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**October 28, 2020**

## **CPhA**

### ***Women in Pharmacy Leadership Empowerment Panel — Hidden burdens: The impact of COVID-19 on women in pharmacy***

CPhA is pleased to launch a new webinar series, the Women in Pharmacy Leadership Empowerment Panels. Join us next Wednesday, November 4 from 3:30-5:00pm ET for the first session, ***Hidden burdens: The impact of COVID-19 on women in pharmacy***. We know that COVID-19 has turned our world upside-down. We also know that women have been disproportionately affected, often bearing the weight of additional responsibilities that have arisen due to the pandemic. Sponsored by Shoppers Drug Mart, this panel will be moderated by Kelly Grindrod, associate professor at the University of Waterloo School of Pharmacy and CPhA's 2020 Canadian Pharmacist of the Year, who will be joined by a diverse panel of pharmacists from across Canada to discuss their unique experiences and ways they have worked through challenging situations. More information and registration details will be available on our [website](#) soon.

### ***CPhA advocates for permanent CDSA exemptions***

Since the COVID-19 pandemic struck in March, pharmacists have faced a multitude of challenges as they strive to maintain continuity of care. One change meant to help pharmacists better manage patients' drug therapy is the federal government's decision to issue a short-term subsection 56(1) exemption from the Controlled Drugs and Substances Act (CDSA), says [Canadian Healthcare Network](#) (subscriber access). Pharmacists are pushing hard to make the exemption permanent. "We've done quite a lot of work advocating the Controlled Substances Directorate," says Shelita Dattani, CPhA's director of practice development and knowledge translation. "We've been asking for years for pharmacists to have a bigger role in opioid stewardship and for modernization of the CDSA regulations. Being designated as a practitioner alone is not enough. We need evidence to show pharmacists could even do more."

CPhA's COVID-19 web pages are being updated regularly at [www.pharmacists.ca/covid19](http://www.pharmacists.ca/covid19) and [www.pharmacists.ca/covid19fr](http://www.pharmacists.ca/covid19fr).

## **National**

### ***MPs vote to open investigation into federal COVID-19 response***

The House of Commons health committee will begin a wide-ranging investigation into the federal government's COVID-19 pandemic response after MPs passed a Conservative motion on October 26 that calls for sweeping document disclosures and the testimony of several cabinet ministers, [says the CBC](#). The motion passed over the strenuous objections of the Liberal government and multiple industry groups, companies and other experts who warned that such a broad investigation could hamper the federal response to the pandemic's second wave and undermine the relationship between the government and key suppliers of medical equipment.

### ***Federal government to spend \$214 million for Canadian COVID-19 vaccine research***

The federal government will spend \$214 million to support “made in Canada” COVID-19 vaccine research, [reports Global News](#). Prime Minister Justin Trudeau announced on October 23 that \$173 million will go to Quebec-based Medicago, while Vancouver’s Precision NanoSystems will receive \$18.2 million for development and testing. The deal with Medicago includes up to 76 million doses of its vaccine candidate, as well as funds to set up a production facility in Quebec City. A further \$23 million will go toward the National Research Council of Canada Industrial Research Assistance Program.

### ***Petition urges Canadian testing of unproven vaccines on volunteers***

[A petition](#) has been filed with the federal government calling on Canada to join the United Kingdom in allowing controversial human challenge trials, which would test unproven COVID-19 vaccines on healthy volunteers willing to get infected with the COVID-19 virus, [says CTV](#). Supporters say the trials could speed up the global search for a vaccine, but there are concerns that moving too quickly could potentially expose volunteers to harmful side effects of the potential vaccine or potentially death from the virus.

### ***Evolving science a reason for inconsistent messaging on COVID-19, Dr. Tam says***

Canada’s chief public health officer says messages on how to keep safe during the COVID-19 pandemic might seem inconsistent, but that’s because the epidemiology is different across the country and the science on the virus has evolved, [says the Globe and Mail](#). “We have been criticized as public health professionals for changing our advice over time,” says Dr. Theresa Tam. “We have been doing so because the science is evolving.” Speaking at a journalism conference at Carleton University in Ottawa, Dr. Tam said that public health officials had to change their advice regarding wearing non-medical masks when epidemiologists came to understand that asymptomatic people can transmit the virus that causes COVID-19.

