



Canadian  
Pharmacists  
Association

Association des  
pharmaciens  
du Canada

# The Weekly

Bringing the world of pharmacy together

## October 5, 2022

### CPhA

***New Indigenous-led association sets sights on supporting Indigenous pharmacy professionals and improving health care for Indigenous patients***

Indigenous pharmacy professionals across Canada have come together to create the [Indigenous Pharmacy Professionals of Canada](#) (IPPC)—a new association with the goal of building a supportive community for the country's Indigenous pharmacy professionals. First announced at the Canadian Pharmacy Conference in June by IPPC co-chairs Dr. Jaris Swidrovich and Amy Lamb, the association will help build a foundation for anti-racism, anti-oppression and cultural safety in the delivery of pharmacy care to and by Indigenous Peoples in Canada. "Recognizing that pharmacy professionals are among the most accessible health-care professionals and knowing that the greatest gaps in health outcomes experienced by people in Canada are between Indigenous and non-Indigenous Peoples, we are well positioned to lead the way in identifying and addressing the historical and ongoing policies, practices and racism that are at play in creating and re-creating these gaps," Swidrovich said [in a news release](#). In addition to improving the pharmacy care delivered to Indigenous patients, the IPPC wants Indigenous Peoples across Canada to see themselves reflected in the profession and feel a sense of belonging throughout their educational and career journeys in pharmacy. "The

IPPC will help foster collaboration and meaningful change within the pharmacy profession to help dismantle systemic racism and ensure that the pharmacy space is a safe and welcoming environment for all people in Canada,” said Dr. Danielle Paes, CPhA’s chief pharmacist officer. Follow IPPC on [Twitter](#) and [Instagram](#).

### ***New resource for parents and caregivers navigating shortage of children’s fever and pain medication***

In light of the current supply challenges affecting infant and children’s fever and pain medication, CPhA has collaborated on a new patient resource to offer guidance to parents and caregivers, including when to speak with a health-care professional for advice. The resource was developed in collaboration with the Children’s Hospital of Eastern Ontario, Canadian Paediatric Society, BC Children’s Hospital, IWK Health, and Moms & Kids Health Saskatchewan. The resource is available in [English](#) and [French](#).

### ***CPhA’s CPO on advocacy and leadership***

In a [recent blog post](#), CPhA’s CPO, Dr. Danielle Paes, reflected on what advocacy means for pharmacy practice in Canada and her role as a pharmacy advocate. “I’ve come to the conclusion that it’s actually quite simple when you think about it: We all have the opportunity to help redefine the face of pharmacy practice in Canada by being an advocate,” she wrote. “We do it by showing up and representing the profession to the best of our ability, by fulfilling our duties as licensed pharmacists. You never know who is going to walk through the pharmacy doors each day, and what tables they may bring their experiences to after they leave.”

### ***HPV Prevention Week: What pharmacists can do***

This week is Human Papillomavirus (HPV) Prevention Week in Canada. This year’s theme—Canada versus HPV—encourages health-care professionals, patients, government and industry to work together to educate Canadians and close the preventative care gap. HPV is preventable with vaccination, but already low immunization rates have been made worse by the pandemic, according to a recent article published in the *Canadian Pharmacists Journal* (CPJ) that highlights what pharmacists can do to help improve HPV

vaccination rates. [Check out the article](#) in the September/October issue of *CPJ*.

### ***CPhA influenza content: Updates for 2022–23***

Updated for the 2022–23 flu season, *Influenza* includes the latest information and evidence related to the prevention and treatment of influenza. [Log in to CPS](#) to see the updates.

