



Canadian
Pharmacists
Association

Association des
pharmaciens
du Canada

The Weekly

Bringing the world of pharmacy together

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CPhA

Canadians want more funding and access to pharmacist care: CPhA

With Canada's health-care system facing significant strain, Canadians recognize the need to expand and fund additional health services in our communities and better utilize and support our health providers. According to a [new national survey](#) conducted by Abacus Data, 94% of Canadians agree that governments need to expand and fund community-based care, like health services available through pharmacies. "Canada's health system is currently struggling with a shortage of health workers, emergency department closures and growing wait times," Dr. Danielle Paes, CPhA's CPO said [in a news release](#) ahead of World Pharmacists Day on September 25. "Now is the time to appropriately invest in our health workforce and ensure we are enabling and supporting new ways of delivering primary care in our communities—pharmacy professionals have a vital role to play in this." The vast majority of Canadians (90%) think pharmacists can help address gaps in care caused by the current shortage of health-care providers. Specifically, when it comes to the health services that pharmacists could provide, Canadians see a larger role when it comes to vaccinations (61%), prescribing for common ailments/conditions (53%) and testing and lab services (47%). Half of the women surveyed (48%) see a larger role in contraception prescribing.

National Day for Truth and Reconciliation: Resources and learning opportunities

Join us on September 30 in acknowledging the National Day for Truth and Reconciliation (NDTR) and the ways in which intergenerational trauma, health-care disparities and racism continue to undermine the health of Indigenous patients. Despite this, pharmacists can play a key role in implementing culturally safe, patient-centred care for their Indigenous patients. CPhA's [Resource Round-up on Indigenous health](#) has been updated ahead of NDTR to highlight 2 upcoming learning opportunities for pharmacy professionals. The first is an educational session [on September 29](#) organized by the Centre for Practice Excellence at the University of Toronto's Leslie Dan Faculty of Pharmacy. Dr. Jaris Swidrovich will be discussing decolonizing and Indigenizing evidence-based medicine. The second event is a webinar and workshop [on September 30](#) entitled "Indigenous trauma - and equity -informed practice" from the Continuing Professional Development for Pharmacy Professionals in collaboration with the Saskatchewan College of Pharmacy Professionals, Alberta College of Pharmacy and College of Pharmacists of Manitoba. In addition, the Ontario College of Pharmacists has published a [Q&A](#) with Amy Lamb and Swidrovich, the co-chairs of the Indigenous Pharmacy Professionals of Canada, on the opportunities for pharmacy professionals to support Indigenous patients and communities on the path to reconciliation.

New resource for parents and caregivers navigating shortage of children's fever and pain medication

In light of the current supply challenges affecting infant and children's fever and pain medication, CPhA has collaborated on a new patient resource to offer guidance to parents and caregivers, including when to speak with a health-care professional for advice. The resource was developed in collaboration with the Children's Hospital of Eastern Ontario, Canadian Paediatric Society, BC Children's Hospital, IWK Health, and Moms & Kids Health Saskatchewan. The resource is available in [English](#) and [French](#).

Webinar recording available: Protecting your at-risk patients from respiratory infections is as easy as 1-2-3

Every year, community-acquired pneumonia is associated with significant morbidity and mortality. Many patients are concerned about their risk of

pneumonia but are unaware of the different vaccine options that have been shown to lower their risk. If you missed the live webinar, [watch the recording now](#) to learn about the impact of pneumococcal disease and the new vaccine options for at-risk patients.

Save 15% on CPS print editions

Both of your trusted references for drug and therapeutic information are on sale! We're selling the print editions of *CPS: Therapeutic Choices* and *CPS: Drug Information* at 15% off their regular price until October 21. [Order now](#).

Provincial

NB becomes latest province to allow pharmacists to prescribe Paxlovid

New Brunswick pharmacists can now both prescribe and dispense Paxlovid as part of a number of shifts the province is making to expand eligibility and access to the oral antiviral COVID-19 treatment, [CBC reports](#). New Brunswick joins other provinces that also allow pharmacists to prescribe the drug, including Alberta, Saskatchewan, Quebec, and Newfoundland and Labrador. "The change is intended to make it easier for eligible patients to access this option," the Department of Health said in a news release on September 22. The change follows a collaboration with the New Brunswick College of Pharmacists and the New Brunswick Pharmacists' Association to establish an assessment and prescribing option for the treatment, the department added. According to a [recent national survey](#) commissioned by CPhA, 91% of Canadians think pharmacists should be able to prescribe Paxlovid to streamline access to the antiviral drug.

