

Media release

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Low dispensing of PBS medicines at discharge a wake-up call

The Society of Hospital Pharmacists of Australia (SHPA) has today expressed strong concerns about the results published in the [Delivering better cardiac outcomes in Victoria](#) report published by the Victorian Agency for Health Information (VAHI), that show significant variations and low rates of prescribing and dispensing of key Pharmaceutical Benefits Schedule (PBS) medicines for patients who have already experienced a heart attack or stroke and are at high risk of another.

SHPA Chief Executive Kristin Michaels says the evidence is alarming.

'Despite the Federal Government's commitment to and investment in PBS medicines, two-thirds of patients are still not being provided with the best preventative medicines despite their risk of readmission after heart attacks and strokes.

'Strokes and heart attacks account for a significant proportion of hospital admissions, and given medication treatment guidelines for strokes and acute myocardial infarctions are very well established, it is alarming this data shows many patients are not being supplied the appropriate PBS medicines after treatment for a stroke or heart attack.

'Rather than dispensing themselves, many Victorian hospitals will provide a prescription for patients to collect their medicines at their local community pharmacy. This report indicates patients are often not getting those medicines dispensed, which increases their risk of another heart attack or stroke resulting in hospital readmission.'

According to the report, approximately two-thirds of Victorian patients at risk of stroke were not supplied oral anticoagulants within 30 days of discharge, and almost half of Victorian patients at risk of acute myocardial infarction were not supplied antiplatelet therapies within 30 days of discharge.

'Hospital pharmacists routinely calculate patient risk levels of cardiac and stroke events and, based on these assessments, provide advice to doctors on prescribing the most appropriate PBS medicines regimen upon discharge against evidence-based guidelines, to prevent patients from having another heart attack or another stroke.

'However, they can only do this with clinical pharmacy capacity, traditionally supported by the Federal Government, to ensure PBS medicines are used effectively'.

In the 2019 Federal Budget, public and private hospital pharmacies had their funding through the PBS cut by \$44 million dollars annually, from 1 July, putting 500 clinical pharmacist jobs at risk.

'Clearly, there is more work to be done and more investment in hospital pharmacy services to support effective and evidence-based prescribing of PBS medicines to reduce incidence of stroke and heart attacks is required,' says Ms Michaels.

‘These preventative costs are comparatively insignificant compared to the excessive costs to the healthcare system incurred by treating preventable strokes and heart attacks in people who are, unfortunately, going without key PBS medicines.

‘These results demonstrate not just to the Victorian Government, but all governments, that now is the time to increase investments into the hospital pharmacy workforce.

‘PBS medicines cannot be separated from the clinical pharmacy services needed to ensure their appropriate use.’

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About SHPA

The Society of Hospital Pharmacists of Australia (SHPA) is the national, professional, for-purpose organisation for leading pharmacists and pharmacy technicians working across Australia’s health system, advocating for their pivotal role improving the safety and quality of medicines use. Embedded in multidisciplinary medical teams and equipped with exceptional medicines management expertise, SHPA members are progressive advocates for clinical excellence, committed to evidence-based practice and passionate about patient care.

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