

Today's issue of PD

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

Iron deficient?

FEFOL iron & folic acid delayed release capsules with iron sulphate are an effective treatment for iron deficiency. Learn more on **page four**.

PHI premiums up

HEALTH Minister Mark Butler yesterday announced an average private health insurance premium increase of 4.41%, effective from 01 Apr 2026.

This is higher than last year's increase of 3.73%, and reflects the rising costs of providing medical and hospital services, which rose 5% last financial year, as well as increasing wage bills and securing the viability of private hospitals.

"I expect private health insurers and hospitals to work hard to bring down costs and keep future price increases to a minimum," Butler stated.

Call for real-time shortages guide

AS MEDICINE shortages increasingly force frontline clinical staff into high-stakes treatment decisions that can put patient safety at risk, Advanced Pharmacy Australia (AdPha) has called on the Federal Government to establish a real-time clinical guidance service to assist healthcare professionals in managing medicine supply disruptions.

With more than 400 medicine shortages listed each day on the Therapeutic Goods Administration's Medicine Shortage Reports Database, the issue is increasingly recognised as a major global healthcare challenge.

A proposed National Medicine Shortages and Discontinuations Clinical Advice Service would be the first of its kind in Australia, with similar models already successful established internationally, including in the UK.

The service could help relieve the current situation where clinicians are often left to manage shortages independently, duplicating work across hospitals and reducing time available for patient care.

"Medicine shortages are placing growing strain on Australia's healthcare system and frequently

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disrupting treatment delivery," said AdPha president Associate Professor Tom Simpson.

"We have seen situations where early warning signs were missed or where there was no coordinated national clinical response until shortages were already affecting patient care.

"Currently, hospitals and health services are individually developing alternative treatment protocols, duplicating effort across the country and placing unnecessary burden on an already stretched workforce," he continued.

"A nationally coordinated clinical advice service would allow healthcare professionals to access consistent, evidence-based guidance quickly, improving patient safety and supporting more efficient use of clinical resources."

AdPha's pre-budget submission is available **HERE**.

Global full scope perspectives

INTERNATIONAL pharmacy leader and Canadian pharmacist, Christine Hrudka, will return to APP in 2026 to share her strategic insights on expanding pharmacy scope of practice.

Recognised as one of Canada's most influential voices in pharmacy, Hrudka has had a distinguished career spanning chain and independent pharmacy ownership, high-level governance roles and national advocacy.

A current representative for North America on the World Pharmacy Council, she has played a pivotal role in expanding prescriptive authority for pharmacists in Saskatchewan and continues to advocate for further expansion across the country.

Hrudka will feature in the full scope panel session on Sat 14 Mar, exploring the latest developments in full scope of practice and sharing practical steps to support its successful implementation.

View the program **HERE**.



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New CEO for Sanofi

FRENCH pharma giant Sanofi has announced former Merck KGaA CEO Belen Garijo as its new CEO, taking over from Paul Hudson whose tenure was ended early.

Garijo will take up the role after the group's annual general meeting on 29 Apr, 2026.

The first woman to be appointed CEO at Sanofi, Garijo is also the oldest appointee at 65 years old, requiring a shareholder vote at the AGM to raise the age limit for commencement of the role.

Board member Olivier Charmeil will serve as acting CEO in the meantime.

Industry commentators observed that Hudson had made positive changes in his six years there, but fell short on drug development to replace blockbuster drugs - particularly Dupixent - going off patent.

As one of the world's largest vaccine manufacturers, the group has also faced pressure from US policy changes.

Hudson's departure is one of several recent high profile exits in the pharma industry.

CSL announced the sudden retirement of CEO Paul McKenzie last week (**PD 12 Feb**), while Novo Nordisk's CEO Lars Fruergaard Jorgensen was abruptly removed last year amid increased competition in the weight loss drugs sector.

Action needed on deprescribing barriers

RESEARCH led by Monash University and published in the *British Journal of Clinical Pharmacology* has found that while most community pharmacists routinely dispense high risk psychotropic medicines, fewer than half initiated discussions on deprescribing.

However, they also found that most pharmacists said they were comfortable about intervening when concerned about the drugs, despite the low rate of initiating discussions around tapering.

With pharmacist-led deprescribing interventions playing a key role in mitigating harms from certain high-risk psychotropics, the researchers set out to learn more about the practices and perspectives of community pharmacists around such initiatives, pointing out that they were not well understood.

The team conducted a nationwide survey of 730 community pharmacists, with around 12% of community pharmacies represented.

Participants were asked about their provision of high-risk psychotropic medicines, including opioid analgesics, benzodiazepines, gabapentinoids and medicinal cannabis, as well as their perspectives, confidence and practices related to implementing strategies to support deprescribing of these medicines.

Approximately three-quarters



stated their pharmacy received prescriptions daily for opioids (81%), benzodiazepines (75%) and gabapentinoids (72%), though only 9% received medicinal cannabis prescriptions every day.

