

# THE Tablet

WINTER 2024 | ADVOCATING FOR BEST COMMUNITY PHARMACY

## Celebrating the best of community pharmacy

Join us in recognizing our pharmacists in six award categories PAGE 12

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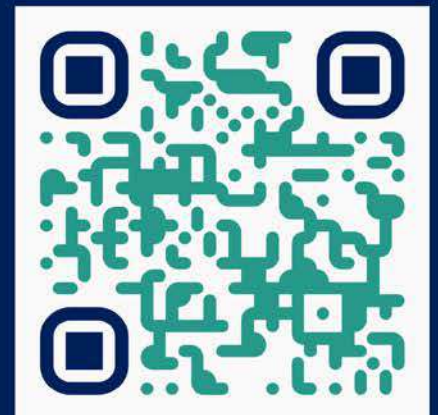
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### ON THE COVER

Javed Jokhoo, pharmacy manager at Modern Pharmacy, is the winner of the 2023 Pharmacy Leadership Award.



Mike Huitema

### A step beyond the counter

In 2023, British Columbia's community pharmacists took a major step forward in delivering primary care. Last year, as of the end of November, B.C.'s pharmacists delivered more than 195,000 assessments for minor ailments and contraception. Given the response from the community, we expect to pharmacists to perform even more assessments in 2024.

As your BC Pharmacy Association president for this year, I'm looking forward to seeing pharmacists take more steps beyond the counter to help the province in addressing the crises facing our health-care system.

The Association has been advocating for pharmacists' ability to order lab tests and coverage of point-of-care testing in pharmacies to help ease the burden on our system. The pharmacy sector, just like other parts of our health-care system, faces a shortage of pharmacists, especially in rural areas that find it difficult to attract talent. That's why the Association is asking the province to revisit the pharmacy rural incentive program to help pharmacists across B.C. serve patients in their communities.

In this issue of *The Tablet*, we profile our 2023 Excellence in Pharmacy Awards winners. As you will see, these are individuals who are providing service to patients in their communities — from the Okanagan to First Nations communities to those going above and beyond for patients with opioid use disorder in Metro Vancouver.

Each one of these individuals has not only stepped out of the old way of thinking, but has also stepped far beyond the counter to deliver the kind of care we have been passionate about since pharmacy school.

I encourage all of us to not just step out from “behind the counter” but to step beyond the counter in our thinking and advocacy for the profession.

We have proven over the years how B.C. community pharmacists can be a key partner in delivering public health. With the success of the minor ailments and contraception service (MACS), we can continue to be a partner in primary care. **T**



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Geraldine Vance

## Hard slogging but opportunities continue

The fall 2023 flu and COVID vaccine campaigns were exceptional. Community pharmacists are the primary vaccine provider for these two very important campaigns. In the first weeks of the campaign, community pharmacies hit record numbers of vaccinations, and by Dec. 31, 2023, delivered more than 2.3 million COVID-19 and flu vaccines.

In addition, many pharmacies also offered respiratory syncytial virus immunization. It is not lost on anyone that pharmacists are delivering record immunizations, even while dispensing an increased number of prescriptions and providing minor ailments and contraception services (MACS).

In December, Premier David Eby announced that nearly 300,000 British Columbians have already benefitted from free contraceptives and minor ailments. The access the public has gained to much-needed care is so important, but I know it hasn't been easy. It seems that the needs of patients and demands on pharmacists continues to grow.

Overall, that is a good thing. But the strain put on the profession and business of pharmacy is made more difficult as a result of the lack of a dispensing fee increase since 2011. I know this is a foundational element of pharmacy operations and viability. Like other businesses the impact of COVID and inflation have added an additional burden. While it's true that the high rate of immunizations and MACS has added revenue to pharmacies, this is new money for new work that requires additional staffing. So, there is no getting around the fact that a dispensing fee is long overdue.

I couldn't agree more and share in your frustration that we haven't been able to make this happen. It is not for a lack of trying. This is an issue we raise all the time and in recent months I have been encouraged that there appears to be a willingness to pursue this conversation. I hope to soon be in a position to confirm that government is willing to begin formal discussions about a much needed increase to the dispensing fee.

I also know that the pressures of third-party payers, notably Express Scripts Canada's imposition of a new adjudication fee, further compound the pressure pharmacies face. The BCPhA has joined together with other provincial associations and CPhA to explore opportunities to contest this move.

But despite all of this I remain optimistic. Pharmacy has taken centre stage in terms of the professions ability to meet the needs in a crisis. First COVID and now the primary care crisis. Time and time again pharmacists rise to the occasion. I know this demonstrates that pharmacists can and should do more.

This is the year to press hard to more opportunities. This will be the focus of your Association. **T**

*The Tablet* asks our contributors:

**How do you envision the pharmacy profession in B.C. will evolve in 2024 and beyond?**



**Javed Jokhoo** is the pharmacy manager of Modern Pharmacy in Chilliwack and the winner of the 2023 Pharmacy Leadership

Award. "I hope the scope of practice for pharmacists continues to expand in the future where we can alleviate that burden on the health-care system and the amount of bureaucracy decreases, so that we have more time to spend with patients."



**Carson Mintram** is a pharmacist at Hogarth's Clinic Pharmacy in Vernon and the winner of the 2023 New Practitioner

Award. "I envision pharmacists will adapt to providing more clinical care while working in collaboration with other health professionals. Being more accessible for POCT (point of care testing), pharmacists can contribute to the management of chronic conditions and help treat more minor ailments given the lack of access to care for many residents in B.C."



**Fatemeh Soleiman-Panah** is the owner and pharmacy manager of Sina Pharmacy in Vancouver and the winner of the 2023

Collaborative Care Award. "In 2024 and beyond, British Columbia's pharmacists will be pivotal in health care, utilizing enhanced minor ailment prescribing rights for personalized care. Integration of AI will streamline medication management, while telepharmacy expands accessibility. Pharmacists will be key in preventative care and chronic disease management, strengthening their role in the health-care system."

# What's on the horizon for 2024?

A MESSAGE FROM THE COLLEGE OF PHARMACISTS OF BRITISH COLUMBIA

Last year was a landmark year for pharmacy care and public safety in British Columbia. The College collaborated with the Ministry of Health, the BCPhA and UBC to advance care in key areas, most notably with the introduction of Pharmacist Prescribing for Minor Ailments and Contraception (PPMAC). This reduced strain on primary care providers and improved client access to medication and care services, with the goal of creating better health outcomes for British Columbians. We thank all the pharmacists who embraced PPMAC and will continue to work with the Ministry on further expanding pharmacists' scope of practice to support access to care in 2024.

Looking ahead, several changes are coming that will further reshape pharmacy care in B.C. The first is our new "What You can Expect from Your Pharmacy Visit" poster, which will be displayed in all community pharmacies across B.C. in the latter half of 2024.

