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**Limits on dispensing and sales of prescription and over-the-counter medicines**

Community pharmacies are an essential front-line access point for the public who require medicines, advice, information and possible referral to medical practitioners or hospitals. As such it is imperative that during this time, we do everything we can to protect our pharmacy personnel so that we can keep our doors open and at the same time provide a safe environment for individuals needing pharmaceutical care.

Demand for medicines has shown a spike over the last few weeks in response to the COVID-19 pandemic. We have had assurances from industry that our supply chain is robust however panic buying and hoarding of essential medicines will create unnecessary stress on the system resulting in supply interruptions.

Consequently, to ensure equitable access to medicines for all South Africans, the pharmacy industry, in consultation with the National Department of Health, require community pharmacists to apply limits on dispensing and sales of prescription and over-the-counter medicines.

It is critical to protect access to medicines for all South Africans.

Community pharmacists will apply manage the supply of all medicines for which unavailability or an interruption to treatment could result in significant health impacts, or which are expected to be subject to increased consumer demand associated with the COVID-19 pandemic. With immediate effect pharmacists will:

- limit dispensing of prescription medicines to 1 months' supply (30 days) at the prescribed dose,
- restrict sales of certain over-the-counter medicines to a maximum of one unit per person per purchase,
- only dispense multiple repeats in exceptional circumstances in accordance with the legislated criteria.

Certain over-the-counter medicines for which there has been particularly high demand will be subject to increased controls on supply:

- Salbutamol inhalers provided on an over-the-counter basis will be subject to new controls. Pharmacists will be required to confirm that supply is appropriate by confirmation of the patient's diagnosis, label the product indicating to whom it has been dispensed and record the supply.
- Pharmacists will be required to place paracetamol paediatric formulations behind the counter to assist in allocating supply equitably.
- Chloroquine is a medication previously used to prevent and to treat malaria. Pharmacists will strictly control access to chloroquine medicines.

**Roles and responsibilities of pharmacists:**

Pharmacists have legal obligations to control the supply of medicine, particularly in terms of Section 22A of the Medicines Act. There is nothing legally preventing the pharmacist from supplying more than 1 month’s supply of S0-S4 medicines.
The pharmacist also has responsibility to control medicine supply to ensure equitable access to medicine by the whole community. It would be irresponsible to allow a few to hoard medicines to the detriment of the rest of the community.

The pharmacist should identify particularly vulnerable patients such as the elderly, the very young and at-risk patients such as asthmatics, patients with cardiovascular disease and diabetics, and prioritize them appropriately.

Patients may claim their right to treatment in terms of Section 27 of the Bill of Rights. However, section 36 of Bill of Rights places certain limitations on these rights - “to the extent that the limitation is reasonable and justifiable in an open and democratic society based on human dignity, equality and freedom....”

Patients may need to accept that they, as individuals also have a responsibility towards their fellow citizens and thus should not be hoarding medicines to the possible detriment of others.

The supply of quantities of medicines that are not clinically required for an individual may be illegal under the current State of Disaster.

This media release has been created through a collaboration of Pharmacy First Working Group: