

Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [Atal iechyd gwael - gordewdra](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [Prevention of ill health - obesity](#)

**OB27 : Ymateb gan: Cymdeithas Fferyllol Frenhinol Cymru |
Response from: Royal Pharmaceutical Society Wales**



Dear Russell,

RE: RPS Consultation Response: Prevention of ill health - obesity

Thank you for the opportunity to feed into the committee's inquiry on this important matter.

Obesity is one of our most challenging public health challenges that has far reaching effect on individuals in terms on their day to day lives, mental health and risk of chronic conditions. Meanwhile, as you will have heard clearly during the committee's inquiry on chronic conditions, supporting and caring for people who are overweight or obese is a significant cost and resource burden for the NHS and health professionals.

In the submission below, you'll find details of how the expert skills and accessibility of pharmacists and their teams can be harnessed as part of obesity prevention agenda through supporting weight management and ensuring patients get the best use of their medicines.

Please do contact us if any further information or if our attendance at an evidence session would be helpful.

Kind regards

Elen Jones, Director Royal Pharmaceutical Society Wales

Prevention



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It's absolutely right that prevention of ill health is at the heart of Welsh Government strategies. In their long-term plan for health and social care, *A Healthier Wales*, they state their ambition for:

“ a long term future vision of a ‘whole system approach to health and social care’, which is focussed on health and wellbeing, and on preventing illness”¹.

Their obesity strategy; *Healthy Weight: Healthy Wales* also rightly has a central focus on prevention and reducing obesity². However, although community pharmacy is referenced once in the strategy, there is no doubt that the skills and accessibility of pharmacists and their teams, particularly the community pharmacy sector, can be utilised further as part of the prevention agenda.

Community pharmacies are community health assets, physically located in the heart of local populations. The community pharmacy network in Wales comprises of 693 premises who are in a unique position to form part of local community hubs that deliver prevention and health improvement services.

To make full use of community pharmacist and their teams, we would urge the committee to recommend that community pharmacists and their teams be formally integrated into national and local weigh loss plans and strategies. As discussed below, they have the potential to be crucial assets in:

- providing regular advice to patients
- reducing inequalities in obesity rates
- referring appropriate patients to weight management support programmes.

The committee will be well aware that the clinical and prescribing role of community pharmacists is developing at pace. Together with severe workload pressures, we have also seen a decrease of 3.1% in the number of community pharmacies between March 2023 and April 2024 (686 from 708)³. Therefore, increased support, resourcing, and access to protected time for training for community pharmacists and their team will be important enablers for their role in prevention of obesity and ill-health.

Regular advice and encouragement

As the most accessible health setting, community pharmacy teams will engage with a significant number of patients every day who could benefit from personalised advice on diet, exercise, and lifestyle changes to help manage their weight. Private

¹ <https://www.gov.wales/sites/default/files/publications/2021-09/a-healthier-wales-our-plan-for-health-and-social-care.pdf>

² <https://www.gov.wales/healthy-weight-strategy-healthy-weight-healthy-wales>

³ <https://nwssp.nhs.wales/ourservices/primary-care-services/general-information/data-and-publications/pharmacies-in-wales/>



consultation rooms available within community pharmacies offer a more discrete setting for patients to gain, advice and support. Meanwhile, the regular contact with their patients also enables pharmacists to monitor patients' progress, discuss any problems or setbacks and to provide continuous encouragement from a trusted healthcare professional.

Tackling health inequalities

It is also the case that for those people with low health literacy and do not routinely engage with the health service, community pharmacists might be the only healthcare professional who sees them on a regular basis. Such individuals will often be located in our most disadvantaged communities where we know obesity rates are significantly higher⁴. Community pharmacies buck the usual trend for the inverse care law and a greater proportion are located in areas of high deprivation, thus they are perfectly placed to support these patients.

Referrals to dedicated weight management support programmes

Community pharmacy's high patient contact rates also ensure they are extremely well placed to refer patients to more formal weight-loss programs and social prescribing initiatives. However, there is currently no mechanism for community pharmacists to directly refer patient to other services, even when a referral that could be safely and appropriately managed by the pharmacy team.

This is an issue the committee has previously highlighted in your report the 'waiting time backlog' in 2022, recommending that the Welsh Government should:

*"outline what contribution the new community pharmacy contract will make to tackling health inequalities, including what scope it provides for pharmacy teams to refer patients into other health services"*⁵.

