



**HEALTH PRODUCTS
STEWARDSHIP
ASSOCIATION**

PROGRAM PLAN FOR THE ONTARIO MEDICATIONS RETURN PROGRAM

April 2013

Executive Summary

Ontario Regulation 298/12 "Collection of Pharmaceuticals and Sharps - Responsibility of Producers" came into force on October 2nd, 2012 under the Ontario Environmental Protection Act (EPA). This is the first time the EPA has been used as an instrument to establish standards for Extended Producer Responsibility (EPR) and hold producers (i.e. manufacturers, brand owners or first importers) directly liable for the end-of-life management of their post-consumer pharmaceutical, natural health and sharps product wastes.

The Ontario Medications Return Program addresses EPR for all types of prescriptions drugs and solid oral dosage of over-the-counter medications and natural health products sold for use in the province of Ontario but limited to the "consumer" waste stream. The program is designed to ensure that the collection service is available to all regions of the province and products returned are packaged, handled, transported and disposed of in a safe, compliant and environmentally responsible manner. Collection of "pharmaceutical" waste is expected to happen at over 3000 pharmacies across the province.

The OMRP is administered by the Health Products Stewardship Association (HPSA), a not-for-profit Industry Funding Organization (IFO), established in 1999. The HPSA was formerly known as the Post Consumer Pharmaceutical Stewardship Association (PCPSA). HPSA was formed to provide the health product industries with a collective means for managing their Extended Producer Responsibilities including the associated product liability and regulatory compliance requirements that vary from province to province. The following MSRP plan has been developed by HPSA with input from producers, Ontario Pharmacists' Association, Ontario College of Pharmacists, Canadian Association of Chain Drug Stores, Research-Based Pharmaceutical Companies, Canadian Generic Pharmaceutical Association, Consumer Health Products Canada and other interested associations such as the Retail Council of Canada and Canadian Association for Pharmacy Distribution Management during plan development

Producers are required to comply with Regulation 298/12 therefore many sections of the regulation have been incorporated directly into this program plan. The OMRP plan will cover the period of three years January 1, 2012 to December 31, 2015, at which time the plan will be reviewed.

This plan has been posted on the HPSA web site (www.healthsteward.ca) for the general public and other interested stakeholders to review.

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1. Glossary of key definitions and acronyms

1.1 Acronyms

AMO: Association of Municipalities of Ontario
CACDS: Canadian Association of Chain Drug Stores
CAP: Canada-Wide Action Plan for EPR
CAPDM: Canadian Association for Pharmacy Distribution Management
CCME: Canadian Council for Ministers of the Environment
CSA: Canadian Standards Association
ECA: Environmental Compliance Approval
EPA: Ontario Environmental Protection Act
EPR: Extended Producer Responsibility
HHW: Household Hazardous Waste
RCO: Recycling Council of Ontario
HPSA: Health Products Stewardship Association
IFO: Industry Funding Organization
ISP: Industry Stewardship Plan
MHSW: Municipal Hazardous or Special Waste
MOE: Ontario Ministry of the Environment
MWA: Ontario Municipal Waste Association
OCP: Ontario College of Pharmacists
OCR: Operating Contingency Review
OECD: Organization for Economic Co-operation and Development
OPA: Ontario Pharmacists' Association
OMRP: Ontario Medications Return Program
PCPSA: Post-Consumer Pharmaceutical Stewardship Association
RCC: Retail Council of Canada
RCO: Recycling Council of Ontario
WDA: Waste Diversion Act
WDO: Waste Diversion Ontario

1.2 Terms and Definitions

a) Collection Location(s):

A location, typically a retail pharmacy, at which the collection of one or both of pharmaceuticals and sharps is provided for.

b) Consumer:

Means an individual acting for personal, family or household purposes, including acting in respect of a companion animal.

c) Household Hazardous Waste Facilities:

Temporary and permanent locations operated by municipalities in Ontario where consumers can drop off medications and other hazardous waste from households for proper disposal.

d) Producer:

The manufacturer of a medication (prescriptions, natural health products or non-prescription drugs), if:

- i) it is sold to consumers in Ontario under a brand name that the manufacturer owns, licenses or has rights to;
- ii) or is the owner of or licensee of the brand or rights holder under which the medication or sharp is sold to consumers in Ontario;
- iii) or the importer of the medication or sharps into Ontario.

e) Program Plan:

A document that provides producers with a strategy for individually or collectively managing the extended producer responsibility of their products including any safety, environmental and regulatory requirements.

f) Pharmaceutical (Designated Material):

Under Regulation 298/12 the pharmaceuticals product category is defined as:

- All prescriptions drugs All dosage forms
- Over-the-Counter Medications Units sold in oral dosage form*
- Natural Health Products Units sold in oral dosage form
- Companion animal products

*Including anti-fungal and anti-bacterial creams

2. Introduction

The Organization for Economic Co-operation and Development (OECD) has defined EPR as "a policy approach in which a producer's responsibility, physical or financial, for a product is extended to the post-consumer stage of a product's lifecycle".

