



A Recap of the 2023 September Symposium EXPLORING THE FRONTIERS OF PHARMACY IN THE DIGITAL HEALTH ERA



by Dr. Stephanie Leigh-de Rapper

[WITS University, 30 September 2023]- The pharmacy industry is rapidly evolving and advancing due to various factors such as improvements in technology, changes in healthcare policies, and shifting patient expectations. With the growth of telemedicine, patients can now access healthcare services from the comfort of their homes. This trend is likely to continue, with more pharmacy services being offered online, such as medication consultations and prescription refills. The emergence of personalised medicine, which involves tailoring treatments to a patient's unique genetic and molecular profile, is likely to further drive changes in the pharmacy industry. Pharmacists will play a key role in the adoption and implementation of these technologies, with the use of automation and artificial intelligence (AI) in pharmacy expected to increase, with the aim of improving accuracy, efficiency, and improved patient outcomes. Therefore, the future of pharmacy is likely to be shaped by a combination of technological advancements, changes in healthcare policies, and evolving patient expectations, all of which are expected to result in improved patient outcomes and more accessible and comprehensive healthcare services.

With this in mind, the intention of the September Symposium was to inspire pharmacists, knowing that the future of pharmacy is within our reach, allowing pharmacists the opportunity to practice in a new realm.

The Hybrid Symposium event was opened by the PSSA Southern Gauteng Chairman, Mr Tshif Rabali, who reflected on the activities of the branch and its growth for the profession. Mr Rabali also provided insights into the vision of the branch for the future, outlining a number of exciting initiatives and encouraging members to get involved to make these visions a reality.



Opening performed by the PSSA Southern Gauteng Chairman, Mr Tshif Rabali

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CPD SAVE THE DATE

Join Medical Academic and PSG Health for a CPD-Accredited Webinar Titled

PREDIABETES: PATIENT AT RISK, SCREENING, AND MANAGEMENT

Addressing prediabetes through awareness, early detection, and lifestyle interventions is vital for reducing the overall burden of diabetes and its associated healthcare costs. This is especially true in an undeserved and resource-poor setting like South Africa, where the prevalence of diabetes could be classed as a public health emergency. Join Dr Sindeep Bhana, the Head of Diabetes, Endocrine and Metabolism in Internal Medicine at Chris Hani Baragwanath Hospital, for a webinar on the importance of identification and management of prediabetes.

DATE: 23 November 2023

TIME: 19:00 to 20:00

TOPIC: 'Prediabetes: patients at risk, screening, and management'

SPEAKER: Dr Sindeep Bhana

CPD POINTS: 1 General point

The link to register is: [https://urldefense.com/v3/_https://scanmail.trustwave.com/?c=20371&d=1PLI5d3BJoZYTh5rKjrHBFjPnBnJAdrKx8V5WdSckg&u=https%3a*2f*2fwww*2eb2bcentral*2eco*2eza*2fwebinar*2fprediabetes-patients-at-risk-screening-and-management*2f_:JSUIJSUIJSUI!!NgSi4SaN6ydtRVQ-!yhq0m9leVZRSTNmHZXyrZPVv4Wf4eqALhyerukUX7hC1y_Q1XHWMCyvRqGd_-4H4y3S0Q6F48L7uqODJUZM4_Oi9Jw\\$](https://urldefense.com/v3/_https://scanmail.trustwave.com/?c=20371&d=1PLI5d3BJoZYTh5rKjrHBFjPnBnJAdrKx8V5WdSckg&u=https%3a*2f*2fwww*2eb2bcentral*2eco*2eza*2fwebinar*2fprediabetes-patients-at-risk-screening-and-management*2f_:JSUIJSUIJSUI!!NgSi4SaN6ydtRVQ-!yhq0m9leVZRSTNmHZXyrZPVv4Wf4eqALhyerukUX7hC1y_Q1XHWMCyvRqGd_-4H4y3S0Q6F48L7uqODJUZM4_Oi9Jw$)



The first speaker for the day was Mr Nhlanhla Mafarafara, motivational speaker and President of SAAHIP. Mr Mafarafara provided an inspiring talk titled, "Repositioning pharmacists for sustainable practice" where he reminded delegates of the opportunities that lie ahead for pharmacists, and how we can grow if we choose to claim them. Mr Mafarafara shared insights from his own journey as a pharmacist and left the audience encouraged and excited for the future.



