



23 September 2022

Medicines Classification Committee Secretary  
Medsafe  
PO Box 5013  
Wellington 6145  
via email: [committees@moh.govt.nz](mailto:committees@moh.govt.nz)

Dear Jessica,

### **MEDICINES CLASSIFICATION COMMITTEE (MCC) COMMENTS TO THE 69<sup>th</sup> MEETING AGENDA October 2022**

Thank you for the opportunity to submit comments on the agenda for the 69<sup>th</sup> meeting of the Medicines Classification Committee.

The Pharmaceutical Society of New Zealand Inc. (the Society) is the professional association representing over 2,500 pharmacists, from all sectors of pharmacy practice. We provide to pharmacists professional support and representation, training for continuing professional development, and assistance to enable them to deliver to all New Zealanders the best pharmaceutical practice and professional services in relation to medicines. The Society focuses on the important role pharmacists have in medicines management and in the safe and quality use of medicines.

Regarding the agenda items for the above meeting of the Medicines Classification Committee, the Pharmaceutical Society would like to note the following comments for consideration:

#### **6.1a Methenamine hippurate – proposed up-scheduling change to classification**

Methenamine is currently considered an alternative form of antimicrobial prophylaxis for those with a history of recurrent UTIs, to avoid long-term antibiotic use.

It appears that the product is well used in New Zealand and prescription volumes have increased significantly since 2020. Before a decision is made regarding a potential up-scheduling, it would be good to understand the total volumes of product being used across the country. If the majority continues to be on prescription, there may be no requirement for an up-scheduling.

Any up-scheduling to the restricted category may result in additional cost and perhaps reduced access for patients. Resources and training for pharmacists to provide appropriate treatment under a change in category would also need to be developed and potentially funded. These areas will need to be considered by the committee before in any change in classification occurs, to ensure patients continue to access appropriate treatment.

#### **6.1b Glecaprevir and Pibrentasvir – proposed change to prescription classification statement**

The Society supports increased access to Maviret for those New Zealanders requiring diagnostic services and treatment for hepatitis C. The applicant's suggested approach is a novel one and the intended outcomes to improve the health of New Zealanders is clear. We would like to suggest that other appropriately trained health professionals, including the pharmacist workforce are considered as part of this proposed reclassification. This would increase the number of "touch points" for patients diagnosed with this condition and ultimately timely access to treatment and care.

We are of the opinion that some additional thinking may be required around the governance requirements for the potential cohort of nurses (or others) delivering the proposed service. Further exploration around the bespoke training and its link to current health professionals' scopes of practice is also required to ensure safe and effective service delivery, as the proposed approach does not currently fit under the nursing scopes.

We are also concerned that the current proposal cannot be achieved using the "prescription except when" category to generate a "nurse initiated" request to a pharmacist for supply. In principle this request to provide would be classified as a prescription. It is not currently possible for this cohort of health professionals (nurses working outside the prescribing scopes) to utilise this approach under the Medicines Act and Regulations.

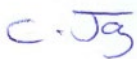
Utilising the pharmacist workforce to "see and treat" through the proposed "prescription except when" approach may be easier and increase access to a larger workforce to provide care and support. However, we would be more than happy to work with the applicant and other key stakeholders to progress their thinking and hopefully address some of these challenges and any other issues raised for consideration at a future MCC meeting.

### **6.1e National Immunisation Schedule - proposed change to prescription vaccine classification statements**

The Society supports Ministry of Health's proposal to widen the classification for a number of vaccines to allow vaccinators who have successfully completed the Vaccinator Foundation Course (or equivalent course) approved by the Ministry of Health and who comply with the immunisation standards of the Ministry of Health to administer the proposed vaccines.

Thank you for consideration of this submission. I would be happy to discuss any aspect of this submission further, if required.

Yours sincerely,



Chris Jay  
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