The purpose of this document is to provide a plan for the management of EPR for post-consumer medications in Ontario. The primary objective of this document is to ensure, through a detailed program plan, that HPSA members meet the principles of EPR and are in compliance with Regulation 298/12 "Collection of Pharmaceuticals and Sharps - Responsibilities of Producers" under the Ontario EPA.

2.1 Regulatory Review

The OSCP is a regulatory driven EPR initiative. The following regulatory review examines the acts, regulations, guidelines and standards that impact the OSCP.

2.1.1 Regulation 298/12 "Collection of Pharmaceuticals and Sharps - Responsibilities of Producers"

The compliance requirements of the OMRP are dictated primarily by Regulation 298/12. This regulation requires producers of pharmaceuticals and sharps to provide for the collection and safe environmental management of their leftover products from consumers. Producers must also provide Ontarians with access to free and convenient collection locations, such as retail pharmacies, to return their leftover pharmaceuticals and sharps.

The Regulation defines "pharmaceutical" as:

"a drug within the meaning of section 2 of the Food and Drugs Act (Canada) that is sold to consumers in Ontario, whether it is sold by the producer of the pharmaceutical or by another person, and includes a natural health product within the meaning of the Natural Health Products Regulations made under that Act; "

For the purposes of the OMRP, a pharmaceutical does not include the following:

- i. A substance or mixture of substances manufactured, sold or represented for use in disinfection in premises in which food within the meaning of section 2 of the *Food and Drugs Act (Canada)* is manufactured, prepared or kept.
- ii. A food within the meaning of section 2 of the *Food and Drugs Act (Canada)*.
- iii. A cosmetic within the meaning of section 2 of the *Food and Drugs Act (Canada)*.
- iv. Any of the following items, if the item does not contain a substance prescribed under the *Drug and Pharmacies Regulation Act* as being included in Schedule I established by the regulations made under that Act:

- A contact lens disinfectant.
 - An anti-dandruff product, including shampoo.
 - An anti-perspirant.
 - A sunburn protectant.
 - A mouthwash.
 - A fluoridated toothpaste.
 - A lozenge for cough, sore throat or halitosis.
 - A topical substance that does not contain antibiotics or anti-fungal agents.
- A radiopharmaceutical.

The Regulation defines “Producers” as:

- i. the manufacturer of the pharmaceutical or sharp, if it is sold to consumers in Ontario under a brand that the manufacturer owns, licenses or otherwise has rights to;
- ii. if there is no person described in clause (a), the owner or licensee of the brand or the person who otherwise has rights to the brand under which the pharmaceutical or sharp is sold to consumers in Ontario;
- iii. if there is no person described in clause (a) or (b), the importer of the pharmaceutical or sharp into Ontario; or
- iv. if there is no person described in clause (a), (b) or (c), the first person who sells the pharmaceutical or sharp to another person in Ontario.

For the purpose of this Plan, a producer will be deemed to be the brand-owner (2) or failing compliance then (3).

The regulation requires producers to demonstrate participation in an approved program in order to do business in Ontario. HPSA is the industry designated IFO that has developed compliance protocols to ensure a level playing field among brand-owners selling sharps in Ontario. Producers deemed to be non-compliant with program requirements are subject to enforcement under the EPA which is the responsibility of the government of Ontario.

2.1.2 Other Applicable Acts, Regulations, Guidelines and Standards

The list of additional acts, regulations, guidelines and standards that have been considered in the creation of the program plan for the MSRP is as follows:

Canadian Council for Ministers of the Environment (CCME) Canada-Wide Action Plan on EPR (CAP). The CCME CAP for EPR is a guideline for regulatory and EPR program clarity for government, producers and IFOs like HPSA and identifies what CCME understands EPR to mean and what principles can be used to govern its adoption. The CAP contains guidelines on key elements that should be common to all EPR programs in Canada.