Mr Nhlanhla Mafarafara, President of SAAHIP.



Mr. Hannes van der Merwe, pharmacist from Deloitte.

Following this introduction, guest speakers Mr. Hannes van der Merwe (a pharmacist at Deloitte), Mrs. Kerry Scott (EmGuidance), Ms. Leigh van der Bijl (Discovery Health), Mrs. Rubina Shaikh (WITS) and Mr. Paul Voigt (MediClinic), gave inspiring talks about the move of pharmacy into the future.

Mr. Hannes van der Merwe rounded up the first session of the morning, sharing how at Deloitte, the future of health is expected to be driven by digital transformation enabled by radically interoperable data and open, secure platforms. He outlined how patient outcomes could be improved with digital transformation aimed at the use of a central digital tower containing all patient information. This would see the pharmacist of the future using dispensing units in retail, becoming a 'Hospital@Home' environment for institutional pharmacists and moving into value based-care for researchers.

Mrs. Kerry Scott of EmGuidance started the second session off with a bang, introducing delegates to the EMGuidance Script which aims to empower healthcare professionals in the frontline. EMGuidance Script aims to deliver the fastest, most intelligent, secure script for healthcare professionals as a means to decrease errors, increase effectiveness and save time. Kerry walked delegates through the legalities of ePrescribing and the journey EMGuidance Script underwent to create the technology that meets the needs of patients, while maintaining legal requirements. Kerry then provided a step-by-step guide on how to use the EMGuidance Script software, and was faced with a barrage of questions on how quickly this could be employed in pharmacies. To date, EMGuidance Script can be found at Medirite, Dischem, Clicks, Medipost, S Buys Pharmacy and Mopani Pharmacy, to name a few.

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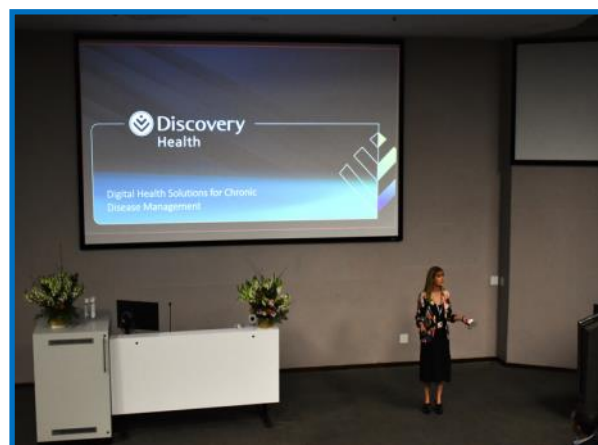
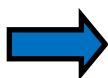


Following this exciting and practical application of the future of pharmacy, Ms. Leigh van der Bijl of Discovery Health (Head of Pharmacy Contracts: Population Health Management) shared how digital health solutions are being used to manage chronic diseases, and are motivating patients to comply with treatment protocols, and manage their chronic conditions due to incentives for improvements and real-time information awareness. Furthermore, Leigh reiterated how pharmacists are an integral part of the care team in relation to the use of these technologies for coaching patients, providing care and support and monitoring.



← Mrs. Kerry Scott facing questions from session chair, Mr. Frans Landman (Chairman, SAACP SG) concerning the EMGuidance Script.

Ms. Leigh van der Bijl of Discovery Health sharing the impacts of technology on chronic disease management.



