



WELCOME

Shortage of Palliative Care Medications during COVID-19 - Part 2

Host: Jeffrey B. Moat

Moderator: Dr. Charlie Chen

Presenters:

Dr. Ebru Kaya

Dr. Bob Sauls

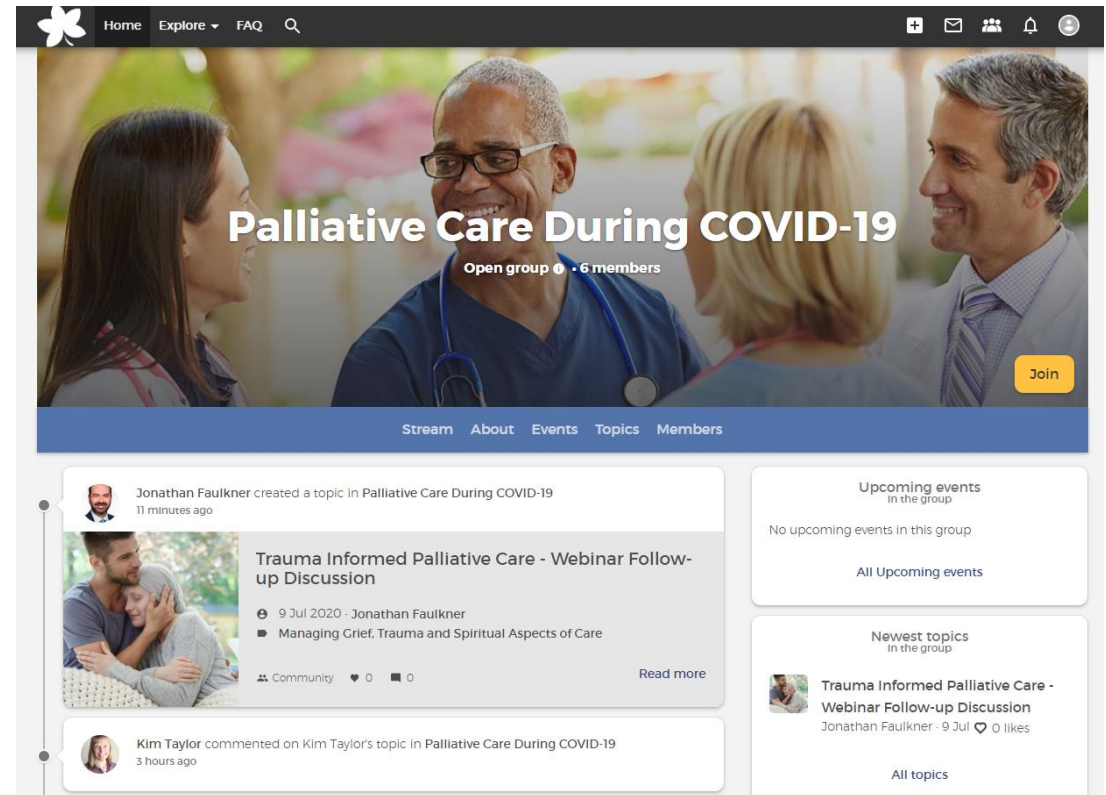
Marcus von Krosigk

This webinar will begin soon. Please note your microphone is muted.
Please use the Q&A function to submit questions.



Introducing: The Canadian Palliative Care Exchange

- CSPCP and Pallium are launching a moderated online community of practice www.cpcexchange.ca
- Early launch for participants from this webinar
- Join the Exchange now to:
 - Ask questions about palliative care during the COVID-19 pandemic
 - Share your experiences
 - Teach and learn with colleagues from across Canada



Housekeeping

- Your microphones are muted.
- Use the Q&A function at the bottom of your screen to submit questions or comments.
- This session is being recorded and will be made available on YouTube.

