



Canadian
Pharmacists
Association

Association des
pharmaciens
du Canada

The Weekly

Bringing the world of pharmacy together

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CPhA

CPhA's CPO and Ontario's first COVID-19 vaccinator reflect on 3 years of the pandemic

A full 3 years after the World Health Organization declared COVID-19 a pandemic, Canada's pharmacists can look in the mirror and see a profession transformed by expanded responsibilities and an elevated status among the public, [according to Canadian Healthcare Network](#) (subscriber access only). On March 10, 2021—just 1 day short of a year after COVID-19 was declared a pandemic—Toronto pharmacist John Papastergiou injected the first COVID-19 vaccine in Ontario. “It felt like I was part of history,” he recalled. Perhaps the biggest value pharmacists offered during the pandemic was their accessibility at a time when many doctors had temporarily shuttered clinics, he added. “I think that today, we continue to be viewed as the healthcare providers [people] can turn to even late at night. It's paved the way for us to become a primary healthcare hub.” The ability to immunize has, in particular, been a game-changer for pharmacy, said Dr. Danielle Paes, CPhA's chief pharmacist officer, noting that pharmacists have administered more than 25 million COVID-19 vaccines. The 3 years of the pandemic have also brought other significant changes to pharmacies, Paes said. “From Paxlovid prescribing to the expansion of minor ailments in a number of provinces, the last year we have seen real momentum, not just on scope but the public funding of these

services, which is a critical part in expanding pharmacy care,” she said. “We are also seeing the introduction of pharmacist-led walk-in clinics in some provinces, reflecting the expanding primary care role pharmacists are playing.”

PAM celebrations continue: How you can participate

March is [Pharmacy Appreciation Month](#) (PAM) in Canada—the annual national campaign that shines a spotlight on all things pharmacy and celebrates the growing role pharmacy professionals play in our health-care system. This PAM, we’re celebrating our pharmacy teams and highlighting to everyone that the power of pharmacy is *you*—the amazing individuals who have been there for their communities time and time again. Here’s how you can help us celebrate this month:

- **Be part of our PAM campaign** – Want to be featured in our PAM materials on social media? [Email us](#) a picture of yourself or your pharmacy team in action, with the name and location (city and province/territory) of your pharmacy and the full names of any team members in the photo.
- **Share our #MyFavePharm patient contest** – We’re asking patients to tell us why they love their pharmacy team by filling out a nomination form by March 20 for a chance to win a tablet for themselves and their favourite pharmacy team member. Share the [contest link](#) with your network or display a [promotional poster](#) at the pharmacy.
- **Celebrate your team on the PAM 2023 Kudoboard** – Share stories, photos, congratulations or thanks to your team and pharmacy colleagues for the incredible work they do every day on this [virtual appreciation wall](#).

For more information on how you can get involved, check out our [communications toolkit](#) and join the conversation on social media using the hashtag #PAM2023!

Reminder: Take the 2023 Canadian Pharmacy Mental Health and Workforce Wellness Survey

In January 2022, over 1400 pharmacists and pharmacy technicians from across Canada completed CPhA’s first ever Mental Health and Workforce

Wellness Survey. The results showed that pharmacy professionals were being challenged in many ways and their personal wellness was suffering as a result. These results have guided our efforts to support the profession over the past year, including the formation of a [Pharmacy Wellness Task Force](#) and Workforce Steering Committee. It's been a year and we're checking in again to see how you're doing. We need to understand what you're experiencing now so that we can continue to advocate on your behalf and share the impact that workplace and staffing challenges are having on you and your team. Please take the 2023 edition of the survey in [English](#) or [French](#) by March 22.

