



Canadian  
Pharmacists  
Association

Association des  
pharmaciens  
du Canada

# The Weekly

Bringing the world of pharmacy together

**June 22, 2022**

## **CPhA**

### ***Canada's first association for Indigenous pharmacy professionals launches at Canadian Pharmacy Conference***

Canada's first association representing Indigenous pharmacy professionals has hit the ground running with a plan of action focused on anti-Indigenous racism and discrimination in health care, [Canadian Healthcare Network reports](#). Indigenous Pharmacy Professionals of Canada (IPPC) launched during the Canadian Pharmacy Conference in Ottawa on June 10. IPPC is working with CPhA on a number of activities ranging from the development of pharmacy professional training programs on various topics—such as the application of Indigenous traditional medicine and how to best present risk factors for conditions such as diabetes and heart disease for racialized communities—to creating standards for building safe spaces for Indigenous pharmacy professionals and patients. “We want to make changes that are going to improve some of those foundational issues that are currently missing in addressing Indigenous health and Indigenous community supports,” said Amy Lamb, a Saskatchewan-based pharmacy practice consultant of Métis ancestry who is co-chairing the new association with pharmacist Jaris Swidrovich, a Two-Spirit Saulteaux First Nations and Ukrainian person from Yellow Quill First Nation in Saskatchewan. “We are working to prepare the systems in which we’re operating to be better equipped to have representation and empowerment for Indigenous Peoples.” For more on the work of the IPPC, check out an interview with the co-chairs [here](#).

***Baby formula shortage: Resource page for pharmacy professionals***

CPhA continues to be involved in discussions with Health Canada and others to stay updated on the hypoallergenic formula shortage and ensure that pharmacy is represented in the discussions. CPhA has published a new resource web page to pull together available information and resources for pharmacy professionals related to the shortage. The web page—available in [English](#) and [French](#)—includes information on managing supply, importation and labelling considerations. It also features a clinical decision-tree resource and information from Health Canada to assist in patient communication. CPhA will continue to update the web page as new information and resources arise.

### ***CPhA calls for reversal of PMPRB grandfathering approach to drugs***

In [a letter](#) to Canada's Health Minister Jean-Yves Duclos regarding revisions to Patented Medicine Prices Review Board (PMPRB) regulations, CPhA is calling for the permanent reversal of PMPRB's regulatory changes that would impact grandfathered medicines, such as drugs currently on the market. "Imposing a new framework that would cause drastic price reductions on drugs already on the market could potentially cause manufacturers to remove drugs from the market, disrupting access to medication," the letter states. "Furthermore, the financial impact on all actors within the supply chain cannot be overlooked, particularly during this time where the cost of doing business is rising and access to products and labour are at a premium." CPhA remains committed to supporting access to drugs for patients and continues to urge governments to consider a broad range of impacts as they make drug policy decision.

### ***Resource Round-up: Indigenous health***

Intergenerational trauma, health-care disparities and racism continue to undermine the health of Indigenous patients and their trust in the health-care system. As a key entry point to our health system, the pharmacy community has an essential role to play in implementing culturally safe, patient-centred care across Canada. CPhA's new [Resource Round-up](#) brings together some helpful resources to support you in your practice.

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## **Pharmacy on the front lines**

### ***'When is my turn?': Calgary pharmacists look for help as armed robberies increase***

With the number of armed robberies targeting Calgary pharmacies increasing, some pharmacists say they now feel like it's not a matter of "if," but "when" they'll be hit, [CTV reports](#). "We feel unsafe, we feel we are not protected by anyone. We're on our own trying to fend for ourselves basically," pharmacy owner Susan Zein said. "It's like a movie." Zein doesn't want CTV identifying her store because she's afraid it'll be targeted next. A recent string of crime in the area—seemingly in search of liquid narcotics and money—has her on edge. So too does a pharmacist-led group chat, which she says recounts horrifying stories almost weekly. "So basically from day-to-day, we are just thinking 'when is my turn?'" All community stores have been pushed by the Alberta College of Pharmacy to store narcotics in time-delayed safes. All locations are also encouraged to update their alarm and camera systems and consider limiting in-store traffic. Zein says many pharmacy owners in her group want stricter penalties for repeat

offenders and for the Calgary Police Service to monitor frequented locations. “That means the robbers are not fearing any consequences,” Zein said. “So definitely the legal system here as well is at fault.”