The last session of the day was provided by Mrs. Rubina Shaikh and Mr. Paul Voigt, both looking into the crystal ball to show projected trends for pharmacy and pharmacy practices of the future. Mrs. Shaikh kicked the session off with her talk titled, “Disruption in the Future of Pharmacy: Challenge or Transformative Opportunity.” In this insightful talk, Rubina highlighted to delegates technologies that have been successfully implemented in recent years and how the use of these systems has benefited patient outcomes and improved pharmacy practices. She then provided insights into the future, and considered technologies such as smart-glasses to detect diabetic retinopathy, smart toothbrushes to detect development of infection, implantable devices to alter physiological parameters; as well as the use of hand-held imaging and scanning devices to identify early-stage cancer, and wearable technology that can communicate directly with Emergency Services during life altering events. These technologies seemed far off, however, Rubina proved how these technologies are not only in the research pipeline, but many are currently being marketed for use. This rapid expansion of technology in pharmacy left the delegates intrigued and vested in researching these opportunities for use.

The last guest of the day was Mr. Paul Voigt who joined from Cape Town via livestreaming. In this session, Paul took participants on a journey through the ages from the ‘long, long ago, to the right now’ and then of what’s to come for digital health. This fascinating talk shared how apps and technologies have been implemented and how many have failed to be consistent changers of pharmacy practice. According to the Medical Futurist, the world is already in advanced stages of virtual reality for pain management, fitness trackers, mental health and smartphone apps, with some of these technologies moving into a trough of disillusionment, where they do not live up to their initial expectations for practice. For what is coming up?

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On the horizon is 3D bioprinting, Artificial Intelligence (AI) for medical decision making, 3D printed drugs, Augmented reality, AI drug decision making, with the next era in the digital age expected to be quantum computing. When asked by attendees how far off this was, Paul made it clear that technology is the future of practice, and we need to jump onto the boat as a healthcare profession or run the risk of being left behind.



Ms. Rubina Shaikh of WITS kicking off the last session of the Symposium addressing the future of technology in pharmacy



Mr. Paul Voigt, joining virtually, answering questions posed by the session chair and chairman of SAAHIP, Mrs. Rashmi Gosai.

The CPD committee of the PSSA SG Branch would like to acknowledge the generous donations made by Viatris, WITS Pharmacy and the SAACP towards the success of the September Symposium. Furthermore, the committee would like to extend its gratitude to WITS Pharmacy and the Pharmacy Practice team for providing the technical assistance and for managing the hybrid technology for the event, and Ms Cecile Ramonyane for managing the administration. Lastly, the team also wishes to extend its immense gratitude to the Chairpersons and Vice Chairpersons of the Sectors for their engagement in the Symposium and providing amazing session chair services on the day.



Sponsors: Team Viatris



Sector involvement was a great reason for the success of the Symposium in 2023.

As the symposium concluded, it was evident that the future of pharmacy is being shaped by innovation, technology, and collaboration. The Southern Gauteng Pharmaceutical Society of South Africa (PSSA) is already looking ahead to future events and opportunities to bring together the pharmacy community in the region. The success of the September 2023 Symposium is just the beginning of what promises to be an exciting and transformative journey for pharmacy professionals in Southern Gauteng.

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Left to Right: PSSA SG CPD committee 2023: Mr. Hilton Stevens, Mrs Rashmi Gosai (Chairman of the SAAHIP SG Branch), Dr Stephanie Leigh-de Rapper (Chairman of the CPD Committee and Vice-Chairman of the PSSA SG Branch), Mr. Tshif Rabali (Chairman of the PSSA SG Branch), Mrs. Patricia Tharage (Vice-Chairman of the SAACP SG Branch), Mr. Frans Landman (Chairman of the SAACP SG Branch).

Stay tuned for more updates and future events from the Southern Gauteng Branch of the PSSA.

Professional Indemnity Insurance

According to Board Notice 83 of 2008 published on 29 August 2008 any person registered with the South African Pharmacy Council who performs one or more of the functions relating to the scope of practice of the category in which he/she is registered must be covered by his / her own indemnity insurance.



Visit
www.pssa.org.za
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One must be a member of the Pharmaceutical Society in order to apply for Professional Indemnity Insurance Plan (PIP).