Pharmacists' expanded scope—and what it means for appropriate prescribing

The scope of pharmacist prescribing has expanded in several provinces, enabling pharmacists to assess and prescribe treatments for a variety of minor ailments. As other provinces and territories are expected to adopt similar approaches, how do we support pharmacists, physicians, and other health-care professionals in promoting resource stewardship and appropriate prescribing practices? Join CPhA's chief pharmacist officer, Dr. Danielle Paes, for a [discussion with Choosing Wisely Canada](#) on these recent scope of practice changes and future thinking around interprofessional collaboration in patient care. The event takes place on March 22 at 12 pm ET via Zoom.

Webinar recording available: The pharmacist's role in head and neck cancer prevention

Calling all licensed health-care professionals! Our recent Learning Activity webinar explores the pharmacist's role in preventing HPV-related head and neck cancer among Canadians by integrating a sustainable immunization program into a busy community pharmacy practice. The speakers also review vaccination and access to care opportunities created during the COVID-19 pandemic and discuss strategies for alleviating some of these pressures. If you missed the live session, the [recording is available now](#). *This webinar was hosted by CPhA on behalf of Merck Canada Inc. and is not accredited.*

Pharmacy Appreciation Month

Duclos, Bennett thank pharmacy professionals in annual PAM message

Jean-Yves Duclos, the minister of health, and Carolyn Bennett, the minister of mental health and addictions, thanked pharmacy professionals for their ongoing dedication and commitment to Canadians' well-being in a [Pharmacy Appreciation Month \(PAM\) message](#) on March 9. The ministers noted that pharmacy professionals are a critical part of the health-care team that keeps Canadians safe and healthy, guiding their communities throughout the COVID-19 pandemic, addressing drug shortages, and collaborating with other health professionals to care for patients. "With more than 45,000 pharmacists and 9,900 pharmacy technicians working in over 11,000 pharmacies across Canada, pharmacy professionals play an essential role in providing health care across the country," they said. "We know that pharmacy professionals—like all health care providers—are eager to be a part of the change needed to improve health care in Canada while adapting the care to Canadians' changing needs."

Pharmacy on the front lines

Naloxone kits a lifeline in a worsening opiate crisis, pharmacist says

At Northway Pharmacy Brothers in Winnipeg, naloxone kits are flying off the shelves. The Selkirk Avenue pharmacy distributes 50 to 70 kits per week. Each kit contains between 2 and 4 doses of the overdose-reversing drug. But pharmacy manager Brett Roeland believes the need is actually much higher. "I'm pretty confident they're all being used in the community," he [told Global News](#). "We might be giving out more kits than other areas, but I still think that we are probably under-servicing the area." Roeland added that 3 to 4 patients per day also come in asking for help accessing addictions treatment services. He points them to other resources in the city, but said he wishes there were more resources for the growing number of people who need help. "It is kind of a long journey, but to get turned away at the beginning of that journey is really disheartening for them, and I wish we could do more to initiate when they're ready," he said.

Edmonton pharmaceutical startup boosts services for drug shortages, eyes expansion

An Edmonton pharmacist and startup founder is working to enhance access to scarce and reformulated drugs both domestically and overseas. KemNet CEO Morenike Olaosebikan started the company in February 2022 to respond to drug shortages. A few months later, amid a national shortage of children's pain medication, she leveraged the company's digital platform to launch an online tool that connects Albertans seeking acetaminophen and ibuprofen with laboratories that can formulate appropriate doses for kids. After introducing the tool in August, Olaosebikan estimates about 3000 families benefited from the access in the 5 months that followed. Now, KemNet is aiming to support a wider range of products with an updated version of the website launching this week. "What you will see are shorted medications for gender health, for women and for non-binary people," she [told the *Edmonton Journal*](#), speaking to some of the new drugs that will be available for request on the platform. "KemNet is all about access to medicines for everyone." The updated website is prepared to facilitate requests for several products, including hormone replacement creams estriol and estradiol, which treat menopausal symptoms and support gender transition. More than just addressing shortages, the platform allows people to request more appropriate versions of the drugs they need, such as medications formulated for children or alternate formulations of drugs that may be hard for some people to swallow in pill form, she said.

