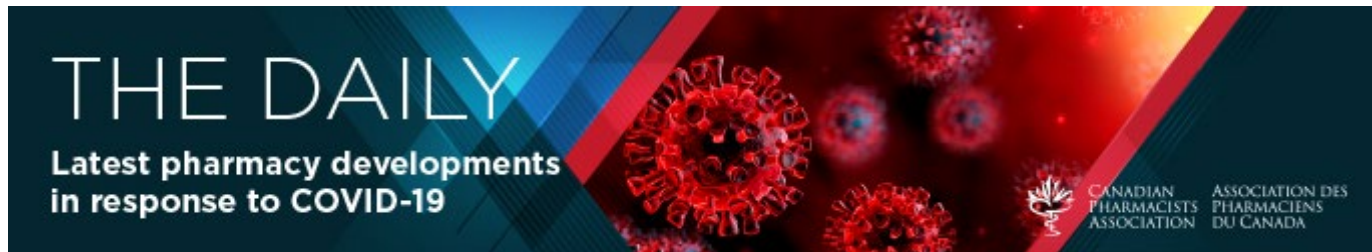


**From:** Public & Professional Affairs Department  
**Sent:** May 11, 2020 5:07 PM  
**Subject:** The Daily: CPhA's COVID-19 Update for May 11



**May 11, 2020**

## **CPhA**

### ***Preparing Canada for the flu season***

On Friday, CPhA chair Christine Hrudka [announced](#) that as part of its next phase of work on COVID-19 CPhA will begin to develop a plan to prepare the profession for the 2020/21 flu season ensuring pharmacists have the support, resources and protection they will require this fall. CPhA will be working toward the development an Influenza Preparedness Plan to ensure pharmacy in Canada is ready for the next influenza season that will include issues such as the need for adequate stock of flu vaccines supply to address the potential surge in patient demand and infection control measures and access to protective equipment, as well as provide educational tools and best practice guidance for pharmacists.

CPhA's COVID-19 web pages are being updated regularly at [www.pharmacists.ca/covid19](http://www.pharmacists.ca/covid19) and [www.pharmacists.ca/covid19fr](http://www.pharmacists.ca/covid19fr).

## **National**

### ***Millions of masks fail to meet Health Canada standards***

The federal government has suspended shipments of N95 respirators from a Montreal-based supplier after about 8 million of the masks made in China failed to meet specifications, the [Canadian Press reports](#). The office of procurement minister Anita Anand said that of the nearly 11 million masks received from the distributor, about 1 million met federal standards and another 1.6 million masks are still being tested. N95 masks used to protect against COVID-19 are so-named because they are supposed to screen out 95 per cent of small particles.

## **International**

### ***NSW to allow flu shots outside pharmacy***

The government of New South Wales (NSW) [announced](#) that pharmacists will now be permitted to administer vaccinations outside of a community pharmacy. This means that the most vulnerable people in Australia's most populous state will now be better protected, says the Pharmaceutical Society of Australia (PSA). The PSA welcomed the move that gives pharmacists the ability to provide vaccinations in places such as residential aged care settings, Aboriginal Medical Services, private and public hospitals and community health centres as well as community pharmacies. "At a time when our health care system is under extreme pressure due to COVID-19, increasing options for more people in NSW to access vaccinations is vital," says PSA NSW branch president Peter Carroll.

### ***University of Cincinnati team projects impacts of physical distancing on health care resources***

Projections from the University of Cincinnati's (UC) College of Pharmacy and its departments of math and geography show that significant relaxation of physical distancing measures would create a substantial strain on health care resources in Ohio. The recently developed public health policy brief and [mapping tool](#) from the Geospatial Health Advising Group at UC comes as state

governors begin to ease social distancing restrictions and reopen their states in phases. Neil MacKinnon, dean and professor at the James L. Winkle College of Pharmacy at UC, says that the idea is to provide policymakers with new information using scientific research, mapping and mathematical modelling. MacKinnon used similar modelling to publish data evaluating whether an Ohio law allowing pharmacists to dispense naloxone without a prescription was associated with an increase in naloxone dispensing rates.

### ***US hospitals reporting short supplies of neuromuscular blockers***

A new [survey](#) by the American Society of Health-System Pharmacists (ASHP) indicates that critical care drug shortages are improving, but neuromuscular blockers are frequently in short supply at many hospitals. The survey, round 4 of a biweekly assessment of pharmacy resources, collected responses from 258 ASHP members at hospitals of various sizes from around the country. Cisatracurium, a drug used with patients on ventilators, had the most critical current inventory status among hospitals reporting an ICU at least half full of patients with COVID-19. Their answers indicated that 19% had less than a 1-day supply of cisatracurium and 44% had less than a 7-day supply.

### ***Childhood vaccinations drop significantly, CDC warns of potential measles outbreaks***

Routine vaccinations for children have decreased significantly since the US declared a national emergency on March 13 in response to the COVID-19 coronavirus pandemic, [a study](#) by the US Centers for Disease Control and Prevention (CDC) found. There were around 3 million fewer non-influenza vaccine doses ordered from the federal Vaccines For Children program in the week of April 13 compared to the same week in 2019, and 400,000 fewer measles doses.

### ***Arthritis drug seen helping COVID-19 patients in small study***

A drug used to treat rheumatoid arthritis appears to help improve lung function in hospitalized COVID-19 patients, a positive sign for treating those with severe inflammation in their organs. Treatment with anakinra, sold by Swedish Orphan Biovitrum AB as Kineret, was associated with a 90% survival rate and reduced respiratory symptoms, according to an observational study of 29 patients published Thursday in the Lancet Rheumatology journal, [reports Bloomberg](#).

### ***Manufacturer to move hydroxychloroquine production to the UK to avoid shortages***

A manufacturer has announced plans to move production of hydroxychloroquine — currently being trialled as a COVID-19 treatment — to the UK from abroad to combat potential shortages. Generics manufacturer Accord Healthcare told [The Pharmaceutical Journal](#) that it is in the process of importing “50 tonnes of raw chemical materials” to its facility in the north east of England, where it plans to produce the active pharmaceutical ingredient hydroxychloroquine.

## **Newsworthy**

### ***COVID-19 exposes drug supply gaps as 'made in Canada' solution proposed***

For more than a decade Canada has had a supply shortage of essential medication. This issue has been exacerbated by COVID-19, but [a “made in Canada” solution is being proposed](#) that could potentially help resolve this long-standing problem. “What keeps me up at night is the potential that we are going to run out of some of these crucial medications,” says Christina Adams, the chief pharmacy officer for the Canadian Society of Hospital Pharmacists. “Because drugs are not produced here in Canada, we're at the mercy of the market when it comes to trying to acquire additional supply in times of need.” With huge demands worldwide and few sources, some are now proposing that essential drugs be made in Canada, using state-of-the-art technology.

## **Worth Repeating**

"I foresee some issues for sure. We will do our best to prevent stockpiling of medications, but when the 1-month rule is lifted, it's definitely going to be a challenge for us as pharmacists when that time comes of when supplies of drugs are running out and we're not able to give those patients who really need their inhaler because someone else bought 8 inhalers." — Brittany Creamer, Shoppers Drug Mart pharmacy owner in Brandon, MB, on lifting the 30-day prescription supply limits in Manitoba

This daily COVID-19 update is compiled by the Canadian Pharmacists Association. To unsubscribe, please reply to this email with

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