- a) Drug and Pharmacies Regulation Act

Among other things, the Drug and Pharmacies Regulation Act of Ontario defines what a pharmacy is and how it is accredited. Under Regulation 298/12 producers are obligated to initially have a minimum 80% of accredited pharmacies or 80% of retail locations in Ontario in which pharmaceuticals or sharps were sold acting as collection locations. This threshold increases to 90% effective January 1, 2014.

b) Ontario Environmental Protection Act (EPA)

This act is Ontario's key legislation for environmental protection. The act grants the MOE broad powers to deal with the discharge of contaminants which cause negative effects. The act specifically:

- prohibits the discharge of any contaminants into the environment which cause or are likely to cause negative effects - and in the case of some approved contaminants requires that they must not exceed approved and regulated limits;
- requires that any spills of pollutants be reported and cleaned up in a timely fashion.

Ontario's EPA has the authority to establish liability on the party which is at fault, including liability for corporate officers or directors who have failed to take all reasonable care to prevent unlawful discharges of contaminants into the environment. Regulation 298/12 and Regulation 347 are part of the EPA.

c) Pharmacy Act, 1991

A person registered as a pharmacist or a pharmacy technician under the Pharmacy Act, 1991 must be present when the collection of sharps or pharmaceuticals from the public occurs at a collection location. This is a requirement of Regulation 298/12 in order for the collection Location to be exempt from the collection, handling, storage and transfer requirements of Regulation 347.

d) Regulation 347 "General - Waste Management"

Regulation 347 under the EPA provides the detailed rules on how waste streams should be categorized, documented, tracked and handled including pharmaceutical waste. Regulation 347 identifies hazardous wastes through a series of listings and tests. It also sets standards and requires annual registration of generators of hazardous waste and liquid industrial waste and the payment of a registration fee.

3. Health Products Stewardship Association

The HPSA is the IFO created to manage safe disposal of unused or expired health products returned from the public in regulated provincial programs. HPSA's predecessor PCPSA began in 1999 by managing the BC Medications Return Program on behalf of producers as required under British Columbia Recycling Regulation 449/2004. HPSA's producer members represent the majority of brand-owners selling health products in Canada. See attached Appendix A.

3.1 Vision

The vision of the HPSA is to be the recognized IFO for environmental waste management programs of health-related products.

3.2 Mandate

The mandate of the HPSA is to collect and dispose of sharps and medications returned by the public in a cost-efficient and environmentally acceptable manner that meets government policy and/or regulatory requirements for its producer members.

3.3 Guiding Principles

- i. **Level Playing Field:** Provide a level playing field (fair competition), achieve a high level of compliance, and reduce the potential for having producers fail to meet their financial obligations.
- ii. **Environmental Standards:** Ensure materials are disposed of in a responsible manner that safeguards the environment and worker health and safety in accordance with regulatory requirements.
- iii. **No Cross-Subsidization:** Ensure the collection of revenue from the program is in balance with the expenses for the program with fees closely reflecting the costs of managing each obligated product.
- iv. **Operational Efficiencies:** Ensure the program is delivered effectively and efficiently at the lowest possible cost.
- v. **Business Sustainability:** Ensure sustainable management of the association by maintaining an appropriate operating contingency reserve (OCR), but not accumulating a surplus.
- vi. **Continuous Improvement:** Adhere to provisions for best practices to strive for continuous improvement in environmental and economic performance.
- vii. **Harmonization:** To the greatest extent possible, harmonize with other programs to achieve economies of scale.

4. Ontario Medications Return Program

A fundamental component of the program plan is the definition of products that consumers can return as part of the OMRP. Under Regulation 298/12 the pharmaceuticals product category is defined as:

- | | |
|---------------------------------|---------------------------------|
| a) All prescriptions drugs | All dosage forms |
| b) Over-the-Counter Medications | Units sold in oral dosage form* |
| c) Natural Health Products | Units sold in oral dosage form |
| d) Companion animal products | |

*Including anti-fungal and anti-bacterial creams

* Excluding lozenge for cough, sore throat and halitosis.

4.1 Product Category and the Ontario Marketplace:

The definition of a producer under Regulation 298/12 is referenced in section 1.2 (f) of the program plan. In the Province of Ontario the following distribution scenarios exist:

- Manufacturers selling their brand to wholesalers and retail pharmacies;
- Retail pharmacies selling their private label branded sharps to consumers;
- First importers selling medications to wholesalers and retail pharmacies.

5.0 Program Design

The OMRP provides all Ontario residents with reasonable access to collection locations on a province-wide basis. HPSA is responsible for strategic planning, overseeing the program and financial operations including the employment of a local program administrator to managing day-to-day operations of the program.

