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Canadian
Pharmacists
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Association des
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du Canada

The Weekly

Bringing the world of pharmacy together

May 18, 2022

CPhA

CPhA: Canadians must have reasonable access to contraceptive medications and abortion services

CPhA reaffirmed its position to protect reproductive rights and access to abortion [in a statement](#) released on May 5. "While abortion is a safe, common and legal health procedure in Canada, we need to actively uphold this right and continue to work to improve the accessibility of abortion resources and care, which varies significantly across Canada. Pharmacists are front-line health-care providers with an important role to play in providing accessible care in our communities, including in the area of reproductive health and medical abortion," the statement reads. CPhA has long called for measures to address gaps in care and enhance patient access to abortion services, particularly in rural or remote communities. This includes support for pharmacist dispensing of the medical abortion drug Mifegymiso and providing equitable, universal access to medical abortion across Canada. CPhA not only believes in the sexual and reproductive rights of Canadians, but that all Canadians must have reasonable access to contraceptive medications and abortion services.

Earn up to 10.75 CEUs at the Canadian Pharmacy Conference

The Canadian Pharmacy Conference: Pharmacy Rising is coming to Ottawa in less than a

month! You can earn up to 10.75 CEUs while coming together with pharmacy colleagues from across Canada. Registration is almost sold out, but it's not too late to secure a spot. Take a peek at this year's [program](#) to find what we have in store for you, June 10-12. [Register now](#).

Provincial

Alberta not stopping Insulin Pump Therapy Program

Alberta will not be stopping its Insulin Pump Therapy Program on August 1, Health Minister Jason Copping told reporters on May 12, [according to CTV](#). The move comes after Diabetes Canada sent a letter to Copping requesting a meeting to discuss the previously announced changes. "Diabetes Canada is extremely concerned about the negative impact this decision will have on the health of Albertans enrolled in the IPTP and the additional costs they will be forced to incur," the letter, penned by Russell Williams, a senior vice-president at Diabetes Canada, states. "Albertans living with type 1 diabetes not only live with difficult health issues every day, but also bear a significant financial burden. We know that added costs adversely affect the ability of some to manage their disease optimally, which impacts quality of life and risks their short- and long-term health." The previous announcement meant anyone who doesn't qualify for low-income status and is without private or employer insurance would have to buy coverage through Blue Cross starting in August. Copping had said the changes could save the province as much as \$9 million per year.

Shortages of some baby formula in Quebec due to panic buying, US supply issues

The disruptions at Abbott, the United States' largest formula maker, are causing supply issues for specific hypoallergenic formulas across Canada, according to Retail Council of Canada spokesperson Michelle Wasylyshen. But in Quebec, parents are noticing shortages of other formulas on the province's pharmacy shelves—a result of panic buying, [the Canadian Press reports](#). "Some of our retailers have put limitations in place in terms of what customers can purchase, just to make sure there's enough for everyone." Quebec is not facing the same kind of shortages as in the US, but Wasylyshen said images of empty pharmacy shelves in the province started circulating online, causing anxiety. The province's Health Department said it's working with Quebec's association of pharmacy owners, the Association québécoise des pharmaciens propriétaires (AQPP), to minimize the shortage's impact. Marilie Beaulieu-Gravel, senior advisor of public and government affairs with AQPP, said that after Abbott's Alimentum formula disappeared from shelves, parents rushed to purchase Nutramigen, another hypoallergenic formula, made by Mead Johnson & Company. "There isn't a production issue with this product, but rather a domino effect," Beaulieu-Gravel said. "The demands for the products increase sharply and unexpectedly on the market." While Nutramigen products are expected to be back on shelves by mid-June, Beaulieu-Gravel said AQPP isn't expecting the supply of Alimentum to return before the end of summer.

Masking strongly urged in Quebec pharmacies to protect vulnerable patients

Since May 16, wearing a mask is no longer mandatory in public places in Quebec, except on the

subway, bus and train and in taxis and health-care settings. In pharmacies, the situation is more delicate. The few pharmacies that [Le Devoir](#) (article in French) visited on May 16 all required their employees to wear a mask, as they are frequented by more vulnerable patients. “We strongly suggest that patients wear their masks near the pharmacy counter,” said Kathleen, a Jean-Coutu employee in Montreal. “But I’m happy to finally see smiles,” she added. Last week, the Order of Pharmacists of Quebec, associations of employee pharmacists, owner pharmacists, and pharmacy chains and banners released a joint statement encouraging the public to continue wearing masks in pharmacies. At a time when COVID-19 is still circulating, pharmacists in Quebec ask the public to protect patients and staff in order to avoid outbreaks and ensure the continued maintenance of operations and services to the public, the groups said.

