



Canadian  
Pharmacists  
Association  
Association des  
pharmaciens  
du Canada

# The Weekly

Bringing the world of pharmacy together

**May 4, 2022**

**CPhA**

***Pandemic stress, increase in harassment and staffing challenges exact heavy toll on pharmacy professionals***

Preliminary [survey data](#) from the Canadian Pharmacy Mental Health and Workforce Wellness Survey reveals a concerning picture of the health of Canada's pharmacy workforce after more than 2 years on the front lines of the COVID-19 pandemic. The national survey of pharmacists and pharmacy technicians, conducted by Abacus Data, shows that only 1 in 5 considers their mental health and well-being to be "good" or "very good," and almost all pharmacy professionals (92%) are at risk of burnout. Adding to the pressure is an increase in frequent abuse and harassment with almost half (48%) experiencing abuse or harassment from patients at least weekly. "The unrelenting demands, coupled with added administrative burdens and staffing challenges have pushed us to a tipping point," says CPhA's Chief Pharmacist Officer Dr. Danielle Paes. CPhA continues to advocate and call on government to invest in mental health resources and supports for health-care providers and funding to help strengthen the pharmacy workforce, especially in rural and remote areas of the country. Survey results were presented and discussed with the pharmacy community during a national townhall on May 3. The survey is part of CPhA's Pharmacy Workforce Wellness initiative, which seeks to address the core causes driving stress and burnout in the profession, and identify solutions and strategies aimed at minimizing the impact of the pandemic and its effect on the pharmacy workforce. CPhA recently formed a multi-stakeholder steering committee with representatives from across the pharmacy

community to help advance this important initiative and ensure a healthy, sustainable and secure future for the pharmacy profession.

### ***Canadian Pharmacy Conference: Pharmacy Rising is selling out fast!***

The Canadian Pharmacy Conference: Pharmacy Rising is coming to Ottawa this June! Space is limited this year and is already more than 75% sold out. [Register now and check out](#) our lineup of keynote speakers and sessions.

### ***CPS social media contest: Share a photo of you and your copy of the Big Blue Book***

*CPS: Drug Information*, the most trustworthy drug information publication in Canada, which has been in print for more than 60 years, is going digital only and will publish its last print edition this year. In celebration of this milestone in *CPS* history, we're running a social media contest for the chance to win a tablet. To enter, take a photo of you and your copy of the Big Blue Book, post it on social media with #CPSPrint2022, and be sure you're following CPhA. The contest closes on May 6. Order your collector's print edition of *CPS* 2022 [here](#).

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## **Provincial**

### ***Red Tape Reduction Act aims to modernize AB pharmacy regulation***

The Government of Alberta is pursuing legislation that aims to modernize how pharmacies are regulated, [according to St. Albert Today](#). One change to the *Pharmacy and Drug Act*, which outlines how pharmacies are governed, will authorize the Alberta College of Pharmacy to create and enforce standards of practice geared toward pharmacy operations. Currently, these operations are addressed through government regulation—a process Greg Eberhart, college registrar, describes as complicated and time-consuming. Eberhart said the changes are not something patients will experience when they attend their pharmacy. One example he gave of how the change might be applied is allowing the college to consider more “innovative and contemporary” applications to license a pharmacy that doesn't fit within regulations that are “quite old.” “It's not uncommon for us in a changing environment to see applications where it feels like you're trying to fit a square peg in a round hole,” Eberhart said. “Sometimes [the applications] might be reasonable, but they just don't fit within the old regulations, so this allows us to be a little bit more dynamic.”

### ***68% of Paxlovid treatments in QC prescribed by pharmacists***

More than 68% of Paxlovid treatments—the oral antiviral against COVID-19—have been prescribed by pharmacists, [Le Devoir reports](#) (original article in French). Between the drug's arrival on the market in March and late April, just over 4500 patients were able to obtain the medication, which reduces the rate of complications of severe disease by 89% in people deemed to be at risk, according to the Quebec Ministry of Health and Social Services. Since the introduction of the pharmacy distribution program on April 1, which allows access to treatment without consulting a physician, the rate of prescription has accelerated. According to Quebec's pharmacy association, AQPP, more than 8000 doses are available in pharmacies, in addition to

others on request. The preventive medication, intended for people who are at high risk or unvaccinated and have comorbidity factors like obesity, hypertension and diabetes can also be prescribed by a specialized nurse practitioner. The many interactions of Paxlovid with drugs often prescribed to patients with comorbidities, however, limits its use. It must also be taken within 5 days of infection to be the most effective.

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## National

### ***Mental health in primary care: The essential role of the pharmacist***

In the third live session of a 4-part series for Mental Health Week exploring how mental-health care can be successfully integrated into primary health-care systems, Senator Stan Kutcher spoke to pharmacist and professor of psychiatry David Gardner on the role community pharmacists play in providing primary mental-health care. Gardner is also the co-lead of the Bloom Program in Nova Scotia—a community pharmacy initiative designed to increase and improve mental health and addictions care. The session recording is available [on YouTube](#).

### ***Moderna submits COVID-19 vaccine for kids 5 and under to Health Canada for review***

Moderna has asked Health Canada to approve its COVID-19 vaccine for children as young as 6 months old a day after requesting US regulators do the same, [Global News reports](#). If approved, it would be the first COVID-19 vaccine for children under 5 in Canada—an age group that has remained ineligible for inoculation since the vaccine rollout began in late 2020. Moderna Canada submitted its vaccine candidate for children between 6 months and 5 years old for review on April 28, a spokesperson told Global News. Health Canada [updated its submission page](#) confirming its receipt.

