



Canadian
Pharmacists
Association

Association des
pharmaciens
du Canada

The Weekly

Bringing the world of pharmacy together

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CPhA

Federal funding to improve access to abortion services includes funding for CPhA to produce pharmacist training and materials

On May 9, Minister for Women and Gender Equality and Youth Marci Ien [announced](#) funding to improve access to abortion services and reproductive health information for Canadians. The \$4.2 million in funding from the Sexual and Reproductive Health Fund will support projects with the University of British Columbia's Contraception and Abortion Research Team (CART) and Action Canada for Sexual Health and Rights. As part of the CART access project, CPhA will develop training resources and materials to further enhance pharmacists' role in medical abortion and sexual and reproductive health services, with a particular focus on underserved populations. CPhA has long been a strong advocate for improving access to reproductive health services, including abortion services, and is proud to be participating in this important initiative.

Pharmacy Wellness Toolkit

CPhA's Pharmacy Wellness Task Force is curating a set of evidence-based resources to support wellness within the pharmacy profession. The task force

has evaluated the Canadian Health Workforce Network's catalog of 140 wellness interventions and is pleased to share an initial curated selection of resources for individuals in a new [Wellness Toolkit](#). Over the coming weeks and months, the toolkit will expand to include resources relevant to pharmacy teams, organizations and system leadership.

Pharmacy on the front lines

New primary care clinic opens in Port Hawkesbury, NS, pharmacy

A pharmacy in Port Hawkesbury has officially opened its new primary care clinic. It is 1 of 14 new pharmacies offering primary care treatments under the province's pilot program. The expansion of the program was announced last month after 12 pharmacies across the province had excellent results in the first phase of the program. Michael Hatt, the owner and operator of The Medicine Shoppe in Port Hawkesbury, [told local radio station 101.5 The Hawk](#) that he's excited about the expansion of the program as it helps meet the needs of an underserved region of Nova Scotia. "Phase one didn't have any locations between New Glasgow and Sydney. So, we're really happy to be offering a service covering that area in between," he said. Hatt said he believes the program is a good way to bridge the gap, while the province searches for ways to address the issue of many Nova Scotians not having a family doctor. "We have 1000 plus pharmacists at our disposal that could certainly help with the strain on the healthcare system. And we'll do our [best to] help unclog the ERs and we'll help unclog the doctor's offices, but we certainly aren't a replacement for those," he said.

Provincial

\$3 million for new chair at U of T to focus on enhancing pharmacist-led vaccine care

The University of Toronto (U of T) and biopharma company GSK are investing \$3 million for the creation of a new chair that will enhance and develop vaccine education programs and practice tools for pharmacists and other health professionals, [U of T News reports](#). Based at the Leslie Dan Faculty of

Pharmacy, the GSK Chair in Vaccine Education and Practice-Oriented Tools will build on current knowledge and training to equip the pharmacists of tomorrow with the skills and tools to adapt to the rapidly evolving clinical scope of practice and the needs of patients and communities. The chair will also develop evidence-based models of vaccine care that build trust, access and improve health outcomes. “Community pharmacies are increasingly seen as health hubs for primary care services and pharmacists are ideally suited to promote the best health outcomes for vaccine preventable diseases at all stages, from childhood to older adults,” said faculty dean Lisa Dolovich. “The support from GSK to establish this chair is vital to advancing our education and research in this important area of practice.”

PrescribeIT to launch at Jean Coutu and Brunet affiliated pharmacies

Canada Health Infoway, Jean Coutu and Brunet [announced](#) last week that national e-prescribing service PrescribeIT will gradually be made available to more than 560 pharmacies operated by pharmacist owners under the Jean Coutu and Brunet banners across Ontario, New Brunswick and Quebec over the next few months. The service enables prescribers to send prescriptions and renewals electronically to a patient’s pharmacy of choice, resulting in more efficient patient care and improved communication between clinicians.

“PrescribeIT will make filling a prescription easier and more convenient for patients. It will also free up time for pharmacists to spend on patient care and make their communication with prescribers more efficient,” said Nathalie Plante, vice-president of pharmacy and health care with Jean Coutu and Brunet. Jamie Bruce, the executive vice-president of Canada Health Infoway calls the agreement with Quebec’s largest pharmacy retailer a “major milestone.” PrescribeIT is now live in 688 communities in Alberta, Saskatchewan, Manitoba, Ontario, New Brunswick, Prince Edward Island, and Newfoundland and Labrador, and Canada Health Infoway says it’s working with other provinces and territories to develop rollout plans.

National

Health Canada recalls Emerade epinephrine auto injectors over possible device failure

Emerade epinephrine auto-injectors are being recalled because the devices could fail, [the Canadian Press reports](#). Health Canada says the 0.3 and 0.5 mg injectors could malfunction when people suffering a serious allergic reaction try to use them. That means they might not get the epinephrine they need to stop potentially deadly anaphylaxis. The recalled lots of Emerade, produced by Quebec-based Bausch Health, were distributed in Canada between April 2022 and May 2023. Health Canada is urging people to take their Emerade auto-injectors to their pharmacy as soon as possible to get a replacement. They should talk to the pharmacist to make sure they know how to use the replacement device before leaving the pharmacy, the health agency says. Health Canada says if someone has a serious allergic reaction before they can get a new device, they should still use the old one and then seek emergency medical attention.

