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The Weekly

Bringing the world of pharmacy together



CPhA

CPhA speaks about ivermectin shortage and COVID-19 misinformation

There's a shortage of the drug ivermectin in Canada as global demand surges due to unproven claims that the medicine can be used to treat COVID-19, CBC reports. The shortage could put people who actually need it for treatment at risk, including those who are more susceptible to illness from parasites due to COVID-19. "The use of this medication for COVID is really putting people who are already in a difficult situation in an even worse situation," said Barry Power, CPhA's Editor-in-Chief. "I would really urge people to think twice before trying to access this medication that has been proven to do nothing in the case of COVID." Quantities of the drug have been limited in Canada since January due to global demand, and the shortage is expected to continue until the end of this year. On August 31, Health Canada issued an advisory asking people not to take the drug to treat COVID-19 after reports that some people were taking the veterinary form of the medicine intended for livestock.

Resource Round-up: Opioids and harm reduction

The new Resource Round-up series from CPhA gathers available resources and practice tools on important health topics to help pharmacists optimize patient care in their communities. The third edition brings together tools related to opioids and harm reduction and is designed to support pharmacists in their role as opioid stewards. From assessing prescriptions to educating patients with harm-reduction strategies, pharmacists play an essential role balancing safety with decreased pain and overall improvement of quality of life. The resource page is available in

CPhA launches 2021 federal election priorities

CPhA has released its <u>2021 federal election priorities</u> calling on all parties and candidates to demonstrate their commitment to the health of Canadians by acting on a series of 5 critical issues that will strengthen our health-care system now and into the future. CPhA recommends that candidates seeking election during this campaign champion the following issues:

- A national COVID-19 testing strategy
- · Addressing the opioid crisis through safe opioid prescribing and use
- Improving access to key health services for Indigenous beneficiaries of NIHB
- Implementing universal pharmacare
- Drug shortages: Ensuring a stable drug supply

Alongside these priorities, CPhA has created other election-related resources: a <u>presentation</u> <u>deck</u>, a <u>leave-behind</u>, which includes a summary of the recommendations, and an <u>election toolkit</u> with tips and information for pharmacists interested in getting involved.

Pharmacy on the front line

Regina pharmacist raising overdose awareness

Sarah Kozusko, pharmacist-owner of Queen City Wellness Pharmacy in Regina, Saskatchewan, told Global News that preventing drug overdoses is an everyday goal for her and her staff. Throughout the summer, Kozusko and her staff have hosted local community barbecues, provided essential services and needs, and helped people with day-to-day activities. They also have distributed more than 10,000 naloxone kits, also known under the brand name Narcan—something that has saved many lives. "My staff Narcans about 2 people a week in the park across the street and in alleys down the way and in the back parking lot," she said. "People know that they can come and get us. We will be there quickly and we will bring Narcan and we will revive people." The pharmacy recently added a peer mentor to their team who goes around the community to find out what people need, whether it's a snack, a ride to the hospital or a wellness check. "If you're a healthcare professional, connect to the people in the community," said Kozusko. "Your business is there 8 hours a day, they live there 24 hours a day. Take care of the people around you. That's the biggest thing. If we connect with people, we'll prevent overdoses."

Sudbury pharmacist reflects on opioid crisis on International Overdose Awareness Day

A Sudbury, Ontario, pharmacist has had to change how she talks to clients about opioids due to the growing crisis involving the drug in the community, <u>CBC reports</u>. "Our role as a pharmacist has changed significantly in the last few years," said Catherine Nolin, a pharmacist who owns 2 Shoppers Drug Mart locations in Sudbury. "But as pharmacists we play a really important role in education and awareness, especially around opioids and the potential for overdose," she added. "We provide this information on medications on a daily basis, but it's particularly important to share with our patients the risk of taking prescribed opioids." Nolin said one role pharmacists

have taken on has been to educate their clients on how to use naloxone kits, which can save a person's life if they are experiencing an overdose. "They're free of charge at your pharmacy," she said. "So anyone who is using opioids, anyone who might be a family member or a friend [of] someone who is using opioids, can come get a kit at any pharmacy."