SAVE THE DATE



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SAACP SG BRANCH REPORT

A video recording of an interview on 31 August with Professor Alex van den Heever by Ms. Pumza Hlekane (SG Branch), on "How the proposed National Health Insurance (NHI) will affect community pharmacy" was professionally produced. This is now available, and Branch members are encouraged to visit the SAACP Website and YouTube (<https://www.saacpsg.co.za>), as well as on the Branch Facebook page (FB: South African Association of Community Pharmacists-SG)

Tshif Rabali, Frans Landman, and Gary Kohn attended a **Deep Dive Workshop** on 29 September at the Bryanston Country Club, which was extremely informative and pertinent at this current time, and Gary Kohn has generated a lengthy and detailed report on the issues covered, for presentation to the Branch Committee at the planning session.

The SARCA Africa Exhibition will take place in March 2024, at the Gallagher Estate venue.

The SAACP SG Branch AGM will be convened virtually at 20:00 on Tuesday 13 February 2024, and timely Notice will be published.



The PSSA Book Department


Do you know that the Book Department has a range of essential publications for pharmacists at preferential prices for members of the PSSA?

From overseas publications such as Martindale, Merck Manual and Dorland's Illustrated Medical Dictionary to local publications such as the Daily Drug Use, South African Medicines Formulary (SAMF) and the Scheduled Substance Register.

Ordering is as simple as 1, 2, 3.

1. Go to the PSSA website, www.pssa.org.za click on Membership and then Member Services.
2. Complete the order form and submit it.
3. Make payment via EFT.

Or contact Dinette at PSSA National Office on (012) 470-9559 or at dinette@pharmail.co.za



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WHAT THE NOSE KNOWS ABOUT PHENYLEPHRINE

Phenylephrine is a medication that has been used for over 80 years to relieve nasal congestion. It was patented in 1927 and came into medical use in 1938 in the USA. It was one of the first medications to be developed for this purpose, and it remains one of the most popular over-the-counter nasal decongestants today.

Phenylephrine is a sympathomimetic medication, which means that it works by stimulating the alpha-1 adrenergic receptors, which are found in the blood vessels and other tissues throughout the body. When phenylephrine binds to these receptors, it causes the blood vessels to narrow. This narrowing of the blood vessels reduces nasal congestion by preventing fluid from draining from the blood vessels into the tissues lining the nasal passages. This reduces swelling and inflammation, which makes it easier to breathe. The vasoconstriction also causes a dose-dependent increase in arterial blood pressure. Phenylephrine can also increase blood pressure by increasing the force of the heart's contractions. Studies in humans reported both decreased and increased cardiac output following phenylephrine administration because of either increased afterload or reduced heart rate and an increased preload, respectively. In the eye, phenylephrine acts locally as a potent vasoconstrictor and mydriatic by constricting ophthalmic blood vessels and the radial dilator muscle of the iris.

Phenylephrine is generally well tolerated and effective for most people when used as directed. However, it can cause side effects, such as dryness and irritation of the nose, blurred vision, headache, dizziness, high blood pressure, and a fast, slow, or irregular heartbeat. Phenylephrine should therefore be used with caution in people with certain medical conditions, such as high blood pressure, heart disease, and thyroid problems.

Phenylephrine is widely available over-the-counter (OTC) in a variety of forms, including topical nasal sprays and drops, and oral formulations. Many combination oral cold and flu formulations contain phenylephrine as a decongestant.

A recent U.S. Food and Drug Administration (FDA) advisory panel concluded that OTC oral phenylephrine is ineffective as a nasal decongestant. The regulator's independent Nonprescription Drugs Advisory Committee voted unanimously that *"orally-administered phenylephrine is not effective as a nasal decongestant at the monographed dosage (10 mg of phenylephrine hydrochloride every 4 hours) as well as at doses up to 40 mg (dosed every 4 hours)."* The committee reported that phenylephrine is however effective in nasal sprays and drops. This finding is not especially surprising, as oral phenylephrine's effectiveness has been questioned for decades. According to a report submitted by pharmacists from the University of Florida and the American Pharmacists Association (APhA) in 2015, *"It is only the oral route that is not effective, because 99% of the parent drug is inactivated in the gut and during the first pass through the liver."*

The FDA has not taken any further action regarding phenylephrine products and the availability thereof, but one pharmacy group in the USA has already withdrawn the products containing oral phenylephrine from their shelves.