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## Provincial

### ***BC pharmacists asked to keep specialized baby formula behind the counter***

The BC government is asking pharmacies to keep a specialized form of baby formula behind the counter in order to preserve limited supplies, [Global News reports](#). In a June 17 [news release](#), the Ministry of Health said there is no shortage of normal baby formula, but that specialized hypoallergenic infant formula—needed by about 2% of babies—is in short supply. The shortage includes products with extensively hydrolyzed formulas and amino acid-based formulas. Families who need the products will also be limited to buying a 7- to 10-day supply at once, though pharmacists can make exceptions for people with barriers such as living in remote communities, according to the ministry. The ministry said the specialized formula, which is for babies with food allergies and certain medical conditions, is being distributed to pharmacies exclusively while supplies are short.

### ***Canada not likely to see a tampon shortage, Quebec pharmacy distributor says***

The Quebec Association of Pharmacy Distributors (AQDP) says the province should not see a shortage of tampons, as has been seen in the United States. AQDP general manager Hugues Mousseau explained that distributors have an inventory several weeks in advance. Therefore, even if a supplier runs out of a product, wholesalers will be able to clear that stock before it hits the shelves. “I had the chance to speak with the players in the feminine hygiene products category of each of the wholesalers over the last few hours and we are not experiencing, in Canada and Quebec, what the Americans are experiencing. So, there is no shortage situation,” Mousseau [told the Canadian Press](#). The AQDP supplies all 1900 pharmacies in Quebec. “By comparison, it took months after the closure of Abbott Nutrition’s baby formula plant in Michigan for the impact to be felt in Quebec,” he said. “The plant finally reopened in early June, but the shortage could last into the summer, according to Abbott Nutrition, which had closed its plant due to contamination.”

### ***NB pharmacies will no longer provide consumer incentives for prescriptions and pharmacy service***

At its annual general meeting, the New Brunswick College of Pharmacists [voted to remove](#) consumer-based incentives for patients in relation to prescriptions and pharmacy services. This means that pharmacies in New Brunswick will no longer be permitted to apply incentives, such as rewards on purchases, to prescriptions or pharmacy services. Incentives will continue to be permitted on items not requiring a prescription. New Brunswick becomes the seventh province to prohibit such consumer incentives on prescriptions and pharmacy services, along with British Columbia, Alberta, Ontario, Quebec, Prince Edward Island and Newfoundland and Labrador—representing more than 90% of the Canadian population. Incentives that will be prohibited on

prescriptions and pharmacy services are rewards, gifts, including gifts of cash, prizes, coupons, points or other mechanisms in inducement or loyalty programs that can be redeemed for rewards, gifts, cash, prizes, and other goods and services.

### ***Nova Scotia pharmacists stepping up to address gaps in health care***

Pharmacists in Nova Scotia are changing the way they operate to meet the growing needs of patients who can't find help elsewhere, [CBC reports](#). With a record 95 000 Nova Scotians currently registered on the province's waitlist for a family doctor, pharmacies are increasingly becoming people's go-to provider of primary care. "We never closed our doors through the entire pandemic. So we're hearing from people by phone, in person, through email, through other means, all the time, just looking for health-care advice," said Diane Harpell, a pharmacist and owner of the Medicine Shoppe in Dartmouth and the board chair for the Pharmacy Association of Nova Scotia. The influx of patients seeking care at pharmacies has led to longer than usual wait times, and in some cases, patients might be asked to book an appointment and come back at a later date. To improve access to health care in the province, pharmacists' [scope of practice has expanded](#) to allow assessing and prescribing for minor ailments and administering injections. "Everything that we do is to fill in those gaps in the health-care system," Harpell said.