Provincial

NB pharmacists call for more services to be covered by Medicare

The New Brunswick Pharmacists' Association has said it can play a larger role in addressing the province's primary care crunch, [Global News reports](#). Executive director Jake Reid said pharmacists are ready and willing to divert patients from elsewhere in the system. "Pharmacists are capable and trained health-care practitioners and they're able to look after a variety of health services, you know, common ailments that you may go to a clinic or to your doctor for, [or] the emergency room for," he said. Right now, pharmacists are able to treat over 30 different minor ailments without the involvement of a doctor or nurse practitioner. However, most of those aren't covered by Medicare. Treatment for urinary tract infections, contraception management and prescription renewal have been covered since earlier this year. But patients have to pay a fee of between \$20 and \$25 when seeking care for smoking cessation, rashes, cold sores and a variety of other conditions. Prince

Edward Island recently began covering the entire scope of practice for pharmacists, and Reid said New Brunswick should follow suit. “Right now patients are being sent to community pharmacy for a lot of these minor ailments for assessment and for treatment, but unfortunately they’re not all paid for by Medicare, so that causes confusion on behalf of the patients,” he said.

Ontario considers expanding scope of practice for nurses, pharmacists and more

Ontario is considering expanding the scope of what certain health professionals, such as nurses, can do in periods of “high patient volumes,” [according to the Canadian Press](#). A spokesperson for Health Minister Sylvia Jones said in a statement that the government has already recently expanded the scope of practice for pharmacists, allowing them to prescribe for certain conditions, and allowing nurse practitioners to order MRI and CT scans, and now the government is looking to give more professionals more powers. The ministry is looking at allowing pharmacists to administer “certain substances” by injection or inhalation, among other expansions for other health-care professionals, Hannah Jensen said. “Maximizing professional scopes to increase flexibility is a lesson learned from the COVID-19 pandemic and a key part in building a healthcare system that is easier to navigate and provides Ontarians with access to faster, more convenient care, when and where they need it,” she said in the statement.

National

Report says long COVID could impact economy and be ‘mass disabling event’ in Canada

A [report](#) released on March 9 by Canada’s chief science adviser said she considers COVID-19 the “head” of the pandemic but long COVID its “tail” as the illness inflicts significant harm on individuals, their families and potentially the country’s economy, the [Canadian Press reports](#). Dr. Mona Nemer said about 10 to 20% of people with COVID-19 develop long COVID after they have recovered from infection and struggle with a variety of symptoms ranging from high blood pressure and an irregular heartbeat to medically undefined symptoms such as chronic fatigue, brain fog, muscle pain and blurred vision.

“Some patients have not recovered 2 to 3 years after the initial infection and it is uncertain whether a proportion may ever fully recover,” Nemer said of the condition that lacks consensus on a clear definition and diagnostic criteria, affecting claims for social assistance, disability supports and insurance by those who can no longer work. Canada could face a “mass disabling event” because it’s increasingly clear that COVID-19 raises the risk of several chronic diseases including diabetes and hypertension, Nemer said, adding the number of people afflicted with long COVID may be greater than expected due to the lack of established diagnostic criteria. Statistics Canada said late last year that about 15% of adults in the country reported some long COVID symptoms at least 3 months after a positive COVID-19 test, amounting to 1.4 million people. In the report, Nemer makes 18 recommendations, including the establishment of a Canada-wide research and clinical care network, along with standardized assessments and clinical guidelines.

