

# Something BIG has just landed in Pharmacy

From the company that has paid over **\$75M** in claims to Community Pharmacy, PharmaPrograms is excited to announce the next evolution in **pharmacy software**

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## Today's issue of PD

Pharmacy Daily today features two pages of news, plus a front cover from PharmaPrograms Pro, and full pages from:

- MediChoice
- Glucojel

## Make the swap

PHARMAPROGRAMS Pro has just landed in pharmacy - see the cover page to learn more about upgrading your pharmacy and patient engagement platform.

## Glucojel glucofest

GLUCOJEL is giving customers the chance to win their favourite Glucojel products. Order your free POS today - for more details see page four.

## Spotting JIA early critical to outcomes

HEALTHCARE professionals are being urged to recognise the early signs of juvenile idiopathic arthritis (JIA) sooner, and refer without delay, to help prevent long-term, irreversible damage.

With frontline healthcare professionals often the first to assess a child with persistent joint pain, stiffness or unexplained fatigue, Juvenile Arthritis Foundation Australia (JAFA) is directing primary care and allied health professionals to its Early Diagnosis HCP Hub.

The evidence-based clinical

## Continuity key to rural pharmacy

THE Remote and Isolated Pharmacist Association Australia (RIPAA) has warned that the clinical models being promoted by national pharmacy bodies are structurally unsuited for Australia's most remote communities, proposing instead a model with embedded pharmacists at its core.

The group cautiously welcomed the development of pharmacist prescribing models - such as the women's health pilot announced a few days ago (PD 16 Mar) - which improve access for patients, particularly in underserved areas.

However, RIPAA has raised concerns about the extent to which pharmacist full scope of practice, and other expanded models of pharmacy care, such as Home Medicines Reviews and the Aged Care Onsite Pharmacist program, can be viably and feasibly delivered in remote and isolated communities.



It argued that the funding structures behind these initiatives are built for the high-volume environment of the city, and are economically unviable in Modified Monash (MM) 5-7 zones.

"We are seeing sophisticated clinical models promoted nationally, but they are structurally unsuited for Australia's small and remote towns," said RIPAA president Fredrik Hellqvist.

"These programs rely on a certain level of volume and access to workforce to make them viable to deliver - in remote and isolated areas that volume and workforce does not exist."

RIPAA has put forward a vision for remote sustainability, which involves moving away from "fragile transactional funding" to ensure a stable economic base for practitioners in thin markets and securing the clinical residency required to make expanded clinical care programs viable long term.

"It's time to stop pretending that what works in a major city suburb will work in a small remote town," Hellqvist said.

"We need clinical continuity, not clinical pharmacy deserts.

"Our proposal offers a different path forward - one that ensures rural pharmacists aren't just 'visiting' but are embedded in their communities," he concluded. KB

## The right choice

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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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## Dispensary Corner

**AMONG** the plethora of stories about wearables saving people's lives by detecting unusual physiological patterns, the wearable story that caught *Dispensary Corner's* attention today was about smart pants that detect farts.

Researchers at the University of Maryland have developed Smart Underwear, the first wearable device designed specifically to measure human flatulence.

A small sensor tracks hydrogen in the gas, allowing scientists to measure how often people fart, while potentially offering a new way to track gut microbial metabolism during everyday life.

Early testing indicates that on average, people pass gas around 32 times a day, which is higher than previous estimates - typically based on self-reporting - of an average 14 times.

There was quite a range, however, from just 4 gaseous events per day to 59.

"Objective measurement gives us an opportunity to increase scientific rigour in an area that's been difficult to study," observed inventor and project lead Brantley Hall, an assistant professor at UMD.

This, and other useful data, such as the composition of the gas, will be used to create the so-called "Human Flatus Atlas" to map patterns of 'normal' gas production.

The team is currently offering to ship the devices to volunteers - sadly, you have to live in the US - allowing them to contribute to the project from home.

## Tackling the stigma of dandruff

**RESEARCH** commissioned by Key Pharmaceuticals has revealed the high social and emotional cost of dandruff, a common condition affecting around half the Australian population.

The survey of over 1,000 people who had experienced dandruff within the previous six months found that it not only undermines self confidence, the itching can also make it difficult to sleep, while embarrassment can lead to social withdrawal and poor mental health.

At the heart of its emotional toll was the stigma and shame associated with dandruff, due to the perception it was a hygiene problem rather than a skin condition.

Despite the significant impact on some people's lives, there was a reluctance to raise the issue with a doctor or pharmacist because it was not perceived as a "serious" condition - just over half (53%) had spoken to a health professional about it.

Community pharmacist Trent Playford told *Pharmacy Daily* that the stigma and shame identified in the research surprised him, and he has changed his approach to customers with the condition.

"As a pharmacist we know biologically what causes dandruff, but to see that mental anguish that people are going through has really changed the way that I look at - and the way that I treat - these patients now," Playford said.

"Previously, it was almost very transactional - I would see people standing in the hair care aisle, and they'd be picking something that was familiar to them, something they recognised from adverts, and not necessarily what was going to be the best for their scalp health.

"Now I try and get out and actually talk to these patients to



see if we can assist them in finding the most appropriate product."

Playford believes educating the patient is important, explaining that it is a fungal overgrowth that has nothing to do with hygiene, that it is a chronic condition, and without ongoing management and treatment it will return.

He pointed out that there are a variety of different pharmacy-grade products that can effectively treat dandruff, and while pharmacist-only products have an antifungal component to them, supermarket products help remove flakes but do not treat the underlying cause.

Among the people surveyed, however, only around one in four used pharmacy treatments.

Playford's final message to other pharmacists was to break the stigma by starting a conversation and normalising the condition. *KB*

## Arrotex and George partner on BP drug

**AUSTRALIAN** companies Arrotex Pharmaceuticals and George Medicines have partnered to support the commercialisation of an innovative therapy designed for the management of hypertension in adults.

The new therapy is the culmination of more than 20 years of medical research focused on improving prevention, control and management of hypertension, and aims to address low adherence to regimens involving multiple medicines.

Under the agreement, Arrotex will oversee regulatory engagement, market access strategy, commercialisation planning and national distribution, while George Medicines will support product advancement through access to its proprietary technology and clinical expertise.

The partnership enables early commercial planning for the treatment and its potential availability for clinicians and patients in Australia and New Zealand as early as next year.



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