Paxlovid can now be prescribed by pharmacists in NL

Pharmacists in Newfoundland and Labrador have played a role in the prevention of COVID-19 by administering vaccines to help prevent infection or serious illness from COVID-19, and now they can play a role in the cure, [Saltwire reports](#). Paxlovid, a combination of the antiviral drugs nirmatrelvir and ritonavir, stops the coronavirus from replicating and significantly reduces a person’s chances of becoming severely ill. On May 13, the provincial government amended regulations to allow pharmacists to test for COVID-19 in high-risk individuals and to prescribe Paxlovid if so indicated. The Pharmacists’ Association of Newfoundland and Labrador (PANL) waited until May 17 to announce the change to give the product a few days to show up on the shelves. “When the announcement goes out before the product is in place, it creates chaos,” association president Janice Audeau told the Telegram. Pharmacies can also issue a free rapid antigen test to diagnose the disease, but only under specific conditions.

MUN School of Pharmacy researching high blood pressure in NL

Memorial University’s School of Pharmacy used World Hypertension Day on May 17 as an opportunity to gather information for a research project on high blood pressure in Newfoundland and Labrador, [VOCM reports](#). The province has some of the highest rates of high blood pressure in the country—a condition that has few, if any, warning signs and is often called the “silent killer.” Untreated hypertension can lead to heart attack, stroke or serious kidney damage. Dr. Tiffany Lee, the lead researcher, said the study aims to learn more about the number of people in the community with hypertension by taking patients’ blood pressure at approximately 30 pharmacies across the province.

National

Federal government announces funding to expand access to abortion services

The federal government has announced more than \$3.5 million in funding for 2 initiatives it says will improve access to abortion services and reproductive health information in Canada, [CBC reports](#). Health Minister Jean-Yves Duclos announced that Action Canada would be getting \$2.1 million over 3 years to improve information and referral services. The funding will be used also to help cover travel and accommodation costs for people seeking abortions. National Abortion

Federation Canada will be getting \$1.4 million in funding over the same time period to help train health-care providers to perform abortions and ensure facilities have the capacity to provide the service. The minister said the funding is not new—it's coming from a spending commitment of \$45 million over 3 years that was announced in the recent federal budget. Duclos said 7 more announcements related to the fund will be made in the coming months. He did not provide specifics.

Medical association says health-care worker burnout has doubled since pandemic

The Canadian Medical Association (CMA) President Dr. Katharine Smart said the rate of burnout among health-care workers is double what it was pre-pandemic, [CTV reports](#). “Our health care system is at a level of crisis we’ve never really seen and the health workers are in a state of crisis we’ve never seen,” she said. CMA, the Canadian Nurses Association (CNA) and the College of Family Physicians of Canada (CFPC) have developed health human resources solutions designed to rebuild Canada’s health-care workforce. In the next 6 months, the groups want Ottawa and the provinces to create retention incentives for health-care workers as well as options like retention bonuses, tax incentives or loan forgiveness for new graduates. CMA, CNA and CFPC also want to see more mental health supports for workers and to find ways to trim time spent on paperwork. “Removing the administrative burden that nurses and other health-care workers have where they’re doing administrative tasks instead of actual nursing care would make a difference,” said Tim Guest, CEO of CNA. The groups also want provinces to build on virtual care models, invest in new training for doctors, nurses and nurse practitioners and support internationally trained professionals to get licensed in Canada. In the long-term, they want to see a pan-Canadian mental health plan for health-care workers and better data collection across health systems to support creating a health human resource plan for Canada.

International

US: COVID-related deaths pass more than 1 million

The US has passed more than 1 million COVID-related deaths, [BBC reports](#). President Joe Biden said the country was marking “a tragic milestone” and each death was “an irreplaceable loss.” It’s the highest official total in the world—although the World Health Organization believes the true death toll may be much higher elsewhere. The US has also recorded more than 80 million COVID-19 cases, out of a 330 million population. The first confirmed case was reported on January 20, 2020, when a man flew home to Seattle from Wuhan in China. In the 2 years since, death rates have ebbed and flowed as waves of the virus have swept across the country—reaching highs of more than 4000 a day in early 2021. Public health experts give several reasons for the high US death toll, including high rates of obesity and hypertension, overworked hospital systems, some vaccine hesitancy, and a large aging population.

US: FDA authorizes Pfizer COVID-19 booster shots for children ages 5 to 11

The US Food and Drug Administration (FDA) has granted emergency use authorization for a booster dose of Pfizer’s COVID-19 vaccine for children ages 5 to 11 at least 5 months after

completion of the primary vaccine series, [according to CNN](#). Pfizer requested the authorization at the end of April, citing company data that showed that a third vaccine dose raised Omicron-fighting antibodies by 36 times in this age group. The decision means anyone 5 and older is now eligible for at least 1 booster dose. Those who are 50 and older and people 12 and older who have certain kinds of immunocompromise are eligible for 2 booster doses. Moderna has also requested FDA authorization for a second COVID-19 booster shot for everyone 18 and older, but a decision has yet to be made regarding that request.