This person-centered poster, developed through consultation with the First Nations Advisory Group; the BC Public Advisory Group; UBC's Queer Curriculum Advisory Committee; the Neighbourhood Pharmacy Association of Canada; and the BCPhA, aims to empower the public to better understand the legislated expectations of pharmacy professionals, enabling them to make more informed decisions about their health and the care they receive. This work is currently posted for public consultation at [bcpharmacists.org/bylaws-comment](https://bcpharmacists.org/bylaws-comment).

Another strategic initiative we've been working on is mandatory anonymous medication incident reporting (MIR). While B.C. is one of the last provinces to implement MIR, we plan on making significant progress this year as we aim to complete partner engagement by the spring. MIR provides data that can be analyzed to help identify trends in incidents that are occurring and provide pharmacy professionals with opportunities to learn from mistakes, improve practice and better support public safety.

## Advancing Reconciliation and Cultural Safety

The College remains committed to addressing Indigenous-specific racism and advancing reconciliation within B.C.'s health system. In 2023, we engaged with First Nations health leaders in remote communities to gain a better understanding of how pharmacy practice fits alongside Indigenous practices. We also worked with Indigenous partners to identify entrenched cultural barriers in our bylaws, policies, and practices.

In 2024, we will engage in further dialogues with Indigenous Peoples to learn about how we can improve their care experiences in ways that align with Indigenous approaches

to health and wellness.

Beyond policy and bylaws, equally important are basic changes in how we think, act, and relate to one another, which is why we encourage all pharmacy professionals to continue to learn how to reduce barriers to care for Indigenous clients and create safer spaces within pharmacy practice.


Last September, the College worked with the First Nations Health Authority and UBC to release "Building Cultural Safety and Humility for First Nations Clients into Pharmacy Practice" which contains two educational courses focused on increasing cultural safety and humility for First Nations clients accessing pharmacy care. The purpose of these courses is to support collective efforts to address systemic Indigenous-specific racism and reduce barriers to health care access in pharmacy settings, and we encourage you to complete them.

These courses are available at no cost and can be applied towards your Continuing Education requirements.

## Regulatory Changes

We are now preparing to transition to the new *Health Professions and Occupations Act* (HPOA), which received Royal Assent in November 2022 and will replace the *Health Professions Act*.

The HPOA came out of a significant report conducted by Harry Cayton, an expert in the field of health profession regulation, and is more person-centric in its approach to health regulation through increased accountability and transparency for all British Columbians. It also embeds a proactive focus on eliminating Indigenous-specific racism and all forms of discrimination within the province's health regulatory framework. We look forward to continuing to work with the Ministry of Health, other health regulators and the public to usher in a new era of health profession regulation.

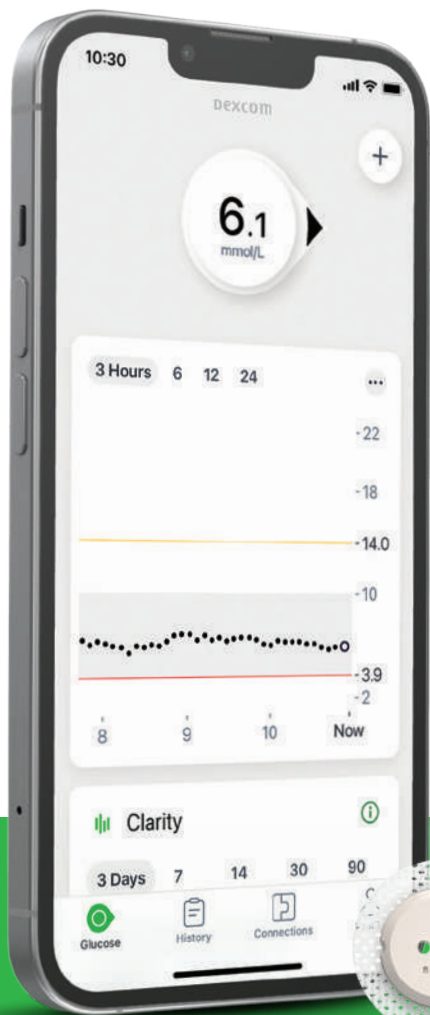
The year ahead promises to be full of impactful change and progress for the regulation of pharmacy practice in British Columbia, and we look forward to sharing additional updates in the coming months. 

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† When compared with CGM systems commercially available in Canada as of October 2023.

‡ For a list of compatible devices, visit [dexcom.com/compatibility](https://dexcom.com/compatibility).

1 Dexcom, data on file, 2023. 2 Beck RW, et al. *JAMA*. 2017;317(4):371-378. 3 Beck RW, et al. *Ann Intern Med*. 2017;167(6):365-374. 4 Martens T, et al. *JAMA*. 2021;325(22):2262-2272. 5 Laiffel LM, et al. *JAMA*. 2020;323(23):2388-2396. 6 Welsh JB, et al. *J Diabetes Sci Technol*. 2022;19322968221099879.

7 Dexcom G7 User Guide, 2023. 8 Heinemann L, et al. *Lancet*. 2018;391:1367-1377.

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## Ruby Maw: training for team-based primary care

BY ISHIKA JAIN

COMMUNICATIONS COORDINATOR, BCPHA

Ruby Maw initially left her small hometown of Armstrong to pursue her education at the University of British Columbia in Vancouver before making the deliberate choice to return to her roots in the north Okanagan. Inspired by a Grade 5 assignment where she was asked to think about what she wanted to be when she grew up, she was influenced by her mother's profession as a nurse, her love for science, and a genuine desire to assist others. Early on, she realized her professional trajectory was in her local community as a pharmacist.

In 2013, Maw commenced her degree in General Sciences at UBC Okanagan, and by 2014, she had transferred to UBC Vancouver's Faculty of Pharmaceutical Sciences, graduating in 2018. As a new grad, she initially worked in Armstrong and Enderby before settling into a community pharmacist position in Vernon.

This article follows the journey of **Ruby Maw** in the Association of Faculties of Pharmacy of Canada (AFPC) Advanced Primary Care Pharmacist Training Program—a part of the Government of Canada's Sectoral Workforce Solutions Program, Team Primary Care: Training for Transformation project. She is the only pharmacist from British Columbia among the 15 people enrolled in the program. When she's not attending the training program, she serves at Hogarth's Clinic Pharmacy, actively contributing to the well-being of her community and shaping the future of health care in the region.

### What motivated you to pursue community pharmacy?

My interest in health care solidified during a high school "Take Your Kid to Work Day" project when I had the opportunity to shadow my mother, a nurse at Shuswap Lake General Hospital. It was during this experience in Grade 9 that I was able to get a behind-the-scenes look at hospital pharmacy, which gave me a much greater appreciation for the variety of pharmacy career paths available. My fourth-year hospital practicum coincidentally took place at the same hospital nine years later. While I loved working in a hospital, my preference shifted towards community pharmacy due to its accessibility and the multitude of opportunities it presents, especially due to its recent and dynamic growth. I've been at Hogarth's Clinic Pharmacy since 2022, and each day brings new and interesting experiences.