Presenters

Host

Jeffrey B. Moat CM

Chief Executive Officer, Pallium Canada

Moderator

Dr. Charlie Chen MD, MEd, CCFP (PC) FCFP

Program Medical Director, Palliative End-of-Life Care Program, Calgary
Zone, Alberta Health Services

Associate Professor, Division of Palliative Medicine, University of Calgary

Presenters

Panelists

Dr. Ebru Kaya MD BS, MRCP (UK), CCT (Palliative Medicine)

Palliative Medicine Program Director, University of Toronto Site Lead,
Toronto General Hospital, University Health Network

Dr. Bob Sauls, CCFP (PC), FCFP

Provincial Clinical Co-Lead, Interim, Ontario Palliative Care Network

Marcus von Krosigk, BSc Pharm, ACPR

Clinical Pharmacist

Declaration of conflicts

Pallium

- Non-profit
- Generates funds to support operations and R&D from course registration fees and sales of the Pallium Palliative Pocketbook
- Partially funded through a contribution by Health Canada.
- These webinars are supported by an unconditional education grant from Boehringer-Ingelheim (Canada) Inc.

Presenters

- Jeffrey B. Moat: CEO Pallium Canada
- Dr. Charlie Chen
- Dr. Ebru Kaya
- Dr. Bob Sauls
- Marcus von Krosigk

Declaration of conflicts

Canadian Society of Palliative Care Physicians

- Not for Profit
- Funded primarily by membership dues and annual conference
- Community of Practice (offered jointly with Pallium) supported by the Canadian Medical Association, Scotiabank and MD Financial Management

Learning objectives

Upon completing this webinar, you should be able to:

- Identify resources for identifying current and pending shortages;
- Recognize conservation strategies at a local, provincial and national level;
- Understand pharmacy regulations impacting care.

Current State

Dr. Ebru Kaya

- Shortages???

Drug shortages and strategies for conservation

- National - CSPCP (Ebru Kaya)
- Provincial – Bob Sauls
- Local – Marcus Von Krosigk

National - Challenges

- Palliative care drugs particularly susceptible
- Stockpiling by larger institutions in some cases
- Existing drug shortages prior to pandemic
- Drug components need to be sourced internationally
- No transparent process for reporting and monitoring drug shortages
- All stakeholders have difficulty predicting future demands

National actions: perspective from the Canadian Society of Palliative Care Physicians (CSPCP)

- Early on, CSPCP members reported medication shortages, particularly in community
- CSPCP immediately alerted the Standing Committee on Health and the Health Canada End of Life Care Unit.
- Health Canada linked us with their Drug Shortages Unit (DSU)
- DSU promptly formed a Tier Assignment Committee (TAC) for Palliative Care Drugs with CSPCP as a key clinical informant.

National Work – Drug Shortage Unit (DSU) at Health Canada

- The Tier Assignment Committee (TAC) for palliative care drugs considers which drugs are Tier 3. CSPCP is an Ad Hoc member.
- Tier 3 shortages are those that have the greatest potential impact on Canada's drug supply and health care system. Impact is based on low availability of alternative supplies, ingredients or therapies.
- The DSU works with manufacturers and distributors to monitor supply and distribution of Tier 3 drugs for COVID-19 and Palliative Care, and to identify alternate sources when needed.
- Methotrimeprazine and phenobarbital added to Tier 3 list April 28

TAC - Multi stakeholder meeting – May 5, 2020

| | |
|---|---|
| TAC members | Purpose - Drug shortages experienced despite good supply Coordinate and exchange information related to the: <ul style="list-style-type: none">• Existing supply• Re-supply timelines• Allocation strategies• Mitigation options |
| <ul style="list-style-type: none">• Health Canada• Provincial and Territorial Drug Shortages Task Team• Canadian Society of Palliative Care Physicians• Canadian Medical Association• Canadian Society of Hospital Pharmacists. | |
| Invited industry members <ul style="list-style-type: none">• Manufacturers• Wholesalers• Distributers | |

Pharmacy regulations impacting care

- Contacted National Association of Pharmacy Regulatory Authorities (NAPRA) re regulations that are causing issues clinically.
- Provincial and territorial Pharmacy regulatory authorities
- Also sent to CMA
- CSPCP continues to work with provincial clinical groups to the extent possible, trying to coordinate efforts with provincial pharmacy regulatory authorities

