The Pharmacy Guild of Australia

Submission to

The Parliamentary Law Reform, Drugs and Crime Prevention Committee, Inquiry into Supply and Use of Methamphetamines

December 2013
Submission to the Parliamentary Law Reform, Drugs and Crime Prevention Committee, Inquiry into Supply and Use of Methamphetamines

Introduction

The Pharmacy Guild of Australia (the Guild) is the national peak pharmacy organization representing community pharmacy. It strives to promote, maintain and support community pharmacies as the most appropriate primary providers of health care to the community through optimum therapeutic use of medicines, medicines management and related services.

The Guild welcomes the opportunity to make a submission to the inquiry into Supply and Use of Methamphetamines

The Guild has been a leader in developing initiatives to support pharmacy in addressing the diversion and misuse of commonly used medicines and would welcome an opportunity for the community pharmacy sector to be involved in the development and implementation of effective initiatives to prevent and reduce pharmaceutical misuse and the minimise the harm to the community.

The 5,000-strong network of community pharmacies across Australia, including over 1200 in Victoria, has demonstrated the ability and willingness to implement effective drug policy strategies and programs. This is generally achieved by working in partnership with other health care providers to deliver accessible, integrated, safe and effective care to the community based on Quality Use of Medicines (QUM) principles.

Over a number of years, the Guild has supported harm minimisation strategies in the Australian community, including:

- provision of drug-related specific services such as:
  - supply of needle, syringe and other injecting equipment;
  - safe collection and disposal of syringes; and
  - opioid dependence treatment programs
- benzodiazepine reduction programs with supervised doses;
- Project STOP online ‘real-time’ recording system for the sale of pseudoephedrine-based products;
- smoking cessation advice and treatment;
- provision of information regarding drug-related conditions (hepatitis C, HIV/AIDS etc);
- provision of information to family and friends of illicit drug users.
- inter-professional liaison and referral to appropriate treatment agencies; and
- the implementation of public health campaigns.
In 2010, the Guild produced ‘The Roadmap – The Strategic Direction for Community Pharmacy’, providing an analysis of where pharmacy is today and a plan for its future direction. The document provides practical mechanisms through which community pharmacy can develop future services and strengthen involvement in harm minimisation programs.

**Demand Reduction:**
Demand reduction includes strategies to prevent the uptake of drug use, delay the first use of drugs, and reduce and stop drug misuse, often achieved through the provision of information and education.

Health promotion in the context of community pharmacy refers to delivering strategies aimed at prevention, early detection and treatment. These include education and awareness raising, referral pathways and improving access to advice and information. Community pharmacy based health promotion programs have been proven to be effective.

The established 5,000 strong network provides a national, equitable-access platform, complete with highly qualified health professionals to disseminate clear and consistent messages and support. In addition, both well and sick people visit pharmacy, providing an opportunity to engage people along the health spectrum and hard-to-reach populations who do not utilise other health services. Consumers are able to gather information which assists them in making key decisions about their health. Community pharmacy also facilitates referral to support service or other health professionals when required.

A variety of health promotion activities are routinely conducted via this network of community pharmacies including smoking cessation. In addition, a number of recent successful health promotion programs have been delivered through community pharmacy, including the Alcohol Standard Drinks Awareness Program and Hepatitis C Public Health Promotion Pilot Program. Brief interventions can also be very effective in community pharmacy, which aim to identify current or potential problems with drug misuse and motivate those at risk to change their behaviour and provide a referral point to treatment and support services.

Including community pharmacy in such activities will assist in meeting the following demand reduction objectives:

- **prevent uptake and delay onset of drug misuse**
  - Implement well-planned social marketing campaigns that address the dangers of drug misuse, dangers about specific drug misuse practices and promote healthy lifestyles.

- **reduce misuse of drugs in the community**
  - Improve access to screening and targeted interventions for at risk groups e.g. young people, people living in rural and remote communities, pregnant women, Aboriginal and Torres Strait Islander people.
  - Increase the community’s understanding of effective drug interventions through the provision of factual, credible information.
• support people to recover from dependence and reconnect with the community
- Improve the linkages and coordination between primary health care and specialist drug and alcohol treatment services to enhance the capacity for all health needs to be dealt with as well as to facilitate the earlier identification of health problems and access to treatment.
- Improve the communication and flow of information between primary care and specialist providers, and between clinical and community support services to promote continuity of care and development of cooperative service models.
- Develop a sustained and comprehensive stigma reduction strategy to improve community and service understanding and attitudes to drug dependence and the related problems of individuals.

Supply Reduction
The Guild proposes an arrangement that would assist in addressing the issue of misuse or abuse of both prescription medicines non-prescription medicines particularly pseudoephedrine containing products.
Pseudoephedrine which is the active ingredient in many common cough and cold treatments is a vital precursor in the manufacture of illicit methamphetamine. Unlike many of the other materials required to make methamphetamines there is no substitute for Pseudoephedrine.
Real-time monitoring is an exceptional aid to QUM as it allows health professionals to check a database to see if an individual has recently been prescribed or supplied with a particular medicine by another doctor or pharmacy. In cases where health or addiction concerns are apparent, pharmacists and doctors can then further counsel patients and assist them to access treatment options.

Real-time monitoring in practice: Project STOP
A real time monitoring system is already used to address the pseudoephedrine issue through a national program called ‘Project STOP’, a real time, web-based program designed to track pseudoephedrine sales and assist law enforcement in identifying pseudoephedrine ‘runners’.
Rolled out nationally in August 2007, Project STOP assists pharmacists in determining the legitimacy of requests for pseudoephedrine-based products, thereby increasing access for therapeutic use and preventing diversion where possible.
Project STOP is an online recording system that records the sale of pseudoephedrine based products in ‘real-time’ to assist pharmacies to determine the legitimacy of sales, making it extremely difficult for ‘pseudo-runners’ to travel from pharmacy to pharmacy to accumulate sufficient pseudoephedrine-based products to manufacture amphetamine type stimulants.
Furthermore, the platform has the potential to be expanded to include other substances and equipment that are used to manufacture illicit drugs. Having a real time electronic register that records the sale of tablet, pill and capsules manufacturing equipment,
Excipients and all other substances that have been associated with the manufacture of illicit drugs would add enormous benefit to the Victorian community.

Online recording of pseudoephedrine sales is currently mandatory in some States (QLD, WA, SA) but not Victoria. As a result the level of recording is inconsistent despite the fact the majority of Victorian pharmacies have registered for Project Stop. It is envisaged that mandatory reporting through Project Stop for all pharmacies, as well as wholesalers of pharmaceutical manufacturing equipment/actives/excipients and suppliers of laboratory equipment would add a level of security that would make it extremely difficult for criminal elements to obtain the precursor chemicals and equipment required to make illicit drugs. It also will allow the Victorian Police to have access to real time monitoring of potential criminal activity, and in doing so, assist in reducing the tax payers’ cost of illicit drug incidents and surveillance resources needed to address the growing problem.

By using the Global Positioning System (GPS), Project STOP allows law enforcement agencies to determine exactly where these medicines are being sought. By tracking movements of potential ‘pseudo-runners’, Project STOP gives pharmacists, police and health authorities real-time access to suspicious pseudoephedrine sales. This also facilitates immediate checking of requests for pseudoephedrine products and allows appropriate supply of these products in accordance with therapeutic standards to support QUM principles and appropriate intervention to prevent the diversion of precursor chemicals into illicit drug manufacture.

*Nationally consistent regulation*

Project STOP is a tool which has proven its effectiveness as a deterrent against the diversion of pseudoephedrine to illicit drug manufacture. For a more effective implementation of Project STOP, each State and Territory jurisdiction should have nationally consistent provisions in their legislation to enable pharmacists to perform their duties without contravening any privacy guidelines with regard to the supply of pseudoephedrine containing products. These uniform provisions must include mandatory real-time recording of the supply of these products.