A program plan under Regulation 298/12 must provide for the following:

1. The appropriate management of waste material according to the guideline established by the Minister;
2. A province-wide, convenient collection system for waste material without user fees at the point of collection;
3. A collection system equal to 80% of retail locations in Ontario;
4. The establishment and administration of promotion and educational material for the program;
5. Interim/annual reports.

5.1 Program Goals

The goals of the program are to:

- Establish a province-wide industry run program for medications in compliance with Regulation 298/12.
- Provide a plan for collecting post-consumer medications.
- Ensure that the producers or stewards who sell, offer for sale or distribute medications in Ontario under their own brand name, sponsor their portion of the costs of a medication return program.
- Ensure environmentally responsible disposal of medications.
- Ensure that the public is able to return sharps for disposal throughout the province.
- Provide the public with information about collection locations.
- Harmonize the plan with other provincial programs.

5.2 Program Requirements for Collection, Transportation and Processing of Medications

5.2.1 Collection Location Requirements:

The collection sites for a *Medications Return Program* are community pharmacies. Registered pharmacy locations are easily identified through a web-based search engine on the HPSA website. Pharmacies are a logical and safe system for the public to return unused or expired medications. Many are open extended hours, offering a convenient place for consumer disposal year-round.

Collection locations must also meet the following requirements:

- At a minimum, 80% of all retail locations in Ontario where a product is sold or 80% of all accredited pharmacies must participate in the OMRP.
- There must be at least one collection location in each municipality in Ontario where there is a retail pharmacy that sells sharps.
- The collection location must provide the consumer the ability to drop off medications during regular business hours.
- A registered pharmacist or pharmacy technician must be present when a consumer drops off medications.
- There must be an agreement in place between the collection location and an approved waste management service provider that addresses the types of containers that are to be used for the collection, handling, storage of medications. The agreement must also stipulate how medications are to be collected, handled and stored at the collection location.
- Under the agreement between the collection location and the waste management service provider, pharmacists and pharmacy technicians that are handling medications must receive annual training on the safe collection, handling and storage and on the other requirements of the agreement. An example of an agreement between a collection location participating in the OSCP and a waste management service provider is attached in Appendix B.

- A copy of the agreement and any related records must be kept on site at all times while the collection location is participating in the OMRP and for five years afterward.
- At each participating collection location there must be a complete list of all collection locations in Ontario where sharps can be delivered by the consumer and information available describing how consumers should safely store and handle sharps before bringing them to a collection location.

Since the voluntary participation of a pharmacist is central to the success of the program, HPSA works closely with them to ensure full participation and awareness of the OMRP. Pharmacy managers interested in offering the program in their store must complete a registration form. Specific information is provided to ensure that pharmacy managers and staff are knowledgeable on the program objective and the way the program operates. All participating collection locations receive a kit containing instructions on the program, a service request form, and sample of education material developed for this program along with a minimum of two containers. Once the registration form is completed and faxed to our office, the pharmacist is contacted by phone to discuss the following points:

- ✓ The program is for returns from the public and not from hospitals, institutions, doctor's offices or their own operations.
- ✓ All employees working at the site must be knowledgeable about the program offered to the public.
- ✓ All pills should be deposited into the container and the original package should be recycled except for liquid medications, gels, powder, etc ... containers are should be deposited directly into the container
- ✓ To recycle the outer container/ extra packaging where facilities exists and available in their region.
- ✓ There is no limitation on the quantity of sharps that a consumer can drop off at a collection location

Once 2 containers are full, the pharmacist must complete the service request form and contact the service provider to schedule service. Replacement containers will be delivered and the full container will be picked up either on s service schedule or by request.

If the location is offering collection of medications under the OMRP and it is not a retail pharmacy then the location has to be approved by the HPSA and has to meet the full requirements of Regulation 347 of the EPA before participation in the program can begin.

5.2.2 Transportation Requirements:

- The waste management service provider must have an ECA (a Provisional Certificate of Approval for a Waste Management System) issued by the Ontario MOE.
- The ECA has to allow for the transportation of 312P biomedical waste, a waste class defined under Regulation 347.
- All conditions of the ECA must be adhered to by the waste management service provider when transporting pharma waste (i.e.: general requirements, transportation and vehicle standards, public waste requirements, staff training, record keeping, reporting and financial assurance).

- The waste management service provider must provide annual training to pharmacists and pharmacy technicians at the collection location on the safe collection, handling and of medications.