We believe that formal protocols must be in place for pharmacy teams to make direct referrals to other services, including obesity services. Helping to tackle health inequalities, this will enable overweight and obese people who, as discussed above, would otherwise not proactively seek out such services to receive the support they require.

⁴ <https://research.senedd.wales/research-articles/tackling-the-obesity-epidemic/>

⁵

<https://business.senedd.wales/documents/s124284/Waiting%20well%20The%20impact%20of%20the%20waiting%20times%20backlog%20on%20people%20in%20Wales%20-%207%20April%202022.pdf>



Referral mechanisms are already in place in England, where community pharmacy teams can now refer adults living with obesity, and other conditions, to a twelve-week NHS weight management programme⁶.

Medicines Support

Advances in recent years now sees medicines being used in the care and treatment of some people who are overweight or obese. While many different types of anti-obesity medicines have been tested in clinical trials, the three medicines who have proved to be safe and effective for use on the NHS for weight management are:

➤ Orlistat:

Orlistat is a potent, specific and long-acting gastrointestinal lipases inhibitor. It works by blocking the absorption of approximately 25% of dietary fat. It can help achieve steady, gradual weight loss when used as directed and is available on prescription or can be bought at a lower dose from a pharmacy*. A prescription for orlistat will usually only be issued if the patient has made a significant effort to lose weight through diet, exercise or changing your lifestyle.

*At RPS we have developed a comprehensive guidance that outlines the considerations that should be examined by pharmacists before supplying orlistat 60 mg capsules over the counter⁷.

➤ Liraglutide and semaglutide:

Liraglutide and semaglutide are weight loss prescription medicines that work by making patients feel fuller and less hungry. They're taken as an injection with liraglutide taken daily and semaglutide taken weekly. Again, these medicines will only be prescribed if changes in diet, exercise or lifestyle have not proven to be effective.

For both of these medicines, patients and other prescribers should always have access to the specialist expertise of pharmacists. Either based in a community pharmacies, GP practices or hospital, pharmacists will be able to:

- discuss the side effects of the medicines that will help the patient determine what's right for them.

⁶ <https://www.england.nhs.uk/2022/01/new-weight-loss-support-on-the-high-street/>

⁷ <https://www.rpharms.com/resources/pharmacy-guides/orlistat-p-medicine>



- help address any issues with adherence to the medicines.

Polypharmacy Considerations for patients with co-morbidity

For patients who are obese, there is also a likelihood that they will be diagnosed with and taking multiple medicines for multiple chronic conditions. People living with obesity are at risk of developing multiple health conditions, including, type 2 diabetes, high blood pressure and high cholesterol, all of which are likely to be managed with medication. The more medicines an individual is prescribed (often by multiple prescribers with condition-specific expertise), the greater the risk of:

- unforeseen drug interactions
- adverse drug reactions
- impaired adherence to medication
- and a reduced quality of life.

When such complex medicines regimes and ‘polypharmacy’ occurs, it’s imperative that they have expert support from prescribing pharmacists who can work with the patient to take a holistic view. Using their in-depth pharmacology and medicines expertise, they will consider the optimal medication regimen for an individual with co-morbidities, and in conjunction with the multidisciplinary team, appropriately de-prescribe or amend the medication so that it’s tailored to each individual circumstance.

Risk of fake medicines

We are particularly concerned about multiple media reports of fake liraglutide and semaglutide being available to buy outside of the legal supply chain by suppliers trading illegally⁸. This puts individuals who purchase them at risk of using something which is not licensed for use in the UK and could be potentially very harmful. Indeed, it appears that some hospital admissions due to side effects including hypoglycemic shocks due to the injections containing insulin rather than semaglutide⁹.

It's important that national communication campaigns, health professionals and services that support weight-loss clearly convey the serious risks to patients of purchasing these medicines on the black market.

⁸ <https://pharmaceutical-journal.com/article/news/uk-regulator-seizes-369-potentially-fake-weight-loss-pens-following-reports-of-hospitalisations>

⁹ <https://pharmaceutical-journal.com/article/news/mhra-warns-of-dangers-of-fake-weight-loss-pens-after-yellow-card-reports>