TAC – current focus

- Re-evaluating Tier 3 drugs
- De-listing where appropriate

Suggestions

- Are you proactively monitoring drug availability in your local area?
- If you have concerns regarding drug availability – contact CSPCP
- Consider some of the regional and local practical suggestions to follow
- Be vigilant
- Not all drug shortage issues are experienced in all regions
- As regions go through the various stages of reopening – will we see an increase in COVID-19 cases?
- Use the current time wisely

Addressing palliative drug supply in Ontario

Dr. Bob Sauls

- COVID-19 Community Drug Shortages Working Group
 - Co-chaired by MOH (Drug Programs) and Ontario Health
 - Initial membership: Regional VP Clinical (5), Palliative Care MDs (2), Home and Community Care (2), MOH (4)
 - Initiated May 5, now meeting biweekly

Workstreams

- Identify the key palliative care drugs and alternates
- Identify conservation strategies
- Identify issues of supply and distribution
- Local/regional communication
- Data collection

Key drugs and conservation strategies

- Identifying key palliative care drugs and conservation strategies
 - <https://www.ontariopalliativecarenetwork.ca/sites/opcn/files/StrategiesForManagingShortagesInPCMedicationsDuringCOVID19.pdf>
 - Policy/regulatory issues
 - Pre-filled syringes
 - Re-dispensing unused medications
 - Ethical Framework: Joint Centre for Bioethics – University of Toronto
 - Symptom response kits (SRKs)
- <http://jcb.utoronto.ca/news/documents/Ethical-Framework-for-Drug-Shortages-during-COVID-Pandemic.pdf>

Symptom response kits

- Important for good clinical care
- Potential for significant drug wastage
- Review of 16 SRKs from Ontario
 - Need for standardization?
- Adjustments during the COVID pandemic
- Just-in time delivery?

Supply, distribution and data

- Monitor and participate in the tier 3 assignment process
- Identify provincial/local distribution issues
 - Real-time communication at frontline level
- Developing community-level reporting
 - Home & Community Care contracted pharmacies
 - Regular reporting on utilization and shortages
 - Ability to project in times of potential shortages

Resources for identifying current and pending shortages: Nationally – Drug Shortages Canada Marcus von Krosigk



Drug shortages homepage

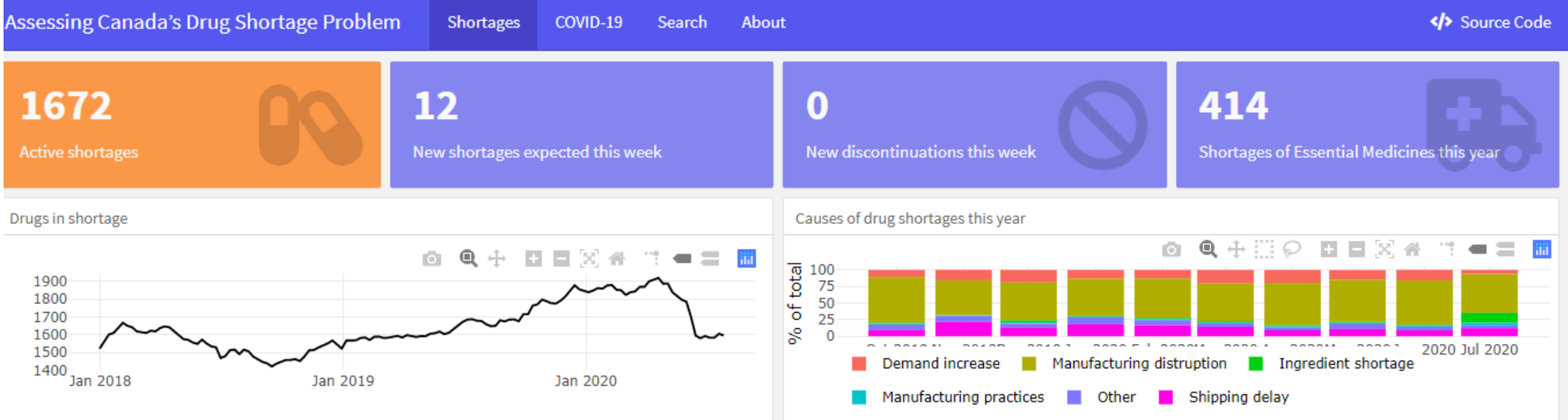
Welcome to Drug Shortages Canada, the website for reporting drug shortages and discontinuations in Canada. The *Food and Drug Regulations* require drug sellers to report when they are not able to meet demand for a product or when they stop selling a product. Information about the website and the regulations can be found on the [About & Resources Page](#).

