Pharmacy Daily
Monday 9th Nov 2026



Today's issue of *PD*

Pharmacy Daily today features three pages of news.

Two days to go

THE virtual National Medicines Symposium is being held Wed 11 Nov, with key themes including person-centred medicines use beyond 'the right drug', and equity and access for all Australians.

Learn more **HERE**.

Win your way to APP2027

THE Guild is giving two pharmacy professionals and students the chance to attend Australia's leading pharmacy conference for free, including flights and accommodation, with entries now open for the 'Win your way to APP2027' competition - more **HERE**.

Alarm over whooping cough holiday hotspots

NEW vaccination data has revealed alarmingly low childhood protection against whooping cough, where for the first time in over 25 years, the proportion of Australian one-year-olds who are up-to-date with whooping cough vaccination has dropped below 90%.

The data also found widespread anti-vaccine sentiment in a stretch of east coast holiday destinations, giving rise to concerns about a 'whooping cough corridor' ahead of the summer vacation period.

The 2026 Whooping Cough Report Card by the Immunisation Foundation of Australia identified eight local areas stretching from the northern rivers of New South Wales to the top of the Sunshine Coast (excepting Brisbane and its surrounds) where vaccination coverage for one-year-olds is up to 35% lower than Australia's best-performing areas.

Sydney's Dural-Wisemans Ferry and Western Australia's Gascoyne region round out the bottom 10 for whooping cough vaccination coverage among one-year-olds.

"We must stop the spread in its tracks and turn it around before vaccination gaps allow whooping cough to run rampant in more communities - many of which are more heavily populated during the summer period," Immunisation Foundation of Australia founder Catherine Hughes said.

At the other end of the scale, the nation's top 10 areas for infant vaccination coverage include three in the ACT, three in Hobart, two in Sydney's north, one in Brisbane's inner-west and one in the Top End surrounding Darwin.

"In many parts of the country, youngsters are well protected against whooping cough - this not only helps to keep them safe, but also protects others around them," Hughes said.

Professor Tom Snelling, infectious disease physician at the University of Sydney, described geographically concentrated gaps



in vaccination coverage as "a particular vulnerability", saying even relatively small declines in vaccination coverage can increase the risk of outbreaks.

The report also highlighted that teenage vaccination rates showed similar geographic differences.

"Teenagers are an important part of the whooping cough picture," Professor Snelling said.

"School-aged children experience high rates of the disease and can pass the infection to babies who are at greatest risk of serious illness."

The Immunisation Foundation has urged all Australians to remain up to date with whooping cough boosters. *KB*

GO FURTHER. GO PROTECTED.[1]

Don't risk your travel plans.
Vaccines and preventative medicines may be recommended for where you're going.[2]
Talk to your healthcare provider.

If you are exploring the vast lands of Australia or venturing across the seas, you might also come across some diseases that can put a stop to your travel plans. So, to help prevent travel diseases while you are away, speak with your healthcare provider to see if there are any vaccines that you might need before you go.[1,3]



1. Australian Centre for Disease Control. Australian immunisation handbook. Vaccination for international travellers. Available at https://immunisationhandbook.health.gov.au/contents/vaccination-for-special-risk-groups/vaccination-for-international-travellers. Accessed July 2026. **2.** CDC. Travelers' health. Before you travel. Available at https://wwwnc.cdc.gov/travel/page/before-travel. Accessed October 2026. **3.** Australian Centre for Disease Control. Australian immunisation handbook. Available at https://immunisationhandbook.health.gov.au. Accessed July 2026. sanofi-aventis australia pty ltd trading as Sanofi. All rights reserved. ABN 31 008 558 807. Sydney, Australia. www.sanofi.com.au. MAT-AU-2601898. Date of preparation: October 2026.

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Pharmacy Daily

Oral Wegovy approval welcomed by peak body

DIABETES Australia has welcomed the recent Therapeutic Goods Administration (TGA) approval of the oral form of semaglutide (***PD*** 04 Nov) as a step forward in the treatment of obesity and related chronic conditions.

