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Canadian
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The Weekly

Bringing the world of pharmacy together

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CPhA

Patient sneaking ivermectin into hospital a scary sign: CPhA

The recent discovery of the antiparasite drug ivermectin hidden inside a stuffed animal belonging to a COVID-19 patient admitted to the ICU in Windsor, Ontario, is a scary reminder of why patients need to be transparent with their medical care providers, according to Dr. Danielle Paes. CPhA's chief pharmacist officer [told CBC](#) it also speaks to the desperation people have to keep themselves healthy during an ongoing pandemic. "I think the scariest part for me when I hear a story like that is that . . . when a patient's admitted into ICU, there's a team of physicians, nurses, pharmacists that are there to make sure that they are safe and well, and they can only operate with the information that they have in front of them," said Paes. "When you see a situation like this where a patient has brought in an additional therapy, and the rest of the team is unaware, it puts into place . . . the risks of something going terribly wrong because all the clinical decisions being made are absent of this missing piece of information."

Pharmacists on the front line

Pharmacy administers hundreds of boosters with overnight clinic

Avalon Compounding Pharmacy in Orléans, Ontario, held an overnight vaccine clinic January 7, taking only walk-ins, [CTV reports](#). The lineup began as early as 5:00 p.m., with many staying late into the night in minus 20 degree weather, only to be turned away around midnight because of technical issues. “We had some hiccups in our system,” said compounding pharmacist Andrew Hanna. “Power outages, computer system failures . . . it did add to the delay of getting vaccinated and it delayed our flow.” That delay meant more frustration for many who have been desperately trying to get their hands on a third dose. “These guys have been working all night, working hard,” said David Brown. “It’s a crapshoot sometimes, the way it’s working. You get lucky or you don’t. In this case, I got a shot.”

For those who can’t work from home, the dangers of COVID-19 are ever present

Nearly 2 years into the pandemic, thousands of Canadian front-line workers who are unable to do their job from home continue to put themselves at greater risk of contracting COVID-19, [CBC says](#). And with the spread of the highly transmissible Omicron variant, those pressures, for many, have just intensified. Kyro Maseh, Toronto-based pharmacist and owner of Lawlor Pharmacy, says the stress of his job over the past couple of years has him waking up multiple times a night because “there’s a million thoughts going through my head.” He has lost weight, as well—not from dieting, but from skipping lunch. He said he simply doesn’t have the time to eat. But mostly he said he’s “livid” because he doesn’t feel the government has recognized that pharmacists are facing the same risks as other front-line health-care workers. “We’re the ones kind of triaging, recommending, answering questions and obviously filling prescriptions,” Maseh said. “So we are the most front-line health-care professional in the Canadian health-care system. And the most accessible by far.”

Provincial

‘Male menopause’ is real and treatable, say pharmacy researchers

A pair of University of Alberta pharmacy professors have [published guidelines](#) in the *Canadian Pharmacists Journal* to help pharmacists support men experiencing the common but underdiagnosed problem of “late-onset hypogonadism” or, as it is more commonly known, “male menopause” or “menopause.” “Men can have trouble sleeping, they can have difficulties with erection, they can have a depressed mood because of other reasons, or people think, ‘I’m just under stress,’” Cheryl Sadowski, lead author and professor in the Faculty of Pharmacy and Pharmaceutical Science, said in [an article in U of A Folio](#). “Low testosterone is not the first thing that comes to mind for patients or their physicians,” she added. Pharmacists can help men understand that their symptoms aren’t just a normal part of aging and that they may be treatable, said Nathan Beahm, co-author and assistant clinical professor. “Pharmacists may see patients more often than physicians and interact with them more,” Beahm said. “Pharmacists can engage in screening and ask some initial questions to identify patients who might benefit from treatment and might otherwise slip through the cracks of the system.”

Some Ontarians are refusing Moderna boosters, pharmacies say

As Ontario rolls out COVID-19 booster shots, some pharmacies are reporting that people are walking out after being informed that they would be receiving the Moderna vaccine rather than the Pfizer-BioNTech one. Justin Bates, CEO of the Ontario Pharmacists Association, says he's hearing from pharmacies that around half of people are refusing to take Moderna. "I think there's a lot of education that pharmacists have to do in other health care providers to demonstrate that [Moderna] is equal to Pfizer. It's safe, it's effective," he [told CTV News](#). Bates is urging Ontarians to avoid vaccine shopping and instead get any vaccine booster as early as possible. "Getting a vaccine now versus waiting or vaccine shopping is much more effective at providing the greatest and maximum immunity against Omicron," he said. "We keep encouraging people to essentially ignore the brands and get the vaccine that available to you, when it's available."