US: HPV ‘herd immunity’ now helping vaccinated, unvaccinated women

Vaccination against human papillomavirus (HPV)—the virus that causes most cervical cancers—has spurred a widespread reduction of infections among young Americans, including those who are unvaccinated, a new study funded by the US Centers for Disease Control and Prevention (CDC) finds. The [study](#), published in *Annals of Internal Medicine*, looked at the impact of the nation’s HPV vaccination program, which began in 2006. Researchers found that by 2018, the vaccine had cut the prevalence of cancer-causing HPV strains by 90% among vaccinated females between 14 and 24 years of age, [HealthDay News reports](#). There was also a 74% reduction among their unvaccinated counterparts, pointing to a “herd” effect—a sharp reduction in the circulation of a virus that affords protection for the whole population. “The decline among unvaccinated females suggests strong herd effects, or indirect protection, from the vaccination program,” lead researcher Dr. Hannah Rosenblum said. Experts stressed, however, that this does not mean kids should go unvaccinated and rely on herd protection. Herd effects only exist when a large portion of the population is vaccinated, said Dr. Rebecca Perkins, a professor of obstetrics and gynecology at Boston University’s School of Medicine. Instead, the findings offer more reason for parents to get their kids vaccinated against HPV on schedule, Perkins said.

UK: Pharmacies carry out 75 000 blood pressure checks in just over 7 months

Community pharmacies in England have carried out just over 75 000 blood pressure checks in the 7 months since the National Health Service (NHS) launched its hypertension case-finding service, [Chemist+Druggist reports](#). NHS England’s Chief Pharmaceutical Officer, David Webb, and Dr. Shahed Ahmad, NHS national clinical director for cardiovascular disease prevention, shared the figure [in a blog](#) commemorating World Hypertension Day on May 17. The pair also wrote that 6800 pharmacies have signed up to offer blood pressure checks since the service [launched in October 2021](#). Under the service, pharmacy teams can identify patients with undiagnosed hypertension by taking their blood pressure and, where necessary, they can offer ambulatory blood pressure monitoring. Webb and Ahmad said the service is “a significant development in clinical services being offered in the community.” It makes “greater use of community pharmacists’ clinical skills to support people manage [sic] their health, providing coordinated care for patients,” they said.

UK: RPS welcomes commission into professional leadership in pharmacy

The Royal Pharmaceutical Society (RPS) [welcomes](#) the recognition from the 4 chief pharmaceutical officers of the UK that both pharmacists and pharmacy technicians will be

supported in acquiring new skills to manage the ever more complex care that health care provides. Pharmacists will soon be qualifying with the ability to prescribe medicines, and an increasing number of pharmacists, in all sectors, are already practising at advancing levels of practice. “We believe strongly that the RPS is the organization that can set and assure standards of post-registration pharmacy practice. We have already taken a collaborative approach to develop a suite of post registration curricula across the UK to ensure safe and effective patient care. We will continue to work with the [General Pharmaceutical Council] and others on this developing program,” a statement reads.

UK: COVID-positive community pharmacy staff in Scotland will not go to work for 5 days

Community pharmacy staff in Scotland will not be required to work for a minimum of 5 full days if they test positive for COVID-19, [Pharmacy Business reports](#). Scottish Health Secretary Humza Yousaf has clarified that health and social care employees, including community pharmacists, will have to follow the new guidance from the National Health Service (NHS) on managing staff with symptoms of a respiratory infection or a positive COVID-19 test. In April, the Pharmacists Defence Association (PDA) reported that Well Pharmacy, one of the country’s largest pharmacy chains, had confirmed to the PDA that they were operating a policy that allowed members of staff who have a positive COVID-19 test to work in their pharmacies. The PDA is now calling on Well Pharmacy to urgently and publicly confirm they have amended their policy and will now follow the NHS guidelines across all of their operations throughout the UK. “This confirmation is critical for employed and locum pharmacists who may be Responsible Pharmacists in Well pharmacies, as well as for their teams and patients,” PDA said. Last week, the Royal Pharmaceutical Society also [recommended](#) that pharmacists and pharmacy staff should follow COVID-19 infection control procedures, including self-isolation.

Ireland: Pharmacists say workload is driving people from profession

Pharmacists say long hours in a high-stress environment with no breaks is driving them from well-paid community pharmacy jobs, [the Irish Times reports](#). Last week, the Irish Pharmacy Union (IPU) called on the government to create significant additional spaces in pharmacy schools and to allow recruitment of pharmacists from outside the EU. The IPU said it is taking an average of 5 months currently to fill vacancies, and up to 12 months in some cases. However, community pharmacists say the number of pharmacists is not the major issue. They say long hours, no breaks and being asked to forgo annual leave as pandemic increases pressure are reasons for the challenges in filling positions. They cite a massive increase in work during the pandemic when many general practitioners were no longer encouraging in-person visits. People went, instead, to pharmacies, which were open as essential services all through lockdown. Additional work was also taken on during the pandemic, particularly with the COVID-19 vaccination rollout. The IPU accepts that there is an exodus of staff, with many going to hospital pharmacies, industry or consulting, or cutting back to part-time work in search of shorter hours or a better work-life balance.

“We have not so much learned to live with COVID-19 as we have come to not really care any more about its lethal toll.” —the *Globe and Mail*'s André Picard [on the fact that Canada has recorded 40 000 COVID-19 deaths](#) with nary a shrug says a lot about how we have become inured to death

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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