Pharmacy Daily

Friday 9th Jan 2026



## Today's issue of *PD*

***Pharmacy Daily*** today features two pages of news, plus the **January MIMS Monthly Update**.

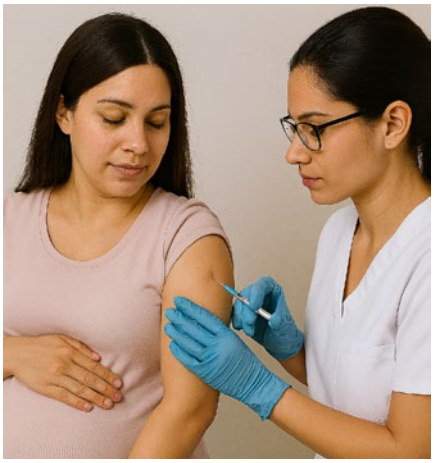
## FIP congress rego opens

**REGISTRATION** and abstract submissions are now open for the 84th International Pharmaceutical Federation (FIP) World Congress of Pharmacy and Pharmaceutical Sciences, taking place in Montreal, Canada from 30 Aug to 02 Sep 2026.

Under the theme, "One Health, One Pharmacy - Bridging science, practice and education," discussions will examine how pharmacists can drive progress towards better health outcomes, equitable access to essential medicines and resilient health systems worldwide.

Register by 03 Jun to secure earlybird rates - more **HERE**.

# Pregnancy vax prevents ED visits



**HAVING** an influenza or whooping cough-diphtheria-tetanus (dTpa) vaccine during pregnancy helps prevent the baby from being hospitalised with the flu or whooping cough in their first six months, according to Italian research published today in *JAMA Network Open*.

The team used health records to identify over 53,000 mothers who received the dTpa combined vaccine during pregnancy, and over 5,000 who received a flu shot during pregnancy.

They then compared the rates of hospitalisation or emergency department visits among babies of vaccinated mums with babies whose mothers didn't receive a vaccine in pregnancy.

The flu shot was linked to a 70% reduced risk of flu-related hospitalisation or ED visit, while the dTpa vaccine was linked to an 89% reduced risk of whooping cough hospitalisation or ED visit in the babies' first six months of life.

In Italy, as in Australia, pregnant women are eligible for free influenza and whooping cough vaccination.

However, the authors reported, uptake of vaccinations was "suboptimal", especially for the flu, and they called for targeted public health strategies to improve vaccine uptake, particularly among vulnerable populations who may be less likely to receive vaccinations.

"Our study revealed a strong association between maternal influenza and [dTpa] vaccinations and reduced influenza- and pertussis-related hospitalisations and ED visits in infants younger than six months of age, alongside evidence of suboptimal vaccine uptake during pregnancy," they concluded.

"These results support the current recommendations for administering these vaccines during pregnancy and highlight the urgent need to implement strategies aimed to increase their acceptance."

Read the paper **HERE**. *KB*

## PBS listing for new MS drug

**NEURAXPHARM** Australia has announced the PBS listing of Briumvi (ublituximab) for the treatment of adult patients with relapsing forms of multiple sclerosis (RMS) with active disease defined by clinical or imaging features.

Briumvi is an anti-CD20 monoclonal antibody that selectively targets CD-20-expressing B-cells, which play a role in the underlying disease process in multiple sclerosis.

The 01 Jan listing occurred just seven months after it was registered on the Australian Register of Therapeutic Goods.

The reimbursement of the new MS therapy was welcomed by Clinical Professor Todd Hardy, senior staff specialist neurologist at Concord Hospital and co-director of the MS Clinic at the Brain and Mind Centre.

"MS is a heterogeneous condition, and treatment needs can differ over time," explained Professor Hardy.

"Having a variety of therapeutic options, including therapies with different administration and dosing schedules, is important as it helps clinicians tailor management to the individual needs of patients.

"The streamlined one-hour, twice-yearly dosing of Briumvi should reduce burden on both patients and infusion services."

## Calls to rationalise Digoxin-Fab stocks

**A RECENT** investigation into supply versus demand for digoxin antidote Digoxin-Fab in NSW hospitals has revealed high levels of wastage thanks to its high cost and short shelf life.

The team from NSW Poisons Information Centre noted that demand for Digoxin-Fab decreased following the updated Therapeutic Guidelines dosing recommendations introduced in Aug 2020, which endorsed a more conservative dosing strategy.

"It is important to investigate whether NSW hospitals have adjusted their Digoxin-Fab stocking practices accordingly," they wrote in *Emergency Medicine Australasia*, observing also that there are no formal stocking guidelines in NSW.

Over the five-year study period, the team identified 144 cases of chronic digoxin poisoning and 16 acute cases.

