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## AMA BACKS TGA ON CODEINE

The AMA today reiterated its support for the Therapeutic Goods Administration (TGA) decision to make codeine a 'prescription only' medicine from 1 February 2018.

AMA President, Dr Michael Gannon, said today that the AMA fully supports the independence of the TGA in making decisions about medicines scheduling, including for codeine.

"There is compelling evidence to support the decision to make codeine prescription only," Dr Gannon said.

"Deaths and illness from codeine use have increased in Australia.

"This is despite a rescheduling decision in 2010 shifting many over-the-counter codeine medicines to Schedule 3, which is 'pharmacist only'.

"There is no evidence that low-dose codeine provides any benefit beyond placebo.

"Patients who have short term pain will still have access to alternative over-the-counter painkillers, which are more effective than low-dose codeine, but without codeine-associated risks.

"It is better for patients with chronic pain to manage it with doctors' advice on appropriate medicines and non-medicine treatments, rather than self-treating with codeine for the long term.

"Codeine is not a safe treatment for long term or chronic pain."

Dr Gannon said the TGA has effectively communicated its codeine decision with the health sector and with the general public, and has actively sought feedback from the medical and health communities, including pharmacists, through participation in its working groups.

"The decision has been made - what we need to see now is cooperative implementation," Dr Gannon said.

"The AMA urges all stakeholders to not deviate from the TGA decision, which was made with open and transparent consultation.

"At this stage, we do not want to see the peddling of alternative models, dressed up as 'patient concern', which undermine the TGA position.

"We are extremely concerned at recent reports of some groups endeavouring to influence or coerce State governments to change, delay, or dilute the impact of the TGA decision.

"This is not in a patient's best interest. It goes against the decision made by the independent regulator.

"We already know that pharmacist control of codeine use does not work.

"Codeine-related deaths continued to rise when pharmacists were given responsibility for ensuring safe non-prescription codeine sales in 2010."

Dr Gannon said it is essential for public safety that the TGA is allowed and supported to make evidence-based decisions about medicines, free from political interference and sectional interests.

"As doctors, we rely on the independence and expertise of the TGA to ensure Australians have access to safe, effective, and high quality medicines.

"The codeine decision was made by independent experts whose only interest is what is best for Australians and their health.

"We call on all those who work in the wider health community – including pharmacy – to quickly implement the changes that are necessary," Dr Gannon said.

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