

Subject: The Weekly: CPhA’s Pharmacy News Update for September 7

From: Canadian Pharmacists Association <advocacy@pharmacists.ca>

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The Weekly

Bringing the world of pharmacy together

September 7, 2022

CPhA

CPhA condemns violence against pharmacists and high rates of abuse and harassment of health workers

CPhA is [deeply concerned](#) about reports of a [recent physical assault of a pharmacist](#) in Kitchener, Ontario. The association strongly condemns any violence, abuse or harassment targeting health workers and stand with Canada’s pharmacy professionals and other health workers across the country. “Violence against health-care workers cannot be tolerated,” said Dr. Danielle Paes, chief pharmacist officer. “Pharmacy professionals and our health-care colleagues have dedicated so much to protect our communities, and we need to protect them too. No pharmacist should live in fear of violence for caring for their patients.” Unfortunately, the abuse and harassment of our health-care workers is a frequent occurrence. According to a [recent Abacus Data survey](#) commissioned by CPhA, 48% of working pharmacy professionals experience abuse or harassment at least weekly, and almost a quarter experience it daily. Abuse

and harassment are major contributors to the growing mental health challenges and high rates of burnout pharmacy professionals are experiencing. “The pandemic has taken a significant toll on our pharmacy teams and the high rates of abuse and harassment they experience are disturbing and unacceptable,” Paes added. “This is a significant concern shared across the health-care system.”

Baby formula shortage: Updated resources

While Health Canada’s efforts to import products to help alleviate the impact of the hypoallergenic baby formula shortage is helping to stabilize the supply situation, Health Canada continues to work to raise awareness about imported/available products with caregivers and health professionals. These products now represent a large proportion of current stock. To that end, Health Canada recently updated the [decision-tree resource](#) to include information about imported products and developed a [list of available products](#) that can be printed and used as signage on pharmacy shelves to help inform patients of what may be available. Information and material continue to be updated on CPhA’s resource page for pharmacy professionals, which can be accessed in [English](#) and [French](#).

Upcoming webinar: Protecting your at-risk patients from respiratory infections is as easy as 1-2-3

Every year, community-acquired pneumonia is associated with significant morbidity and mortality. Many patients are concerned about their risk of pneumonia but are unaware of the different vaccine options that have been shown to lower their risk. Join us on September 14 from 12:00–1:00pm ET to learn about the impact of pneumococcal disease and the new vaccine options for at-risk patients. *This webinar is being hosted by CPhA on behalf of Pfizer and is not accredited.* [Register now.](#)

Provincial

BC pharmacists offer to prescribe medications for minor ailments to help ease pressures on doctors

It’s been 9 months since Pourya Eslami completed his Doctor of Pharmacy program at the University of British Columbia, and already he sees serious gaps in the health-care system. In a province where almost a million people are without a family doctor, Eslami believes pharmacists could play an important role in taking pressure off the primary-care system if they were given the ability to prescribe medication for minor ailments. “It is frustrating for us, but more so for the patient,” Eslami [told the Vancouver Sun](#). “There is this pool of knowledge and skills that is not being used despite our current [family doctor] shortage.” Allowing pharmacists to prescribe some medications is a strategy being used in Alberta and will soon take effect in Ontario.

While BC's health minister said it is an option on the table, there has been no firm commitment. The BC Pharmacy Association (BCPhA) has been pressing the government for months to give community pharmacists the power to prescribe medication for self-diagnosed minor or common ailments. "In other provinces and around the globe, community pharmacists have prescribing authority for a range of self-diagnosable, limited conditions," BCPhA wrote in a 2021 budget submission. Expanded powers for pharmacists could be especially important in rural and remote communities where people have even more limited access to physicians, the association said.

OPA condemns acts of violence against pharmacy professionals

The Ontario Pharmacists Association (OPA) has condemned the physical and verbal assault of a pharmacist last week in Kitchener, Ontario. "Our hearts are with the pharmacist who suffered injuries in this terrible incident, and we extend our deepest sympathies. There has never been a more important time to stand up for pharmacy professionals and condemn threats and acts of violence. Incidents like this are simply not acceptable," the association wrote [in a statement](#). OPA said it will continue to work alongside the Ontario College of Pharmacy and key stakeholders on initiatives to protect pharmacy professionals from violence.

Brantford, ON, pharmacist taking medicine to flood-ravaged Pakistan

A Brantford, Ontario, pharmacist is heading to Pakistan to deliver medicine to people who have lost their homes, livelihood and loved ones to flooding, [the Brantford Expositor reports](#). "The situation is very critical," said Anwar Dost, owner of CenPro Pharmacy. An unprecedented amount of rainfall that began in June has put a third of Pakistan underwater and killed more than 1 100 people, including at least 380 children. Dost is being kept up to date on the situation in Pakistan by Salashuddin Zia, the CEO of Can-Pak Health and Education—a Brantford-based registered charitable organization established by Dost and his wife, Dr. Ismat Dost. Zia, who is in Karachi, Pakistan, said disease has emerged as a major problem for those who have survived the flooding. CenPro is donating \$10,000 worth of medication, which Dost will deliver when he leaves for Pakistan in about 2 weeks. "One of the biggest problems now is the mosquitoes and the diseases that come with them, like malaria and dengue," Dost said.

