

# BC PHARMACARE NEWSLETTER

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The PharmaCare Newsletter team works from the territory of the Lekwungen People, known today as the Songhees and Esquimalt Nations. Our gratitude extends to them, and all Indigenous Peoples on whose territories and lands we build relationships.

BC PharmaCare counts on pharmacies and device providers to practice cultural safety and humility. To learn more, read *Coming Together for Wellness*, a series of articles by the First Nations Health Authority (FNHA) and PharmaCare, and consider taking the San'yas Indigenous Cultural Safety course.

The PharmaCare Newsletter is published by the Pharmaceutical, Laboratory & Blood Services Division to provide information to B.C.'s healthcare providers.

[www.gov.bc.ca/pharmacarepharmacists](http://www.gov.bc.ca/pharmacarepharmacists)  
[www.gov.bc.ca/pharmacareprescribers](http://www.gov.bc.ca/pharmacareprescribers)  
[www.gov.bc.ca/pharmacaredeviceproviders](http://www.gov.bc.ca/pharmacaredeviceproviders)



**Q:** What is romosozumab (Evenity™) and what is the evidence for it compared to bisphosphonates?

**A:** The answer is in the current edition of [PAD Refills](#). Make sure to subscribe so you don't miss out on news and updates!



## Scheduling of nicotine mouth spray and inhaler products

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On February 8, 2024, we communicated [changes to the scheduling of nicotine pouch products](#), in response to the Minister of Health's announcement regarding government action to prevent new nicotine dependency in youth and non-smokers.

Pharmacists have questions about the inclusion of Nicorette® QuickMist® and Nicorette® Inhaler products in the announcement.

There are no concerns with inappropriate use of Nicorette® QuickMist® and Nicorette® Inhaler among youth and non-smokers. The Ministry of Health is in the process of consulting with Health Canada, after which further modifications may be made to the nicotine listing in the drug schedules.

Any updates will be published in the PharmaCare Newsletter. Be sure to subscribe so that you are notified of special editions as well as our regular edition, published the first Tuesday of the month.

## B.C. designates nicotine pouches as Schedule 2 drugs

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The Province has regulated tobacco-free nicotine pouches as Schedule 2 drugs ([Drug Schedules Regulation](#)), in part to prevent new nicotine dependency. As of February 7, 2024, buccal nicotine pouches (e.g., Zonnic), as well as sprays and inhalers (e.g., Nicorette's QuickMist® and Inhaler®) must be sold by pharmacies only, for therapeutic use, and must be kept behind the counter.

B.C. pharmacists should use their professional judgment when providing buccal nicotine pouches to clients. Health Canada's recommended dose for the only approved pouch, Zonnic 4mg, is a maximum of fifteen pouches per day, for adults 18 years or older.

Canada's [Drug and Health Product Register](#) requires non-tobacco products containing nicotine to be prescribed, but nicotine replacement therapy (NRT) in the form of gum and lozenges containing 4 mg or less of nicotine and patches with a delivery rate of 22 mg or less of nicotine per day are exempt. This allows nicotine pouches to be sold in Canada without a prescription.

The rescheduling of buccal nicotine pouches will be re-evaluated in 12 months or if the federal government decides to restrict sale of these products.

### Supporting patients trying to quit nicotine

Pharmacists are always encouraged to sign people up for the BC Smoking Cessation Program, which covers the full cost of non-prescription NRT (gum, lozenges, patches) and some or all of the cost of prescribed medications. The program is unchanged. Learn more at [Smoking Cessation Program](#).

As part of providing the Minor Ailments and Contraception Service (MACS), B.C. pharmacists can assess and prescribe for nicotine dependence. Learn more at [Minor Ailments and Contraception Service \(MACS\)](#).

### Resources

- [Health Canada product information – Zonnic](#)
- [Province takes action to prevent sale of nicotine products to youth | BC Gov News](#)
- [Ministerial Order M32](#)
- [Smoking Cessation Program](#)
- [Minor Ailments and Contraception Service \(MACS\)](#)

\*Updated on March 15, 2024, to correct details regarding Health Canada's recommended dose of Zonnic 4mg.