5.2.3 Processing Requirements:

- Pharmaceutical must be treated by high temperature incineration.
- The bottom ash from the incineration must be disposed in a landfill approved to receive this waste stream.

6. Program Administrator

Through a Request for Proposal (RFP), invitations for proposals from prospective companies to provide administrative services for a period of three (3) years, with a potential option of up to an additional two (2) years. Collection of pharmaceutical waste is expected to happen at over 3000+ pharmacies across the province.

Services are to include: collection, transportation, consolidation, processing and permanent disposal of pharmaceutical waste (from consumer sources). All containers returned are tracked by weight, pickup date, location and stored in a secure location until ready for safe destruction through a licensed incineration facility.

7. Performance Measure

Medications are intended to be consumed entirely to treat specific condition or symptom. Ideally, none should be left over. Because of the practice of keeping medications for future use, there is typically a considerable lag time between its purchase and its eventual disposal.

Reduction: Ideally all medications purchased should be used by the consumer/patient.

- ❖ *A year to year comparison analysis will be completed to monitor the overall progress.*
- ❖ *Once the program is established, some performance measures will be developed through a combination of methods, such as surveys and the number of collection sites.*
- ❖ *Data on actual quantities recovered with special events through current HHW events and depots could be used for comparison with the medications returned through our collection sites.*
- ❖ *The plan will provide for an audit procedure to ensure proper tracking mechanisms, such as certificates of destruction are in place for management of medications from point of collection to final destruction.*

7.1. Public Awareness

Target for 2015:	Establish a public awareness level based on public survey in 2013.
Performance measures:	Conduct survey to measure awareness and behaviour.

Strategies:	Analyse the data collected to acquire a sound understanding of the issues, barriers and opportunities;
Year 1	Develop promotional material and key messages on program
Year 2	Contact Municipalities with promotional material and key messages for their websites.
Year 3	Promote program by advertising in recycling calendars, municipality websites and special events.

7.2. Promotion and Education

Target until 2015	Location of collection locations (3000+) is on the internet through the producers' website, HPSA and some municipalities
Performance measure:	Information on the internet on location of collection locations
Strategies: Year 1	Developed material to promote the program in pharmacies,
Year 1	Promote program through pharmacies
Year 2	Municipalities that currently provide events for safe disposal of medications will be encouraged to promote returns to pharmacies, Contact Municipalities with promotional material and key messages for their websites..
Year 3	Advertise the <i>Medications Return Program</i> through websites, flyers and events

8. Annual Report

Regulation calls for an interim report on or before June 30, 2013 then annual reports on or before April 1, 2014 and subsequent years.

HPSA will prepare an interim Report for the 6 month period ending March 31. The report will document the performance in relation to the plan and projected program to achieve standards outlined in regulation.

8.1. Interim report (June 30th 2013)

- a) A description of actions taken and outcomes achieved by the producer in respect of the requirements of this Regulation.
- b) The number of collection locations and the location of each of the collection locations at which collection of the designated material of the producer is provided for.
- c) List of producers on whose behalf the report is prepared.
- d) The number of collection locations and the location of each of the collection locations at which collection of the designated material of the producers is provided for.
- e) The report shall be made available publicly and free of charge on the internet through our website

8.2. Annual report (April 1st)

- a) number of collection locations and the location of each of the collection locations provided for during the previous calendar year;
- b) a description of any changes that occurred with respect to the number and location of collection locations from the previous calendar year.
- c) The total weight of all of the following that was collected at the collection locations during the previous calendar year:
 - i. Pharmaceuticals and containers (excluding any containers that were recycled)
- d) A description of how the designated material of the producer collected at collection locations was handled and how it was recycled or disposed of during the previous calendar year.
- e) A description of actions, their effectiveness and outcomes achieved for pharmaceuticals, collection locations, promotion and education information.
- f) A description of any actions taken that exceeded the actions required for the collection locations, in order to provide for the collection of the designated material of the producer.
- g) A description of any actions taken by the producer during the previous calendar year that exceeded the actions required for the purposes of requirements, with respect to educational and public awareness activities in order to promote to consumers the collection locations and the availability of collection.

9. Conclusion

HPSA has organized and operated *Medications Return Programs*, a program that allows consumers to return (at no charge) their residual medications to pharmacies in the province of British Columbia since 2000 and in Manitoba since 2011. As a result, HPSA has been able to divert approximately 358,685 kg of unused or expired medications from landfills or waterways.