### ***Surgery and scan backlogs set to worsen without additional funding, CMA says***

A new study commissioned by the Canadian Medical Association (CMA) suggests at least \$1.3 billion in additional funding is required to return to pre-pandemic wait times for 6 procedures. The report, [Clearing the Backlog: The Cost to Return Wait Times to Pre-Pandemic Levels](#), quantifies the backlog resulting from the first wave of COVID-19 for 6 procedures, which together account for nearly 80% of the diagnostic and surgical care provided in hospitals in Canada. “There is no doubt that the impact of the pandemic will be felt for years to come. But for many Canadians, it could become a serious quality of life issue as they wait for their procedures,” says Dr. Ann Collins, CMA president. “Clearing this growing backlog must be addressed promptly, recognizing that the resurgence of the pandemic may exacerbate the issue with other potential delays.”

### ***Canadians are feeling pandemic fatigue: poll***

Months of isolation, fears and lifestyle changes have taken their toll. In turn, following COVID-19 safety guidelines has begun to feel like more and more of a challenge. A new poll, commissioned by [Global News](#) and conducted by Ipsos, puts into perspective just how fatigued Canadians are and found that [nearly half of Canadians are getting tired of following public health recommendations](#) and rules related to the virus. Fatigue is most pronounced among Gen Z (57%), Millennial (50%), and Gen X (53%) Canadians, and exceeds 50% in Alberta (53%) and Quebec (52%) while remaining much lower in British Columbia (34%).

### ***New ad campaign reminding Canadians of COVID-19 basics***

With Canada well into the second wave of COVID-19, the federal government is rolling out a new ad campaign featuring Canada’s top doctors. The 30-second spots, one in English and one in French, are reminding people of the basic health precautions to be taken. “The COVID-19 pandemic in Canada is serious. We must continue to practice all public health measures,” [says Chief Public Health Officer Dr. Theresa Tam](#). “Follow local guidelines for gatherings, maintain physical distancing, wash your hands, wear a mask and download the COVID Alert app. If you have symptoms, even mild ones, stay home. Protect yourself and others. We’ve come too far to stop now,” she continues. The advertisements launch this week on TV, radio and across digital platforms and social media sites.

## **International**

### ***NHS to invest in mental health support for pharmacists***

The Royal Pharmaceutical Society (RPS) [has welcomed news](#) that NHS England will invest an extra £15 million to strengthen mental health support for nurses, paramedics, therapists, pharmacists and support staff, as part of efforts to cope with the second wave of COVID-19. Proposals include funding nationwide outreach and assessment services, ensuring staff receive rapid access to mental health services. Chair of RPS England Claire Anderson said, “After a gruelling 7 months, pharmacists are already under strain as we head into what will be a challenging winter, so it’s welcome to see them included in this new mental health service.”

### ***As pandemic continues pharmacies integrate more clinical services into their practices***

COVID-19 hit as independent pharmacies were already facing challenges. There was a fear that customers would rely more on mail-order pharmacies as the pandemic has continued, but Antonio Ciaccia, senior adviser for disruptive innovation and practice transformation at the American Pharmacists Association (APhA), says business has now largely returned to normal for many pharmacies, [reports Fortune](#). People are still avoiding doctor’s offices, though, and the pharmacy industry is hoping to persuade regulators to let them integrate more clinical services into their practices, serving as a partner with physicians—another pandemic pivot that would bolster small practices.

### ***Australian pen-pal program a hit with students, older patients***

Socially isolated elderly pharmacy patients are being connected with primary school students through a pen-pal program established by an intern pharmacist at a West Australian pharmacy, [says The Pharmacy Guild of Australia](#). “Social isolation has become so much more prominent because of COVID-19 and pharmacists being so accessible to the elderly it was a good option for us to reach out to them and see if we could help,” says Tahlia Parisella, an intern at Gerald Burns Pharmacy in Bicton. “In a year like we are having, I thought it was important to provide something extra for them.” Under the program, Parisella has connected 25 of the pharmacy’s older patients with 25 Year 6 students from a primary school, with letters being exchanged every 2 to 4 weeks.

### ***WHO warns giving up on efforts to control COVID-19 would be ‘dangerous’***

The World Health Organization (WHO) has warned countries against giving up on efforts to control the coronavirus pandemic, with the head of the agency saying doing so would be “dangerous,” [says STAT](#). “Giving up on control is dangerous,” said Tedros Adhanom Ghebreyesus, the WHO’s director-general. “Control should... be part of the strategy.” The remarks came a day after White House chief of staff Mark Meadows seemed to indicate in [a CNN interview](#) that the administration has concluded containment of the virus is not possible.