Quebec pharmacies to distribute 3M rapid tests this week

Quebec pharmacies will distribute 3 million rapid tests this week, starting January 11, [according to the Montreal Gazette](#). Some pharmacies will only get the tests later in the week. The tests are in demand now that Quebec is severely limiting who can get PCR tests at government clinics. Each pharmacy should receive an average of about 300 kits by Friday, with each kit holding 5 tests. The number of tests each pharmacy receives will depend on its volume of business, said Viviane Ross, a spokesperson for the Association québécoise des pharmaciens propriétaires (AQPP). The head of AQPP, Benoit Morin, [told CBC](#) he is hoping this bigger shipment of tests will help ease the process for pharmacists this time around. Morin said the distribution methods for testing kits will vary from pharmacy to pharmacy in order to accommodate a wide range of customers, including some who don't have access to online appointments. "Some of us will put the appointments online, some of us will call patients, some will distribute [tests] at the front door. It will be a mix of everything," he said.

Workplaces across NS—including pharmacies—are feeling the effects of staff shortages due to COVID-19 pandemic

COVID-19 is putting a dent into workforces across Nova Scotia as hospitals, stores and pharmacies feel the pinch, [CTV reports](#). "We've had dozens upon dozens of staff go out already and I say that to also point out that I don't get reports from everybody," said Allison Bodnar, executive director of Pharmacy Association of Nova Scotia. Some pharmacies have shortened hours, split staff shifts to limit contacts and hired more health-care workers to help vaccinate patients. So far, no appointments have been cancelled. "It's not just vaccines. Vaccines are exceptionally important," Bodnar said. "But the critical delivery of medication to patients is an essential service that can't stop."

Sobeys gives \$30,000 to support inclusion and equity in pharmacy at Dalhousie

A [generous donation](#) from Sobeys National Pharmacy Group will support students from underrepresented groups in their pursuit of pharmacy education at Dalhousie University. The \$30,000 gift will be directed toward the Faculty of Health's priority area of advancing and supporting inclusion and equity in the College of Pharmacy. "The College of Pharmacy is grateful for the new annual Sobeys National Pharmacy Group Scholarship, focusing on students from

underrepresented groups. This gift will assist students in attending the College of Pharmacy and alleviate some of the financial constraints, so they can more fully concentrate on their studies,” said Susan Mansour, director of the College of Pharmacy. The gift will create an annual scholarship of approximately \$1,000 and the first recipient is expected to be chosen in 2022. Preference for the award will be given to students who self-identify as belonging to historically underrepresented groups, including students of Indigenous ancestry (especially Mi’kmaq) and persons of African descent (especially African Nova Scotians). Also eligible for the scholarship are members of the dis/ability, Acadian and 2SLGBTQ+ communities.

National

TELUS Health launches Virtual Pharmacy service in Canada

TELUS Health launched its digital Virtual Pharmacy service to help improve medication adherence by offering Canadians the opportunity to set up automatic refill reminders for prescription medications shipped directly to their doorstep. The service allows users to have unlimited one-on-one video and phone consultations with pharmacists from the comfort of their home, while also providing them with tools to keep track of their family’s medications through the service’s online dashboard. “As people’s lives continue to get busier, we need to focus on providing simple and convenient solutions that allow people to better manage their health and the health of their families. Not following medication instructions can negatively affect a patient’s health and costs our health care systems billions of dollars in unnecessary acute care interventions,” Sonya Lockyer, the vice-president of pharmacy at TELUS Health, said [in a news release](#). “Our new virtual pharmacy service is designed to make medication compliance easier, especially for those with chronic or acute conditions who need to manage multiple medications.”