## New SA eForms feature – account deactivation notifications

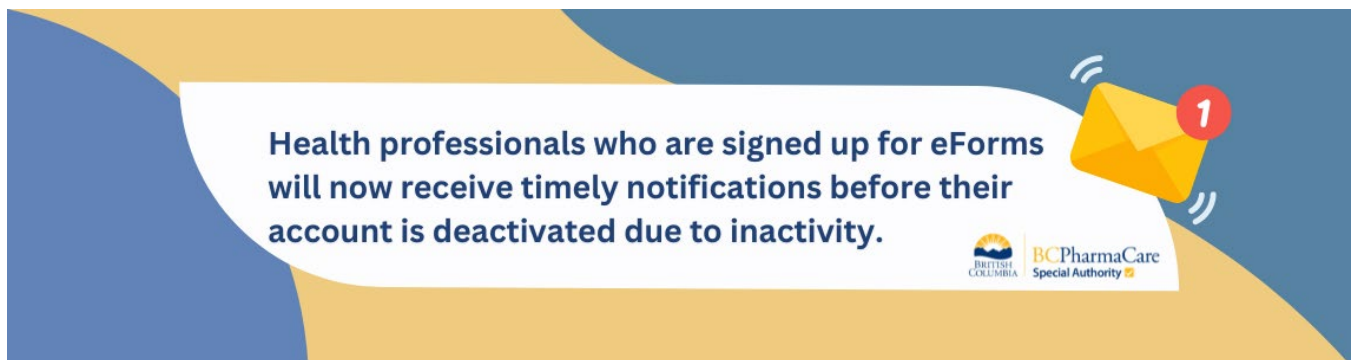
Health professionals who are signed up to submit [Special Authority \(SA\) eForms](#) will now receive timely notifications before their account is deactivated due to inactivity.

eForms accounts are automatically deactivated if a user does not log in for 90 days.

This new feature will send reminder emails to users 60, 75, 83, and 89 days after their last login. These reminder emails will prompt users to log in and prevent account deactivation.

### Resources

- [Special Authority eForms](#)



## New MACS learning modules for pharmacists

On January 31, 2024, UBC Continuing Pharmacy Professional Development (CPPD) released the following free, accredited programs to support the Minor Ailments and Contraception Service (MACS):

- [MACS: Acne Vulgaris](#)
- [MACS: Fungal Skin Infections](#)
- [MACS: Threadworms and Pinworms](#)

Pharmacists are encouraged to enrol in these programs and continue to seek educational opportunities and resources to support their participation in MACS.

Other educational opportunities available through UBC CPPD can be found at: [Continuing Pharmacy Professional Development Programs](#) and [Building Cultural Safety and Humility for First Nations Clients into Pharmacy Practice](#).

### Resources

- [UBC Professional Development Courses for Pharmacist – MACS](#)
- [Continuing Pharmacy Professional Development Programs](#)
- [Building Cultural Safety and Humility for First Nations Clients into Pharmacy Practice](#)

## Therapeutics Letter – minimizing ICS in COPD

The Therapeutics Initiative recently published a Therapeutics Letter about minimizing the harm of inhaled corticosteroids (ICS) in patients with chronic obstructive pulmonary disease (COPD). The letter describes evidence of harm of ICS, suggests a patient population who may benefit from ICS in combination with bronchodilators, and reviews two studies that evaluated ICS withdrawal. Visit [Therapeutics Initiative | \[145\] Minimizing inhaled corticosteroids for COPD](#) to read the letter.

### Resources

- [Therapeutics Initiative | \[145\] Minimizing inhaled corticosteroids for COPD](#)

## Transition in B.C. cervical screening

In January 2024, BC Cancer transitioned to human papillomavirus (HPV)–based screening, replacing the current provider-collected liquid-based cytology sample (Pap test) for detection of pre-cancerous lesions in the cervix.

People can choose to self-test by completing a cervix self-screen kit and mailing it to the lab, making cervical screening more accessible! Self-screening kits can be requested by phone or online.

Learn more from BC Cancer's [December 2023 bulletin \(PDF, 611KB\)](#).

## RAT kit payment update

Since the last newsletter, PharmaCare paid pharmacies for COVID-19 rapid antigen test (RAT) kit distribution as follows:

Payment month	Payment date
November 2023	February 5, 2024

Pharmacies are paid \$75 for each case of RAT kits distributed, and pharmacists are reminded to enter the correct PIN for each case of RAT kits distributed.

- BTNX: 66128325
- Artron: 66128338

### Resources

- [2023 PharmaCare Provider Payment Schedule \(PDF\)](#)
- [2024 PharmaCare Provider Payment Schedule \(PDF\)](#)

## MSP enrolment and PharmaCare coverage

Under the [Medicare Protection Act](#), enrolment with the Medical Services Plan (MSP) is mandatory for all eligible residents and their dependents. MSP is the provincial health insurance program that pays for required medical services.

Most PharmaCare plans require people to be enrolled in MSP to receive coverage. However, exceptional coverage is available under Plan Z (Assurance) and Plan G (Psychiatric Medications) for some products for people living in B.C. who are in the [wait period for MSP coverage](#) and who may or may not have completed both MSP enrolment steps.

### MSP enrolment

To enrol in MSP and obtain a photo BC Services Card, most adults must complete two steps:

- Submit the [Application for Health and Drug Coverage \(AHDC\)](#) with accepted identification to Health Insurance BC and
- Attend an ICBC driver licensing office to provide primary and secondary identification

Children and temporary document holders don't need to attend an ICBC office and will be issued a non-photo BC Services Card.

