brand-name drugs — Canadian prices for those drugs have increased 1.9 percentage points slower than the general rate of inflation and Canadian patented drug prices have averaged below median international prices since 2001.

“The argument that adopting stronger IP rights for pharmaceuticals will drive up health care costs is not supported by the evidence,” he says.

Meanwhile, Canada’s generic industry plans to continue to make its concerns known to the

federal government and to advocate for a deal that doesn’t extend drug-patent protection.

“Going into the final days of negotiating, we will continue promoting our interests and remain hopeful that Canada will sign a trade deal with the Europeans,” says Mr. Keon. “We support the government’s trade agenda — we are free traders ourselves — but we don’t want these heavy-handed restrictive aspects for pharmaceuticals.”

DOI: 10.1177/1715163512473930

Saskatchewan pharmacists pleased with demand for prescribing services, but seek to expand assessments for minor ailments

The numbers are in for the first 6 months of pharmacist prescribing services in Saskatchewan, and they show strong uptake of “level-1” services — including renewals, changes to dosage form and provision of emergency supplies of medications.

About 48,000 Saskatchewan residents accessed these types of prescribing services between January 1 and June 30, 2012, according to figures released by the province’s health ministry on October 23. The numbers are much smaller, however, for minor ailments prescribing, accessed by approximately 550 people from February 1 to June 30. Reimbursements to pharmacists in the minor ailments category cost the government \$10,000 over the 5-month period.

“It wasn’t a surprise that the numbers were somewhat low on the minor ailments side,” says Dawn Martin, executive director of the Pharmacists’ Association of Saskatchewan (PAS). “This is still a very new program and the minor conditions included in the authority remain quite limited.”

The statistics also reflect the fact that pharmacists receive the \$18 minor ailment assessment fee only when the assessment results in a prescription. “The billing statistics don’t tell us about the cases where the pharmacist ends up providing the patient with an OTC medication or referring them to a physician,” says Ms. Martin.

Meanwhile, PAS is pleased that Saskatchewan residents are turning to their pharmacists for prescription refills and similar services, says the executive director. “We have a diverse rural and remote population and pharmacists had struggled to help their patients in communities with small

numbers of physicians. It appears we are indeed filling some gaps in patient care with these new services.”

A survey conducted for PAS last summer showed that 95% of people in the province felt comfortable approaching their pharmacist to discuss health issues.

Moving to expand minor ailment services

The association launched a public education campaign in late October to make Saskatchewan residents more aware of the minor ailments prescribing services — using newspaper ads, posters and brochures for pharmacies, and promotional radio programs.

The next step, says Ms. Martin, is to expand the services to cover more minor ailments. Currently, the services cover prescriptions related to minor acne, insect bites, cold sores, canker sores, allergic rhinitis, oral thrush and diaper rash.

The Saskatchewan College of Pharmacists has put together an interdisciplinary committee that includes pharmacists, physicians and other health care stakeholders and its mandate is to recommend additional minor conditions to be added to the current list of 7. Pharmacists are also advocating for an expansion of the assessment fee to cover all outcomes: prescriptions, OTC medications and referrals to another health care provider.

DOI: 10.1177/1715163512473939