

## Coalition denies PBS savings claims

Nick O'Donoghue

ALLEGATIONS that a Coalition Government would "rip up" the Fifth Community Pharmacy Agreement are false, pharmacists have been told.

In a letter to members of the Pharmacy Guild of Australia, shadow health minister Peter Dutton described claims the Coalition was seeking extra savings from the Pharmaceutical Benefits Scheme (PBS) as a "last minute scare campaign" by Labor.

Labor minister for health Nicola Roxon accused the Liberal Party of planning to cut PBS spending by \$1.2 billion over the next four years

on top of the \$1 billion the Guild signed up to in the agreement.

"Just three days before the federal election, the Coalition released a document that set out the savings they would take to the election.

"Tucked away, on page 19 of their document, Mr Abbott stated that he intends to cut an additional \$1.2 billion from the PBS over the next four years, on top of the savings already agreed with the Government," Ms Roxon said in a letter to Guild members.

She claimed the savings could only be made by cutting the pharmacy supply chain including remuneration to community

pharmacy and rising prices for consumers.

"The cuts to the PBS he announced yesterday make it clear he intends to rip up the Fifth Community Pharmacy Agreement if he becomes Prime Minister," Ms Roxon added.

Mr Dutton told Guild members the additional savings would comprise "income not recognised by the Government in their forward estimates".

"These PBS savings are based on financial modelling changes to the PBS based on the existing policy settings.

"Labor booked \$2.5 billion in savings over the Forward

Estimates period for the PBS. We have estimated that the reforms will net savings of an extra \$1.1 billion," he said.

Mr Dutton stressed the agreement would be "untouched" by the Coalition and called on pharmacists to reassure patients there would be no changes to the PBS.

"The price of drugs to pensioners will remain the same. There is no change to the co-contribution scheme and there will be no change to the arrangements recently agreed between the Government and the industry," he said.

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## Fad diets fail to meet the weight of expectation

Nick O'Donoghue

PHARMACISTS will be shown the evidence, or lack thereof, for fad diets that keep coming back at the Pharmacy Australia Congress 2010 (PAC10) in late October.

Senior lecturer in nutrition at Deakin University, Dr Tim Crowe, told *Pharmacy eNews* he hopes to educate pharmacists about the efficacy of diet programs that have been promoted over the years.

"My role will be about education of pharmacists about the different dietary approaches that are used by the population.

"To give them the firm clinical trial evidence for the efficacy of

the major dietary approaches, and the summary is they all perform fairly poorly in the long-term," he said.

Dr Crowe warned fad diets based on low-carbohydrate, low-GI or high-protein intake offer little benefit to patients and seem to get hyped up every few years.

"They keep coming back, one of the sad things about my profession is that it's all quiet for a couple of years and a diet you spoke about five or 10 years ago comes back again.

"They all go in cycles and even some of the big proponents of some of the more non-traditional low-carb diets have come back and



WEIGHT LOSS: Fad diets keep coming back.

acknowledged from their research that it's not actually the diet you follow that makes any difference.

"It's actually getting ongoing

advice and counselling support and adhering to your chosen diet that will help you lose weight long-term, but there's nothing magical about the diet per-se," he said.

While pharmacists have a role to play in weight-loss management, Dr Crowe said they should look to direct customers to dietitians or GPs for help.

"Pharmacists' primary role is not to counsel or advise on weight loss as far as an ongoing relationship with the customer, but they have a role in screening and giving the appropriate advice to a person in need of weight loss," he said.

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FROM THE GUILD PRESIDENT - KOS SCLAVOS

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## Healthdirect Australia needs to incorporate pharmacy



THERE has been significant pharmacist anger about the decision of the National Prescribing Service (NPS) to cease funding of the national medicines line which was run out of Brisbane by Mater Health Services.

That service will now cease and healthdirect Australia will take over funding and incorporate the Medicines Line into their existing service. A dedicated

new number 1300 633 424 has been established in addition to the healthdirect Australia line of 1800 022 222.

The key contentious issue is that the line is run by registered nurses and protocols to triage callers to community pharmacy does not exist.

The Guild held meetings with both NPS and the Government prior to that decision. The Guild has stressed that it is now vital to incorporate appropriate telephone protocols to triage callers to healthdirect services into pharmacy services. This does not exist at present. It is also vital that call centre over time employs pharmacists.

The Guild has offered the resources of Find A Pharmacy and the Guild database as we believe it should be incorporated into the call service and indeed new pharmacy agreement programs availability should also be included over time. Only the Guild resource includes information on trading hours,

services offered by the pharmacy as well as non-English languages spoken by pharmacy staff.

Healthdirect Australia is the collective trading name for the National Health Call Centre Network Limited (NHCCN Ltd) and provides 24 hours a day, seven days a week to healthcare triage, health advice and health information.

It is not yet a truly national service as it is a services only for residents of the ACT, NSW, the NT, Tasmania, SA and WA.

Other states have their own call centre programs but the general view is that consolidation will occur in this sector

There are lessons in the UK as to why pharmacists and pharmacy triage protocols must be involved with the service. In the UK they receive on average 27,000 calls a day and in their own publications they state the most common reasons for calls.

In the UK the five most common reasons for call in order are cold and flu, abdominal

pain, dental tooth/jaw pain, rashes, and medicines enquiries. Research has shown that almost six per cent of calls are solely for advice about medicines and approximately 40 per cent of responses include advice about medicines (Jamieson and Joshua, 2002).

It was from this identified need that the community pharmacy project was born. It has since been rolled out across all NHS Direct sites. One of the aims of the project was to provide safe and appropriate information and referral to an appropriate health care professional (in this case a community pharmacist) following assessment of the caller using the computerised clinical assessment system.

This link is a **UK version** of what the Guild wants to see being established quickly by healthdirect in Australia to ensure that the valuable pharmacist resource is utilised.

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