Provincial

RxA says increase in robberies taking a toll on pharmacists

The Alberta Pharmacists' Association (RxA) says increases in robberies in Alberta are taking a toll on its members. "We are very concerned about the increase in pharmacy robberies, not only for our membership, but also their staff and patients," the association said in a statement to CTV News. "As an association, we have been working closely with the Calgary Police Service, as well as the Edmonton Police Service and RCMP. The policing agencies have been extremely helpful and instrumental to provide education, recommendations and assisting robbery awareness as well as with the implementation of prevention measures in pharmacies." RxA adds that it provides professional psychological services to assist its members who have been victims of a crime.

Nova Scotia pharmacists take over all COVID-19 vaccinations in the province

Faced with the requirement to purchase technological equipment and learn a new documentation process, physicians in Nova Scotia have opted out of the province's COVID-19 vaccine program, leaving pharmacists to run the immunization effort, Canadian Healthcare Network reports. "Starting August 30, we're the only provider of [COVID-19] immunization in the province," said Allison Bodnar, CEO of the Pharmacy Association of Nova Scotia (PANS). "We've been fully integrated in the vaccination model here since Day One—we delivered 50% of COVID-19 vaccines in the province." The shift to pharmacy-only COVID-19 vaccinations is the result of physicians opting out of the program, added Bodnar. For pharmacists, this change means basically more of the same responsibility since the start of the pandemic. Patients will still be booking their vaccine appointments through the same central booking portal for the province.

National

Moderna's COVID-19 vaccine approved for 12- to 17-year-olds in Canada

Health Canada and the Public Health Agency of Canada (PHAC) approved Moderna's COVID-19 vaccine for use in adolescents, according to CBC. "After a thorough and independent scientific review of the evidence, Health Canada has determined that the vaccine is safe and effective at preventing #Covid19 in youth aged 12 to 17," the agencies said in a social media post on August 27. The Pfizer-BioNTech vaccine was approved for Canadians in early May for those aged 12 to 15. That vaccine was approved for those 16 and older in December 2020—the same month Moderna's shots got the go-ahead for Canadians over 18. Moderna applied for authorization for administering it to youth in early June, citing a clinical trial of 3,700 youth in which none of the teens who got 2 doses developed a COVID-19 infection. Europe approved the

Moderna vaccine for children more than a month ago. The United States has not yet authorized it for teenagers.

Certain lots of Teva-Losartan and Sivem-Losartan recalled due to azido impurity

Teva Canada and Sivem Pharmaceuticals are recalling a total of 7 lots of prescription losartan tablets in 25 mg, 50 mg and 100 mg strengths after tests found an azido impurity above the acceptable limit, says Health Canada. Long-term exposure to levels above what is considered safe could potentially increase the risk of cancer. The azido impurity is considered a mutagen—a chemical substance that can cause a change in the DNA of a cell. These mutations may increase the risk of cancer, but the specific risk for this azido impurity to cause cancer in humans is unknown. There are established international guidelines that recommend that mutagenic impurities be kept at or below a specific level because exposure to a mutagen over the long term at a level above what is considered to be safe has the potential to increase the risk of cancer. A person taking a drug daily for 70 years that contains this azido impurity at or below the acceptable level is not expected to have an increased risk of cancer.

International

Australia: Pharmacy Guild condemns attacks on pharmacy employees

David Heffernan, president of the New South Wales (NSW) Branch of the Pharmacy Guild of Australia, is pleading with the public to be patient in pharmacies, saying that Guild members are reporting increased difficulties with angry customers. The Australian Journal of Pharmacy (AJP) reported that a 17-year-old pharmacy assistant at a Pharmacy4Less outlet was attacked by an angry customer shouting, punching, kicking and throwing bottles at staff. "No workplace should have to be confronted with that," Heffernan told the AJP. "Everyone is in the same boat here in NSW, we're all in lockdown and we plead with the public to have patience, because we're there to help, not hinder. But it really does conjure anger when you see a 17-year-old girl confronting that sort of thing." Following the incident, Pharmacy4Less CEO Feras Karem called for greater protections from police and legislators for pharmacy workers.

