



**The Pharmacy
Guild of Australia**

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31 March 2014

Mr Steve Irons MP
PO Box 6022
House of Representatives
Parliament House
Canberra ACT 2600

Dear Mr Irons

Response to the House of Representatives Standing Committee on Health - Skin Cancer in Australia: awareness, early diagnosis and management

The Pharmacy Guild of Australia is the national peak pharmacy organisation representing community pharmacy. It strives to promote, maintain and support community pharmacies as the most appropriate primary providers of health care to the community through optimal therapeutic use of medicines, medicines management and related services.

The Guild welcomes the opportunity to provide a response to the House of Representatives Standing Committee on Health regarding Skin Cancer in Australia: awareness, early diagnosis and management. As the Committee highlights, Australia has one of the highest rates of skin cancer in the world with two out of three Australians diagnosed with skin cancer by the age of 70, and almost 2000 Australians die of skin cancer each year.

Emphasis should be placed on utilising and enhancing the expertise of existing health professionals in rural and remote areas, including in relation to the detection, early diagnosis, treatment and management of skin cancer. When used appropriately, teledermatology can be useful in diagnosing, preventing and managing skin cancers. It entails capturing an image digitally and transmitting the image to one or several dermatologists for opinion and assessment. Such 'store and forward' practices has been happening for a decade or more overseas¹.

As primary health care providers, community pharmacists are involved in health promotion, early intervention, prevention, assessment and general health management, often being the first point of contact between the public and the health care system, with more than 400,000 people visiting Australia's 5400 community pharmacies each day². Community pharmacy offers a highly accessible network of primary health care professionals who provide quality advice and professional services, often over extended hours seven days a week in urban, rural and remote areas.

¹ 'The implementation of teledermatology in Australia' (2011) discussion paper prepared for the Department of Health and Ageing by Tele Derm Pty Ltd.

² Guild Digest (2011)

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This provides a valuable interface with consumers to support health promotion messages, provide advice on sunscreen products and use, and in some instances, utilise teledermatology solutions, with appropriate referral to a GP or specialist if indicated.

The following is a brief outline addressing the Terms of Reference where the Guild believes community pharmacies can be utilised.

Strategies to enhance early diagnosis

Five year survival for people diagnosed with melanoma is 91%, rising to 99% if the melanoma is detected before it has spread. If spread is within the region of the primary melanoma, the five year survival is 65%, dropping to 15% if the disease is widespread³. The Guild believes that the availability of evidence based teledermatology solutions through community pharmacies could facilitate *early* diagnosis and intervention, particularly for those at high risk in rural and remote communities who have limited access to a general practitioner, let alone a specialist dermatologist. The impact on appropriately supported teledermatology 'store and forward' models through community pharmacy needs to be explored.

I highlight that this is already occurring in over 50 pharmacies in Western Australia through 'Spotcheck'⁴. This service commenced in February 2014 and uses smartphone technology and a password protected secure 'app' to allow a trained staff member to take a photograph of up to three 'spots' including sunspots, moles and freckles, at a cost to the consumer of up to \$65 depending on the number of areas assessed. These images are sent and assessed by doctors that practise skin cancer medicine who provide a report directly to the consumer and pharmacy within 48 hours, advising of results and recommendation as to whether follow up is required. If a consumer identifies that they require more than three areas assessed, they will be referred for a comprehensive skin check by an appropriate health professional.

Internationally, Norway has the second highest incidence of skin cancer, after Australia, which led to the implementation of the 'ScreenCancer' pilot in 2010 in Boots Pharmacies⁵. Currently, more than 80 pharmacies are now participating, detecting more than 60 cases of melanoma each year. The success of the pharmacy model is currently being expanded through Boots Pharmacies in Europe and UK. Closer-to-home, a similar model already operates in New Zealand, where certain pharmacies provide the 'Molemap' at a cost of approximately \$60 to the consumer.⁶ The consumer is provided with a report from a dermatologist within seven working days, including images, dermatologist diagnosis and recommended actions.

Effective strategies for prevention

Australian research has confirmed the appropriate application of sunscreen can decrease the risk of both cutaneous squamous cell carcinoma and cutaneous melanoma⁷. In laboratory conditions, when used as directed, SPF30 sunscreen filters 96.7% of Ultra Violet radiation and SPF 50 filters 98%, both providing excellent protection as long as they are applied properly⁸. Community pharmacy is ideally placed to assist

³ Australian Cancer Network Melanoma Guidelines Revision Working Party (2008) 'Clinical Practice Guidelines for the Management of Melanoma in Australia and New Zealand'.

⁴ Chemmart Pharmacy 'Spotcheck' webpage – accessed 18/3/2014

⁵ Alliance boots 2012/13 Annual Report – accessed online 20/3/14

⁶ Molemap 'Pharmacy Spot Checks' webpage - accessed 20/3/14

⁷ Green AC et al (2010) 'Reduced Melanoma After Regular Sunscreen Use: Randomized Trial Follow-Up' *Journal of Clinical Oncology* 28:70-78 (accessed online 20/3/14)

⁸ Australian Government – Australian Radiation Protection and Nuclear Safety Authority 'UV Resource Guide – Sunscreens' webpage (last updated 14/1/14)

