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Angela Nagy  
Secretariat  
Standing Committee on Family & Community Affairs  
House of Representatives  
Canberra

Dear Ms Nagy

Substance Abuse in the Community

Thank you for providing me with the opportunity of submitting a personal view on this issue. I hope my contribution will assist the committee.

I am a Community pharmacist with a background of providing Methadone treatment through my pharmacy to patients over many years. Through the various positions I have held with the Pharmaceutical Society of Australia I have supported the role of Pharmacists in managing substance abuse. I believe that pharmacists can make a very positive contribution in this area..

The committee's terms of reference identify areas where pharmacy has a primary and a responsible role. Pharmacists are required to ensure that all medications, whether prescription or OTC is used correctly and optimally. (reference Australia's QUM policy).

Where substance abuse occurs, pharmacists are ideally placed in the community to provide assistance in, treatment, prevention, harm reduction, monitoring, referral, and education. I believe their expertise has not been sufficiently recognised or utilised.

- As in most health professions it is disappointing to mention that large numbers of practitioners shirk their responsibility in some areas of substance misuse. (While pharmacists are happy to assist with Nicotine replacement therapies, many find it difficult to deal with "Doctor Shoppers" and with opioid dependence.)  
Many reasons have been put forward for their reticence but I believe until there is a majority involvement many strategies to minimise misuse & reduce harm will flounder.
- Obviously access to treatment by opioid dependent patients is limited by number of practitioners with expertise & concern. I would believe the committee should identify strategies that would encourage more involvement & awareness. One option would be that the funding of treatments be reviewed and that availability via the National Health Scheme be supported. This could encourage more health professionals to be involved, as addiction care would then be seen as part of mainstream practice.

- Health professionals should be supported and trained to provide prevention strategies. Research has shown that early minor interventions by practitioners can be of great benefit.
- I am aware that proposals have been discussed and recommended to create a national electronic database to monitor the use of medications. There are privacy issues, but I believe the benefits of at least having Schedule 4 & Schedule 8 medications usage on a database would give better outcomes for patients and reduce healthcare costs. This will only work effectively if all medication was recorded not just that which the patient requests be recorded.
- The ability of health professionals to identify patients at risk, via a database, would allow early referral to specialist or counselling services.
- I would draw the committee's attention to the Syringe Exchange program, through community pharmacies and the success, in terms of harm reduction, this has achieved. Programs similar to this should be explored where polypharmacy is identified.
- The knowledge & expertise of healthcare professionals should be employed to provide education and raise awareness of the community of the issue of substance abuse. Perhaps the committee could be the conduit for collaboration of the Professional Healthcare Organisations to progress this proposal.
- Pharmacies are ideal locations for distribution of general health information and I would encourage the committee to explore avenues to use them. I have enclosed a copy of a booklet "Drugs & Kids" to instance an initiative that should be supported.

Although some cooperation may exist between Law enforcement agencies & Healthcare organisations, promotion of it may bring greater benefits. This would also apply to Social Welfare agencies.

I believe pharmacists have demonstrated their acceptance to provide advice, where, for example OTC's may cause issue with driving, and where some medications are directed to the illicit market. This responsibility could be enhanced by the provision of timely information from the various authorities.

Once again, I thank the committee for accepting this late submission.

Yours Sincerely,

Ron Natoli