In comparing hospitals' supply inventory with need for the drug, they found in some cases there were hospitals with up to 36 vials in stock - at a cost of $2,650 each - but no cases needing it.

On the other hand, there were two hospitals that needed it but did not have it on hand.

"Our findings indicate that while Digoxin-Fab is unevenly distributed across NSW hospitals, the overall supply far exceeds actual demand," they wrote.

"These results support the rationalisation of Digoxin-Fab stocking practices based on emergency department role delineation levels.

"Implementing this approach can ensure that patient safety is maintained while promoting cost-effectiveness and reducing waste in the healthcare system."

Study details are **HERE**.

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## Dispensary Corner

**AUSTRALIAN** spiders possess some of the strongest arachnid venom in the world - so it's nice to know they can be used for good.

University of Queensland researchers have started clinical trials to assess the safety, tolerability, and dosage of IB409, a novel drug developed from a molecule in the venom of the funnel-web.

The drug is designed to protect patients' hearts and brains during heart attacks and strokes, and could potentially save millions of lives.

Researchers have previously recorded "exceptionally promising" preclinical results with a protein called Hi1a, which was derived from the venom of a funnel-web spider from K'gari.

If the drug is successful and becomes approved for use, it's likely to be administered by paramedics and medical practitioners to provide early protection to patients suffering heart attacks and strokes.

Venomous creatures, including snakes, spiders and even cone shells, have been the source of numerous medicines in use or in development.

The very first modern drug inspired by venom was captopril, an ACE inhibitor mainly used to treat hypertension and kidney conditions, and was based on a peptide from the jararaca, a Brazilian snake.

# THC key to cannabis efficacy in pain

**CANNABIS-BASED** products with higher tetrahydrocannabinol (THC)-to-cannabidiol (CBD) ratios may provide small short-term improvements in pain and function, especially for those with nerve pain, according to a systematic review of trials involving more than 2,300 adults with chronic pain.

However, the researchers noted these products are also associated with increased risks of common adverse events, while those with a low THC-to-CBD ratio, including CBD-only formulations, did not appear to be helpful.

The team analysed 25 short-term placebo-controlled randomised trials of cannabis products to update previous evidence about the effectiveness and harms of cannabis-based products for treating chronic pain.

Cannabinoids were categorised by the ratio of THC to CBD (high, comparable, low); whether the product was synthetic, purified, or extracted from a plant; and administration method (oral, oromucosal, topical) and assessed how well they reduced pain, improved function and whether there were any adverse events.

The data showed that oral THC-only products probably slightly reduce pain severity, with the cannabinoids nabilone demonstrating a moderate effect and dronabinol showing no or only minimal effect.

Nabiximols slightly reduced pain severity and had no meaningful effect on function.

On the flip side, high THC products were linked to moderate-to-large increases in adverse events including dizziness, sedation and nausea.

Reviewers noted that the inconsistent study results and safety concerns underscore the need for more research on long-term outcomes and other cannabis product types.

Read the paper **HERE**.

# PRODUCT SPOTLIGHT

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

## Mag-Sup powder - a better way to absorb magnesium

Mag-Sup powder is a high absorption magnesium supplement for use in magnesium deficiencies. It contains magnesium aspartate which has increased bioavailability compared to other forms of magnesium. Magnesium aspartate has better oral absorption than magnesium citrate, magnesium glycinate, magnesium chloride and magnesium oxide.


- High dose, once a day
- Rapidly absorbed
- Natural forest berry flavour
- Up to 300mg elemental magnesium per day
- Contains no artificial preservatives, colours or flavours

Available in 200g packs equivalent to 40 doses.

**Supplier**: Available from Symbion, Sigma, API & CH2. Contact your Clear Sales representative on 1800 640 043 for special deals.
**RRP**: $21.57

**Website:** CLICK HERE for more information.

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MIMS Monthly Update

January 2026

## New Products

- **Faecal microbiota (Biomictra)** works via restoration of gut microbial diversity. *Biomictra is indicated for the restoration of the gut microbiota in the management of gastrointestinal disorders, specifically Cl. difficile infection. The product must not be released for use in conditions other than C. difficile infection, unless as part of a registered clinical trial or via the Special Access Scheme or via Authorised Prescriber Scheme.* Biomictra is contraindicated in patients with suspected bowel perforation and anaphylactic food allergy. Biomictra transplant contains faecal microbiota 12.5 g per 50 mL and is available in packs of 1 or 4 prefilled syringes.

- **Odevixibat (sesquihydrate) (Bylvay)** is a reversible and selective inhibitor of the ileal bile acid transporter. Odevixibat acts locally in the distal ileum to decrease the reuptake of bile acids and increase the clearance of bile acids through the colon, reducing the concentration of bile acids in the serum. The extent of reduction of serum bile acids does not correlate with systemic pharmacokinetics. *Bylvay is indicated for the treatment of progressive familial intrahepatic cholestasis in patients aged 6 months or older.* Bylvay capsules contain odevixibat 200 mcg, 400 mcg, 600 mcg or 1200 mcg and are available in packs of 30.