It is important to note that only the *effectiveness* of oral phenylephrine is questioned and that there are no concerns about *safety* issues with use of oral phenylephrine at the recommended dose. In products that contain additional active ingredients (e.g., paracetamol or ibuprofen) that treat symptoms other than congestion like headaches or muscle aches, the presence of phenylephrine does not affect how other active ingredients work to treat those symptoms. Patients with common cold symptoms may still find some relief from the other ingredients in multi-product formulations. There are also several alternatives to phenylephrine available including nasal decongestants like pseudoephedrine, oxymetazoline, and xylometazoline.

References available upon request.





Kind attention: The Editor, The Golden Mortar

Dear Sir,

I note with keen interest the debate on National Health Insurance. Independent community Pharmacists can play a very important role in implementing the concept. They need empowerment. Pharmacists must be empowered to be Primary Care Drug Therapists (PCDT) with Section 22a permits. The concept is to start at a primary health care level.

We do not need The Corporates. They can handle the front shop, and the diminishing private sector market. They can compete with the corner supermarkets, cafes and spaza shops, and also street vendors. They can release their pharmacists and other auxiliary staff for customer support.

Because of the economic squeeze, people are opting for Hospital care only medical scheme benefits.

This segment is dropping to 14% of the population, who are caring for potentially 86% of the population. The NHI pharmacist will operate from a pharmacy with a dispensary and a clinic. Municipal recreational centers are ideal for this purpose with little or no overheads. It need not be in a shopping mall or other high rental premises. Patients will be assessed and treated. Any cases that cannot be handled will be referred to a government hospital for further evaluation.

The pharmacy, first port of call, will receive a fee from government. It will relieve the overcrowded hospital Pharmacies, who will then be able to devote more time with patients. Nursing Sisters will be empowered to run mini hospitals within their scope of practice, working closely with the pharmacist. This will relieve the overburdened doctors and specialists at government hospitals. They, too, will be compensated by government.

This is a bottoms-up concept, not-top-down concept. Government employees must think "Business". Private sector must think community - A paradigm shift. Large scale fraud, theft and tender irregularities will be on a much smaller scale. Pharmaceutical industry must be aligned, with limited drugs on code.

Our great rainbow nation is geared for this. National health insurance is already here in its rudimentary state. We need the political will to implement it fully.

Take care, God bless.

Kenneth Anthony Hanna.
Pharmacist.

National Pharmacy Museum Artefacts



R285



R165



R95



R360



R325

To start your very own
collection please contact:
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ceciler@pssasg.co.za



THE NATIONAL PHARMACY MUSEUM HAS A NEW HOME

by Lynette Terblanche

The 52 Glenhove Road building was home to an extensive collection of books (some dating back to as early as 1886), fondly known as the Pharmacy Library, as well as the National Pharmacy Museum, with numerous displays showcasing the rich heritage of our noble profession.

The sale of 52 Glenhove Road necessitated the relocation of the Library and the Museum.

It was very important that suitable premises be found that continue to display the history of Pharmacy, and the PSSA Southern Gauteng (SG) Branch is deeply indebted to Aspen Pharmacare for providing alternative premises for the Museum