Diabetes Australia Group CEO Justine Cain said the approval of oral Wegovy would help many in the community who were hesitant about injections and could improve accessibility to a medicine class emerging as an important tool in managing a range of chronic health conditions.

"GLP-1 medicines have already transformed treatment options for many people living with type 2 diabetes, and it's encouraging to see new formulations becoming available," Cain said.

"The development of an oral option for obesity may help remove some of the practical barriers associated with injectable treatments and gives people living with chronic conditions and their healthcare professionals another treatment option to consider."

However, Cain raised concerns about the prescribing restrictions imposed by the TGA that limit access to those with established weight-related conditions or established cardiovascular disease, pointing to the importance of equitable access and the quality use of emerging medicines.

"Innovation is important, but so is equitable access," Cain said.

"A treatment can only improve health outcomes if the people who stand to benefit can actually access it.

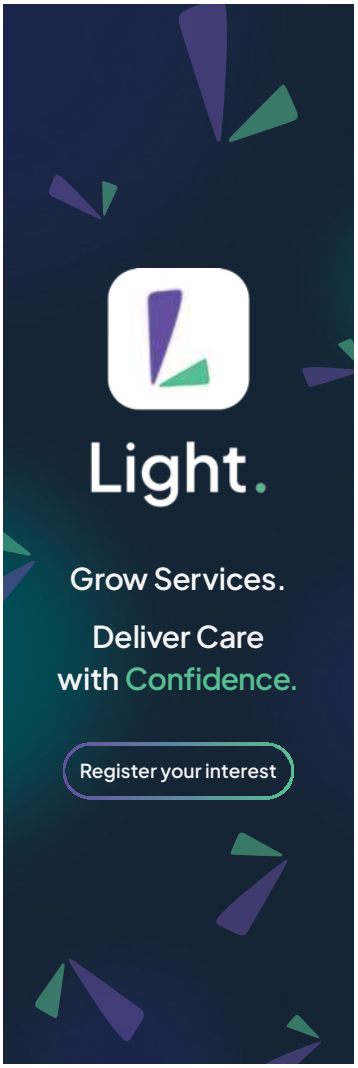


"As new treatments emerge, we need to ensure decisions about access are guided by clinical evidence, rather than a person's capacity to pay.

"We also need to consider comprehensive models of care, including wrap-around support for things like nutrition, physical activity, psychological support, and long-term follow-up, and how we support quality use of medicines," she added. *KB*

Poisons education

NSW Poisons Information Centre (PIC) is holding a toxicology education day on 14 Nov aimed at community pharmacists to support the vital role they play in poisoning prevention - learn more **HERE**.



First Nations mental health pharmacist support: your input needed

CONCERN over insufficient education for pharmacists around supporting and communicating with Aboriginal and Torres Strait Islander people, especially in relation to supporting their mental health and wellbeing, has led to the development of a new training package, with the project team now calling for pharmacist input.

Co-led by Indigenous Health Professor Faye McMillan from the University of Technology Sydney and Dr Sarira El-Den from The University of Sydney Pharmacy School, the project team has set to determine whether targeted pharmacist training improves their ability to provide culturally responsive mental health support.

Called Mental Health Safe Spaces in Pharmacy for Aboriginal and Torres Strait Islander Consumers through Education (MH-SPACE), the MRFF-funded project involves the evaluation of a training package consisting of four modules from PSA's Deadly pharmacists' foundation training course, Aboriginal and Torres Strait Islander Mental Health First Aid, and other co-designed training components.

The project team anticipated that findings may help shape future pharmacist training programs and policies, ensuring that pharmacists across the country are equipped with communication and support skills to bolster the mental health and wellbeing of Indigenous communities.

See the below recruitment call to get involved:

"Are you a pharmacist interested in supporting the mental health and wellbeing of First Nations people?

"We are recruiting pharmacies in Western New South Wales, the Northern Territory, the Pilbara, and the Kimberley to complete MH-SPACE training and take part in a mystery shopping evaluation.

"Participants can earn CPD credits and will receive gift cards for their participation."