Slim majority support government lockdowns, restrictions in response to Omicron: poll

A new poll conducted by Leger and the Association of Canadian Studies suggests a slim majority of Canadians support the latest round of lockdowns and other government-imposed restrictions as the Omicron variant continues to fuel an explosion in new COVID-19 infections, [the Canadian Press reports](#). Of the respondents, 56% agreed governments are making the right decisions to limit the spread of Omicron and keep the health system from being overrun. Another 31% said they did not believe Omicron poses a serious health risk to most of those who are infected, and that governments should leave things open and let Canadians live with the risk. The remaining 14% said they did not know. The results suggest there is a growing level of fatigue among Canadians when it comes to lockdowns, including among those who have been fully vaccinated, said Leger Executive Vice-President Christian Bourque.

International

US: Omicron explosion spurs nationwide breakdown of services

The current explosion of Omicron-fuelled coronavirus infections in the US is causing a breakdown in basic functions and services—the latest illustration of how COVID-19 keeps

upending life more than 2 years into the pandemic, [the Associated Press says](#). In downtown Boise, Idaho, customers were queued up outside a pharmacy before it opened on January 7 and before long, the line wound throughout the large drugstore. Pharmacies have been slammed by staffing shortages, either because employees are out sick or have left altogether. Pharmacy technician Anecia Mascorro said that prior to the pandemic, the Sav-On Pharmacy where she works always had prescriptions ready for the next day. Now, it's taking a lot longer to fill the hundreds of orders that are pouring in. "The demand is crazy—everybody's not getting their scripts fast enough so they keep transferring to us," Mascorro said.

US: APhA welcomes proposed elimination of retroactive direct and indirect remuneration fees in potential win for patients and pharmacies

The American Pharmacists Association (APhA) [is pleased](#) to see provisions in a new Centers for Medicare and Medicaid Services (CMS) proposed rule that would eliminate pharmaceutical benefit managers' (PBMs) use of retroactive direct and indirect remuneration (DIR) fees, which increase patient out-of-pocket drug costs and cause harmful impacts at pharmacies. The proposed rule would move all pharmacy price concessions, including retroactive DIR fees, to the point-of-sale to benefit patients with lower cost sharing. It would increase predictability for pharmacies and address a regulatory loophole CMS opened in 2014 that allowed PBMs to have unlimited license to apply retroactive DIR fees. "If finalized, this is a major step forward for patients and pharmacies," said Scott J. Knoer, APhA executive vice president and CEO. "We appreciate CMS' bold proposed action to lower patients' out-of-pocket costs at the pharmacy counter, which responds to APhA's years of advocacy to eliminate Part D plans' and PBMs' harmful use of retroactive DIR fees."

UK: Investment in common ailments treatment to tackle NHS pressures in Wales

Welsh patients are to benefit from an additional £2.5 million investment in community pharmacy services this winter, [according to the Royal Pharmaceutical Society](#). The funding announced January 10 will be part of a package of measures to help the National Health Service (NHS) recover from the ongoing COVID-19 pandemic, alleviate waiting times and reduce winter pressures. The one-off community pharmacy investment aims to enhance access to free NHS treatment and advice across Wales for patients with a range of common ailments including sore throat/tonsillitis, conjunctivitis and diarrhea. Using the clinical skills of pharmacists in the community will form a key part of the Welsh government's plans to reduce pressures on doctors and other NHS services this winter.

In-Depth

Equal footing: Helping women thrive in the workplace will have benefits for us all

Workplaces should provide equal opportunities to all. And yet, women often feel left behind. Working to address gender-based professional challenges, the International Pharmaceutical Federation (FIP) has launched a FIPWiSE (Women in Science and Education) toolkit to help support women and their employers to produce the best workplace outcomes for their

employees. [In the Medicine Maker](#), Claire Thompson, FIPWiSE chair, outlines the extent of the gender inequality problem and shares how the federation's newly launched resource will give women in pharmaceutical sciences and education better access to and continued benefit from the opportunities enjoyed by their male counterparts.

Worth Repeating

“As pharmacists, we always want to do more. We don’t always want to be behind the counter dispensing, so this is an opportunity to focus on clinical assessments and educating people about vaccines. It’s almost been like a dream job for some people. They’ve been studying their whole career to get to this point.” —Adrian Gulowaty, pharmacist-owner of Shoppers Drug Mart in Winnipeg’s Osborne Village. Through Gulowaty’s efforts, the Osborne location [has been called](#) a “hero” of the vaccine effort, raved about on social media and become one of the top vaccine distributors in Manitoba outside the government-run sites.

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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