

Today's issue of PD

Pharmacy Daily today features three pages of news.

New drug for severe asthma

GSK Australia has announced the registration of Exdensusr (depemokimab) by the TGA, providing Australian healthcare professionals with a new treatment option for eligible patients living with severe eosinophilic asthma (SEA) and chronic rhinosinusitis with nasal polyps (CRSwNP).

The treatment targets IL-5, a key cytokine involved in type 2 inflammation, to help prevent IL-5 mediated eosinophilic inflammation - just two doses per year can deliver a reduction in asthma exacerbations.

According to respiratory physician Professor Jo Douglass, the drug's registration is an important development for Australian healthcare professionals and affected patients.

"Healthcare professionals caring for people with SEA and CRSwNP are always trying to help patients improve their quality of life," she said.

"The registration of Exdensusr provides us with a further opportunity to tailor treatment to individuals while giving patients symptom relief."

Shortage a chance to update

THE current shortage of salbutamol nebulisers provides an ideal opportunity for health professionals to educate patients about the recently updated asthma care guidelines, the National Asthma Council (NAC) has advised.

The NAC Australian Asthma Handbook guidelines were updated last year (*PD* 17 Sep 2025), outlining significant changes in asthma management that included a move away from using short-acting beta2 agonist (SABA)-only treatment.

GSK Australia has stated that the current supply shortage of Ventolin Nebules (salbutamol sulfate) 5mg/2.5mL and 2.5mg/2.5mL inhalation solution ampoules is expected to last until 17 Aug 2026 and 21 Dec 2026 respectively.

"While this may be distressing for patients with asthma who have been using this medication, the shortage also provides an opportunity for health professionals to reinforce the updated NAC Australian Asthma Handbook guidelines," Clinical Associate Professor Debbie Rigby, NAC clinical executive lead, said.

"No adult or adolescent should be using SABA-only treatment, and the emphasis is now on embedding anti-inflammatory reliever (AIR-only) and maintenance-and-reliever therapy (MART) approaches as standard care for adults and adolescents," she explained.

Assoc Prof Rigby said it is important for health professionals

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to also communicate to patients that compared with using pressurised metered-dose inhalers - blue puffers - salbutamol delivered via nebuliser requires a higher dose without any added therapeutic benefit, as well as being less portable and requiring more time to deliver the dose.

"Pressurised metered-dose inhalers with a spacer is at least as effective as a nebuliser for the delivery of salbutamol for adults and children, even during symptomatic exacerbations," she said.

However, Assoc Prof Rigby warned, shifting away from SABA-only treatment towards inhaled corticosteroids therapy requires substantial education and behaviour changes for patients.

"We encourage all health professionals to talk to their patients about the importance of focusing on alleviating chronic inflammation in the airways, not just addressing symptoms," she said.

Assoc Prof Rigby pointed to a suite of resources released recently by the NAC (*PD* 18 Jun) that can help GPs and pharmacists explain the changed recommendations to patients.

More on the shortages [HERE](#). KB

Minns to address Pharmacy Connect

THE Pharmacy Guild of Australia has announced that the NSW Premier Chris Minns will address delegates at the opening plenary of Pharmacy Connect 2026 on Thu 10 Sep.

Mario Barone, president of Guild NSW Branch, said it is an honour to welcome Premier Minns (*pictured*) back to the conference for the third year.

"With the state's continued investment in patient-led care, Premier Minns' presence highlights the growing recognition of the vital role pharmacists play in delivering accessible, frontline healthcare across New South Wales," Barone said.

Under this year's theme 'Connecting with Care', the conference offers a platform for professional development, business innovation and discussions on the future of pharmacy practice in a rapidly changing healthcare landscape.

"This is an opportunity for every corner of the industry to come together and decide the way forward - the conversations that change how we practice start here," Barone said.

Learn more [HERE](#).



Medicinal cannabis education evolves

MEDICINAL cannabis supplier Leafio recently held its largest pharmacy education event to date in Brisbane, bringing together community pharmacists to discuss their evolving role as medicinal cannabis becomes increasingly integrated into mainstream healthcare.