### What prompted you to apply to the Association of Faculties of Pharmacy of Canada training program?

Our pharmacy owner, Curtis, was extremely supportive of us applying and I was very grateful to secure my spot among the 15 pharmacists. I wouldn't be where I am without my colleagues, past and present, who not only provided letters of support or reference for my application, but also influenced me to practice at the top of my scope. It felt like the optimal time, both in my personal career and in the current health-care environment, to expand the presence of pharmacists into a collaborative primary care setting to enhance patient outcomes and health-care access, especially for chronic disease management. As the only pharmacist from B.C. in the program, it's been great to have mostly asynchronous training and flexibility with different time zones, allowing me to work concurrently while studying.

### What have you learned during this placement?

During this placement, my focus was on providing patient care through activities such as medication reviews, reconciliation, deprescribing, and chronic disease management. Over the four weeks, each program participant actively engaged in a leadership project aimed at fostering practice changes for the expansion of primary care services. In this project, we are tasked with identifying an initiative that could make a meaningful impact on patient care. As a Certified Respiratory Educator, I have a strong interest in respiratory conditions, and was inspired to focus on the implementation of



individualized action plans for asthma and chronic obstructive pulmonary disease. A statistic that resonated with me, mentioned in a course I have taken, highlighted that only two per cent of patients report receiving an asthma action plan. Recognizing the numerous barriers in practice, particularly the time constraints faced by primary care providers, I believe collaboration is crucial for addressing these barriers and ensuring that patients receive quality, personalized care.

Simultaneously, I am developing evidence-based teaching materials specifically tailored for respiratory conditions. This teaching initiative is intricately connected with my leadership project, underlining the necessity for personalized action plans in managing conditions like COPD and asthma. The overarching goal is to empower patients, elevate the quality of care, and foster improved collaboration among health-care providers.

#### How do you think one would benefit from this course?

I believe this program will significantly enhance my collaboration skills. The program offers opportunities to work on projects with colleagues and physicians that help foster relationship-building. Following my four-week placement in January, I aim to leverage the additional training to collaborate with various community groups. Through these initiatives, my goal is to instigate lasting, positive change even after the placement concludes. I'm hoping to:

- Increase awareness of the pharmacist's role within the health-care team
- Promote the value of pharmacists in unconventional healthcare settings
- Make a meaningful impact on people's wellness journeys through personalized interactions
- Build relationships that facilitate improved communication and collaboration in the future. **T**

“

*Designed for pharmacists practicing in community pharmacies and clinics, this program provides online and in-person training, with coaching from an experienced primary care pharmacist.*

— Christine Papoushek, AFPC

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Premier David Eby (at podium) speaks at a press conference in December 2023, where he discussed the significant impact of the pharmacy minor ailments and contraception service.

## See the Association's highlights of 2023

Last year was a big one for community pharmacists in British Columbia. From a significant increase to long-term care fees to the launch of the minor ailments and contraception service (MACS), 2023 was a year of advancement for the profession. Here are some of the top highlights in the past year.

### Launching Minor Ailments Assessments in B.C.

On June 1, British Columbia became the latest province to enable community pharmacists to assess and prescribe for 21 minor ailments and contraception. Since then, between June 1 and Nov. 30, community pharmacists performed more than 195,000 MACS assessments. Of the minor ailment assessments, approximately 79 per cent resulted in a prescription and 10 per cent resulted in advice to see another health-care provider. From May 31 through September, the BC Pharmacy Association ran a province-wide advertising campaign that spans television, radio, newspapers and social media. As of Sept. 1, this significant advertising push has reached more than 90 per cent of British Columbians age 18 and up. In total, the advertisements have been seen more than 5.5 million times, and have reached more than 3.3 million British Columbians.

### Negotiating Compensation for MACS

Reviewing minor ailment assessment fees across Canada, the Association negotiated a \$20 assessment fee for MACS. This fee is based on the assessment service, and is provided whether a prescription is issued or not. Pharmacies can claim the fee for any of the 21 minor ailments and contraception. The list of 21 minor ailments is one of the largest in the country for pharmacist prescribing.

### Long-term Care Fee Increase

Since 2021, the Association has been advocating for an increase to Plan B long-term care (LTC) fees, which have been unchanged since 2010. On March 1, 2023, following extensive consultations, PharmaCare increased the LTC fee to \$65 per bed/month, a 50 per cent increase from the previous fee. The Plan B fee covers the full cost of eligible prescription drugs, medical supplies and devices for the nearly 32,000 people in B.C. living in LTC and assisted living facilities.

### Engaging with First Nations Communities

In May, the BC Pharmacy Association joined the College of Pharmacists, First Nations Health Authority, the University of B.C. and community pharmacies around Prince Rupert and Williams Lake to collaborate with First Nations communities on health-care access. The purpose of the sessions was to create a safe space to share awareness in pharmacy service and access challenges, and to discuss ways to improve the experiences of Indigenous clients in pharmacy. During the visits, the group visited First Nations community health centres in Terrace, Prince Rupert and Williams Lake, as well as Yunise'tin Health Fair in Alexis Creek.

### Connecting community pharmacists and MLAs

In 2023, the Association held tours with a total of 22 MLAs in communities including Vancouver, Surrey, Burnaby, Richmond, Victoria, North Vancouver, Maple Ridge, Nanaimo, Langley, Chilliwack and the West Kootenays. These tours were held throughout the year and included meetings with the Premier of B.C., eight cabinet ministers, and four ministers of state.


### Record Attendance at BC Pharmacy Conference

This year's BC Pharmacy Association annual conference was held virtually on May 11, 2023, and it was the most well-attended of any of the Association's conferences to date – at its peak, the conference saw close to 900 attendees. More than 1,100 people registered for the conference.

### Advocating for Pharmacists Beyond COVID-19

On June 13, CEO Geraldine Vance spoke to the B.C. Select Standing Committee on Finance and Government Services to highlight the work of pharmacists in filling the gaps in care from the COVID-19 pandemic onward. One of the areas the Association would like to see grow in scope for pharmacists is allowing for point-of-care testing in pharmacy. Another key ask is allowing pharmacists to order lab tests, which will enable pharmacists to access clinical information to ensure patients who do not have a primary care prescriber can receive renewals of their chronic medications for up to two years.

### Respiratory illness vaccinations in pharmacy

Community pharmacies hit record numbers of vaccinations delivered in the first weeks of the fall immunization campaign and by Dec. 31, 2023 pharmacists in B.C. delivered more than 2.3 million COVID-19 and flu vaccinations. Community pharmacies continue to be the biggest immunizers in the province, with pharmacies delivering a large majority of B.C.'s COVID and flu shots. 

## Express Scripts Canada's new service fees

The BC Pharmacy Association is working closely with the Canadian Pharmacists Association (CPhA) and other provincial pharmacy associations to address the concerns around the recent announcement by Express Scripts Canada (ESC) that it is introducing a new service fee for adjudication of all claims that will be payable by pharmacy providers registered with Express Scripts Canada that took effect on Jan. 1, 2024.