A shortage means, in respect of a drug, a situation in which the manufacturer to whom a document was issued under subsection C.01.014.2(1) that sets out the drug identification number assigned for the drug is unable to meet the demand for the drug.

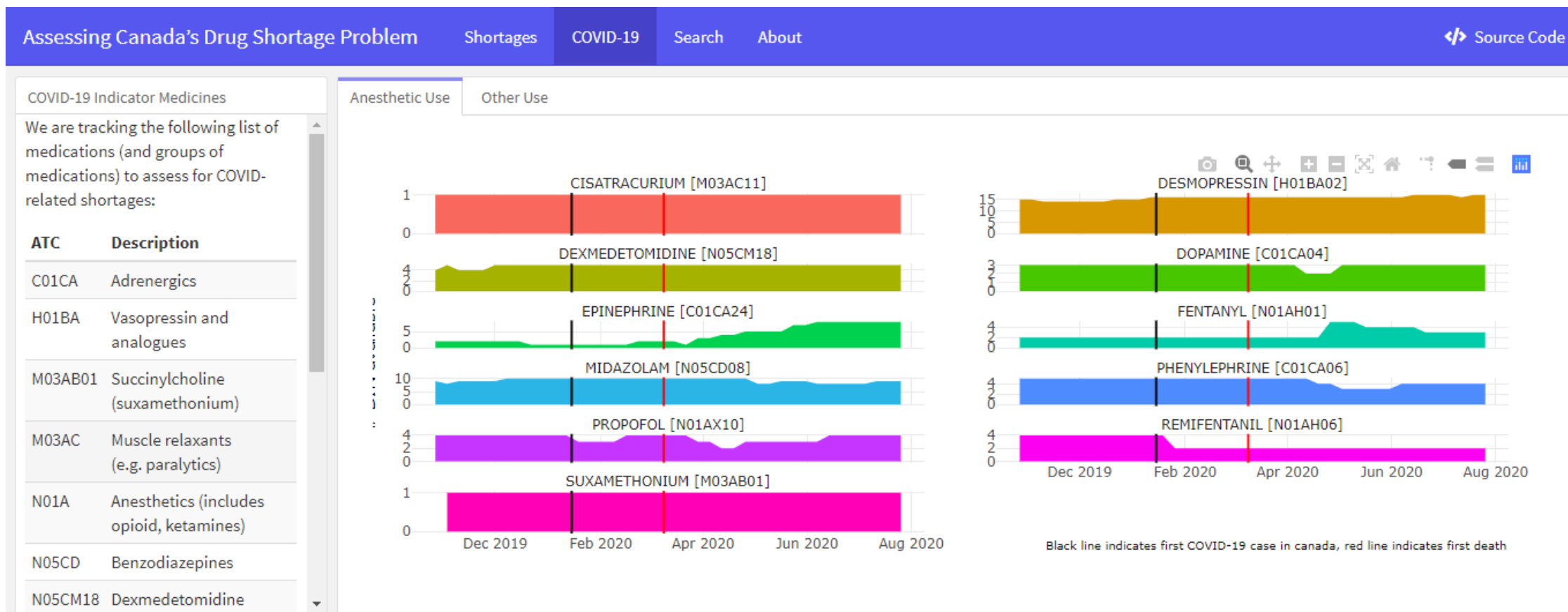
<https://www.drugshortagescanada.ca/blogs> are the newest and most recently updated Shortage and Discontinuation reports.