MSP coverage becomes active once MSP enrolment is complete and the resident has completed the [wait period](#) consisting of the balance of the month in which they established residency in B.C., plus two months.

First Nations Health Authority (FNHA) manages MSP for First Nations people in B.C. Status First Nations people can enrol for MSP through the First Nations Health Benefits program (Plan W). The [MSP enrolment application form](#) is available online or by calling First Nations Health Benefits at 1-855-550-5454.

### Resources

- [Application for Health and Drug Coverage \(AHDC\)](#)
- [Psychiatric Medications Plan \(Plan G\)](#)
- [Plan Z \(Assurance\)](#)
- [First Nations Health Benefits \(Plan W\)](#)

## Steps to enrol in MSP

# 1

Submit the Application for Health and Drug Coverage (AHDC) form online or by mail

# 2

Verify ID at an ICBC driver licensing office, if applicable

Enrol in Fair PharmaCare at the same time using the AHDC form!

## Formulary and listing updates

### Regular benefits: Apo-riluzole and Mylan-riluzole

<b>Drug name</b>	Apo-riluzole and Mylan-riluzole		
<b>Date effective</b>	February 1, 2024		
<b>Indication</b>	For the treatment of amyotrophic lateral sclerosis.		
<b>DIN</b>	02352583 02390299	<b>Strength &amp; form</b>	50 mg tablet

### Limited Coverage benefits: ozanimod (Zeposia®), icosapent ethyl (Vascepa®)

PharmaCare has added the following Limited Coverage items to the PharmaCare drug list. Special Authority approval is required for coverage.

<b>Drug name</b>	<a href="#">ozanimod (Zeposia®)</a>		
<b>Date effective</b>	January 16, 2024		
<b>Indication</b>	For the treatment of adults with moderately to severely active ulcerative colitis who have had an inadequate response, loss of response, or were intolerant to either conventional therapy or a biologic agent.		
<b>PIN</b>	02506009 02505991	<b>Strength &amp; form</b>	0.23 mg and 0.46 mg (initiation pack) capsule 0.92 mg capsule

<b>Drug name</b>	<a href="#">icosapent ethyl (Vascepa®)</a>		
<b>Date effective</b>	February 6, 2024		
<b>Indication</b>	For reducing the risk of cardiovascular (CV) events for statin-treated patients with elevated triglycerides, who are at high risk of CV events due to established CV disease (i.e., secondary prevention).		
<b>PIN</b>	02495244	<b>Strength &amp; form</b>	1 gm capsule

### Limited Coverage benefits update: semaglutide (Ozempic®)

Effective February 6, 2024, PharmaCare has added coverage for semaglutide (Ozempic®) 0.68 mg/mL (2 mg/pen). Because of this new listing, temporary coverage for dulaglutide (Trulicity®) that was provided during the semaglutide shortage will end on February 13, 2024.

<b>Drug name</b>	<a href="#">semaglutide (Ozempic®)</a>		
<b>Date effective</b>	February 6, 2024		
<b>Indication</b>	For the treatment of Type 2 Diabetes.		
<b>DIN</b>	02540258	<b>Strength &amp; form</b>	0.68 mg/mL (2 mg pen)

## Delisting: Apomorphine (Movapo™, Kynmobi®)

On June 4, 2024, PharmaCare is delisting apomorphine (Movapo™, Kynmobi®) because these products have been withdrawn from the Canadian market due to low demand. Effective February 5, 2024, no new approvals will be authorized for Movapo and Kynmobi, except for ones that are currently being processed. These will be authorized up to the delisting date on June 4, 2024.

This allows prescribers to find an alternative for their patients before Movapo and Kynmobi are delisted.

## Your Voice: Input needed for drug decisions

The knowledge and experience of patients, caregivers and patient groups is integral to [B.C.'s drug review process](#). If you know someone who is taking one of the drugs below or who has a condition any of the drugs treat, please encourage them to visit [www.gov.bc.ca/BCyourvoice](http://www.gov.bc.ca/BCyourvoice).

