

18 September 2020

A/Prof Chris Freeman
Pharmaceutical Society of Australia
381 Royal Parade
Parkville VIC 3052

Via email: apf@psa.org.au

Dear A/Prof Freeman,

Re: Pharmacist Labelling of Antibiotics

The Royal Australian College of General Practitioners (RACGP) welcomes the opportunity to provide comments on the changes in labelling of antibiotics and to co-sign a letter to the Medical Software Industry Association (MSIA). Practical solutions are required to decrease antibiotic overprescribing and we support a collaborative, multi-sectorial approach to reduce antimicrobial resistance in Australia.

We provide the following comment and feedback on the recommendations and the proposed letter to the MSIA.

Changes in cautionary advisory label D 'until all taken'

The RACGP welcomes this change to labels. It is important to note label changes alone will not resolve potential inappropriate antibiotic use. We recommended these changes should be done in conjunction with pharmacists only dispensing the required number of doses, matching the duration the patient should be taking the antibiotics, when this has been specified by the prescriber. Dispensing only the required number of doses would eliminate the issue of patients having to remember when to cease their antibiotics.

Communication between prescriber and pharmacist. Pharmacists should always seek prescriber clarification on the duration and reason for antibiotic use if this has not been specified on the script

The RACGP recognises communication can be problematic if the prescriber is not available when the patient presents a prescription to the community pharmacist. However, the process of prescribing involves assimilation of multiple sources of information followed by a shared decision-making process and discussion with the patient about how and when to take the medication and for how long. Community pharmacists will not know all these details. Furthermore, for antibiotic prescriptions it is relatively common for GPs to write a 'delayed prescription'.

Changes to prescribing software

Default repeats for antibiotic prescribing is no longer an issue as repeats have been removed from the Pharmaceutical Benefits Scheme (PBS) listing of common antibiotics. In response, general practice clinical software vendors have removed this default setting.

Letter to MSIA

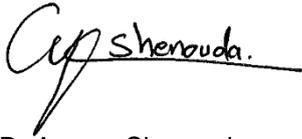
As there are many and varied sources of guidance for the duration of a course of antibiotics, which will change as knowledge changes, software will have to be regularly updated. It may be unrealistic to expect these could be introduced by software providers as early as January 2021 and we suggest this is acknowledged in the letter.

Furthermore, as default repeats for prescribing have recently been removed by software providers, this recommendation is no longer necessary in the letter.

However, we fully support the intent of the letter and will be happy to review and sign an updated version.

Thank you again for the opportunity to provide feedback on the labelling of antibiotics. For any enquiries regarding this letter and advice on member communication, please contact Stephan Groombridge, eHealth and Quality Care Manager on 03 8699 0544 or stephan.groombridge@racgp.org.au.

Yours sincerely



Dr Ayman Shenouda
Acting President