The company noted that while much of the focus over the past few years has been on improving patient access, as patient numbers continue to grow, the discussion has now shifted

towards clinical governance, continuity of care and how pharmacists, doctors and technology can work together for stronger patient outcomes.

"Patients don't experience healthcare as separate organisations - they experience one connected journey," said Montu CEO Myles Lawlor.

"The stronger the connections between clinicians, pharmacists, technology and quality assurance, the better the outcomes we can deliver for patients."

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COVID lockdown effects still linger

SLEEP problems and anxiety driven by COVID lockdowns still affect many people, regardless of whether they had contracted the disease, with new research suggesting that they may also be contributing to fatigue symptoms in those with long COVID.

The team from King's College London and Flinders University used UK biobank data to assess the extent of residual or continuing sleep and related mental health problems, including in people with long COVID, finding that it was the experience of the pandemic itself that was linked to sleep disturbances globally.

Disordered sleep can result in reduced immunity, increased inflammation, and worse mental health, and may not resolve without intervention.

Read the research [HERE](#).

Patients say yes to collaborative prescribing

RECENT research investigating patient perspectives and experiences of collaborative pharmacist prescribing in hospital inpatient settings has found that almost all respondents trusted pharmacists' expertise and ability to prescribe.

Patients also reported greater involvement in medicine decisions compared to those who received doctor prescribing.

Collaborative pharmacist prescribing involves pharmacists, medical doctors and patients working together to develop medicine plans that support shared decision-making and underpin pharmacist prescriptions, according to the team from the Quality Use of Medicines and Pharmacy Research Centre at Adelaide University.

Evidence from hospital inpatient settings has focused predominantly on clinical, safety, and system-level outcomes, the team noted, rather than patient perspectives and experiences, with the current study

providing valuable insights into how patients perceive it.

They surveyed 200 patients across four hospitals, 100 of whom received collaborative pharmacist prescribing and 100 who received medical doctor prescribing.

Patients who received collaborative pharmacist prescribing were significantly more likely to agree that the prescriber worked with them to plan their medicines in line with their goals and wishes, compared to patients who received medical prescribing (82% vs 67%).

As one patient said, "They [the pharmacist] listened to me, they spent time answering my questions, they [were] good at communicating in a way that I understand."

Those who had collaborative prescribing also felt a greater sense of safety and reassurance around medication errors, while having a deeper understanding of their medicines.

"Having a pharmacist involved



confirms that we don't have any medicines that clash with each other and that I am currently taking what I am supposed to be taking," another patient said.

"Collaborative pharmacist prescribing enhances shared decision-making by actively involving patients in discussions about their medicines - it improves patients' understanding of their medicines, which supports safer and more informed treatment decisions," the team concluded.

"These findings support wider adoption of collaborative pharmacist prescribing to improve patient-centred care in hospitals."

Read the study [HERE](#). KB

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Dive into our latest podcast episode featuring **Nancy El-Miski**, for Part 2 of a conversation she asked to have - this is one of the most personal episodes we've shared - "Grief, Empathy & Patient-Centred Care".

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Dispensary Corner

WHILE the link between drinking coffee and living a longer, healthier life has been well established, the reason why has never been quite clear.

Now scientists have found a cellular mechanism that may help explain coffee's protective effects - and also accounts for why even decaffeinated coffee offers similar benefits to the real stuff.

A team from the Texas A&M College of Vet Medicine and Biomedical Sciences has found that certain compounds in coffee may activate NR4A1, a receptor that is becoming increasingly important in studies of ageing, stress responses and disease.

NR4A1 is part of a group of nuclear receptors that help control gene activity when the body is exposed to stress or tissue damage, acting to reduce the damage.

Caffeic acid, a polyphenol found not only in coffee but also to a lesser extent in other plant foods such as fruit and vegetables, is thought to be the most active compound that binds to NR4A1.

Caffeine also has some effect, but is not as prominent.

The researchers cautioned that coffee is chemically complex and probably affects the body through multiple biological routes - though this is potentially one of the more important pathways.

They also suggested that because NR4A1 plays a role in several medical conditions, the findings may also contribute to future drug development.

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