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## **National**

### ***SDM recalls infant formula sold in error***

Shoppers Drug Mart (SDM) is recalling certain Abbott brand powdered infant formula products from the marketplace due to possible *Cronobacter sakazakii* and *Salmonella* contamination, [the Canadian Press reports](#). The warning notes that the products were [previously recalled](#) on February 17, 2022, but some units were sold online in error. Food contaminated with *C. sakazakii* and *Salmonella* may not look or smell spoiled but can still make you sick. Although *C. sakazakii* is not commonly linked to human illness, in rare cases it can cause serious or fatal infections. *Salmonella* may cause serious and sometimes deadly infections in young children, pregnant women, the elderly and people with weakened immune systems.

### ***High school students across Canada to be trained on how to administer naloxone***

Hundreds of thousands of high school students in Canada will be given training on how to respond to someone overdosing on opioids, including on how to administer naloxone—a drug used to reverse the effects of an overdose, [according to the Canadian Press](#). The Advanced Coronary Treatment Foundation says that its new training program will be added to the CPR and automated external defibrillator training it offers for free in high schools across the country. Each year, in addition to learning how to administer naloxone, about 350 000 students will learn about opioids and how to identify when to call 911, when to perform CPR and when to give naloxone. The training will first be deployed in Quebec, Alberta, Ontario and British Columbia before expanding to other provinces. The Public Health Agency of Canada (PHAC) reported more than 5386 deaths related to opioids between January and September 2021. The majority of the deaths—94%—were accidental. "Cardiac arrests, it doesn't happen to young people that much,"

said Jocelyn Barriault, the foundation's medical director. "But with opioids, there's a lot of chance that it's a peer, that it happens at school or at a party."

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## International

### ***US: Walmart raises wages of pharmacy workers in tight labour market***

Walmart said it will increase the average pay of pharmacy workers to more than US\$20 per hour and offer more frequent and automatic pay raises as part of a new "progressive wage model" to address a tight domestic labour market, [Reuters reports](#). The raises will be offered to more than 36 000 Walmart and Sam's Club pharmacy technicians beginning this week, the company said. The announcement marks the second pay increase over the past year for Walmart technicians, who last received hikes of at least US\$1 to their base pay in August 2021. There is currently a nationwide labour shortage caused by the COVID-19 pandemic that is forcing retailers to adapt by offering attractive incentives and pay increases. Pharmacy chains Walgreens and CVS also raised minimum wages to US\$15 per hour and doled out sign-on bonuses over the past year. A survey by the National Community Pharmacists Association (NCPA) last year found that more than a third of independent community pharmacies were having a hard time filling staff positions, with 88% stating that pharmacy technicians were in short supply. This was also leading to increased dispensing times.

### ***US: FTC to ramp up enforcement against any illegal rebate schemes, bribes to prescription drug middlemen that block cheaper drugs***

The Federal Trade Commission (FTC) announced it will [ramp up enforcement](#) against any illegal bribes and rebate schemes that block patients' access to competing lower-cost drugs. The [enforcement policy statement](#) puts drug companies and prescription drug middlemen on notice that paying rebates and fees to exclude competitors offering lower-cost drug alternatives can violate competition and consumer protection laws. The agency says it will use its full range of legal authorities to combat illegal prescription drug practices that foreclose competition and harm patients. "Today's action should put the entire prescription drug industry on notice: when we see illegal rebate practices that foreclose competition and raise prescription drug costs for families, we won't hesitate to bring our full authorities to bear," said FTC chair Lina Khan. "Protecting Americans from unlawful business practices that are raising drug prices is a top priority for the Commission."

### ***UK: Commission more pharmacy take-home naloxone services, review says***

While some pharmacies already offer the take-home naloxone (THN) service to some extent in different parts of the UK, the Advisory Council on the Misuse of Drugs (ACMD) argues that contractual arrangements for this service should be adopted across the UK, [Chemist+Druggist reports](#). This is one of 7 key recommendations put forward by the ACMD [in a report](#) that reviewed the availability and use of naloxone in the UK. Pharmacy teams should also receive training on how to "provide brief interventions related to THN and how to administer both intranasal and intramuscular naloxone," the ACMD added. A "UK-wide agreement on the specific

role of community pharmacies in supplying naloxone would be a useful way of promoting collaborative working in all areas of the UK,” the ACMD added. There are “many advantages” in having pharmacies supplying naloxone, “particularly as a core group of people using drugs will visit pharmacies to access opioid substitution.”