However, for each of the medicines, fewer than half said they had initiated a conversation about deprescribing, and a third said they had not talked about deprescribing for any of the four medicines.

Pharmacists working outside of capital cities, pharmacy managers/owners and those with 15 or more years of professional experience were more likely to initiate discussions on deprescribing psychotropic medicines compared with those working in capital cities, employee pharmacists and those with less than 15 years of professional experience.

The team acknowledged the

findings may partly reflect a clinical context in which deprescribing is not always appropriate, such as when opioids are prescribed long-term for cancer pain or palliative care and gabapentinoids for seizure management.

"Nevertheless, the limited engagement observed may also indicate broader barriers constraining pharmacists' capacity to support deprescribing initiatives," they stated, pointing to barriers such as lack of support, resources and education and fear of negative consequences.

"Our findings, therefore, highlight the need for strategies that address practice-related barriers as well as structural and systemic barriers to strengthen pharmacists' role in supporting deprescribing in clinical practice," they concluded.

Read the research **HERE**. KB

Kenvue joins Pharmx marketplace

PHARMX has announced that consumer health company Kenvue has joined the platform, with more than 450 Kenvue SKUs are now available to order on the Pharmx Marketplace.

Kenvue's brands include Nicorette, Zyrtec, Codral, Listerine, Neutrogena, Aveeno and Johnson's.

Serving over 99% of the ANZ pharmacy market, the Pharmx platform has an extensive catalogue of over 40,000 SKUs.

Steve Mallin, Kenvue's pharmacy sales director, ANZ, said this move supports easier access for pharmacies and a more streamlined experience.

"By coming onto the Pharmx Marketplace, pharmacies can access our range through a single integrated ordering and e-invoicing workflow, supported by their existing wholesaler relationships," he said.

"It also means our brands will be easier to find and easier to order, helping us to better support this channel."

Speeding up heart valve response with SLOW

LEADING heart charity Hearts4heart is launching its 'SLOW Symptoms' campaign during Heart Valve Disease Awareness Week (16-22 Feb 2026) in an effort to change Australia's dangerously slow response to heart valve disease.

Affecting an estimated 850,000 Australians, advocates now warn heart valve disease is "the next cardiac epidemic", driven by an ageing population and persistently low awareness.

Inspired by the FAST campaign for stroke, the SLOW Symptoms

campaign includes a simple and memorable tool developed by UK charity Heart Valve Voice:

- Shortness of breath
- Lightheadedness on exertion
- Feeling Older than your years
- Weary or unusually fatigued.

Hearts4heart CEO and Founder Tanya Hall said the SLOW campaign was a critical step in closing Australia's awareness gap.

"The SLOW campaign gives people the language to recognise symptoms, start a conversation with their GP and ask for a stethoscope check," Hall said.



Dispensary Corner

SO HERE'S a great idea from - perhaps surprisingly - New York.

Instead of trying to liven up the nightlife of Australian cities (well, Sydney at least), governments and councils could lean into a new phenomenon called 'daylife'.

As the name suggests, daylife is about ditching the pub or nightclub and socialising at the gym, having a sauna, and going to cafes, parks and libraries for a better quality of life, sense of wellbeing and health.

There are even sober morning dance parties.

While we can't necessarily blame social media for this one, we can blame the tee-totalling gym-junkie health-nuts of Gen Z.

The movement coincides with recent research showing that young Americans are partying 70% less than they did two decades ago and national alcohol consumption has hit a 90-year low.

As one enthusiast said to the *New York Post*, "Personally, I would much rather spend my Friday night going to the gym or heading out for a run and waking up Saturday morning feeling energised and ready to enjoy the day, not hungover or feeling miserable as a result of drinking and staying out late."



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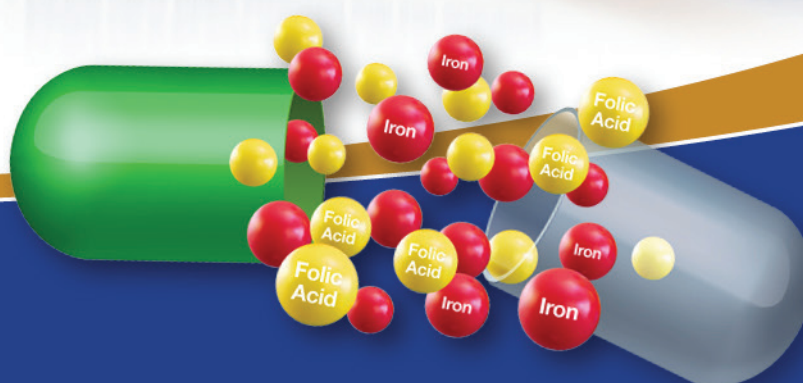
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*Oral Iron Supplement (Aug 2022) In: Therapeutic Guidelines. Melbourne: Therapeutic Guidelines Limited.

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