Like our members, the BCPhA has serious concerns about Express Scripts' plans, noticeably the complete lack of consultation done with the pharmacy sector and unilateral imposition of these charges with no option to opt-out of their service fees. ESC asserts that their adjudication fees are in-line with what others are doing in the sector. We do not agree that is the case. An option to pay a fee for prompt payment is very different from a fee imposed for processing all claims in our view.

The CPhA is taking the lead on this issue for pharmacies and with the support of provincial pharmacy associations across the country. The BCPhA is supporting the work being done by the CPhA. More will be communicated about these efforts soon.



# Honouring Pharmacy Excellence

Each year the BC Pharmacy Association's Awards Committee reviews nominations from all across British Columbia to select the best and brightest of the profession to recognize. In 2023, the Committee selected six award winners, recognizing the areas of patient care, community service, leadership, innovation, collaboration, and early practice success.

## Kyle Denley

### EXCELLENCE IN PATIENT CARE AWARD

**TITLE** Pharmacy Manager,  
**WORKPLACE** Pharmasave Lions Gate  
**LOCATION** North Vancouver, B.C.

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Opposite: Kyle Denley, pharmacy manager at Pharmasave Lions Gate, poses inside his pharmacy for a photo. The Excellence in Patient Care Award winner is known for his work with marginalized patient populations.

Pharmacist **Kyle Denley** never expected to be providing pharmacy services under overpasses, in the woods or in a jerry-rigged cabin.

“It’s not what I learned in school, but it’s definitely an important part of my daily experience,” Denley said.

After Denley opened Pharmasave Lions Gate at the start of the COVID-19 pandemic in 2020, much of his focus has been on supporting patients with opioid use disorder and those with addictions and mental health needs.

Each day, he starts his morning at 7 a.m. in North Vancouver travelling through the community to check on patients with opioid use disorder to make sure they have their medications and they’re healthy.

He will search for patients under bridges and jump fences looking for them. One winter he found patients in a self-built mini cabin in an encampment. He was there to do an assessment. As he approached, he noticed a strange smell; the propane tank that was being used to heat the cabin had a leak. Denley evacuated the patients and brought one in for an assessment.

Serving patients with opioid use disorder, addictions, and those with mental health needs on the North Shore means Denley is known by many as an “unsung hero” in the province’s overdose crisis.

“The overdose crisis is pretty horrendous, and we’re losing a lot of people,” said Ally Colbourne, a member of the local Overdose Outreach Team. “He’s got a very calm, loving demeanor.”

At his pharmacy, the team provides a comprehensive range of services, including opioid therapy, outreach, and delivery. The clientele includes mental health group homes, and services offered encompasses fentanyl patch changes, Sublocade® injections for long-acting OAT therapy, vaccinations, administration of injectable medications, minor ailments assessments, blister packs, and non-sterile compounding.

He works seven days a week, staying late and doing mental health patients’ daily outreach in the evenings. He’s known to keep his cell phone on through the evening, answering calls at midnight from staff at mental health group homes who have questions about a patient’s medication.

Working with a patient population with mental health disorders means Denley must create a safe and non-judgmental space. Some may have symptoms of paranoia or hallucinations, which can make it difficult for them to trust others.

Once Denley could not find a patient who was staying at a shelter and the staff didn’t know where he was. Denley found him hiding in the shadows, where he was having auditory hallucinations.



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*The issue is there is a lot of cracks in the system. A lot of people are not able to get access to the care they need unless people who care go to them.*

”

“I was able to just sit with him for 15 minutes, talk to him about what’s real and what’s not, and confirmed that the voices he was hearing were not actually out to harm him,” Denley said. Luckily, the patient had an antipsychotic medication that could be administered when needed, which Denley was able to do.

“He’s an advocate for (these patients). He makes sure they get the best possible care,” said Nisa Kabolizadeh, a pharmacist at Lions Gate Pharmacy.

Patients like Stephen Reynolds say they owe him their lives. Reynolds relapsed and overdosed in his car. Denley found him and administered naloxone, which revived him.

“It was pretty crazy. I didn’t even know he was there until I woke up. He dragged me inside,” Reynolds said.

Others like patient Jason Mierau point to his

promptness, his attention to detail and helpful nature.

“He’s the best pharmacist I’ve ever had,” Mierau said.

There can be interesting challenges for Denley as he travels to meet patients where they live. He’s gone into rundown buildings where he knows his patients are living, and he’s had police called on him from neighbours who thought he was part of nefarious activity. He had already registered with the RCMP, so they knew who he was.

“We laugh about it now, but it was a bit traumatizing for the patient,” he said.

So why does he go to such great lengths?

“It’s a service that’s so needed, even if they are hard to locate,” Denley said. “The issue is there is a lot of cracks in the system. A lot of people are not able to get access to the care they need unless people who care go to them.”

The Bowl of Hygeia Award is awarded to pharmacists who demonstrate excellence community service.





## Joravar Hera

### BOWL OF HYGEIA AWARD

**TITLE** Pharmacy Manager  
**WORKPLACE** Beyond Health Pharmacy  
**LOCATION** Abbotsford, B.C.

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For **Joravar Hera**, growing up in Duncan on Vancouver Island, volunteering was ingrained in his South Asian upbringing. So was hard work.

As a teenager, his family moved to Abbotsford and began blueberry farming. He spent his summers working in the fields laboring until sunset. Meanwhile, Hera and his family volunteered their time cooking and serving meals at the local Sikh temple.

After graduating from the University of British Columbia's Faculty of Pharmaceutical Sciences in 2020, Hera was ready to give back to his community in a more meaningful way by bringing his experience to people who may have difficulty accessing pharmacy services.

He is known to set up influenza clinics the local Sikh temple, conduct diabetes educational clinics and test blood glucose for individuals who may not be aware of their risk or that they should be screened. He has also advocated to have Ozempic® materials translated into Punjabi for patients with diabetes.

"I don't just have to help out in the kitchen or something like that. I can actually use something that I've learned to educate the people in my community," Hera said.

Many who attend the local temple say they feel more comfortable asking him questions about their health. Hera speaks Punjabi and understands their culture.

Harjeet Mander says his mother, Surjit and father, Joginder, often feel there are barriers for them to go to a pharmacy in person. From needing to speak to their pharmacist in Punjabi to having someone who understands their culture, they feel they have that with Hera.

"Here they feel so comfortable just approaching him," Harjeet said. "It feels like he's just another person at the temple, and that they can relate to him personally."

But it's not only the Sikh community that feels Hera takes extra time for. His patients at Beyond Health Pharmacy say he goes the extra mile for them.

From visiting patients at home to helping them put on diabetic sensors, Hera and his team believe the work of community pharmacists is to be out in the community.

One patient who had cancer was in and out of hospital and was confused by the many different medications doctors would prescribe. Hera worked with her doctors and nurses to provide blister packs of medication, and worked with a nurse who visited the patient daily to provide feedback to him and the patient's doctor.

Collaborating with the local nurses and physicians on complex patient care is something Hera finds incredibly rewarding. Patients enjoy it, too.

"If there are any questions, the two of them work together and keep my health going as it should," patient Max Warner said.