Nova Scotia to include bivalent COVID-19 vaccine in fall booster campaign

Moderna's Omicron-targeting bivalent vaccine, which was approved September 1 by Health Canada, will be ready for use when the fall booster campaign begins on September 19, according to Allison Bodnar, the CEO of the Pharmacy Association of Nova Scotia (PANS). However, she said it's not clear who will initially be eligible to get the shot. "There will be restrictions on who can book the new bivalent [vaccine],"

Bodnar [told CTV](#). “Just like in the early days of COVID-19, the new vaccine means a limited supply comes into the province. And that supply comes in over a period of weeks and months . . . it doesn’t all come in at once.” PANS said booster uptake is declining across the province, compared to previous vaccines. More than 84% of Nova Scotians have 2 doses while only 50% have received their third dose. Bodnar said it could be a combination of COVID-19 fatigue and the fact so many have been infected by the highly contagious Omicron variant this summer. “There’s been a high degree of infection over the summer and those individuals will not be eligible to have their vaccine until 160 days expires,” Bodnar said.

National

Health Canada approves first bivalent COVID-19 vaccine that targets Omicron variant

Health Canada has approved an updated version of Moderna’s COVID-19 vaccine that specifically targets the Omicron variant, making it the first “bivalent” COVID-19 vaccine cleared for use in this country, [the Globe and Mail reports](#). The federal department has authorized the updated formulation for use as a booster shot in adults. It offers better protection against Omicron BA.1—the initial strain of the Omicron variant of COVID-19—than Moderna’s original vaccine, according to a study comparing the 2 versions. Health Canada has said the new vaccine is also effective against more recent Omicron subvariants, which have accounted for a growing number of Canada’s COVID-19 infections in recent months. The approval marks a new stage in the pandemic—one where edits to mRNA vaccines allow for a nearly real-time response to the virus’ shifting profile.

International

US: CVS makes \$8 billion bet on the return of the house call

Pharmacy giant CVS Health is buying Signify Health, which runs a network of doctors making house calls, for roughly US\$8 billion in a deal that cements the pharmacy chain’s move away from its traditional retail roots, [the New York Times reports](#). The deal, if approved by shareholders and regulators, gives CVS, which has nearly 10 000 stores nationwide, a new way to reach its customers: at home. Pharmacies like CVS have been searching for new ways to reach out to their large customer base, particularly as consumers increasingly head online for the everyday items that used to draw them into stores. In acquiring Signify, CVS gets a company that offers analytics and technology to help a network of 10 000 doctors provide in-home health care to 2.5

million patients across the US. Signify has a focus on those on Medicare and in underserved communities. “CVS doesn’t want to sell us just prescriptions and toothpaste; it wants to be our primary care provider,” said Erik Gordon, a professor at the University of Michigan’s Ross School of Business. CVS has been whittling down its store base as it has pushed further into health care. The retailer said last year that it would close roughly 900 outlets over 3 years. Its executives told analysts last month that the chain was looking to tack on new health services and ways to deliver that service, including in the home, through deals.

US: Abortion pill providers experiment with ways to broaden access

As bans and restrictions proliferate across the country, abortion pill providers are pushing the envelope of regulations and laws to meet the surging demand for medication abortion in post-Roe America, [the New York Times explains](#). Some are using physician discretion to prescribe pills to patients further along in pregnancy than the 10-week limit set by the US Food and Drug Administration (FDA). Some are making pills available to women who are not pregnant but feel they could need them someday. Some are employing a don’t-ask-don’t-tell approach, providing telemedicine consultations and prescriptions without verifying that patients are in states that permit abortion.

US: Florida sues FDA over drug importation plan

Florida Governor Ron DeSantis is accusing the US Food and Drug Administration (FDA) of delaying approval for the state health agency’s proposal to import cheaper drugs from Canada, according to a [lawsuit filed](#) on August 31. The case is based on legislation passed in June 2019, known as the Canadian Prescription Drug Importation Program, which needs the FDA’s approval before it can be implemented. Since November 2020, the proposal has been pending and the agency “declined to provide any timeline for future actions,” according to court documents. Florida has funneled more than US\$24 million into the program, which the state government expects to annually save Florida US\$150 million, the lawsuit says. “The lack of transparency by the Biden administration during the approval process, and failure to provide records on the importation proposal, is costing Floridians who are facing rising prices across the board due to inflation,” DeSantis said [in a news release](#). “Florida is confident in our importation model, and we continue to look for more ways to lower drug costs for Floridians while the FDA delays approval of this importation proposal.” President Joe Biden [signed an executive order](#) on July 9, 2021, instructing the FDA to allow for the US to import safe, cheaper drugs from Canada. For more than a year, the agency failed to respond to the executive order, according to the lawsuit.