International

US: Birth control pills aren't available over the counter in the US. That could change

For the first time, the US Food and Drug Administration (FDA) is weighing whether or not to allow oral contraceptive Opill to be sold over the counter, [the Washington Post reports](#). A panel of outside experts advising the agency [met on May 9](#) to discuss if the risks of an over-the-counter pill would outweigh its benefits. Birth control pills are available in more than 100 countries without a prescription. The FDA is expected to make a final decision by the end of the summer. If it approves the request from the French company, it would mark the latest milestone in a reproductive health landscape shaken by seismic legal and political upheavals during the past year. A year after the Supreme Court overturned *Roe v. Wade*, which guaranteed the nationwide right to abortion, reproductive health advocates and medical groups, including the American College of Obstetricians and Gynecologists and the American Medical Association, say the pill should immediately be made more widely available. About 46% of US pregnancies are unintended, according to a new study by the Guttmacher Institute, a US research organization that supports reproductive rights.

UK: Pharmacist prescribing set to launch in England, while Northern Ireland calls for similar powers

Pharmacists in England will soon be able to prescribe for 7 common health conditions under new plans from the government. The £645 million (the equivalent of over CDN\$1 billion) investment into community pharmacies is expected to help free up around 15 million doctors' appointments over the next 2 years. Ministers hope the Pharmacy First program will be introduced this winter following a consultation with the industry, [iNews reports](#). Under the proposals, pharmacists will be able to prescribe oral contraception and prescription medications that treat earaches, uncomplicated urinary tract infections, sore throats, sinusitis, impetigo, shingles and infected insect bites without prior general practitioner approval. Thorrun Govind, chair of the Royal Pharmaceutical Society in England, welcomed the plans as “a real game-changer for patients.” She said [in a statement](#) that the plans “will provide better access to healthcare, helping to reduce the strain on other parts of the [National Health Service] and provide patients with the care they need, when they need it.” Govind added that pharmacist prescribing is already successful in Scotland and Wales. Meanwhile, pharmacists in Northern Ireland are calling for similar prescribing powers. “We are certain that similar arrangements for Northern Ireland would be incredibly beneficial,” Gerard Greene, chief executive of Community Pharmacy Northern Ireland, [told BBC](#). “There is much potential, but a long way to go. We want to work with the Department of Health to turn all of this into reality.”

UK: Scores of local pharmacies closing across England

The number of pharmacies in England has fallen by 160 over the past 2 years, [BBC analysis shows](#). There are now 11 026 community chemists, according to data from the National Health Service (NHS) Business Services Authority—the lowest number since 2015. Rising operational costs, staff shortages and reduced government financial support have been blamed. This is despite rising patient demand and plans for pharmacists to provide more services to ease pressure on general practitioners. Pharmacists are warning that many more local businesses could close, without help. Dr. Leyla Hannbeck, chief executive of the Association of Independent Multiple Pharmacies, estimates there has been a 30% cut in government funding to independent pharmacies over the past 7 years, after taking inflation into account. “This has led to many pharmacies severely struggling with cashflow problems,” she told BBC Radio 4’s Today program, adding that because most of their work is NHS-funded, the pharmacies cannot pass on rising costs to customers. “On top of that, we’ve got the workforce challenges that we have been struggling with for so many

years,” Hannbeck added, warning “many more” pharmacies could close this year without government funding.

Australia: Pharmacy Guild warns of patient losses following budget cuts to community pharmacies

Millions of Australians who visit their local pharmacy every week could soon be worse off following a massive cut in the federal budget to 6000 community pharmacies, [according to a statement from the Pharmacy Guild of Australia](#). National President Trent Twomey said the \$3.5 billion cut (the equivalent of more than CDN\$3.1 billion) will impact patients and their ability to get medicine, advice and services from their local pharmacist. “Unless the Federal Government provides a guarantee that no patient and no community pharmacy will be worse off under their new medicine policy then millions of people in every single community in Australia will be worse off,” he said. “These are unprecedented changes that will fundamentally change the way patients get medicine and access support from their local pharmacist.” Twomey said it was counterintuitive for the federal government to announce more support for Medicare and welcome reform changes to the health system at the same time as cutting funding to pharmacy services.

In Depth

What the end of the COVID-19 emergency status means for Canada

The World Health Organization has stated that COVID-19 no longer qualifies as a global emergency, citing increased immunity, fewer deaths and less pressure on hospitals. But while the situation with the virus has improved worldwide, it has also exposed major issues with Canada’s health-care system. Canadian experts say COVID-19 will remain a challenge to public health for years to come and has left lasting scars on the health-care system. [CBC explains](#).

Worth Repeating

“COVID-19 is still killing about 4000 people a week worldwide (down from a peak of 100 000 at the height of the pandemic) and sickening who knows how many more. The wily virus continues to mutate and spit out new variants. It hasn’t finished ripping a global trail of social, economic and political destruction.” —The *Globe and Mail*’s André Picard [on the World Health Organization’s ruling](#) last week that COVID-19 is no longer considered a global health emergency

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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