Online recording of pseudoephedrine sales is currently mandatory in some States (QLD, WA, SA) but not Victoria and other jurisdictions. As a result the level of recording is inconsistent despite the fact the majority of Victorian pharmacies have registered for Project Stop. It is envisaged that mandatory reporting through Project Stop for all pharmacies, as well as wholesalers of pharmaceutical manufacturing equipment/actives/excipients and suppliers of laboratory equipment would add a level of security that would make it extremely difficult for criminal elements to obtain the precursor chemicals and equipment required to make illicit drugs. It also will allow the Victorian Police to have access to real time monitoring of potential criminal activity, and in doing so, assist in reducing the tax payers’ cost of illicit drug incidents and surveillance resources needed to address the growing problem.
The benefits of real-time monitoring

Broader implementation of real-time monitoring systems would bring the following key benefits:

- **Targeted Regulation** – In the case of *Pharmacist Only Medicines* (S3), real-time monitoring can serve to retain the appropriate level of access to medicines for the community at large, whilst restricting inappropriate and/or criminal use. This constitutes a much more sophisticated tool than simple scheduling changes.

- **Professional Decision Support** – Real-time monitoring by prescribers and pharmacists would provide a powerful, data-driven decision-support tool by electronically linking these health professionals and helping them determine if the prescription or sale/dispensing of a medicine is appropriate. Real-time monitoring not only reduces the risk of criminal diversion but also facilitates the safe and appropriate use of medicines.

- **Data Collection to Inform Policy Direction** – The data-collection element of such monitoring systems can provide governments and health bodies with the evidence to properly inform future decision-making in the area of medicines regulation and scheduling.

- **Support to law enforcement** – Where appropriate, information and data can also be provided to police and/or law enforcement agencies.

The Guild believes that real-time monitoring systems should:

- be developed in a manner which ensures security and patient privacy is maintained according to contemporary and accepted guidelines and practices;
- meet legislative requirements
- be integrated with dispensing and prescribing software to maximize convenience of use by pharmacists and prescribers to ensure complete and accurate patient records are maintained. The seamless integration of these systems into dispensing and prescribing software, to avoid the need for multiple sets of data entry, is crucial for the viability of such systems; and
- be adapted and applied to other medicines which may be subject to abuse and/or misuse to address the growing problem of doctor and pharmacy shopping.

**Pharmacist Only Medicines Notifiable (POMN)**

In order to harness the benefits of real-time monitoring, the Guild believes that a consideration should be given to incorporate a sub-schedule into the current Pharmacist Only Medicine (S3) schedule to assist in the supply and monitoring of drugs with the potential for misuse. Pharmacist Only Medicine Notifiable (POMN) would involve modifying the current *Pharmacist Only Medicine* (S3) schedule to incorporate a sub-schedule, with medicines included in the S3N sub-schedule through the government’s usual scheduling processes.

POMN medicines may include those with a potential for misuse and/or abuse as well as other medicines considered clinically appropriate.
Medicines included in the POMN category would be recorded in an integrated database to allow pharmacists to monitor sales. Medical practitioners, health authorities and relevant agencies could also monitor the sales. The security and rigor of such a system has already been proven through Project STOP and it provides the opportunity for intervention such as:

- pharmacist advice, support or referral where the use of the medicine is contrary to specific drug protocols or not consistent with QUM principles; and identification of patterns or trends by health agencies to inform the development of health policy.

**New technologies and online services**

Another issue that needs to be addressed is regulation around access to legal drugs via new technologies and on-line services, specifically, the sale and purchase of pharmaceutical products over the internet.

The growing trend of sale and purchase of analogue drugs, ‘legal highs’ and pharmaceutical products over the internet within Australia and internationally creates an environment conducive to the uncontrolled and unregulated supply of controlled and/or prescription only medications, as well as the supply of substandard and/or counterfeit pharmaceutical products.

Pharmacies conduct business over the internet under a range of models: there are e-pharmacies that conduct their business almost exclusively over the internet, and there are community pharmacies that offer ‘web portals’ as an adjunct to their main business. The Guild recognises that internet pharmacy is an area of rapid growth which improves consumer access and choice. However these advantages should be balanced against potential dangers and protection of patient safety and public health, particularly when consumers purchase products that bypass regulations or safety standards. Many of the drugs that can be obtained via the internet have a potential for abuse or misuse and could cause considerable adverse effects.

It is also clear that the internet is emerging as a facilitator for sourcing precursors for illicit drug manufacture. The Guild believes that the ideal way to dispense and receive medicines is through face-to-face contact, as there are benefits for the consumers to have the opportunity for advice from a pharmacist when they have a medicine supplied. The nature of the internet sale/purchase of medicines could make promoting QUM difficult. It is a concern that some medicines are readily available from online suppliers who have no professional qualification or healthcare expertise. Consequently, it is difficult for consumers to know which online pharmacies are genuine businesses which meet all regulatory requirements.

