Remarks to the Standing Senate Committee on Social Affairs, Science and Technology
Study on the government’s response to the COVID-19 pandemic

May 20, 2020

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(Check against delivery)

Good afternoon and thank you for inviting us to appear today.

We are here today representing Canada’s 42,000 pharmacists, and Canada’s 10,000 community pharmacies that have remained open to Canadians during this crisis.

In times of national emergencies, pharmacies are considered essential services, which means that they stay open when others are closed. This pandemic has been no exception and pharmacies have adapted considerably to continue to serve their patients safely and access their life saving medications. This includes providing more delivery services for seniors and other vulnerable patients, dedicating special opening hours for seniors, and putting in place protective measures like plexiglass barriers to minimize the risk of contamination just to name a few. Community pharmacists are also a key source of COVID-19 information for the public. In a recent survey, over half of pharmacists across Canada indicated they’re providing COVID-19-related information to 5 or more patients per day.

While pharmacists have been grateful to do their part, it has not been without added pressure and stress. When we surveyed pharmacists in April, there were 2 major areas of concern that stood out: the increased difficulty in managing our drug supply, and being able to protect pharmacy staff.

Drug shortages are not new in Canada but the pandemic certainly added a layer of pressure and complexity to managing our drug supply. As concerns about COVID started to grow in Canada in late February and early March, we saw a huge spike in demand for many products, like toilet paper, masks, hand sanitizers, and medications. In fact, the demand for prescription medications went up 200% putting a significant strain on the drug supply chain across the country. Our job as pharmacists is to ensure that our patients get the right medications at the right time meaning that we need to make sure that we could distribute medications
equitably to all of our patients and why we felt at the time that the only responsible course of action was to recommend limiting dispensing to 30 days.

The limits on dispensing helped stabilize our supply and while we must continue to carefully manage our drug inventories, we are in a much better situation than 2 months ago. However, as the pandemic progresses, we know that there will be an increased demand for many medications that are being used to treat COVID or symptoms associated with COVID. Health Canada has developed a list of over 70 medications that are currently being used in the context of COVID and the availability of these drugs is being closely monitored. We are also concerned that disruptions in manufacturing in countries like China and India will have a downstream impact on shortages in the coming months. As a result, we must remain vigilant so that we can adapt to whatever comes next. We hope that the government of Canada will continue to prioritize this issue and work with us to look at those longer-term impacts.

The second issue that we wanted to touch on is the ongoing lack of protective equipment for health professionals and essential workers. You will have heard much of this from our colleagues this morning from the Medical Association and the Nurses Association so we won’t repeat their observations except to say that pharmacists have found it equally difficult to access the protective equipment that they need on the front lines. We believe there is an important role for the federal government to assist health care providers, and essential workers in this respect.

Lastly, we feel it’s important that we start looking forward to the fall and a possible second wave. Specifically, it’ll be particularly important that we have an even more ambitious influenza strategy campaign this year to ensure that we don’t add additional burden to the health care system. This means that we have to start planning now by ensuring that we have sufficient vaccines to deal with increased demand, and proper access to PPE for providers who provide flu shots in the community, including community pharmacists who deliver over a third of flu shots every year. What we’ve seen in the southern hemisphere- notably in Australia – is that demand for flu shots increased, but that access to vaccines was somewhat erratic. A coordinated approach is required to ensure that all Canadians, regardless of where they live can access flu shots conveniently and safely. This is why we have to prepare now.

Thank you very much and my colleague Barry Power and I will be happy to take your questions.