#### ***UK: Boots criticized over pill boxes for the elderly***

Some pharmacies run by Boots have been criticized for telling some patients on multiple drugs that they can no longer have blister pack boxes, also known as dosette boxes or multi-compartment compliance aids (MCCAs), [BBC reports](#). The weekly pill organizers can help users keep track of their daily medication and stay safe, but Boots says the aids are “not always the most appropriate option.” The latest [Royal Pharmaceutical Society \(RPS\) guidance](#) indicates that the use of multi-compartment compliance aids is not always the most appropriate option for patients that need support to take their medicines at the right dose and time,” a Boots spokesperson said. “Pharmacists are speaking with patients who we provide with MCCAs to discuss whether it is the right way to support them, depending on their individual circumstances and clinical needs. Alternative support might include large-print labels and a medicines reminder chart. In many cases, MCCAs will remain the most appropriate option for the patient, and we will continue to support them in this way.” The RPS guidelines add that dosette boxes are “one tool amongst many to help with medicines use but other interventions also exist, which as part of a person-centred and quality approach, must also be considered.”

#### ***UK: Pharmacists are well placed to help with early cancer detection***

A pilot study in community pharmacies in England to improve the early detection of cancer is a [welcome development](#), the Chair of RPS England Thorrun Govind says. “Pharmacists and their teams are well placed to raise awareness and help with the early detection of cancer. People with cancer often self-medicate during the early stages of the disease because they do not recognize their symptoms and have not yet sought advice from a health professional,” Govind said. “Their local community pharmacy is often where they first buy medicines to treat their symptoms. Community pharmacists and their teams have a key role to play in raising awareness of symptoms of different cancers amongst customers and ultimately facilitating early diagnosis through formal referral pathways. Access to the patient records is key to safely advise and input into their care,” she added.

#### ***Ireland: Dire shortage of pharmacists requires urgent action plan***

There is now an urgent need for a concerted action plan to address the growing shortage of community pharmacists, which [the Irish Pharmacy Union \(IPU\) believes](#) has the potential to impact the accessibility of pharmacy services for patients. The IPU has welcomed the addition of pharmacists to the list of occupations that qualify for expedited work permits but said it’s only a first step toward what is becoming a very acute issue, especially over the peak holiday season. “The majority of community pharmacists surveyed by the IPU now believe there is an insufficient number of pharmacists in our health care system to meet patient needs,” said IPU president Dermot Twomey. “This is a dire situation which could develop and has the potential to create

profound difficulties for patients, and immediate action needs to be taken to avoid this. These shortages will lead to pharmacies reducing their hours, reducing their services and in some cases may result in shortened hours or temporary closures.”

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## In Depth

### *Don't kid yourself, conspiracy theories are alive and well in Canada*

Are microchips secretly implanted in COVID-19 vaccines to control your behaviour? Of course not, you say. But the trickier question is this: How many Canadians believe differently? The answer is, well, hard to believe. One in 3 adults in Canada believes Microsoft founder Bill Gates is either monitoring people with vax chips, or they think it's possible, or they're just not sure—but can't rule it out. That leaves just 66% of Canadians who reject that particular conspiracy theory outright. According to new public opinion research by Abacus Data, it's not just the Gates microchip, but a host of hoaxes and top-secret cabals that are on the minds of Canadians—and causing them to lose their minds. [The Toronto Star looks at](#) the phenomenon.

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## Worth Repeating

“It's incredibly disappointing. That person who gets vilified in the grocery store, they're still wearing their mask because it's strongly recommended. They're following good advice to keep themselves and others safe.” —Maxwell Smith, a Western University bioethicist who studies the ethical dimensions of how people respond to infectious diseases, [commenting in the \*Globe and Mail\*](#) on how there is now a total inversion of social norms around masking, with those who continue covering up increasingly feeling like outsiders forced to justify their behaviour in public

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