Rising number of pharmacy robberies has AB pharmacists concerned for safety

Calgary pharmacists say they are concerned for their safety as the number of pharmacy robberies in the city has risen in 2022, [Global News reports](#). So far this year, the Calgary Police Service has reported that more than 5 dozen pharmacies have been hit. The rise has pharmacist Ibrahim Elkady feeling uneasy behind the counter. "[I am] feeling unsafe. It was not like that just a

couple of years ago. Something is changing,” he said. Elkady is a pharmacist at the Health Select Remedy’s Rx on 44 Ave. N.E., which has been robbed 4 times in the past 5 years, and most recently on September 17. According to Calgary police, there have been 64 pharmacy robberies in the city since January. To put that into perspective, the Edmonton Police Service has reported 74 robberies over the past 4 years with just 9 in 2022. Barry Strader, the communications director at the Alberta College of Pharmacy, said the rise in robberies has been a major concern for the past few years. As deterrents, the college has recommended pharmacies install cameras and alarm systems and keep a limited number of narcotics in store. Strader said the college has also mandated timed safes for narcotics with a 5-minute timer minimum in pharmacies. This has been mandatory for all pharmacies since July 1 and since the start of the year; newly opened pharmacies have been required to comply with the mandate prior to opening.

National

Liberal government launches review of Cannabis Act—a year late

The federal government has launched a review of the *Cannabis Act* to determine whether the legislation governing the legalization of marijuana is meeting Canadians’ needs and expectations, [CBC reports](#). The Liberals lifted a century-long prohibition on the use and sale of recreational cannabis in October 2018, with a commitment to review the law 3 years after it came into force. That review is nearly a year overdue. According to the *Cannabis Act*, the review must focus on the law’s impact on Indigenous people, on cultivating cannabis in a housing complex, and on the health and consumption patterns of young people. “Young people are at increased risk of experiencing harms from cannabis such as mental health problems, including dependence and disorders related to anxiety and depression,” said Minister of Mental Health and Addictions Carolyn Bennett. “While a lot of progress has been made on the implementation of the *Cannabis Act* and its dual objectives of protecting public health and maintaining public safety, we need to assess the work that has been done and learn how and where to adjust to meet these goals.” The review mandate has been expanded to include an examination of the social and environmental effects of the *Cannabis Act*, the impact of legalization and regulation of medical cannabis, and the impact on racialized communities and women.

Total drug costs, claimants up in 2021: report

Total drug costs grew to \$2 billion in 2021, rising steadily from \$1.4 billion in 2017, according to Green Shield Canada's annual drug trends report. The report, which is based on claims reported by Green Shield Canada, found the number of claimants also increased from 1.9 million to 2.1 million over the same period, [Benefits Canada reports](#). While the average claims per claimant was 14 in 2021, down slightly from 15 in 2020, the total drug cost per claim increased to \$68, up from \$64 in the previous year. While specialty drugs made up fewer than 1% of claims in 2021—up 4% from 2020—the average cost per claim for specialty drugs was nearly 64 times higher than for their non-specialty counterparts.

International

FIP urges governments to allow and fund point-of-care testing in pharmacy

The International Pharmaceutical Federation (FIP) is [calling on](#) governments to fund pharmacy-based point-of-care testing in publicly funded health-care systems. Point-of-care tests that can be performed in pharmacies include tests for diseases like COVID-19 and HIV, and tests that help manage diseases or monitor medication outcomes, such as tests for cholesterol and blood glucose levels. The new policy statement updates FIP's 2004 position on point-of-care testing, describing benefits like earlier detection of disease, reduction of unnecessary visits to general practitioners, and more responsible use of antibiotics. "The World Health Organization has said that when point-of-care tests are adequately performed, they improve quality of care. With this policy statement, FIP is leading on point-of-care testing in pharmacy settings as a way to strengthen health systems around the world," Julien Fonsart, co-chair of FIP's policy committee on point-of-care testing, said in a news release. "It is crucial for pharmacy professionals to be included in national and local strategies and I encourage all stakeholders to read the statement."