---

## **Pharmacy on the front lines**

### ***Saskatoon, SK, pharmacy looking to tackle kids Advil, Tylenol shortage***

Saskatoon's Nanogram Pharmacy and Alberta pharma tech company KemNet Inc. have teamed up to tackle the ongoing shortage of children's Advil and Tylenol in Saskatchewan, [Global News reports](#). Their goal is to provide Saskatchewan residents with easy access to the popular kids medication through a new online ordering platform by KemNet. "Many of the phone calls that come into our pharmacy are from parents who have run out of acetaminophen (Tylenol) or have heard about the shortage," said Stephanie Yeboah, the manager at Nanogram Pharmacy. "We get a call about probably about every 5 to 10 minutes." The specialty compounding pharmacy provides drug compounding services for fertility, hormone, skin, pain medications and animals. Yeboah said Nanogram Pharmacy can now fill doctors' prescriptions for children's Tylenol and Advil that are being placed on KemNet's system. KemNet founder and CEO Morenike Oladsebikan said its facility in Edmonton began stockpiling ingredients needed to supply these meds after learning about the shortage. Yeboah wants parents to know that the shortage won't last forever, but in the meantime, there is an alternative.

### ***Cambridge, ON, pharmacy sees influx of bookings since new bivalent booster rollout***

Though many residents were unsure about getting the new bivalent booster, Bryan Langel said he's received a pretty warm response to the vaccine from the patients of his pharmacy. Langel is the owner and pharmacist at the Shoppers Drug Mart in Cambridge, Ontario. "For most people this isn't their

first vaccine so we're not getting too many questions about efficacy or anything like that," he [told CityNews](#). Ontarians aged 18 or older became eligible to receive an Omicron-targeted COVID-19 vaccine on September 26. Langel said his pharmacy has received over 500 doses, but more will be made available should the demand require it. "I do fully expect us to have to re-order and, in fact, we do re-order on a weekly basis," he said. "It's something that the ministry has allowed us to be able to do to get in what the public has requested of us. This is why it's so important that residents book appointments because it gives us the ability to order in advance for what people may need." On average, his pharmacy is administering 50 to 70 doses per day of the new booster. "Every time there's a new vaccine released to the 18+ public, we do see a huge influx of customers and patients for that," Langel said. "It does tend to [wean] over time, naturally but it's something that we've grown to expect and we've gotten used to since the original rollout of the vaccines."

---

## Provincial

### ***BC pharmacists will now be allowed to renew prescriptions as family doctor crisis lags on***

Pharmacists in British Columbia will soon be able to refill and renew prescriptions for those without a family doctor as well as prescribe medication for a range of ailments, [CHEK News reports](#). Starting October 14, pharmacists will be able to renew prescriptions for chronic conditions and refill existing valid prescriptions for up to 2 years for those who have difficulty accessing a family doctor or don't have one, the BC government announced on September 29. Minister of Health Adrian Dix called the changes significant and said it brings BC in line with other provinces. Starting in 2023, pharmacists will also be able to issue prescriptions for contraception as well as less acute ailments such as allergies, indigestion, urinary tract infections and acne. The changes are intended to take the pressure off the province's primary-care system and reduce emergency room wait-times. Jamie Wigston, president of the BC Pharmacy Association, said the changes will help many individuals who struggle to get a prescription refilled or renewed through primary care. He also said the changes will benefit those who live in rural or smaller communities where there may be a pharmacy but a medical clinic or primary care may be hours away. "This is especially important to individuals dealing with mental

health and substance use disorders who need access to their medication in a timely and critical manner,” Wigston said.