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## International

### ***US: With supply more abundant, pharmacies struggle to use up COVID-19 antivirals***

The national rollout of Paxlovid, which the Food and Drug Administration (FDA) authorized for emergency use in December, has been far more complicated and less efficient than expected, leaving hundreds of thousands of courses unused as cases of the Omicron subvariant BA.2 surge, [the New York Times reports](#). The first-of-its-kind treatment, authorized for COVID-19 patients 12 and older who are at risk of severe illness, remained out of reach for many Americans for months as production ramped up. But with the medication now more abundant, pharmacists, public health experts and state health officials say that encouraging the right people to take it and making it easier for them to access could help blunt the effects of another COVID-19 wave. Giving pharmacists prescribing power could help people get the treatment much more quickly and easily, public health experts say. But regulators at the FDA and other federal health officials believe there is reason not to allow pharmacists to prescribe Paxlovid themselves, even though [some Canadian pharmacists](#) can do so. The treatment can interfere with certain medications and should be prescribed at a lower dose for people with kidney impairment, which is measured with a blood test. Pharmacists say they are highly trained and

well equipped to conduct such screening themselves. Michael Ganio, senior director of pharmacy practice and quality at the American Society of Health-System Pharmacists, said pharmacists could get Paxlovid to patients faster if they could prescribe it, “without having to call a physician’s office and wait for a call back, and hope it happens within 5-day period.”

***US: Pediatricians, not pharmacies, will be largely administering COVID-19 vaccines to the youngest kids***

It’s been a difficult road to get COVID-19 shots for children under 5, although a vaccine could become available next month. But unlike prior age groups, many kids likely won’t be receiving their vaccines in pharmacies, [the Washington Post reports](#). That’s partly because the majority of states prohibit pharmacists from vaccinating children under 3. Even in areas where it’s allowed, pharmacies are wrestling with whether to administer shots to the youngest kids. Some may decide not to, depending on the comfort level of their staff, corporate rules and whether they have the space for such a setup. “It’s a lot to take on for pharmacies,” said Claire Hannan, the executive director of the Association of Immunization Managers. There’s a recognition that rolling out shots for kids will be different. Pharmacists in just roughly 23 states are allowed to administer coronavirus vaccines to children under 3 due to the state scope of practice laws. Yet, some states may require a prescription before doing so or have other requirements, according to Allie Jo Shipman, the director of state policy at the National Alliance of State Pharmacy Associations.

***UK: Reliance and Apollo Global team up on Boots pharmacy chain takeover bid***

Indian investment firm Reliance Industries is teaming up with US private equity company Apollo Global Management in an effort to buy UK pharmacy chain Boots from the Walgreens Boots Alliance, [Pymnts reports](#). If the joint bid is successful, Boots would add locations across India, Southeast Asia and the Middle East. It’s unclear whether Reliance or Apollo would own a bigger share of Boots, but both would own equity stakes in the pharmacy empire if their bid is accepted. Walgreens Boots Alliance has not commented on the Reliance-Apollo planned bid. Walgreens Boots Alliance put Boots on the block in December as part of its plan to focus on growing its US-based health-care segment, with a May 16 deadline for bids. The sale could be in the range of \$6.2 billion to almost \$7.5 billion, [according to the Financial Times](#).

***UK: Pharmacies in Wales to help GPs prescribe medicine to patients***

Nearly a third of community pharmacies in Wales should be able to prescribe medicines for National Health Service (NHS) patients, including antibiotics, by the end of this year, [according to BBC](#). It’s the first new service of its kind in the UK. The aim is to take the pressure off general practitioners at a time of increasing strain on the NHS. Scotland has adopted a similar approach, but England and Northern Ireland have not so far. Community pharmacies in Wales are allowed to offer prescriptions of medicines for acute illnesses such as urinary tract and respiratory infections, gout and chronic pain, as well as emergency contraception—if they have a pharmacist who has had extra training for prescribing. For most patients, that will be more convenient and avoid waits for general practitioner appointments. The plan is to roll out the service progressively across Wales, building on local initiatives already in place.

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## In Depth

### ***Canada detects severe hepatitis of ‘unknown origin’ cases in kids. What is it?***

Canadian health officials are investigating cases of severe acute hepatitis of “unknown origin” found in children across the country. The Public Health Agency of Canada (PHAC) is aware of reports of this illness as other regions in the world report cases of liver disease in kids with an unknown cause. “These are being investigated further to determine if they are related to cases in the United Kingdom and the United States,” PHAC said. “As the investigation evolves, we will keep the public updated accordingly.” [Global News looks at](#) what’s happening and what we know so far.

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## Worth Repeating

“They faced the same pressures and concerns as every other health care profession. They are burnt out and they are tired. Not saying it’s an excuse, but the hours have been very long and a lot of pharmacies were available 24 hours a day, 7 days a week when you couldn’t get to another health care professional. They put in a lot of hours and they are tired but they want to make sure people are safe and healthy.” —Pharmacy Association of Saskatchewan’s Michael Fougere [on how pharmacists have been feeling](#) the effects of the extra hours put in during the COVID-19 pandemic.

“Governments need to stop pretending that the COVID-19 virus is history. Instead, they need to keep the focus on taking steps to make sure the pandemic really does become history. That means constant reminders of the importance of getting a jab, and making vaccines as easy as possible to get.” —An [editorial from the Globe and Mail](#), which says getting the COVID-19 vaccine is a “way of preventing an unpleasant medical procedure tomorrow, by taking a simple preventive measure today.”

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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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