

# The Island Capsule

## Newsletter of the Prince Edward Island Pharmacy Board

### January 2006

#### **PRINCE EDWARD ISLAND PHARMACY BOARD**

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#### **MEMBERS**

David McLeod, Chair (Lawton's St.Peter's Rd)  
Ken Ramsay, Vice-Chair (Ramsay's Ph)  
Wally Kowalchuk, NAPRA Delegate (Zellers Phcy)  
Linda Gordon-MacEachern (Shoppers Drug)  
Kerry Murphy (Shoppers Drug)  
Iain Smith (QEH)  
Nancy Canham, LayRep  
Connie MacKinnon, Layrep  
Government Rep – Pat Crawford

#### **REGISTRATIONS**

Pharmacists: 160  
Permits: 42 + 7 hospitals + Provincial Phcy  
Students: 29

*This newsletter is distributed to all licensed pharmacies in PEI, emailed and posted on our website. Decisions regarding all matters such as regulations, drug related incidents, etc. are published in it. The PEI Pharmacy Board therefore assumes that all pharmacists are aware of these matters*

#### **ENCLOSURES**

1. Manual Additions – Amended Advertising Regulations
2. Renewal applications – Pharmacists and Pharmacies
3. Adverse Drug Reaction Newsletter

#### **ARE YOU AND YOUR STAFF CONNECTED?**

Pharmacy Managers are reminded that mailings and faxes are only going to them at the pharmacy of employment. **Please ensure your staff pharmacists receive any documents forwarded – this includes newsletters, guidelines etc.** if they are not accessing E-Link.

Pharmacists can also go to [www.napra.ca](http://www.napra.ca) and click on PE to access newsletters and all other documents. This includes application renewals for the coming 2006/7 licensing year.

#### **2006/2007 RENEWALS**

One copy of the renewal applications for both pharmacists and pharmacies are enclosed. Please ensure pharmacy staff is

either provided a copy for submission, or they can access one on the website or from E-Link.

**Please have the application and applicable fee sent to the Board office by March 1, 2006. This will give the office ample time to process the applications by March 15<sup>th</sup> to ensure licensure is not delayed past March 31<sup>st</sup>. Cheques may be post-dated for March 31<sup>st</sup>.**

**Pharmacists are reminded that your Professional Development Log is due by January 30, 2006.**

For the 2007/8 licensing year the CE requirements will be **20** CEUs. Professional Development Log and information on program accreditation can be found on the PEI section of the napra website.

The Board is working with the *Health Human Resources Database* for the province as well as the federal government (through the Canadian Institute for Health Information) as a means to track professional human resources needs in the future. Please ensure you fully complete the data on the application forms – and it is our hope that you will soon be able to register on line and use the database to update your own file – for things like name changes, changes in places of employment, changes to a mailing address etc. ! This database will be used by the Board for its standard database.

#### **MATERNITY LEAVES**

Pharmacists are reminded that *Authorization Regulations 36(e)* states that licensure for **less than four months** is eligible for 50% of the licensing fee. Presently that would be  $\$450 \div 2 = \$225 + \$25 \text{ CE} = \text{net } \$250$ . The fee must be paid at regular registration time (i.e. March 31<sup>st</sup>) with clarification as to the months the pharmacists will not be practicing. Failure to do so would result in a \$100 late fee upon re-licensing in addition to the required fee. The pharmacist must still maintain the 20 continuing education units

(new for re-licensure in 2007/8) for the next year's renewal.

#### **ADVERTISING REGULATIONS AMENDED**

Further to the pharmacist's survey on Loyalty Programs last year, the Board has approved an amendment to the Advertising Regulations. Section 2(d) states that a pharmacist or pharmacy shall not **advertise** inducements of any kind related to the sale or distribution of prescription drugs. It does not prohibit offering loyalty points, for example SDM Optimum, Hbc Rewards, Air Miles, etc for the prescription value. But this cannot be advertised in conjunction with prescription and professional services.

#### **DRUG SCHEDULING CHANGE**

**Desloratadine and its salts and preparations:**

**(in products marketed for adult use – 12 years and older) - Unscheduled**

**(in products marketed for paediatric use – under 12 years of age) – Schedule III**

**Clobetasone butyrate 0.05% in a cream formulation for topical use on the skin – Schedule II**

#### **COMPOUNDING MISTAKES**

There is quite a bit of confusion about compounding, especially with regards to hormones. Some pharmacists may not be aware of Health Canada's compounding rules. Some doctors may not realize pharmacists are not permitted to compound a product purely for cost savings. Patients may not realize that naturopaths do not have prescribing authority in PEI so they can't prescribe topical hormones.

Simply wanting to produce a medication that's cheaper than one commercially is not a good enough reason for compounding a product. You need a valid medical reason, such as a patient with an allergy to a commercial product, or the strength a patient needs is not commercially available.

Another factor which may confuse patients is that you can buy products like progesterone 2% cream over the counter in the United States, whereas in Canada all hormones are Schedule I drugs and can be purchased only with a prescription.

### **Highlights of Health Canada's Policy Framework for Manufacturing and Compounding Drug Products in Canada (June 2000)**

You can:

- Compound sterile and non-sterile dosage forms that are not commercially available
- Combine commercially available products
- Repackage medications in ready-to-administer units
- Prepare limited quantities in anticipation of receiving a prescription
- Buy compounding services from a pharmacy for patients with whom you have an established pharmacist-patient-physician relationship. You need a formal agreement outlining accountability before you can buy services from another pharmacy.

You cannot:

- Compound generic copies of commercially available, ready-to-use products.
- Produce parenteral products made from raw, on-sterile ingredients, such as making morphine 10mg/ml injection from morphine powder.
- Produce investigational new drugs or products with active ingredients that are not commercially available.
- Buy large amounts of bulk compounded products purely for marketing.
- Promote or advertise that you compound specific drugs or drug classes.

You can find the full text of Health Canada's June 2000 *Manufacturing and Compounding Products in Canada: A Policy Framework* by searching under the keyword "compounding" at:

[www.hc-sc.gc.ca](http://www.hc-sc.gc.ca)

The National Association of Pharmacy Regulatory Authorities (NAPRA) expects to finalize new national guidelines for pharmacy compounding soon in consultation with Health Canada's review of their legislation. Check the NAPRA website for updates.

### **NEW CE CO-CHAIRS**

The Board welcomes Grant and Marsha Wyand as co-chairs of the PEIPB CE Committee. Grant can be reached at Wal-Mart Pharmacy in Charlottetown while Michelle is employed with The Drugstore Pharmacy, 680 University Ave. Other committee members include Bethany Lund and Crystal MacEachern.