









Put patient health first in regulating codeine use Health Ministers urged

This is a joint release from the RACP, painaustralia, RDAA, RACGP, CHF and SHPA

Thursday, 2 November 2017

Australia's health ministers meeting tomorrow (Friday) must put people's health first and resist pressure to water down codeine safety measures, an alliance of medical, pharmacy and consumer organisations has urged.

"We are concerned that some state and territory health ministers may bow to pressure from some pharmacy owners and seek to overturn in their states the decision supported by the Federal Health Minister, Greg Hunt, to make codeine available only after consultation with their GP.

"The Pharmacy Guild representing owners has indicated that it is no longer campaigning for the regulation change not to proceed.

"However, we fear that health ministers may press for this important decision to be watered down in the wake of a campaign suggesting people will be disadvantaged by having to go to the doctor to get a prescription for codeine.

"This is highly misleading and damaging: more than 100 Australians die each year as a result of codeine addiction. The facts remain:

- * Codeine is not effective for treating chronic long-term pain.
- * There are serious risks of harm associated with codeine use, including dependence, toxicity and death.
- * Available over-the-counter alternatives, such as a combination of ibuprofen and paracetamol, have been found to be more effective at relieving pain than over-the-counter codeine-containing analysesics.
- * Multidisciplinary pain management is the most effective way to treat chronic pain.

"A failure to limit codeine to prescription-only would fly in the face of the unanimous decision of Australia's state and federal health authorities to act on the weight of evidence – in line with 26 other countries which have already curbed over-the-counter codeine sales – creating a dangerous regulatory mess that will put more Australian lives at risk."

Associate Professor Adrian Reynolds, President of the Chapter for Addiction Medicine within the Royal Australasian College of Physicians said: "Those who are seeking to pare back codeine upscheduling cite 'practicality' as their reason to continue to allow these drugs to be supplied, especially in rural areas. Practicality is a word people often use when they don't want to do the right thing. Practicality is also irrelevant when we know there are safer and more effective alternative medicines than codeine available.

Painaustralia CEO, Carol Bennett says: "We need to see better responses to pain – over the counter codeine is not one of those responses for people experiencing chronic pain. Health Ministers have an opportunity to save lives and reduce the growing rate of codeine dependency and harm in Australia.

RACGP President Dr Bastian Seidel: State governments must not water down codeine safety measures. The evidence is clear. Codeine is dangerous and the current situation is leading to severe negative health outcomes.

CHF Chief Executive Officer, Leanne Wells: Consumers need to hear the best evidence-based medical advice. When there are better medically-proven pain relief options like combination ibuprofen and paracetamol, taking codeine without a script should not remain as an option.

The Society for Hospital Pharmacists of Australia Chief Executive Kristin Michaels: Hospital pharmacists see the very worst of opioid misuse and dependence. 'Our members treat Australians, in primary and acute settings, who are taking codeine but gaining no therapeutic benefit. As Australia's only pharmacy organisation to back limiting codeine access as part of our Choosing Wisely recommendations, SHPA supports all government initiatives that reflect the weight of clinical evidence and prioritise patient safety.'

RDAA President Dr Ewen McPhee: Too often, rural doctors see the negative health outcomes of codeine overuse and addiction in their patients. Some doctors have told us of patients who present to them feeling unwell, and then advise they have been taking up to 20 tablets containing codeine each day! Patients can become easily addicted to codeine, and overuse can lead to very serious conditions including liver damage and internal bleeding. Given this significant danger, it is critical that codeine is only available by prescription, and that patients are prescribed codeine only after being properly assessed by a doctor — in many cases, there may be just as effective alternative medicines with lower risk for the patient.

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Contacts

Pain Australia: Linda Baraciolli 0404 931 031

RACGP: Callie Morgan 0439 585 798

RDAA: ceo@rdaa.com.au or 0427 638 374. CHF: Mark Metherell 0429 111 986 RACP: Melissah Bell 0415 111 503 SHPA: Nick Sharp-Paul 0411 098 838

Mark Metherell

Communications Director

E: m.metherell@chf.org.au

T: 02 6273 5444 **M**: 0429 111 986