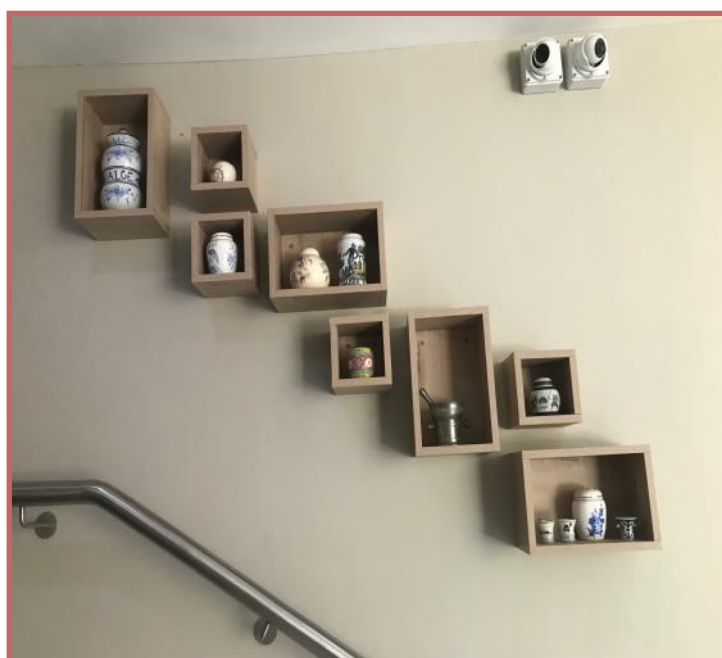


Entrance area to building 1

The relocation process was no mean feat; all exhibits were marked according to their respective display cabinets, wrapped, and boxed, and transported to a holding area on the Pharmacare campus, from where the items were moved to the current display area, once the additional display cabinets were installed and other renovations to the designated area were complete.

It soon became clear that space was limited and that not all the exhibits could be displayed in the new premises; some exhibits, such as the dispensary shelving donated to the Museum in commemoration of Cecil Abrahamson, were non-negotiable and have been accommodated.

The accompanying photographs illustrate the different displays in the new premises; displays in cabinets have been created according to specific themes within the pharmacy profession. All items have been indexed and an inventory list of all displays is available.



Exhibits alongside staircase to meeting room

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The Cecil Abramson Dispensary

Fortunately, several duplicate and excess items could be donated to the Pharmacy Department at Wits University, including an extensive collection of dry plant and animal material, traditional medicines, as well as glass laboratory equipment.

In addition, the Branch would like to acknowledge A Thermal who agreed to destroy the bottled substances and medicines at no cost to the Society. We salute you for this service to pharmacy!



Tools of the Trade

The National Pharmacy Museum and Library has, for several years, been administered and financed by The Southern Gauteng Branch of the Pharmaceutical Society. To cement the concept of a National Pharmacy Museum, much of the administration has been transferred to the National Office, for which we are very grateful.

The Museum is now a fully-fledged Section 21 Company (not-for-profit company) with a bank account into which donations can be made and claimed back from SARS. More details will be made available later.

We hope to appoint a curator soon who will offer guided tours of the museum.

Unfortunately, the Library could not be housed on the same premises as the Museum and found a home at 6 Fort Street, Illovo Extension, on the new premises of the PSSA Southern Gauteng offices.

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Medicines from the Bible Display



Pharmacognosy & Production Equipment

All duplicate books have been removed and have been arranged on specially built shelving, according to subject matter, in a separate facility on the property. In due course, we hope to have a list of all available books published on the PSSA website.

A list of the duplicate books that have been removed from the library will continue to be published in The Golden Mortar from time to time, and should any member be interested in acquiring such a specific publication, this will be available at a nominal cost (donation to the museum.)



Library at 6 Fort Street, Illovo Extension

How to visit the museum?

1. Make your way to Health Care Park in Woodlands Drive, Woodmead during office hours.
2. At the entrance to the Park, inform the security guard that you are visiting the museum.
3. You will be directed to Building 1 where the museum is situated.



The Chairman of the Editorial Board is David Sieff, and the members are Shaista Nabee, Dr Stephanie Leigh-de Rapper, Gary Köhn, Yolanda Peens, Lynette Terblanche and Cecile Ramonyane, Branch Secretary. All articles and information contained in The Golden Mortar, of whatsoever nature, do not necessarily reflect the views or imply endorsement of the Editorial Board, the Branch Committee, the PSSA, its Branches or Sectors. The Editorial Board and the aforesaid cannot therefore be held liable. Every effort is made to ensure accurate reproduction and The Golden Mortar is not responsible for any errors, omissions, or inaccuracies which may occur in the production process.

The Editor reserves the right to amend punctuation or text for correctness, and to summarise where necessary.

We welcome all contributions and as space permits, these will be published.

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Academic Pharmacy:	Prof Yahya Choonara & Muhammed Vally

Contact them through the Branch Office: Tel: 011 442 3615

The Editorial Board acknowledges, with thanks, the contributions made by the SA Association of Community Pharmacists (SAACP) Southern Gauteng Branch, to the production of this newsletter.