When Dale Thandi's wife was bedridden, Hera visited their home to provide her with her COVID-19 and flu vaccinations.

"I find that he went very out of the way to do that," Thandi said. "He's an exceptional human being."

“

*I can actually use something that I've learned to educate the people in my community.*

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## Javed Jokhoo

### PHARMACY LEADERSHIP AWARD

**TITLE** Pharmacy Manager  
**WORKPLACE** Modern Pharmacy  
**LOCATION** Chilliwack, B.C.

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Javed Jokhoo is known for his ability to communicate across cultures, particularly in his work with First Nations community members.

Pharmacist **Javed Jokhoo** says trust needs to be earned. When he first arrived as a pharmacist in Williams Lake in 2014, he had no knowledge about First Nations culture and tradition.

He was a stranger who was new to the area. But over the next four years, little by little, he began conversations with First Nations patients to understand their childhood experiences, their culture and who they were as individuals, which allowed many to trust his health-care knowledge and advice.

Client Julie Giroux met Jokhoo five years ago when he was the pharmacy manager at Seabird Remedys Pharmacy located on the territory of the Seabird Island Band in the Agassiz area, which serves almost exclusively First Nations clients.

“He’s always been there for our people,” said Giroux, who had heart failure last year. When she was unable to get in to see her doctor, Jokhoo would adapt her prescription so she could continue her medication without interruption. “He knows about Indigenous peoples and knows what their needs are.”

Born and raised in Mauritius, an island country off the coast of Madagascar, and educated at Rhodes University, a pharmacy school in South Africa, Jokhoo is the first in his family to arrive to Canada. He understands what it’s like to feel like an outsider to the common culture. Something that helps him connect with Indigenous patients.

“He’s very good at communicating across cultures,” said Dr. Robert Fox, a staff physician with Seabird Island. “Patients feel comfortable when they’re around him, so that no matter what you look like or what culture you may be coming from, he’s going to make you feel comfortable and not judged at all.”

Understanding the concept of Cultural Safety and Humility and putting it into practice is a cornerstone of what sets Jokhoo apart.

In 2022, the First Nations Health Authority (FNHA) and the Health Standards Organization

(HSO) released the British Columbia Cultural Safety and Humility Standard, which outlines the responsibilities of health systems and health and social service organizations in British Columbia to establish a culture of anti-racism, cultural safety and humility in their services and programs.

After working at Seabird Island, Jokhoo opened Modern Pharmacy in the Rosedale area of Chilliwack. Many patients from Seabird Island have followed him to his new pharmacy.

Mike Joe, a member of Seabird Island and now a client at Modern Pharmacy, said Jokhoo goes out of his way to help him address his chronic obstructive pulmonary disease and breathing difficulties.

“Whatever I need, he’ll provide,” Joe said.

And health-care team members working with the Seabird Island community say he’s an amazing partner.

From his patients’ nurses, doctors to social workers, Jokhoo is seen as an integral part of the team, even now that he’s no longer co-located at Seabird Island’s main health-care centre. When facing uncomfortable and personal conversations about clients, Jokhoo takes it in stride with professionalism and compassion.

“He cares, and that comes across every time,” said Emily Brundritt with Child and Family Services serving Seabird Island.

Jokhoo said the key is working collaboratively to serve not just Indigenous patients, but every patient, to ensure they get the best care.

“We have to work as a team,” Jokhoo said. “If we don’t communicate with each other, nothing’s going to happen.”

For Jokhoo, he lives by one adage: Never stop listening.

“You have to listen to the people. That’s the main thing. What are the needs?” Jokhoo said. “By listening you have done almost 75 per cent of the job.”

From there, he said, you take the next steps.





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*We have to work as a team.  
If we don't communicate  
with each other, nothing's  
going to happen.*

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Pharmacist Josh Kim, winner of the 2023 award for innovation, played a crucial role in a pharmacy special project that resulted in 3,000 patients being screened for liver conditions.

# Josh Kim

## BEN GANT INNOVATIVE PRACTICE AWARD

**TITLE** Manager, Specialty Pharmacy and Services

**WORKPLACE** London Drugs

**LOCATION** Richmond, B.C.

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Pharmacist **Josh Kim** sees numerous opportunities ahead for the profession to have a bigger role in the overall health-care system. Whether it's the area of point-of-care testing, injection training, providing support for specialty medications, counselling, or bringing new technologies into community pharmacies, the possibilities are endless.

It's one of the reasons why he feels proud to have served at London Drugs since his start in pharmacy 21 years ago. Today, he is the Manager of Specialty Pharmacy and Services at London Drugs, where one of his roles is to ensure the success of up-and-coming pharmacy programs.

"London Drugs has been one of the forerunners in implementing newer technologies and innovations in pharmacy, such as automation, online tools, and consultation booths for the pharmacist to sit down and talk with patients," Kim said.

One of his most innovative roles has been his work with the Canadian Liver Foundation on the Liver Beware Project, a patient-screening initiative held at a couple of London Drugs pharmacy locations intended to identify the prevalence of significant liver conditions such as fatty liver and fibrosis among individuals without known liver conditions. Within two years of offering the service, more than 3,000 patients were screened.

"This project would not have happened if it wasn't for Josh," said Dr. Eric Yoshida, a co-lead of the Liver Beware Project and a gastroenterologist at Vancouver General Hospital.

Kim's role involved helping recruit volunteers from universities to help deliver the program. He brought

marketing support with posters, brochures, and social media postings so patients were aware of the opportunity. And for any eligible patients who showed up for their liver screening, he worked with pharmacists to offer medication and vaccine reviews. The service was an opportunity to not only demonstrate the capability of pharmacists, but to also offer patients a service that they may not have had in the past.

Chris Chiew, Vice President of Pharmacy and Healthcare Innovation at London Drugs, said the first year of the Liver Beware Project was so successful that the Canadian Liver Foundation invited London Drugs to participate again.

"The reactions have been very positive," Chiew said.

One clear sign of progress in pharmacy has been the recent growth in the pharmacists' scope of practice in British Columbia.

"It is great to see that we are playing a critical role in immunization programs. It's awesome to see now we're able to inject medications other than vaccines, and recently we started prescribing for minor ailments and contraception,

and our scope of practice keeps expanding," he said.

"However, our potential role in disease screening and management through point-of-care testing and other tools, that's an area where we're not playing a big enough role in the community," he added.

"In order for community pharmacists to do this we need to increase our scope and reach different services and programs to be able to understand the holistic picture of the patient's health. I believe that's possible when we get more involved in the disease management approach."

“*In order for community pharmacists to do this we need to increase our scope and reach different services and programs to be able to understand the holistic picture of the patient's health.*”

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## Carson Mintram NEW PRACTITIONER AWARD

**TITLE** Pharmacist  
**WORKPLACE** Hogarth's Clinic Pharmacy  
**LOCATION** Vernon, B.C.

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Opposite: Carson Mintram is the winner of the 2023 New Practitioner Award, given to pharmacists who have done outstanding work in their first five years of practice.

He's so well-loved in his new community that patients offer up their homes for him to stay in while travelling, just so he doesn't have to commute as far from Kelowna to Vernon.