US: CVS expands mental health services

CVS is expanding a pilot program that started in 2020 that provides in-person mental health counselling services at its clinics in a number of locations, explains Marketplace. Walmart and Walgreens are also experimenting with similar services. When it comes to most health services, access and convenience are big factors. "We're meeting people where they're at," explained Cara McNulty, president of CVS Health Aetna. And where they're at may not be too far from a CVS. There are nearly 10,000 in the US and more than a thousand of them have walk-in health care clinics. CVS, which owns health insurer Aetna, currently has mental health professionals in 34 of those. "Maybe you're being seen for an ear infection and you started talking about some other issues. Our nurse practitioner could suggest you see the therapist," McNulty said.

US: Pharmacy associations urge HHS to authorize pharmacists to provide COVID-19

prophylaxis treatment

A group of pharmacy organizations is urging the Department of Health and Human Services (HHS) to allow pharmacists to provide COVID-19 prophylaxis treatment to ensure patients have timely access, *Drug Store News* reports. Efforts from the group, which includes the American Pharmacists Association (APhA) and National Community Pharmacists Association (NCPA), come after the Food and Drug Administration (FDA) recently authorized the first post-exposure prophylaxis, Sotrovimab, for COVID-19 emergency use. In addition to requesting authorization, the groups encouraged HHS to coordinate with insurers to ensure adequate reimbursement is available to support access to these services when provided by pharmacists.

US: CVS caps sales of at-home COVID tests

CVS Health is limiting purchases of over-the-counter COVID-19 tests, as demand for the kits jumped following a surge in cases driven by the Delta variant. CVS is capping purchases of Abbott Laboratories' BinaxNow self test and start-up Ellume's home test kits "in order to serve our customers' over-the-counter testing needs, and due to high demand," a spokesperson told the *Financial Times*. CVS is permitting customers to buy 6 tests online at once and 4 tests at a time at its pharmacies.

COVID-19 booster shots can help vulnerable, WHO official says

A COVID-19 booster shot is a way to keep the most vulnerable safe and not a luxury robbing people who have yet to have even a single jab, Reuters reports. The comments from WHO Europe head Hans Kluge appeared to be more positive than the UN health body's past assessments of the third vaccinations being administered by a growing number of countries. Last week, WHO Director-General Tedros Ghebreyesus said data on the third shots was inconclusive. He had earlier said they should be halted and authorities should focus on getting the doses to poorer nations. On August 30, Kluge told a press briefing that more studies were showing that third doses protect vulnerable people. "A third dose of vaccine is not a luxury booster [that is] taken away from someone who is still waiting for a first jab. It's basically a way to keep the most vulnerable safe," he said.

In-Depth

What is the new C.1.2 COVID-19 variant?

South African researchers are raising concern over the spread of a new COVID-19 variant riddled with a number of mutations, including some associated with increased transmissibility and a resistance to antibodies against the disease. The variant, named C.1.2, was first detected in May and has spread to a majority of South Africa's provinces as well as 7 other countries, including China, Portugal and the UK. <u>Global News takes a look</u> at the variant and what we know so far.

"The cognitive dissonance is striking: Embracing an unproven and dangerous livestock drug, while rejecting a vaccine that has been remarkably safe and effective in 5.3 billion doses so far." — the *Globe and Mail*'s André Picard on the trend of <u>people self-medicating with the veterinary drug ivermectin</u>, which is now carrying over into Canada, with feed stores and pharmacies alike reporting a deluge of demand.

This weekly COVID-19 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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