***Refilling some prescriptions at pharmacy doesn't solve BC's health-care problems: pharmacist***

Local pharmacies are welcoming the news that they will soon be able to refill some prescriptions for customers who don't have a family doctor. But they agree with doctors who have said the change is not a long-term solution to the shortage of physicians. Overall, however, it's really needed right now, Moez Karim, pharmacy manager at The Pharmacy in Langley, [told the Vancouver Sun](#). “A lot of patients, especially in this area, they're either seniors or they have real difficulty getting access to doctors and their family doctors. Often times, they are seeing them on the phone,” Karim said. “I think they're falling through the cracks. This is one way of reducing their stress.” Minister of Health Adrian Dix announced last week that, starting October 14, pharmacists across BC will be able to renew prescriptions for a wider range of medications as part of a 5-year plan to deal with BC's overburdened health-care system, which is suffering from a shortage of doctors, nurses and paramedics. From his vantage point at the local pharmacy, Karim said he can see that customers are very frustrated right now. “You can't find doctors that are going to accept patients. And doctors are retiring. It's a real problem for them. So, this is one move. I think it's a temporary solution.” Dr. Ramneek Dosanjh, president of Doctors of BC, said at a news conference in August that expanding the powers available to pharmacists is not the best way to support family doctors. “We have a crumbling foundation of our primary care system. And that is what we need to support.” Karim said that some doctors may see the shift as a threat, but for patients, there are many positive aspects to pharmacists being able to offer more primary care.

***Province encouraging SK residents to turn in unused prescription drugs***

Do not flush your expired pills down the toilet or toss them in the trash — instead bring them to a pharmacy for safe disposal. That's the message from the Government of Saskatchewan and the Pharmacy Association of Saskatchewan as part of a campaign encouraging people to turn in unused or expired medication to local pharmacies, [the Regina Leader-Post reports](#). Michael Fougere, CEO of the Pharmacy Association of Saskatchewan, said province-wide programs exist for pharmacies to safely dispose of unused

prescription drugs, but this campaign is a way to “up the ante.” Everett Hindley, minister of mental health and addictions, said this program is part of the government’s Pillars of Life plan, focused on reducing suicides in Saskatchewan. “The goal of this initiative is to remove medication as a potential means of intentional or accidental drug poisoning,” Hindley said. The drugs will be incinerated, according to Beth Scott, pharmacy manager at Save-On-Foods in south Regina. “It’s something that we’ve certainly done for a long time,” she said. “This campaign really elevates the existing program so that people know how to bring their stuff back.”

### ***NS pharmacists celebrate milestone: 1.5M COVID-19 vaccines***

Nova Scotia pharmacists have 1.5 million reasons to celebrate pharmacy, according to the Pharmacy Association of Nova Scotia. As of September 30, 1.5 million doses of COVID-19 vaccines have been administered by pharmacy teams in the province, the association [announced on social media](#) with a [celebratory video](#).

---

## **National**

### ***Opioid-related deaths in Canada nearly doubled during COVID-19 pandemic***

Deaths from opioid toxicity nearly doubled in the first 2 years of the COVID-19 pandemic compared with the 2 years before, according to a [grim new report](#) from the federal government that reflects a worsening of the toxic drugs epidemic. The research, released September 28 by the Public Health Agency of Canada, attributes the increase in mortality to a toxic street drug supply, interruptions to health services, and feelings of isolation, stress and anxiety—all of which it says became more acute during the pandemic. Between April 2020 and March 2022, at least 15 134 people across the country died of apparent opioid toxicity, according to the report. That is a 91% increase from the 7906 deaths that occurred in the 2 years prior to the pandemic. British Columbia, Alberta and Ontario continue to see the majority of opioid-related deaths. The 3 provinces account for about 90% of them in Canada so far this year. Carolyn Bennett, the federal Minister of Mental Health and Addictions, called the deaths “heartbreaking.” “For every one of them, there’s a whole family and a community that is grieving not only the loss, but [wondering],

could they have done something?” she [told the \*Globe and Mail\*](#). Between January 2016 and March 2022, at least 30 843 people in Canada died of apparent opioid toxicity, according to separate national data that was also released on September 28.

