

Should pharmacists be able to dispense nicotine vapes without a prescription?

April 16 2024, by Coral Gartner, Kathryn Steadman and Lisa Nissen



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The Australian government is currently [considering a bill](#) to implement the next stage of reforms to vaping regulation.

At present, vaping products that don't contain [nicotine](#) can be sold in regular shops, such as convenience stores, like [tobacco products](#) are. To use vaping products that contain nicotine, [people must have a prescription](#) from a doctor or a nurse practitioner, and get the prescription filled at a pharmacy.

However, many retailers have sold [nicotine-containing vapes illegally](#) by pretending they don't contain nicotine. Young people have found it [easy to obtain them](#).

The current bill will address this issue by ending the sale of nicotine-free vaping products by general retail stores. But it's not only teenagers who have accessed nicotine vaping products without a prescription. Most adults who vape, including those who use vaping products to quit smoking, don't have a prescription either.

In a [new paper](#), we argue allowing pharmacists to dispense nicotine vapes without a prescription would be a practical way to ensure people who are using them to quit smoking can access them, while reducing the chance they'll fall into young hands.

Why are people vaping without a prescription?

Research shows vaping [can help people quit smoking](#) and may be more effective than other nicotine replacement therapies. For people who have not succeeded with other methods, using vapes [to quit smoking](#) may be a reasonable option. Although certainly not risk-free, the health risks of vaping are likely to be much [lower than those of smoking](#) because vapes

emit far lower levels of harmful chemicals than cigarettes.

Some doctors [will not prescribe](#) vaping products because they are not approved medicines. Others lack knowledge about their use for smoking cessation or find the reporting requirements for prescribing them too onerous. Prescribers must notify the [Therapeutic Goods Administration](#) via an online form within 28 days of prescribing nicotine-containing vapes.

[Online prescribing services](#) have emerged, which may fill this void. However, there are concerns about the quality of care because some online prescribers [do not speak directly to the patient](#).

With [fewer GPs bulk billing](#), there are also substantial patient costs involved in seeking a prescription for nicotine vapes.

The current law risks criminalizing people who vape nicotine without a prescription because possession without a prescription is illegal. The [maximum penalties](#) vary from a fine of A\$45,000 in Western Australia to two years in jail in the Australian Capital Territory or the Northern Territory.

The ACT minister for [population health](#), Emma Davidson, is reportedly [working on a bill](#) to remove the penalties for unauthorized personal possession of nicotine vapes in the ACT.

However, a simpler option would be to [change the classification of nicotine vapes](#) from prescription-only (schedule 4) to pharmacist-only (schedule 3). This would allow pharmacists to supply nicotine vapes without a prescription.

Additional requirements could be added, such as banning advertising of vapes, and standards for providing in-pharmacy smoking cessation

counseling alongside vaping product supply.

As well as removing penalties for possession without a prescription, other possible benefits would include reduced costs and greater access for patients. This model also retains health practitioner oversight of vaping product supply.

What other options are being discussed?

Some lobbyists are promoting the idea all vaping products [should be regulated like tobacco](#). This would allow vaping products, including those containing nicotine, to be sold by general retailers to people aged 18 and over with no health practitioner involvement.

While some [political parties](#) support this model, most Australian health and medical organizations [do not](#). Regulating vapes like tobacco may seem like a reasonable option, but there are several factors to consider.

The widespread availability of tobacco [makes quitting smoking difficult](#) and encourages [youth to experiment with smoking](#). Widespread retailing of vaping products is likely to have a similar effect for vaping.

We also know general retailers have [sold vapes to children](#).

Are pharmacists up to the task?

Pharmacists are governed by professional standards and the [Australian Health Practitioner Regulation Agency](#). Strong sanctions, including restrictions on practice, can occur for pharmacists who do not comply with professional standards and laws, such as illegal supply of medicines.

Pharmacists currently supply other pharmacist-only ([schedule 3](#))

medicines directly to the public. These include pseudoephedrine (cold and flu medicines), salbutamol (asthma puffers) and naloxone (for reversing an opioid overdose).

Some people may be concerned that without a prescription, certain customers may purchase nicotine vapes to supply to youth illegally. However, pharmacists have previously developed innovative ways to reduce diversion of medicines where this has become a problem.

For example, pseudoephedrine can be used to make methamphetamine. Real-time monitoring of sales of cold and flu medicines containing pseudoephedrine [has reduced the diversion](#) of these medicines from pharmacies into methamphetamine production.

Further, after [additional planned reforms](#) are implemented this year, the types of vaping products that pharmacies can supply—only tobacco, mint or menthol flavored vapes sold in plain pharmaceutical packaging—will be less attractive to youth.

Pharmacists already play an important role in supplying smoking cessation nicotine products and services. They offer advice and counseling about the full range of assistance and medications available for quitting smoking.

Therefore, pharmacist-only supply of nicotine [vaping](#) products without a prescription would utilize the skills, knowledge and accessibility of pharmacists to support people who wish to use nicotine vapes to quit [smoking](#), while preventing inappropriate sales to youth.

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