Click **HERE** to participate, or click **HERE** to learn more.



Voices of change
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Dispensary Corner

WHILE it's well known that being in nature is great for you, the good news for those living in the city with limited access to untouched green spaces is that urban parklands also boost our health and wellbeing.

For example, recent research from China showed that a 30-minute walk through a forested city park helped with attention, mood and levels of the stress hormone cortisol, compared to walking on a treadmill indoors.

Meanwhile, a review of over 140 studies found benefits from spending time in green space for a number of aspects of health, in particular for heart and vascular health.

Spending time in parklands and near the water has also been associated with reduced use of certain psychotropic medicines, including anxiolytics, antidepressants and sleeping pills, as well as anti-hypertensives and - reassuringly - asthma medication.

A study looking at the benefits of neighbourhood greenery in Canada found it was linked to a slightly lower risk of developing dementia or suffering a stroke, while a similar study in China found that the more greenery you have around your house, the lower your risk of developing diabetes.



Call for national scope consistency

THE Pharmacy Guild of Australia has acknowledged two years of progress since *Scope of Practice Review, Unleashing the Potential of our Health Workforce* was published, pointing to the steady state-by-state progress in improving access for patients while calling on the federal government to introduce a nationally consistent endorsement framework.

"It's hard for patients to know what's available in which state," Guild national president Trent Twomey said.

"The government needs to introduce a nationally consistent set of rules to end the postcode lottery and make sure patients can access safe and timely care wherever they live."

A nationally consistent endorsement framework would set a single national standard for pharmacists who prescribe, replacing today's patchwork of state and territory arrangements.

Despite the progress that has been made, Coalition health spokesperson Senator Anne Ruston took aim at the Federal Government for not doing enough in the two years since the report's release, saying pharmacists had every right to be demanding answers.



"In the current workforce crisis, which really hasn't changed, we can't afford not to have all of our health professionals working at the top of their scope," Senator Ruston told delegates at Medicines Management 2026 last month.

"What's the plan that is going to be properly in place to enable us to get from what the review recommends to actually having it in practice on the ground?" she asked.

Digital mental health tools under scrutiny

THE Therapeutic Goods Administration (TGA) has completed a review of its approach to regulating digital mental health tools (DMHTs) - software such as apps and websites that offer assessment, therapy or self-management strategies to support mental health care - and has released a consultation paper for stakeholder feedback.

While generally regulated as medical devices when used for diagnosis, prevention, monitoring, prediction, prognosis or treatment of a person, some DMHTs are excluded from TGA regulation if they are based on established clinical practice guidelines that are displayed in a way that can be reviewed by the user.

However, a 2024 review found that the DMHT exclusion may no longer be appropriate, given the increasing complexity and risk profiles of these products.

The TGA has put forward three options for regulatory change: retain the status quo (no change), remove the exclusion so sponsors and manufacturers would need to meet regulatory requirements, or modify the exclusion criteria such that only higher risk products warrant oversight.

The consultation closes 07 Dec - learn more **HERE**.

Weekly Comment



Welcome to Pharmacy Daily's weekly comment feature. This week's contributor is **Sally Tadros, cofounder and pharmacist at Vitaceuticals.**

Judge ashwagandha by quality, not quantity

CUSTOMERS often ask whether the ashwagandha on our shelf is the same as a cheaper one they have seen online, to which the answer is: it depends which part of the plant it contains.

Ashwagandha (*Withania somnifera)* is sold as root powder, standardised root extract, or root and leaf extract, and these are not interchangeable.

The leaves carry a different withanolide profile, so a root and leaf extract is chemically different from a root-only extract, even when the milligrams match.

That matters because the root is the part with the long history of Ayurvedic use, and the key human trials on stress, cortisol and sleep used standardised root-only extracts such as KSM-66®.

Botanical evidence belongs to the extract that was studied, so a cheaper ingredient cannot borrow research done on a different one.

That means looking past the milligrams and withanolide percentage, and checking the plant part, the standardisation and whether the evidence matches what is in the bottle.

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