Maybe it's his youthful appearance that makes them want to take him under their wings. But it's even more so the fact that pharmacist **Carson Mintram** connects so well with his Vernon-area patients and embraces the change in scope of practice given to pharmacists earlier this year.

"He goes above and beyond to give me what I need," says patient Brenda Gentles. "He's a breath of fresh air. He's young and bright."

After graduating from UBC in 2022, Mintram quickly found his role serving patients in Vernon at Hogarth's Clinic Pharmacy, moving up to Pharmacy Manager in less than a year on the job. He's known for his self-effacing sense of humor, boundless energy, and ability to adapt to changing situations. He credits being a high-performance hockey official before pursuing pharmacy that taught him to be a quick thinker.

His colleagues say he's injected a sense of enthusiasm into their practice.

"He's challenged the way I do things, to say the least," says pharmacist Curtis Omelchuk, owner of Hogarth's Clinic Pharmacy. "I'm older. You get stuck in your ways and sometimes you don't always look at the other side of the coin and say, 'Hey, maybe we can do this.'"

"To think differently is important. It takes a certain amount of boldness to be able to say, 'Yeah, I know that's the script, but I'm going to adapt.'"

Pharmacist Ruby Maw agrees. At a recent dinner, Mintram started a conversation with local doctors about how they could work more collaboratively together.

"Considering how new he is to pharmacy. It's incredible," she says. "He's fearless."

While he's known for encouraging pharmacy peers to adapt rather than simply fax a prescriber and counselling patients on medications, Min-

tram is also known for his ability to make it easier for patients who find navigating the health-care system challenging.

Hogarth's Clinic Pharmacy serves patients who are members of the Okanagan Indian Band. He understands and respects the cultural aspects that come with the community and handles it with compassion and understanding, says Kim Lutz, a registered nurse with the Band.

Not everyone is willing to take on Indigenous populations who have had challenging billing procedures, she says. He's helped with using special authority for devices for patients with diabetes so they can manage their chronic diseases and has adapted prescriptions, so patients don't have to return to their doctors repeatedly. He helps when patients lose their medications and is always available when she needs to call him.

"It's a lot of work with little gain, but he's taken it on with smiles and joy," Lutz says. "Carson likes the challenge that it seems to give him."

But what fuels him the most is knowing he's connecting with people in his community.

"It's having those meaningful interactions with people," Mintram says. "I've long been a believer in getting to know people. They see your face, and they're familiar with you. The ability to come in and recognize people and be recognized and be a trusted resource for them is something I don't take for granted. I'm very grateful for the opportunity."

Patients ask for him by name. Patients like John Fraher who came to him with multiple medications given to him by the hospital.

"To me they were incomprehensible. He sat down with me and took 15 minutes to describe every single medication, and what I should do with it and how I should confer with my doctor about it," Fraher says. "It became comforting to know that I was with somebody who knew what they were talking about and was prepared to spend the time."

Many say he treats them like they're the first patient he has interacted with, or that he will ask



all the questions they didn't even think to ask.

"I've never met a pharmacist like Carson before," says patient Evan Winkelaar.

Mintram says pharmacists are in a unique position right now, where patients are looking to them to help with the burden in the health-care system and serve as an integral part of the team. With recent changes in scope and after the COVID-19 pandemic, the paradigm has shifted. Rather than visiting their doctor for every minor issue, patients are comfortable with pharmacists helping with chronic medications and looking at lab results.

"Not only does it reduce the workload on the prescribers, but it helps increase the amount of trust patients have with us," Mintram says.

But really, he says, "I'm just doing my job. Doing my job well."

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*The ability to come in and recognize people and be recognized and be a trusted resource for them is something I don't take for granted. I'm very grateful for the opportunity.*

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## Fatemeh Soleiman Panah COLLABORATIVE CARE AWARD

**TITLE** Pharmacy owner  
**WORKPLACE** Sina Pharmacy  
**LOCATION** Vancouver, B.C.

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As the owner of a pharmacy building that's also home to 10 doctors, Fatemeh Soleiman Panah spends her days collaborating with other health providers.

Throughout pharmacy school, pharmacist **Fatemeh Soleiman-Panah** was fascinated by the idea of delivering customized health care for patients using compounded medications.

Even in a large city like Vancouver, she found many prescribers were unfamiliar with custom compounding options outside of commercially available products. Shortly after opening Sina Pharmacy in 2014, she decided that needed to change. Taking inspiration from the preceptor who introduced her to compounding at the University of British Columbia, she approached dozens of doctors' clinics in and around the downtown Vancouver area.

"There's a huge gap in the knowledge of doctors and the training they've received in compounding. I saw an opportunity to be a different pharmacist who would collaborate with them and be a source they can rely on for evidence-based recommendations," Soleiman-Panah said.

Most doctors were very receptive to listening, perhaps even more than she had anticipated.

"At one clinic, the talk was meant to be half an hour, but it ended up going on for two hours," she said.

Those initial visits to doctors' clinics have blossomed into close relationships. What impressed those doctors was Soleiman-Panah's enthusiasm, the in-depth knowledge she brought, and her emphasis on always using credible references and research-based treatment options in the recommendations she makes.

Some doctors liked her so much they even decided to move in, bringing their practices into her pharmacy and seeing patients in one of her consultation rooms. Eventually, there was enough demand that she ended up converting her in-pharmacy organic juice bar into even more consultation rooms, so physicians could have more space.

"The way it happened: I went to speak with a doctor at a nearby clinic about our compounding

options and services, and he said he wasn't happy where he was. He offered to see patients if we had a consultation room in our pharmacy," Soleiman-Panah said.

"Another doctor, during COVID, she needed a space to do an allergy serum. I said of course she could use the space. Their clinic was closed due to the pandemic at the time, and she didn't have a space. She ended up moving here."

Today, her pharmacy – now more aptly named Sina Health Centre – is home to seven general physicians and three specialists.

"I lean on her a lot and her expertise. There are endless ways she helps us. Any medication related question we have she can usually answer it or knows where to find the answer," said Dr. Rayn Kingan, a doctor at Sina. "Most people say they really trust her. They trust her advice."

She's proud to call many of these doctors her friends.

"You have to first be friends with someone before you can collaborate with them," Soleiman-Panah said. "All of our team here, we are very good friends. We have a lot of respect for each other, and I treat all of them like family. And I think they really see that."

Even the patients notice the collaborative nature of Sina Health Centre.

"She plays a vital role in coordinating my health care. What I like about Sina Pharmacy is how the staff, the medical doctors and the pharmacists work together as a team," said Waseem Al-Nuaimi, a patient at Sina.

Soleiman Panah said she wouldn't want to approach her practice any other way.

"It's that satisfaction. I'm doing something positive and I'm making a contribution that's helping the doctor, helping the patient and sometimes it helps our pharmacy too," she said.

