



## Dispensary Corner

**COULD** the secret to basketball legend LeBron James' staggering success be his unconventional eating plan?

And should we do it too?

James recently shared his daily training routine, revealing that he doesn't eat a full meal until around 2pm, after his 'sweat session'.

While it seems to work for James, who is now 40 and still playing top flight basketball, some experts warn that this fasting protocol is not ideal for most active people.

"A large body of research suggests that fuelling both before and after exercise is beneficial for optimal performance, recovery and muscle-building benefits," said dietitian Melissa Mitri.

She explained that training in this fasted state forces the body to draw from carbohydrate reserves in the muscles and then the brain, which in turn, can lead to fatigue, brain fog and weakness, while low blood sugar can lead to irritability and mood swings.

So don't try this at home, folks.

On the plus side, James did get brownie points for hydration, getting through almost four litres of water per day.

## FIP publishes ED management resource

**THE** International Pharmaceutical Federation (FIP) has released a new handbook to help pharmacists support patients managing erectile dysfunction (ED), co-authored by Canberra pharmacist and Men's Health Downunder (MHDU) founder Brad Butt (**pictured**), with a foreword from FIP President Paul Sinclair, former Pharmacy Guild of Australia Vice President.

A practical and comprehensive tool offering evidence-based guidance on both pharmacological and non-pharmacological approaches to supporting patients with ED, it covers topics from understanding the condition to assessment, diagnosis, treatment strategies and psychosocial support.

The aim is to enable pharmacists to take a proactive role in helping patients make informed decisions about their treatment and health.

Effective management of ED can involve a combination of approaches, including pharmacotherapy, medication

review, lifestyle changes, psychological counselling, and the use of approved medical devices.

It notes that community pharmacies offer a convenient setting for screening and early detection, through point-of-care testing, as well as the delivery of pharmacological treatments and lifestyle interventions, including tobacco cessation, stress management and weight control.

But are pharmacists ready to have the conversation?

"In Australia we are in a fortunate position because we do have some pharmacists trained up in scope who would be more comfortable having those conversations and looking at a person's health globally," Butt told **Pharmacy Daily**.

"Those pharmacists who have looked over the educational material within that publication, and thus have a little bit of knowledge, could then say, 'just putting it out there - we know that people who have diabetes, high cholesterol, high blood pressure can also suffer with ED, and if you need any support with this, the GP is a great person to talk to', and then we can include that in the patient's notes," he suggested.

"Many pharmacies have got private consultation spaces so these conversations can be had in both a tasteful and confidential manner," he added.

With respect to over-the-counter



preparations, there is not much a pharmacist can recommend for the management or treatment of ED at this point in time that is evidence-based and effective.

However, the future may see drugs such as sildenafil, tadalafil, and vardenafil supplied without a prescription or prescribed directly by pharmacists in Australia as they are in other countries.

With various solutions of dubious worth proliferating, Butt is concerned there are not enough checks and balances in place to ensure safe and effective treatment, which is where the handbook, with its evidence-based approach, comes in.

"This publication is comparable to Therapeutic Guidelines in terms of references and peer review - it's a quality document, a fantastic resource, and it would be great if my pharmacy colleagues were interested in having a look at it," Butt concluded.

The handbook is **HERE**. KB



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