Resources for identifying current and pending shortages: Nationally – <https://www.drugshortages.pipitone.ca/#shortages>



Drug shortages during Covid-19 pandemic



Resources for identifying current and pending shortages: Nationally

Assessing Canada's Drug Shortage Problem Shortages COVID-19 Search About [Source Code](#)

Searchable list of shortage reports since January, 2020

1,597 records Search:

| | ATC | Drug Name | Dose | Company | Status | Start | Duration (days) | Reason | View report |
|------|----------------------|----------------------------------|----------------------|----------------------------------|----------------------|----------------------|----------------------|----------------------------------|------------------------|
| | <input type="text"/> | <input type="text" value="All"/> | <input type="text"/> | <input type="text" value="All"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text" value="All"/> | <input type="text"/> |
| 1597 | C08DA01 | ISOPTIN SR | 180MG | Bgp Pharma Ulc | Anticipated | 2020-08-19 | | Manufacturing disruption | 116478 |
| 1595 | C09DA01 | LOSARTAN HCT | 100MG 12.5MG | Sivem Pharmaceuticals Ulc | Anticipated | 2020-08-10 | 168 | Manufacturing disruption | 120600 |
| 1596 | N05AA02 | NOZINAN INJ 25MG/ML | 25MG | Sanofi-Aventis Canada Inc | Anticipated | 2020-08-10 | 11 | Other | 120468 |
| 1594 | H01AC01 | GENOTROPIN | 1.0MG | Pfizer Canada Ulc | Avoided | 2020-08-10 | | Manufacturing disruption | 104767 |
| | | | | Novartis | | | | | |

BC Provincial resources to manage medication shortages:

<https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/pharmacare/pharmacies/drug-shortage-information>

| SHORTED DRUG | | | | | | ALTERNATE DRUG | | | | | | | | | |
|--------------|-------------|--------------------------------|-------------|--------------|------------------------------|---|-----------------|---|-----------|-------------|------------------------|--------------|-----------------------------|------------------------------------|----------------------------------|
| Strength | Dosage form | Brand name | DIN/PIN/NPN | Manufacturer | Availability status | Estimated date of availability (if known) | Last updated on | Alternate drug Trade/Brand name | Strength | Dosage form | Alternate drug DIN/PIN | Manufacturer | Maximum reimbursement price | Alternate full coverage start date | Alternate full coverage end date |
| 50 MCG/NL | ampule | FENTANYL CITRATE INJECTION USP | 2240434 | Sandoz | available on allocation only | | 2020-07-10 | FENTANYL CITRATE INJECTION USP | 50 MCG/ML | ampule | 2385406 | Teligent | 2.947 | 2020-06-26 | |
| 0.2 MG/ML | vial | GLYCOPYRROLATE INJECTION USP | 2039508 | Sandoz | available on allocation only | | 2020-07-10 | GLYCOPYRROLATE INJECTION | 0.2 MG/ML | vial | 2382857 | Omega | 4.2962 | 2020-05-21 | |
| 20 MG/ML | vial | HYDROMORPHONE HP 10 | 2145936 | Sandoz | available on allocation only | | | No alternative available and no coverage for compounding; discuss treatment options with prescriber. | | | | | | | |
| 10 MG/ML | vial | HYDROMORPHONE HP 10 | 2145928 | Sandoz | available on allocation only | | 2020-07-10 | No alternative available and no coverage for compounding; discuss treatment options with prescriber. | | | | | | | |
| 50 MG | tablet | SANDOZ LACOSAMIDE | 2474670 | Sandoz | available on allocation only | | 2020-07-10 | Other already-covered full benefit versions available. Consult the online LCA Data Files for details. | | | | | | | |
| 50 MG | tablet | SANDOZ LOSARTAN | 2313340 | Sandoz | back-order-with date | 2020-08-12 | 2020-07-10 | COZAAR | 50 MG | tablet | 2182874 | Merck | 1.9125 | 2018-12-14 | |

Other resources available locally

1. Pharmacy managers – hospital and institutional
 1. Pro - may be given early advance warning of pending shortages
 2. Con – use different distribution networks and allocation systems for shorted medications
2. Community Pharmacists – direct contact with multiple pharmacies for stock
 1. Pro – some pharmacies may have stockpiled medications or have higher allocation of medications based on prior sales
 2. Con – very time consuming, particularly during increased workload of pandemic, hit and miss, pharmacies may reserve allocated medications for regular clientele.