HPSA is prepared to implement a similar program in Ontario.

Appendix 1 HPSA Members (May 2013)

AA Pharma Inc.
Abbott Laboratories Limited
Abbott Diabetes Care
Actelion Pharmaceuticals Canada Inc.
Advantage Sales and Marketing Canada
Alcon Canada Inc.
Amgen Canada Inc.
Amway Canada Corporation
Apotex Inc.
Aptalis Pharma Canada Inc.
Astellas Pharma Canada Inc.
AstraZeneca Canada Inc.
Auto Control Medical
Aventix Animal Health
Baxter Canada
Bayer HealthCare, Consumer Care
Bayer Inc.
Bimeda-MTC Animal Health Inc.
Bioforce Canada Inc.
Biogen Idec Canada Inc
Bioniche Animal Health Canada
Boehringer Ingelheim Canada Ltd.
Bristol-Myers Squibb Pharmaceutical Group
Canada Safeway Ltd.
Champion Alstoe Animal Health Inc.
Cobalt Pharmaceuticals Inc.
Combe Incorporated
Costco
Covidien
Cytex Pharmaceutical Inc.
Domrex Pharma Inc.
Elanco
Eli Lilly Canada Inc.
EMD-Serono Canada Inc.
Enzymatic Therapy
Ferring Inc.
Galderma Canada
General Nutrition Centres Canada
GlaxoSmithKline Consumer Healthcare Inc.
GlaxoSmithKline Inc.
Helix BioPharma Corp.
Herbalife of Canada
Hospira Healthcare Corporation
HPI Health Products/Lakota
Intervet Canada Corp (dba Merck Animal Health)
Institut Rosell-Lallemand
Jamieson Laboratories
Janssen Inc.
Johnson & Johnson Inc.
Katz Group Canada Ltd
Kripps Pharmacy
Laboratoires Atlas
Leo Pharma Inc.
LifeScan Canada Inc.
Loblaw Companies Ltd
London Drugs Limited
Lundbeck Canada Inc.
Mannatech Incorporated
Medicopia Life Sciences Inc.
Merck Canada Inc.
Merial Canada Inc.
Mint Pharmaceuticals Inc
Mylan Canada
Natural Factors Nutritional Products Ltd.
Nature's Sunshine Products of Canada Ltd.
Nature's Way Canada Ltd
Norbrook Laboratories Inc.
Novartis Consumer Health Canada Inc.
Novartis Pharma Canada Inc.
Novo Nordisk
Odan Laboratories Ltd.
Omega Alpha Pharmaceuticals
Omega Laboratories Ltd.
Organika Health Products Inc.
Overwaitea Food Group Ltd Partnership
Paladin Labs Inc.
PendoPharm, a Division of Pharmascience Inc.
Peoples Drug Mart (B.C.) Ltd
Pfizer Animal Health
Pfizer Canada Inc
Pfizer Consumer Healthcare, Division of Pfizer Canada
Inc.
Pharmaceutical Partners of Canada Inc.

Appendix 1 HPSA Members (May 2013)

Pharmasave Drugs (National) Ltd.	Stiefel Canada Inc., a GSK Company
Pharmascience Inc.	Sunovion Pharmaceuticals Inc.
Platinum Naturals	Takeda Canada Inc.
Procter & Gamble Inc.	Target Canada
ProMedics Nutraceutical Ltd	Taro Pharmaceuticals Inc.
Purdue Pharma	Teva Canada / Novopharm
Rafter 8 Products	Triton Pharma Inc.
Ranbaxy Pharmaceuticals Canada Inc.	Trophic Canada
Reckitt Benckiser (Canada) Inc.	UniPHARM Wholesale Drugs
Reckitt Benckiser Pharmaceuticals Inc.	USANA Canada Co.
Roche Limited	Valeant Canada Limited
Sanis Health Inc.	Vetoquinol Canada Incorporate
Sanofi-Aventis	Virbac Animal Health Canada
Sanofi Consumers Health	Vita Health Products Inc.
Schering-Plough Canada Inc.	W.F. Young, Inc.
Seaford Pharmaceuticals Inc.	Wal-Mart Pharmacy
Servier Canada Inc.	Warner Chilcott Canada Co.
Shaklee Canada Inc.	Webber Naturals Ltd.
Shire Canada Inc.	WellSpring Pharmaceutical Canada Corp.
Shoppers Drug Mart, Pharmaprix	Westcoast Naturals
SISU Inc.	WN Pharmaceuticals Ltd.
Stericycle Inc.	