---

## International

### ***US: Walgreens will use robots to fill prescriptions to free up pharmacists***

Walgreens Boots Alliance Inc. is turning to robots to ease workloads at pharmacies as it grapples with a nationwide shortage of pharmacists and pharmacy technicians, [MarketWatch reports](#). The nation’s second-largest pharmacy chain is setting up a network of automated, centralized drug-filling centres that could fill a city block. Rows of yellow robotic arms bend and rotate as they sort and bottle multicoloured pills, sending them down conveyor belts. The company said the setup cuts pharmacists’ workloads by at least 25% and will save Walgreens more than US\$1 billion a year. The ultimate goal is to give pharmacists more time to provide medical services such as vaccinations, patient outreach and prescribing of some medications. Those services are a relatively new and growing revenue stream for drug stores, which are increasingly able to bill insurers for some clinical services. “This frees up the capacity of our most skilled professionals,” said Rina Shah, the vice-president overseeing pharmacy strategy at Walgreens. “We looked at our system and said, ‘Why are we filling prescriptions the way we did in 1995?’” The COVID-19 pandemic increased the demands on pharmacies as they expanded into testing and vaccinations, putting pressure on staff and creating a shortfall of pharmacists that many chains have struggled to fill. Walgreens has reduced pharmacy hours at a third of its nearly 9000 US stores and is offering signing bonuses of up to US\$75,000 to fill pharmacist jobs in some areas.

### ***UK: Pharmacies could become “prime location” for range of vaccinations, PSNC says***

Community pharmacies in England could become a “prime location” for the provision of a wider range of vaccinations, helping the National Health Service (NHS) tackle low uptake levels, the Pharmaceutical Services Negotiating Committee (PSNC) has suggested, [according to Chemist+Druggist](#). Following a “significant growth” in number of flu shots administered by pharmacists, the



public recognizes the “sector’s accessibility as a place to be vaccinated and the quality of the service being provided,” PSNC said [in its response](#) to NHS England’s market engagement on the future of vaccination services. “Taking the convenience of the community pharmacy vaccination offer, aligned with the ability to also engage with less well served groups in the population, we believe pharmacies are well placed to become a prime location for the provision of a wide range of NHS vaccination programmes,” PSNC said. The negotiator envisages a model where integrated care boards commission local services using nationally developed directions. “Such an approach would allow local flexibility and innovation, while also reducing the hurdles that need to be overcome to commission a service from scratch at a local level,” it added. Commenting on PSNC’s suggestions, director of NHS services Alastair Buxton stressed that using pharmacies to deliver a range of NHS vaccinations “makes perfect sense.” “In the longer term, if the right funding and support is in place, many pharmacies could help deliver a much wider range of NHS vaccination programmes—giving the public the convenience and service that they want, and taking pressure off our general practice colleagues,” he said.

### ***Australia: Queensland’s UTI service made permanent***

The Queensland Urinary Tract Infection (UTI) pharmacy pilot has now been made a permanent service, in a move welcomed by the Pharmacy Guild of Australia, [the Australian Journal of Pharmacy reports](#). “Today marks a historic day for women’s health care in Queensland, with the permanent continuation of community pharmacists being able to diagnose and treat women suffering from a non-complex urinary tract infection,” said Chris Owen, president of the Guild’s Queensland branch. Beginning October 1, women can access the urinary tract infection health service through their local participating community pharmacy. “This means women won’t have to suffer the painful symptoms of a UTI while waiting for a doctor’s appointment or visiting an emergency department,” Owen said [in a news release](#). The announcement follows the pilot program, which was commissioned by Queensland Health. An independent review found the pilot service improved accessibility to primary health-care services, was convenient and resolved women’s symptoms in 87% of cases. The Guild is now calling for the service to go nationwide, as the increased scope of practice follows countries like England, Wales, New Zealand and Canada.

---



## Worth Repeating

“We don’t have a singular health system, but our 15 health systems all have common challenges that require similar solutions, and there is no lack of good ideas. There is no lack of innovation. What we have is an implementation crisis and a lack of urgency.” —The *Globe and Mail*’s André Picard [on why bold, structural reform is the only way](#) to fix Canada’s broken health care system

---

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.

Canadian Pharmacists Association  
851 Industrial Avenue, Mailbox M035  
Ottawa, ON K1G 4L3  
[Contact Us](#)