"The satisfaction of making a difference, and everyone in the process is benefitting." ■

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*It's the satisfaction of making a difference, and everyone in the process is benefitting.*

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## Community pharmacies in B.C. offering RSV vaccines

BY MICHAEL MUI  
COMMUNICATIONS MANAGER, BCPHA

More than 600 pharmacies in British Columbia have been providing immunizations against the respiratory syncytial virus (RSV) since Health Canada approved a vaccine in August 2023.

The first vaccine, Arexvy, was approved last year for the prevention of lower respiratory tract disease in adults 60 years or older. A second RSV vaccine, ABRYSVO™, was approved in January 2024 for people who are 32 to 36 weeks pregnant for the prevention of lower respiratory tract disease caused by RSV in infants.

RSV causes yearly outbreaks of respiratory tract disease, usually starting in late fall and running through to early spring. Those with the illness usually receive cold-like symptoms, but it can also cause more serious respiratory illness. It is transmitted when coughs or sneezes from an infected person comes into contact with the eyes, nose, mouth or airway of another person.

The vaccines are not funded by the province of British

Columbia and instead must be purchased from pharmacies that are offering it. To book a RSV vaccine, visit [bcpharmacy.ca/rsv-vaccines](https://bcpharmacy.ca/rsv-vaccines).

Shyrr Lelis, pharmacist at Pharmasave Mount Pleasant in and Pharmasave City Square in Vancouver, said she's been receiving regular interest from seniors inquiring about the RSV vaccine since the fall public vaccine campaign began. Most patients, she said, heard about the availability of the vaccine through the news or from other health-care providers. The same day the second vaccine was approved, Lelis already had a patient inquire about it.

"The news spreads so quickly. It's great that the public are aware of these announcements, that also prompts us as pharmacists to make sure that we are on top of things," she said.

*Continued on page 26*



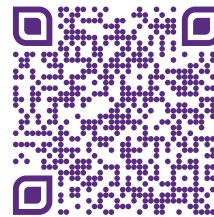
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\* Comparative clinical significance unknown.

**References:** **1.** Data on file. GSK. **2.** AREXVY Product Monograph, GlaxoSmithKline Inc.



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Lehis said between two pharmacies, about five to 10 patients per month have been coming in for the first RSV vaccine since her stores began offering them in October 2023.

“I did a lot of COVID vaccine clinics before, and kept in touch with some of the staff. One of the nurses who worked in Sechelt this season commented that they had numerous inquiries about RSV vaccine and even they were unsure of where to get them,” Lehis said.

“Patients often don’t know exactly where to get them and here at the pharmacy we were actually surprised at how many RSV vaccines we have provided in our stores.”

Imran Rajani, pharmacy owner of Wescana Pharmacy Delta, agreed that the majority of inquiries he received about the RSV vaccine were from seniors. Most frequently, those who called wanted to know about the cost of the vaccine and where they could get one. For this group of patients who are actively seeking out the vaccine, the vast majority had done their research and were seeking to get the most protection possible during the respiratory illness season.

Other patients opted to purchase the RSV vaccine after coming in for their seasonal COVID and flu shots and learning of the RSV vaccine from pharmacy staff.

“These people didn’t really know about it, but we would explain to them that this is a new vaccine for RSV, and we would explain what it prevents against, who the vaccine is intended for, and share with them the data about severity of illness and rate of hospitalizations. This helps put things into perspective for the patient, when let’s say, compared to the benefits of receiving the influenza vaccine or the pneumonia vaccine,” Rajani said.

Shyrr Lehis (right), pharmacist at Pharmasave Mount Pleasant, provides immunizations for a visiting delegation from MLA Joan Phillip’s office.

For Arexvy, the first approved RSV vaccine, pharmacies have been generally charging between \$250 to \$300. Rajani said the cost was often a factor in whether a patient who learned about the RSV vaccine went through with receiving it.

Most of the patients who received the vaccine had a prescription along with third-party insurance, covering 50 to 80 per cent of the cost, Rajani said.

Despite the cost, Rajani said he’s not surprised so many have been seeking to be protected from RSV. He credits an increased awareness among the public of vaccine preventable illnesses due to the COVID-19 pandemic.

“There’s been sort of a mindset change over the last three or four years. People are a lot more aware of respiratory illnesses and the harm and danger that they can potentially pose,” he said.

“After COVID, people are realizing that RSV is something that can also get them really sick, especially in the populations above 60 and in children under nine years old.” **1**

To book a RSV vaccine, visit [bcpharmacy.ca/rsv-vaccines](https://bcpharmacy.ca/rsv-vaccines).

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### SPEAKERS *(More will be announced soon!)*:



Dr. Kaitlyn Watson,  
B. Pharmacy (Hons),  
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**Founder, CEO, Disaster  
Pharmacy Solutions**

Dispensing Preparedness:  
How has the pandemic  
shifted the way patients  
see community  
pharmacists?



Allison Bodnar,  
B.A., LL.B

**CEO, Pharmacy  
Association of Nova Scotia**

Pharmacy Clinics: Nova  
Scotia is experimenting  
with the idea of primary  
care clinics in pharmacies  
where patients can seek  
free appointments for  
services such as minor  
ailments.



Mitch Moneo

**Assistant Deputy  
Minister, Pharmaceutical,  
Laboratory and Blood  
Services Division**

Ministry Update: Each year,  
the head of the Ministry  
of Health's Pharmaceutical  
Laboratory and Blood  
Services provides an  
update to pharmacists on  
its latest work.



## Ensuring First Nations Plan W clients receive coverage for OTC medications

BY CARMEN PALLOT, BSC(PHARM)

As someone who grew up in an area of British Columbia with a large population of First Nations community members, I was very surprised to learn of a recent survey that found 74 per cent of Indigenous people in B.C. report being asked to pay for over-the-counter (OTC) medications that should be covered under Plan W.

Plan W is available for clients enrolled with the First Nations Health Authority and includes coverage for OTC supplies and medications, with eligibility for the latter available if the client has a prescription, or the product is recommended by you, the pharmacist.

The survey, however, found that many Indigenous clients felt whether they received coverage for their OTC medications depended on the specific pharmacist or pharmacy they were visiting. The respondents emphasized that they experienced racism and discrimination when attempting to access their coverage. The findings were published on Nov. 16, 2023 by the Coastal Research, Education and Advocacy Network, after polling 119 Indigenous clients.

Living and working in Lillooet, an unceded territory of the Northern St'at'imc people, about half of the clientele at my pharmacy identify as First Nations. First Nations communities have long endured from colonialism-driven

health inequities which impacts their physical, spiritual, mental, and emotional being. As pharmacists, we have a responsibility to be mindful of this and to try to correct the imbalance by helping our Indigenous clients access the best care possible.

My family has owned and operated our pharmacy, Pharmasave Lillooet, since 1971. Having been in the community for so long, I recognize most of our First Nations clients as soon as they walk into the pharmacy. But a good habit every pharmacist should adopt is to inquire with every new client whether they have coverage for medications, whether that's from a third-party provider or Plan W. It should be a standard question, as part of the counselling you do with the patient, for everyone coming into the store.

