



**The Pharmacy
Guild of Australia**

WA Branch

Response of the Pharmacy Guild to the Education and Health Standing Committee

RE: Correspondence received 12 November 2018

The Education and Health Standing Committee have asked the Pharmacy Guild of Australia for information to assist them in their enquiry into the role of diet in type 2 diabetes prevention.

The Guild notes the advice that the Committee has received evidence that meal replacement shakes are an effective way to lose weight quickly. The Guild also agrees with the statement that in many cases people using the shakes for this purpose received professional support at the pharmacy in which they have purchased the meal replacement product.

It is well documented that weight loss and dietary intervention can help to prevent or manage diabetes, and meal replacement programs are an effective way to lose weight quickly.

Consultations

The standard approach in community pharmacy is for the pharmacist to manage diabetic patients where counselling is required.

Pharmacies have the capacity and pharmacists have the training to use weight management programs to positively assist diabetic patients with their dietary choices and blood glucose control. However these programs are not remunerated and are provided at the pharmacies cost.

Feedback to the Guild is that demand for meal replacements has been consistent. (i.e. not a fad) These products work in the short term, but as other submissions to this committee testify the results can only be maintained if meal advice forms part of a comprehensive program establishing healthy habits that persist once the shakes are removed from the diet.

There is greater potential for poor outcomes where consumers self-select products which are often sold, unregulated, through supermarkets and pyramid style schemes (E.g. Isagenix, Herbalife) where the patient has no access to advice and support. Having these products removed from those channels would enable health professionals including community pharmacists to provide counselling and referral to allied health and general practice where appropriate.

Product and Support

Comprehensive programs are available through pharmacy.

These include a program researched and designed by the CSIRO which includes monitoring of cholesterol, BP, BGL and weight. Staff (pharmacists and pharmacy assistants) have to receive training. Initial consultations can be up to an hour, and then there are regular appointments made.

Pharmacies have to roster accordingly:

- All consultants trained.
- Milestone consults to be conducted by a pharmacist.
- All consults are recorded on the Guild software known as GuildCare, with patient metrics measured at 0, 1, 3&6 months to demonstrate positive changes in body chemistry.
- A full menu book associated with the program is provided to teach healthy eating and portion sizes post program and a manufacturer designed app is available.
- Pharmacists are not paid for the consults.
- The results would suggest that a Government investment in such a program would prevent downstream health costs.
- “Impromy” may have statistics to support their efficacy of this program.

Another product “Optifast” is used for pre surgery weight loss and has been used successfully as part of a program to lose weight with the associated advice of a pharmacist.

Other meal replacement products offer varying degrees of support:

- Diet books, websites and apps.
- None are associated with a dedicated consulting program.
- All necessary information and precautions are outlined on the boxes and associated websites.
- If a consumer needs information and advice they are referred to a pharmacist.

Demand

Feedback to the Guild indicates the demand for meal replacements has remained consistent. The Guild does not have access to the data required to provide an evidence based answer to this query. This data should be available from the suppliers.

Consultation Areas

In WA the Pharmacy Registration Board oversees the Pharmacy Act 2010 and associated regulations which mandate the provision of an area for privacy. Many WA pharmacies now have separate consult rooms especially since the introduction of the successful community pharmacy immunisation programs (the adult influenza program and the NIP 65years and over influenza vaccination program). The programs require the pharmacies to have a private consulting area. These spaces are used for professional services and clinical counselling.

Resources

The 6CPA funded Medscheck and Diabetes Medscheck Program is the only remunerated program available to pharmacy. The lack of appropriate remuneration is a major obstacle in the provision of a community pharmacy based diabetes program which would necessarily include among other things the role of diet and the appropriate use of shakes.

Some pharmacies have initiated their own diabetes management programs which demonstrate success however these are at their own expense and the data and IP is tightly held by those pharmacies that have made the investment.

Unfortunately without funding of broader community pharmacy based trials the success of these programs and the role community pharmacy can play in lowering the burden of illness and associated costs will not be recognised and a significant opportunity will remain unrecognised.

Collaboration

Preventative health is part of the priorities included in the draft national women's, and men's health strategies (2020-30), including preventing/reducing overweight and obesity. Early identification and intervention with people at risk of developing type 2 diabetes is the key to delaying or preventing long term complications that constitute the major burden on the health and hospital system (eyes, kidneys, lower limbs, cardiovascular).

Pharmacy is ideally placed to identify at risk patients early in their pathway and provide an entry point linking with GPs and other appropriate allied health services.

A community pharmacy diabetes screening program and dietary consulting service has the potential to provide significant savings to the state health budget.

The Committee may also be aware that the Guild has provided a submission to the "Sustainable Health Review" (SHR) identifying a range of primary and secondary health care options. It is attached for the Committee's information.

Opportunity

There are 650 community pharmacies in WA seeing up to 138,000 people a day. The sector employs a tertiary trained workforce in excess of 2,500 medicine management experts and up to 8,000 pharmacy assistants and thanks to our unique distribution ("Location rules") community pharmacy is evenly distributed throughout WA and more accessible than GPs, supermarkets or banks ("MicroPlan DiMasi 2016"). The profession consistently reports a high level of trust with the public (e.g. Menzies Nours survey 2012, Roy Morgan 2014) and various journals report that a community pharmacy sees a patient on average 14-18 times per year and 2-3 times more than their GP.

There exists an opportunity to utilise this level of access, trust and professional expertise to provide early detection and intervention services to patients that may be at risk in developing Type 2 Diabetes.

Recommendation:

- *Implement a pilot community pharmacy diabetes screening program and dietary consulting service which has the potential to make significant savings to the state health budget.*
- *Remove dietary products from supermarkets and other non-regulated channels.*

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