More mental health resilience during COVID-19 than previously thought, study suggests

A [new study](#) published in the *BMJ* suggests the first year of the COVID-19 pandemic took a relatively limited toll on global mental health, [the Canadian Press reports](#). Canadian researchers reviewed 137 studies from around the world that measured people’s overall mental health, as well as depression and anxiety levels, before the pandemic and then again during 2020. They were surprised to find that there was minimal overall change at a population level. Senior author Dr. Brett Thombs, a researcher at McGill University, said that coverage of the pandemic has mostly focused on snapshots of people whose mental health has deteriorated and people have generalized that to the overall population. The majority of studies during COVID-19 have not looked at how the participants were faring mentally prior to the pandemic, he said, so they wouldn’t have been able to measure changes in mental health, either positive or negative. “Different individuals have had different experiences with mental health and COVID,” Thombs said. “It’s been all over the place—some terrible, some positive, some hasn’t changed much. But overall, you know, there’s been a lot of resilience here and there’s a lot of good news in that respect.” However, when the researchers looked at different subgroups by age, sex or gender, they did find that women’s mental health worsened by a small amount, including anxiety and depression symptoms, during 2020.

International

US: Top pharmacies pressed on abortion pill plans by Senate Democrats

US lawmakers are calling on pharmacy operators to clarify their policies on stocking, prescribing and distributing a pill that's commonly taken to induce abortions, [Bloomberg reports](#). Seventeen Senate Democrats sent letters to Albertsons Cos., Costco Wholesale Corp., CVS Health Corp., Kroger Co., Rite Aid Corp., Walgreens Boots Alliance Inc., Walmart Inc. and McKesson Corp.'s Health Mart unit asking them to clarify or share plans surrounding mifepristone, which is approved as an abortion medication through the first 10 weeks of gestation. In January, the Food and Drug Administration said it would allow pharmacies to prescribe and dispense the pill to patients directly. CVS Health, Rite Aid and Walgreens have said they would look into receiving certification for pharmacists to offer mifepristone. After Walgreens faced pressure from Republican lawmakers, it later added that it wouldn't sell the pill in certain states, but the company has since doubled back. On March 14, a spokesperson referred Bloomberg to the company's previous statement that Walgreens "plans to dispense mifepristone in any jurisdiction where it is legally permissible to do so." CVS said it plans to seek certification to sell the pill in states where it's legal to do so. Albertsons, Costco, Kroger and Walmart have not clarified whether they will seek certification to dispense mifepristone where it's legally permissible.

US: Department of Justice sues Rite Aid for missing opioid red flags

The US Department of Justice (DOJ) filed a lawsuit against Rite Aid on March 13 for allegedly violating the *Controlled Substances Act*, alleging that the company "knowingly filled unlawful prescriptions for controlled substances," [CNN reports](#). In a statement, Attorney General Merrick Garland said the DOJ is "using every tool at our disposal" to hold Rite Aid accountable for contributing to the opioid epidemic. "Rite Aid's pharmacists repeatedly filled prescriptions for controlled substances with obvious red flags, and Rite Aid intentionally deleted internal notes about suspicious prescribers," Associate Attorney General Vanita Gupta added. "These practices opened the floodgates for millions of opioid pills and other controlled substances to flow illegally out of Rite Aid's stores." In the complaint, the DOJ alleges that from May 2014 to June 2019, Rite Aid filled thousands of unlawful combinations of prescriptions

known as “the trinity,” which included prescriptions for “excessive quantities of opioids, such as oxycodone and fentanyl.”

UK: Patients to get contraceptive pills and implants directly from pharmacists under new NHS plans

Patients will be able to get contraceptive pills and implants directly from their pharmacist, without first having to see a doctor, under new National Health Service (NHS) plans, [the Independent reports](#). Current rules mean pharmacists cannot prescribe the contraceptive pill, fit an implant, or conduct a yearly contraceptive pill check-up, but this would change under the suggested measures currently being piloted. If approved, they could be introduced in England later this year. A spokesperson for NHS England said the scheme is still being negotiated with the pharmacy sector and that it’s a “little premature” to discuss plans until they have been agreed upon. It comes after reports that patients are facing lengthy delays to access long-acting contraceptives such as intra-uterine devices or the implant. Research shared with the Independent last year revealed that almost a third of patients seeking these types of contraception during the pandemic were unable to do so.