Your Voice is now accepting input on the following drugs:

Drug	Indication	Input window
inclisiran (Leqvio®)	Non-familial hypercholesterolemia (nFH) with atherosclerotic cardiovascular disease (ASCVD), adults	January 31 to February 27 at 11:59 pm
inclisiran (Leqvio®)	Heterozygous familial hypercholesterolemia (HeFH), adults	January 31 to February 27 at 11:59 pm
infliximab (Remsima™ SC)	Crohn's disease (CD), adults	January 31 to February 27 at 11:59 pm
infliximab (Remsima™ SC)	Ulcerative colitis (UC), adults	January 31 to February 27 at 11:59 pm
cannabidiol (Epidiolex®)	Seizures associated with Dravet syndrome (DS) in patients two years of age and older	January 31 to February 27 at 11:59 pm
cannabidiol (Epidiolex®)	Seizures associated with tuberous sclerosis complex (TSC) in patients two years of age and older	January 31 to February 27 at 11:59 pm
cannabidiol (Epidiolex®)	Seizures associated with Lennox-Gastaut syndrome (LGS) in patients two years of age and older	January 31 to February 27 at 11:59 pm



## Climate change series #2 – Life of a pill bottle

Between 1860 to 1950, most prescription bottles were glass, with a narrow neck and mouth designed to make liquid easy to pour. The feature also helped prevent evaporation around the cork. There were four general shapes: round, square, rectangular, and oval, with oval being the most popular. Jars and pots for ointments were made of glass, pottery, ceramic, and metal. After World War II, plastic bottles and jars entered the market and soon dominated, being cheaper and easier to manufacture and transport.

Most plastic medication bottles are recyclable. Recycling means less plastic in the landfill, leaching chemicals into the air, ground, and water.

Here's what generally happens when a prescription bottle is recycled in B.C.:

- Materials are collected from homes, depots, and office spaces
- Materials are delivered to a receiving facility
- Recyclable materials are sorted and put through a final quality-control clean up
- Materials are baled and shipped to end-markets in the B.C. or the U.S. and used to make new products such as furniture, shelving, and packaging



### Pharmacists' scope of (recycling) practice

Pharmacists can support the recycling of medicine bottles:

- Check whether your local recycling depot accepts pill bottles at Recycling Council of British Columbia ([rcbc.ca](http://rcbc.ca))
- Remind clients to recycle their pill bottles and medication packaging at home when possible, or
- Ask clients to return their used pill bottles to the pharmacy; and place them in a box, and when the box is full, put them in the Blue Box, making sure to remove the labels first
- If there is residue like powder or liquid inside the containers, wash the containers with soap and water. Residue can contaminate other plastics and make them unrecyclable

While recycling can be beneficial, there are a few downsides. Some recycling facilities do not have the means to recycle small prescription bottles. Plastic needs to be melted down, but most bottles are heat-resistant, so melting them requires a lot of energy. Finally, plastics can only be recycled a few times before they degrade.

Blister packs are harder to recycle because they use both paper and plastic, which are difficult for recyclers to separate; they are usually thrown in the trash. One solution is providing clients with reusable pill cases or organizers instead. Each pill case could be personalized for clients with unique labels or colours.

## Reduce and re-use is best

While recycling is important, reducing and reusing is better. Consider using glass bottles instead of plastic bottles. Glass bottles can be recycled many times and provide the same benefits as a plastic bottle. Several pharmacy suppliers package their products without plastic.

Some suppliers of glass bottles include:

- [GreenPharmacies.ca](https://www.greenpharmacies.ca) (has options for childproof lids)  
[Uline](https://www.uline.com)
- [Cole-Parmer](https://www.cole-parmer.com)
- [Canadian Med Health](https://www.canadianmedhealth.com) (has options for childproof lids)

You can also do an online search for “glass prescription bottle wholesale suppliers B.C.” to find other options. When ordering from a supplier, ensure the bottles are sterilized before use. Amber glass bottles also protect medication from UV light and are resistant to heat and cold, providing the same benefits as a plastic bottle. Some customers prefer amber glass bottles for their aesthetic and can attract new customers to your pharmacy.

Glass bottles are more expensive to buy and ship because of the manufacturing process and their weight. You may want to consider a [reusable bottle program](#), featured in our December 2023 newsletter.

Lastly, find other uses for plastic in your pharmacy. For example, the pharmacists of Teasdale Apothecary Co. reuse the large plastic bags from medication deliveries as garbage bags. They also display a tally of the plastic bottles they have diverted from landfill through their reusable bottle program. To date, they have diverted 4000 single-use plastic vials from the waste stream! Such displays can inspire customers to join their pharmacy’s environmental initiatives.

Let us know at [PharmaCareInfo@gov.bc.ca](mailto:PharmaCareInfo@gov.bc.ca) what you do in your pharmacy to reduce your waste. We will share them in a future newsletter. If everyone takes one small step, we can all make a big difference in the communities that we care for.

Did you know that B.C. processes over 200,000 tonnes of recycling each year? That’s the weight of 33,000 orca whales!



### Did you know?

The Smoking Cessation Program, introduced in September 2011, covers smoking cessation products for eligible B.C. residents who want to stop using tobacco products. In 2021/22, the program provided approximately 56,000 patients with free nicotine replacement therapy. Read [PharmaCare Trends 2021-22 \(PDF, 865KB\)](#) for more PharmaCare facts.