Summary

Assessing shortages

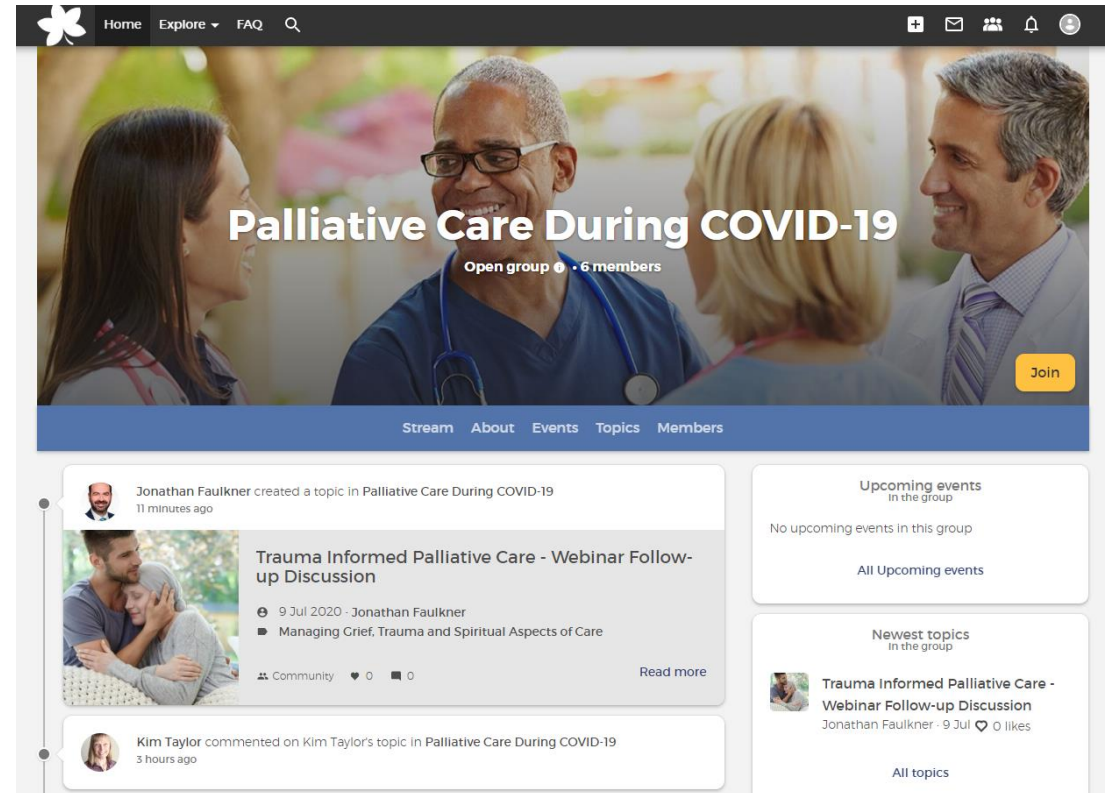
1. Nationally – Assessing Drug Shortages
 1. Searchable database by medication name/DIN/ATC code
 2. Estimated duration of shortage
 3. Potentially modifiable to monitor for shortages (anticipated, actual, resolved) of palliative care medications
2. Provincially for British Columbia
 1. Pharmacare drug shortages list – provides list of alternate medications covered by provincial drug plan
 2. Local Community Pharmacies

Q&A

Please use the Q&A function at the bottom of your screen.

Join the discussion now

1. Visit www.cpcexchange.ca
2. Login to your Pallium Central account (or create an account)
3. Visit the Trauma Informed Palliative Care topic area and get started!



THANK YOU



Pallium Canada