- **Olipudase alfa (Xenpozyme)** is a recombinant human acid sphingomyelinase that reduces sphingomyelin accumulation in organs of patients with acid sphingomyelinase deficiency (ASMD). *Xenpozyme is indicated as an enzyme replacement therapy for the treatment of non-central nervous system manifestations of ASMD in paediatric and adult patients with type A/B (Niemann-Pick type A/B) or type B (Niemann-Pick type B).* Xenpozyme powder for infusion contains olipudase alfa 4 mg or 20 mg and is available in packs of 1 vial.

- **Tucatinib (Tukysa)** is a tyrosine kinase inhibitor of human epidermal growth receptor 2 (HER2). *In vitro*, tucatinib inhibits phosphorylation of HER2 and HER3, resulting in inhibition of downstream MAPK (mitogen-activated protein kinase) and AKT (protein kinase B) signalling and cell proliferation, and shows anti-tumour activity in HER2-expressing tumour cells. *In vivo*, tucatinib inhibited the growth of HER2-expressing tumours. The combination of tucatinib and trastuzumab showed increased anti-tumour activity *in vitro* and *in vivo* compared to either drug alone. *Tukysa is indicated in combination with trastuzumab and capecitabine for the treatment of patients with advanced unresectable or metastatic HER2-positive breast cancer, including patients with brain metastases, who have received one or more prior anti-HER2-based regimens in the metastatic setting. Tukysa, in combination with trastuzumab, has provisional approval for the treatment of adult patients with RAS wild-type HER2-positive unresectable or metastatic colorectal cancer that has progressed following treatment with fluoropyrimidine, oxaliplatin, and irinotecan-based chemotherapy.* Tukysa tablets contain tucatinib 50 mg or 150 mg and are available in packs of 88 (50 mg) or 84 (150 mg).

- **Ublituximab (Briumvi)** is a chimeric monoclonal antibody that selectively targets CD20-expressing cells. CD20 is a cell surface antigen found on pre-B cells, mature and memory B cells but not expressed on lymphoid stem cells and plasma cells. The precise mechanism by which ublituximab exerts its therapeutic effects in multiple sclerosis is unknown, but is presumed to involve binding to CD20 inducing lysis of CD20+ B cells primarily through antibody-dependent cell-mediated cytotoxicity and, to a lesser extent through complement-dependent cytotoxicity. *Briumvi is indicated for the treatment of adult patients with relapsing forms of multiple sclerosis with active disease defined by clinical or imaging features. Briumvi is contraindicated in severe active infection, in patients in a severely immunocompromised state, and in known active malignancies.* Briumvi concentrate for infusion contains ublituximab 150 mg per 6 mL and is available in packs of 1 vial.

## New Indications

- **Tisagenlecleucel (Kymriah)** is now indicated for adult patients with relapsed or refractory follicular lymphoma after two or more lines of therapy.

- **Trastuzumab deruxtecan (Enhertu)** is now also indicated as monotherapy for the treatment of adult patients with unresectable or metastatic HER2-low (IHC 1+ or IHC 2+/ISH-negative) breast cancer who have received prior chemotherapy in the metastatic setting or developed disease recurrence during or within 6 months of completing adjuvant chemotherapy. Patients with hormone receptor positive breast cancer should additionally have received and no longer be considered eligible for endocrine therapy.
It is also indicated as monotherapy for the treatment of adult patients with unresectable or metastatic HR+ and either HER2-low (IHC 1+ or IHC 2+/ISH-negative) or HER2-ultralow (IHC 0 with membrane staining) breast cancer who have received at least one endocrine therapy in the metastatic setting and who are not considered suitable for endocrine therapy as the next line of treatment.

## New Contraindications

- **Live varicella vaccine (Varilrix HSA-Free)** is now contraindicated in patients on recent immunosuppressive therapy (including high doses of corticosteroids but not topical or inhaled corticosteroids).

- **Measles virus, mumps virus and rubella virus vaccine (Priorix Albumin Free) and Measles virus, mumps virus, rubella virus and live varicella vaccine (Priorix-Tetra)** are now contraindicated in patients on current or recent immunosuppressive therapy (including high doses of corticosteroids but not topical or inhaled corticosteroids).

- **Neostigmine methylsulfate (Neostigmine Juno)** is now contraindicated in patients with doubtful bowel viability; in bronchial asthma; and for concomitant use with depolarising muscle relaxants.

*This list is a summary of only some of the changes that have occurred over the last month.*
*Before prescribing, always refer to the full product information.*