### ***FDA approves first COVID-19 drug: the antiviral remdesivir***

The US Food and Drug Administration (FDA) has approved the first drug to treat COVID-19: remdesivir, an antiviral medicine given through an IV for patients needing hospitalization, says [the Associated Press](#). The drug, which Gilead Sciences is calling Veklury, cut the time to recovery by 5 days, from 15 days to 10 on average, in a large study led by the US National Institutes of Health. It had been authorized for use on an emergency basis since spring, and now has become the first drug to win full US approval for treating COVID-19.

### ***WHO says it will have advice on remdesivir in 3-4 weeks***

The WHO is preparing guidelines on the use of remdesivir for COVID-19 and should be able to release them in 3 to 4 weeks, [Reuters](#) writes. The US gave full approval for remdesivir to treat infections, but a large WHO study earlier this year on COVID-19 patients in the hospital found that the drug probably had no effect on their survival rate. WHO chief scientist Soumya Swaminathan said the FDA does not appear to have taken the results of the study into account in giving approval.

### ***Vaccine verdict due by early December, says Dr. Fauci***

US infectious disease expert Anthony Fauci said it would be clear whether a COVID-19 vaccine was safe and effective by early December, but that more widespread vaccination would not be likely until later in 2021. “We will know whether a vaccine is safe and effective by the end of November, the beginning of December,” Fauci told the BBC and [reported by Reuters](#). “When

you talk about vaccinating a substantial proportion of the population, so that you can have a significant impact on the dynamics of the outbreak, that very likely will not be until the second or third quarter of the year.”

### **AstraZeneca says vaccine has shown ‘encouraging’ immune response**

A COVID-19 vaccine being developed by the University of Oxford and AstraZeneca produced an immune response in both young and old adults and also triggered lower adverse responses among the elderly, [Reuters reports](#). Immunogenicity blood tests carried out on a subset of older participants echo data released in July that showed the vaccine generated “robust immune responses” in a group of healthy adults aged between 18 and 55. Details of the finding are expected to be published shortly in a clinical journal.

### **COVID-19 vaccine trials from AstraZeneca, Johnson & Johnson to restart**

Two major studies of vaccines against COVID-19, both paused because of potential safety concerns, are set to restart, [reports STAT](#). “The restart of clinical trials across the world is great news as it allows us to continue our efforts to develop this vaccine to help defeat this terrible pandemic,” Pascal Soriot, AstraZeneca’s CEO, said in a statement. “We should be reassured by the care taken by independent regulators to protect the public and ensure the vaccine is safe before it is approved for use.” Paul Stoffels, the chief scientific officer at Johnson & Johnson, said in an interview, “We as a company have found no evidence the vaccine candidate caused the event, and we have agreed to restart the study.”

### **Don’t give up on COVID-19 plasma, experts say, after study finds no benefit**

Researchers called for more research into using blood from recovered COVID-19 patients, or so-called convalescent plasma, as a potential treatment, after a small trial of hospitalized patients in India found it was of no benefit, [says Reuters](#). Scientists not directly involved in the India study, which involved around 460 patients, said its results were disappointing but should not mean doctors give up hope altogether on convalescent plasma. They said further and larger trials are needed, including in COVID-19 patients with milder disease and those newly infected. The findings are a setback for a potential therapy that US President Donald Trump touted in August as a “historic breakthrough,” and one experts say has been used in some 100,000 patients in the United States already, despite limited evidence on its efficacy.

## **Newsworthy**

### **Canadians rely on too few companies to make their drugs: If we want to avoid another shortage, we need more drug makers**

When the pandemic shut down the country in March, Canadians got an unexpected lesson in supply chain logistics. Just like empty grocery store shelves became a reality, COVID-19 also turned into a stress test for managing and maintaining Canada’s drug supply writes Dimitris Polygenis, president, Pharmaceutical Solutions and Specialty Health, McKesson Canada, in an op ed [published in the Toronto Star](#).

## **Worth Repeating**

“A few weeks ago, my 6-year-old son asked me: ‘Dad, is COVID-19 forever?’ It’s not. And we need to keep that in mind. Because yes, this sucks — but better days are coming. If we keep working hard and following public health guidelines, we will get through this together.” — Prime Minister Justin Trudeau commenting as compliance slips and COVID-19 cases continue to spike.

This weekly COVID-19 update is compiled by the Canadian Pharmacists Association. To unsubscribe, please reply to this email with “Unsubscribe” in the subject line.

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.