UK: Pharmacists to get new powers under plan to free up doctors

Pharmacists in England will be allowed to manage and supply more medicines including contraception without a doctor's prescription under new government plans to overhaul the creaking National Health Service (NHS), [Bloomberg reports](#). The aim is to ease pressure on general practitioners so that patients with the most urgent needs can be seen on the same day and everyone can get an appointment within 2 weeks, according to a statement from the Department of Health and Social Care. By giving pharmacists more power to dispense medicines, 2 million general practitioner appointments a year could be freed up, according to the department. Pharmacists will also take referrals from emergency care for minor illnesses or symptoms such as a cough, headache or sore throat. "To ensure patients get the most out of the NHS it's important they receive care in the right place. A 'Pharmacy First' approach in England, where people can go directly to a community pharmacy to treat a minor health problem, would improve access by patients to the care they need and better manage demand right across primary care services," Thorrun Govind, the chair of the Royal Pharmaceutical Society in England, said [in a news release](#). "Pharmacists will be central to reducing health inequalities, managing the growing cost of long-term conditions and delivering best value from medicines for patients and the taxpayer."

UK: PSNC unveils plans for new national pharmacy contraception service

A new national contraception service and "modest expansions" to existing services will be launched within the final 2 years of the 5-year community pharmacy contract, the Pharmaceutical Services Negotiating Committee (PSNC) has announced. A selected number of pharmacies started piloting an NHS Community Pharmacy Contraception Management service last September, which was extended in October, to be trialled for at least 2 years. Following the pilot, the new pharmacy contraception service will be rolled out gradually from January 2023, with pharmacists initially using a patient group direction to provide ongoing management of routine oral contraception that was initiated in general practice or a sexual health clinic. "The service, when pharmacies have capacity to offer it, will be a positive step forward, allowing pharmacies to give people the advice and contraception they need in a more convenient setting, while also freeing up further GP capacity," Clare Kerr, a member of PSNC's negotiating team and vice-chair of PSNC's service development committee, [told Chemist+Druggist](#).

Ireland: Pharmacists cutting hours and closing due to staff shortages

Pharmacies are cutting back their hours including closing on weekends, with some facing closure due to staff shortages, the president of the Irish Pharmacy Union Dermot Twomey has warned. The shortage is so acute that locum pharmacists offering cover for sick leave can charge up to the equivalent of \$132 an hour, leaving small businesses deciding whether to pay or temporarily close their doors, [the Irish Examiner reports](#). Twomey warned that some pharmacists are already making these tough decisions. “Some are closing on Saturdays, some who were doing late nights are cutting back,” he said. “Some are deciding they are not providing certain services like vaccination because they haven’t the manpower to do it.”

In Depth

Hundreds of thousands of COVID-19 antivirals are sitting on shelves across Canada

Health Canada has distributed enough of the antiviral Paxlovid to treat more than 700 000 people with COVID-19, yet the provinces have given only a fraction of that medication to patients. Paxlovid has been shown to significantly reduce hospitalizations and deaths among people most at risk from COVID-19, such as seniors and people with compromised immune systems. It’s a combination of pills that can be obtained for free with a prescription and taken at home, but must be started within 5 days of symptoms appearing. The low usage rate means hundreds of thousands of treatment courses are sitting unused across Canada, prompting questions about why more people aren’t getting an antiviral that could help keep them out of hospital, especially with health systems across the country under strain. CBC [looks at the issue](#).

Republican abortion bans restrict women’s access to other essential medicine

Since the US Supreme Court’s elimination of federal abortion rights, many states have been enacting laws that highly restrict access to abortion, affecting not only pregnant patients but also other patients and health-care providers. As a result, many pharmacies and physicians have been forced to deny and delay patients’ access to essential medications that can also be used to help induce an abortion. This includes access to methotrexate, a standard treatment for

rheumatoid arthritis and other autoimmune diseases, and misoprostol, which prevents stomach ulcers in those who take aspirin, ibuprofen or naproxen. The *Guardian* [looks at what this means](#) for patients who rely on these medications.

Worth Repeating

“Every Canadian who gets vaccinated or boosted this fall reduces the number of people likely to end up in our crowded hospitals. It’s not complicated.” —An [editorial from the *Globe and Mail*](#) urging Canadians to get their COVID-19 booster shots to limit further strains on our overstretched health-care system

This weekly update is compiled by the Canadian Pharmacists Association. Please note that this publication is meant to inform and is not a comprehensive list of information available. Be sure to check with your provincial regulatory authority or advocacy association for province-specific information. While we aim to ensure all information contained in this update is accurate, the situation is evolving rapidly and CPhA does not take responsibility for the content provided by other organizations and sources.

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