Something else we have is signage. It can be something simple that reads: If you have Plan W there's certain medications that might be covered, just ask us. Putting up a sign like this at the prescription pick-up and drop-off area or having them attached as shelf talkers next to the OTC products can help communicate that information as well.

Another thing you can do is familiarize yourself with the list of OTC medications available through Plan W. This list is available on the PharmaCare website and identifies the

covered OTC products by ingredient, brand name, strength, dosage form, identification number and manufacturer.

Once a patient eligible for Plan W is identified and you have determined that an OTC recommendation is suitable for their needs, we would set up the OTC product as a prescription fill. This means the patient will have to wait or come back when their prescription is ready for pickup. Upon their return, we would provide a consultation with the patient about their medication they're receiving, and complete the BC PharmaCare Plan W OTC Recommendation form, which has a section the patient must sign.

This does take more time compared to a non-Plan W patient coming in to purchase an OTC product, of course. But it's important to take the time to identify Plan W patients and help ensure Indigenous clients can access the coverage they are entitled to. Even if it takes longer, this is in the best interest of the patient and as pharmacists improving patient care is our ultimate goal.

The survey published in November tells me that there's still much work left to do.

The imbalances that face First Nations members of our communities have existed for hundreds of years, and the trauma from those imbalances continues to impact every First Nations client that we have. As health-care providers, we should be mindful of that and we should do our part to help them access the best care possible. Being aware of these imbalances and taking these little steps to make it better can make a big difference over time. **T**

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*Carmen Pallot, BSc(Pharm) is the owner and pharmacy manager of Pharmasave Lillooet. She graduated from the University of British Columbia's pharmacy program in 1999. She is the 10th pharmacist in her family.*

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*First Nations communities have long endured from colonialism-driven health inequities which impacts their physical, spiritual, mental, and emotional being. As pharmacists, we have a responsibility to be mindful of this and to try to correct the imbalance by helping our Indigenous clients access the best care possible.*

”



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## We are now accepting nominations for the **2024 Awards**

With the return to an in-person conference this year, the Association is launching the 2024 Excellence in Pharmacy Awards nominations process early this year.

From **Feb. 1, 2024** to **Mar. 31, 2024**, nominate a deserving candidate to be recognized by the profession.

To nominate a pharmacist,  
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**HIGHER CONCENTRATION**  
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**CITRATE-FREE<sup>†</sup>**

**Option to store up to 31 days @ room temperature**

The patient may choose to store HADLIMA<sup>®</sup> 40 mg/0.4 ml at room temperature up to a maximum of 25°C (77°F) for a single period of up to 31 days.

For more information, please refer to the Product Monograph.



[www.harmonyorganon.ca](http://www.harmonyorganon.ca)

Indications have been granted on the basis of similarity between HADLIMA<sup>®</sup> and the reference biologic drug Humira<sup>®</sup>.<sup>1</sup>

HADLIMA<sup>®</sup> (adalimumab injection in pre-filled syringe) and HADLIMA<sup>®</sup> PushTouch<sup>®</sup> (adalimumab injection in auto-injector) are indicated for:

- reducing the signs and symptoms, inducing major clinical response and clinical remission, inhibiting the progression of structural damage and improving physical function in adult patients with moderately to severely active rheumatoid arthritis. HADLIMA<sup>®</sup> can be used alone or in combination with methotrexate (MTX) or other disease-modifying antirheumatic drugs (DMARDs).
  - o When used as first-line treatment in recently diagnosed patients who have not been previously treated with MTX, HADLIMA<sup>®</sup> should be given in combination with MTX.
  - o HADLIMA<sup>®</sup> can be given as monotherapy in case of intolerance to MTX or when treatment with MTX is contraindicated.
- in combination with MTX, reducing signs and symptoms of moderately to severely active polyarticular juvenile idiopathic arthritis (JIA) in patients, 2 years of age and older, who have had an inadequate response to one or more DMARDs. HADLIMA<sup>®</sup> can be used as monotherapy in case of intolerance to MTX or when continued treatment with MTX is not appropriate. Adalimumab has not been studied in pediatric patients with polyarticular JIA aged less than 2 years.
  - o HADLIMA<sup>®</sup> is available for pediatric polyarticular JIA patients who require the full 40 mg dosage based on body weight.
- reducing the signs and symptoms of active arthritis and inhibiting the progression of structural damage and improving the physical function in adult psoriatic arthritis patients. HADLIMA<sup>®</sup> can be used in combination with MTX in patients who do not respond adequately to MTX alone.
- reducing signs and symptoms in adult patients with active ankylosing spondylitis who have had an inadequate response to conventional therapy.
- reducing signs and symptoms and inducing and maintaining clinical remission in adult patients with moderately to severely active Crohn's disease who have had an inadequate response to conventional therapy,

including corticosteroids and/or immunosuppressants. HADLIMA<sup>®</sup> is indicated for reducing signs and symptoms and inducing clinical remission in these patients if they have also lost response to or are intolerant to infliximab.

- treatment of adult patients with moderately to severely active ulcerative colitis (UC) who have had an inadequate response to conventional therapy including corticosteroids and/or azathioprine or 6-mercaptopurine (6-MP) or who are intolerant to such therapies. The efficacy of adalimumab in patients who have lost response to or were intolerant to tumor necrosis factor (TNF) blockers has not been established.
- treatment of active moderate to severe hidradenitis suppurativa in adult and adolescent patients (12 to 17 years of age weighing  $\geq 30$  kg), who have not responded to conventional therapy (including systemic antibiotics).
- treatment of adult patients with chronic moderate to severe plaque psoriasis who are candidates for systemic therapy. For patients with chronic moderate plaque psoriasis, HADLIMA<sup>®</sup> should be used after phototherapy has been shown to be ineffective or inappropriate.
- treatment of non-infectious uveitis (intermediate, posterior and panuveitis) in adult patients with inadequate response to corticosteroids or as corticosteroid-sparing treatment in corticosteroid-dependent patients.
- treatment of chronic non-infectious anterior uveitis in pediatric patients from 2 years of age who have had an inadequate response to or are intolerant to conventional therapy, or in whom conventional therapy is inappropriate.
  - o HADLIMA<sup>®</sup> is available for pediatric uveitis patients who require the full 40 mg dose based on body weight.

Consult the product monograph at [https://www.organon.com/canada-en/hadlima-pm\\_e](https://www.organon.com/canada-en/hadlima-pm_e) for contraindications, warnings, precautions, adverse reactions, interactions, dosing, and conditions of clinical use. The product monograph is also available by calling 1-844-820-5468.

<sup>†</sup>Clinical significance has not been established.

Reference: 1. HADLIMA<sup>®</sup> Product Monograph. Organon Canada Inc. December 14, 2022.

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adalimumab injection



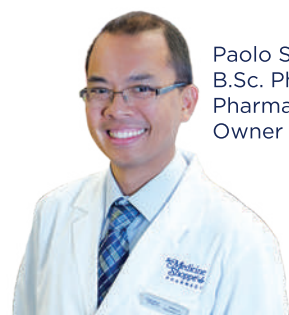
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