UK: PDA survey finds 10% of pharmacies are understaffed

A survey from the Pharmacists’ Defence Association (PDA) has revealed that 1 in 10 pharmacists work in an environment never staffed to an adequate level, [Chemist+Druggist reports](#). The PDA’s 2022 Safer Staffing Survey polled 1452 members between November 29 and December 27, asking about staffing levels, self-checking prescriptions and how easy it was for them to raise concerns in the workplace. Over 1 in 10 respondents (11%) said their pharmacy had safe staffing levels “none of the time” in the 6 months prior to the survey, with another 30% saying this was the case a minority of the time. Some 24% reported working in a safely staffed pharmacy around half of the time, while 31% said this happened some of the time. Just 4% of those surveyed said that their pharmacy had enough staff to run safely “all of the time.” The PDA defines safe staffing levels as when a pharmacy can meet its legal, contractual and regulatory obligations, meet workload in accordance with standard operating procedures, and carry out other work “in accordance with the organization’s expectations.” The findings follow similar results from Chemist+Druggist’s 2022 Salary Survey, which revealed last month that a fifth of employee pharmacists reported dangerously low staffing levels.

Ireland: Pharmacists want authority to substitute medicines without new prescriptions

Irish pharmacists are calling to be allowed to substitute medications for patients without a new prescription each time, as medicine shortages are now a year-round issue affecting patients, [the Irish Examiner reports](#). The national medicines shortages list shows 247 medicines as out of stock as of March 8. This includes 7 types of amoxicillin antibiotics, as well as diazepam, which is used for treating anxiety, and somatropin solution for injection to assist growth limited by health conditions. Pharmacists can already swap between a brand-name medicine and a generic version, but Irish Pharmacy Union (IPU) president Dermot Twomey argued their skill set should be more effectively used in also substituting for new medication if needed. “One of the things that has worked in other jurisdictions is a Serious Shortage Protocol,” he noted. This would allow for “therapeutic substitution of medicines,” he said, removing the need for a new prescription where there is a critical shortage. “Again, a relatively simple measure which will increase the speed of supply and reduce the stress on patients and pharmacists,” Twomey added.

In Depth

After 3 years of COVID-19, here's how Canada's 'endemic' future may look

On March 11, 2020, the world came to a screeching halt when the World Health Organization declared the COVID-19 outbreak a global pandemic. Schools across the world shut down, workplaces turned remote and the fast-spreading virus revealed the fragility of many countries' health-care systems. Since then, the virus has claimed close to 7 million lives, including the lives of more than 51 000 Canadians. Fast-forward 3 years and COVID-19 hospitalizations and deaths are declining, more than 70% of Canadians have contracted the virus at least once, and effective vaccines and treatments paired with previous infection have allowed many to live somewhat normal lives again. Some experts now say the pandemic is slowly transitioning to an endemic state—when a disease, like COVID-19, is consistently present, often within a particular area or region. [Global News explains](#) what this may look like.

How fentanyl became the king of street drugs

Canada is in the grip of the worst drug crisis it has ever seen. The Public Health Agency of Canada reports that, in the first half of last year, 3556 people died of apparent opioid overdoses—a rate of about 20 deaths per day. In other words, on average, someone was dying somewhere in Canada nearly every hour, day and night. In the worst-hit province, British Columbia, deaths from illegal narcotics exceed those from murders, suicides, car accidents and prescription-drug overdoses combined. The cause, in a nutshell, is fentanyl, the potent synthetic opioid that has shouldered aside cocaine, oxycontin and heroin to become the undisputed king of street drugs. [The Globe and Mail explains](#) how this happened.

Worth Repeating

“Pharmacists do not need to expand their scope to include prescribing for infections or diagnosing heartburn versus a heart attack. We need to be utilized for the skills we already have. To help create an efficient and accessible primary care system, we need to collaborate and let health-care professionals do what they do best.” —Anita McDonald, a community pharmacist in Cochrane, Alberta, and a master of public policy student at the University of Calgary, [argues family doctors are too busy](#) seeing patients who could be helped by a pharmacist

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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