US: J&J to pay \$40.5 million to settle New Hampshire opioid lawsuit

Johnson & Johnson (J&J) has agreed to pay US\$40.5 million to settle New Hampshire's claims over the company's role in the US opioid epidemic, averting a trial that had been scheduled to begin this week, [Reuters reports](#). The settlement resolves a lawsuit brought in 2018 against J&J and its Janssen Pharmaceuticals unit. New Hampshire accused J&J of aggressively marketing opioids to doctors and patients, misrepresenting their addictive properties when used to treat chronic pain and targeting vulnerable groups like the elderly. "This resolution provides a positive step forward in ensuring these devastating business practices are not repeated," Governor Chris Sununu said. New Hampshire will apply US\$31.5 million toward opioid abatement, after paying legal fees, and J&J will be banned from selling or promoting opioids in the state. In a [statement](#), J&J did not admit wrongdoing, and called its marketing and promotion of prescription opioids "appropriate and responsible."

UK: Boots' clampdown on crime sees staff at extra 225 pharmacies get body cams

After an initial pilot that involved 83 branches across the UK, Boots is now in the process of rolling out body-worn cameras to a further 225 pharmacies. This means that Boots teams at over 300 locations will soon have access to body cameras, a spokesperson [told Chemist+Druggist](#). "Boots has seen that body-worn cameras have reduced the number of incidents involving violence and aggression towards its team members," said Iona Blake, the chain's security and incident manager. For example, Birmingham branches participating in the pilot saw a "68% reduction in incidents," Blake said. Meanwhile, branches where staff "consistently wear their devices have seen around a 45% reduction in incidents." In an effort to reduce crime across its locations, the chain has also installed panic alarms, "a state-of-the-art CCTV monitoring centre unit," and headsets allowing team members to communicate faster in larger outlets, Blake added.

UK: Putting the patient first: How pharmacy can get it right this winter

With unprecedented levels of burnout among pharmacists, pharmacy closures and the potential for strike action, the Royal Pharmaceutical Society (RPS) is [calling for](#) professionalism, respect, and prioritization of patient care as the approaching seasonal pressures compound the continued challenges of the pandemic. RPS is asking pharmacy employers and trade unions to come together at a round table meeting to agree on principles that ensure patients benefit consistently from access to high quality, adequately staffed, safe pharmacy services. RPS is also urging governments, National Health Service (NHS) organizations and individual pharmacy teams to define clear prioritization plans that determine which pharmacy services are essential and must always be provided, and which can be de-prioritized at specific levels of pressures. Lastly, RPS is calling for zero tolerance of abuse across pharmacy.

Australia: 'Take home naloxone' program is becoming embedded in pharmacy

practice

Since the national rollout of the Take Home Naloxone (THN) program on July 1, 2022, there has been a significant jump in participating community and hospital pharmacies, [according to Australian Pharmacist](#). According to data from the Department of Health and Aged Care, there are approximately 2595 sites registered to participate in the program, with an additional 1053 registering since the program went national. As of late August, the total number of THN units supplied under the program through community pharmacy is 70 429, with 12 580 units supplied since July 1. Adelaide pharmacist Adam Forrest saw the benefits of the program firsthand when one of his patients taking prescribed opioids used THN after a suspected overdose. “The patient was still admitted [to hospital], but there was cause to use it,” he said.

In Depth

We’re close to cold and flu season. So, what does that look like with COVID-19 in the mix?

For several years, pandemic restrictions and social distancing helped keep a variety of respiratory viruses at bay, even as rates of COVID-19 ebbed and flowed. Influenza largely disappeared until early 2022. Now, we’re entering uncharted territory. Most restrictions are lifted, global travel has bounced back, and mandates for masks and boosters are few and far between. This fall and winter, with society largely reopened, scientists say they suspect we’ll experience the return of cold and flu season—this time around, with another respiratory pathogen in the mix. But how exactly the months ahead will play out is tough to predict, [according to CBC](#).

Worth Repeating

“The online bullying must be addressed whether it is happening in the form of Google reviews on the company account page, or company page, or community pages. These people should be held responsible for the ongoing psychological injury and defamation of pharmacists and other staff.” —Melbourne, Australia, pharmacist Pardeep Singh [posted a call](#) to stop online abuse of pharmacists after an angry patient attacked a colleague over a declined prescription

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

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