**Preventative measures to combat this could include:**

- **Requiring** e-pharmacies to provide a facility for consumers to have a meaningful consultation with a pharmacist.
- Regulatory requirement to ensure face-to-face interaction between the health professional and consumer, for example, all internet orders for medicines that
have potential for abuse/misuse to be accompanied by a prescription. While it is recognised that this measure will reduce the level of convenience by consumers and additional cost to Medicare, the disadvantages would be outweighed by the public health benefit of this measure.

- **Specific provisions and guidelines** for online pharmacies and internet sites to adhere to in dealing with re-scheduling of pharmaceutical products. For example, recent codeine re-scheduling changes and controls must also be adhered to by the online pharmacies.
- Extension of **Project STOP – based measure** to internet pharmacies requiring them to use purchaser’s unique identifier.
- **Regular checks and monitoring** of internet sites selling medicines.
- **Public awareness and education** programs to warn consumers about the potential dangers of purchasing over the internet.

**Information and Education Campaigns**

Overall, the Guild strongly believes that frameworks established to address supply reduction strategies will require targeted public information campaigns, information sharing and social marketing which engage the health sector and community. It is essential for community pharmacy to be involved in the development of such campaigns, as it is the most commonly utilised health service provider in Australia with a track-record in effective health promotion and public health awareness activities. Such campaigns require support for community pharmacy which is at the point of supply of pharmaceutical drugs, to reduce the inappropriate supply, misuse and diversion of drugs into the black market. The Guild should be involved in the development of any training to ensure appropriate changes from a community pharmacy business perspective, and allow for such changes to be championed by pharmacy owners and implemented smoothly. This is essential to achieve any impact on pharmaceutical drug misuse.

**Harm reduction:**

In relation to injecting drug use, the provision of sterile injecting equipment through needle and syringe programs (NSPs) is an integral harm reduction strategy to reduce the transmission of blood borne viruses, such as HIV/AIDS and hepatitis C. It is estimated that over the last decade (2000-2009) NSPs in Australia have directly averted over 32,000 new HIV infections and over 96,000 hepatitis C infection. The Guild strongly believes that community pharmacy is ideally placed to continue to assist in the distribution of sterile injecting equipment, advice and referral to treatment services. The Community Pharmacy NSP Recruitment Project was a joint initiative between the Guild and the Department of Health.

**The project resulted in the recruitment of 279 community pharmacies.**

To ensure that this work continues, it is essential that acknowledgement and support be given to those pharmacies distributing sterile injecting equipment and health information to people who inject drugs. As such, it is essential that funding is available to support the community pharmacy NSPs Program and ensure pharmacists are
encouraged to participate in the program. Some of the key challenges in responding to the harms caused by substance abuse lie in making individuals aware of the harms to their health from drug misuse, motivating them to seek and engage with treatment, and connecting them with appropriate treatment and other support services. Community pharmacy, with adequate support, could provide an easily accessible platform to health information and referral to treatment services.

As such, the Guild recommends the following which it believes would enhance the NSP Program:

1. A liaison officer to be funded and positioned at the Guild to provide direct support and training to participating pharmacies

The establishment of such positions would result in:

- resource development and distribution
- availability of data on pharmacy participation in the program
- availability of comprehensive data on the demographics of people who inject drugs accessing pharmacy programs
- improved access to health professionals for people who inject drugs
- improved knowledge of illicit drug use and issues to inform future policy development in this area.

2. Public health information placed on needle and syringe packs by the manufacturer or supplied by pharmaceutical wholesalers via portable data entry. This would ensure a quick and effective distribution of information to consumers.

3. A series of universal health fact-cards focused on illicit drug use be made available, or distribution to community pharmacy in each State and Territory. Distribution through the current pharmaceutical wholesaler chain would ensure cost-effectiveness.

**Conclusion:**

The community pharmacy sector has demonstrated its ability and willingness to implement harm minimisation strategies and programs, by working in partnership with government and other health care providers in order to deliver accessible, integrated, safe and effective care to the community.

The Guild trusts that this submission will assist the Law Reform, Drugs and Crime Prevention Committee with regards to its current Inquiry into the Supply and Use of Methamphetamines.