medication dose required of less than three hours, it was also recommended that hospitals be enabled to provide up to seven days of interim medication supply aligned with a seven-day IMAC, to enhance continuity of medication administration.

The team called for barriers to implementation of these approaches to be addressed.

The paper is available [HERE](#). KB

## False sense of security on BP

**THE** Apple Watch's blood pressure monitoring feature may provide people with a false sense of security, according to research published today in JAMA.

A team from the University of Pennsylvania tested the watch in nearly 4,000 people, and found it picked up undiagnosed hypertension in around 41% of those who had it - but missed it in 59%.

It also gave a false positive alert to 8% of people who did not have hypertension.

While the device is not intended to diagnose hypertension, the researchers had concerns about the implications of misclassification of risk.

"False reassurance may discourage some individuals with undiagnosed hypertension from obtaining appropriate screening or engaging with the health care system, resulting in missed opportunities for early detection and treatment," wrote the researchers.

"Rigorous validation, strategies to improve cuffless device accuracy, and thoughtful integration into population screening will be essential if cuffless technologies are to contribute meaningfully to hypertension detection," they concluded.

Read the paper [HERE](#).

