

From the Editorials.....

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These are extracts from the various editorials of the pharmaceutical journals published in the last twenty years. The extracts have been grouped under various headings.

UNION

Some Achievements

The formation of our Union itself: we found quite some stiff opposition and it was only half-heartedly that some of our members joined up; some of them just could not believe how employee and employer pharmacists could pull on the same rope, and anyhow, the interests of the hospital pharmacist were as varied from the above two categories as were those of the medical representative pharmacist. But we pulled through and we did do something for the profession.

*Journal of the Malta Union of Pharmacists
October-December 1967 Vol. I No. 1*

THE BOARD OF PHARMACY

On the 1st March 1968, the House of Representatives gave a first reading to "An Act further to amend the Medical and Health Department (Constitution) Ordinance, Chap. 148 (Draft Bill No. 15), which in plain language means that Parliament has approved the first reading of a Bill instituting the Board of Pharmacy.

*Journal of the Malta Union of Pharmacists
December 1968 Vol. II No. 1*

Three Years Later

The past ten years saw the M.U.P. striving hard to make our profession, which is indeed the oldest profession on earth, be recognised as equal in importance and merit to other professions. This we succeeded in partly doing through the setting up of the Pharmacy Board, although we have to comment that this Board has not yet lived up to expectations. This perhaps is due to the fact that the work of the Board is hampered by the whims of politicians and civil servants alike and also due to the lack of statutory powers. Can any true pharmacist consider this Board what he really wants is to be, when for example the scourge of price-cutting in retail pharmacy which has reduced our pharmacies to the level of grocer shops, has not yet been tackled with the seriousness that such a degrading state of ethics deserve?

*Journal of the Malta Union of Pharmacists
March 1971 Vol. III No. 1*

THE PROFESSION

He cannot make a living as a community pharmacist out of his profession. As things are at present, he not only has no professional fee, like other professions but is forced to sell other items to earn a living. He will have less and less time for dispensing and patient counselling, his primary scope of existence as a pharmacist... As pharmacists our profession comes first and we believe in the increasing clinical involvement of the pharmacist even in community pharmacy. The only way into the future is by ensuring that the pharmacist will be able to earn a living out of his profession.

*The Pharmacist
January 1985 No. 5*

General Public Awareness

Our future economic survival must rely on the continuing development of the pharmaceutical services which we provide, an area which is solely our domain, and which, with continued development will lead to the greater appreciation of our work. The necessity of increasing the general public's awareness of the pharmacists' expertise, is felt internationally, so much so that the F.I.P. has issued the Budapest Declaration.

The Pharmacist
April 1985 No. 10

Health Professional

The pharmacist is a specialist on drugs and pharmaceutical products and we must educate the public that it is wiser to seek advice first than to experiment with medication that may be available in the medicine cupboard or passed on by a neighbour.

The Pharmacist is the only health professional who is readily available for such advice. Great awareness is necessary on the part of the pharmacist to identify people who underestimate their complaint.

The Pharmacist
August 1985 No. 11

PHARMACY MANAGEMENT

First and foremost, it is NOT a hot issue whether a pharmacist should be present in a pharmacy or not. It is a priori that a pharmacist is present in a pharmacy. In most developed countries, not only are pharmacies managed by pharmacists, but also owned by them. Whether a pharmacist can go for a coffee break or not is a moot point. He is still responsible for all that goes on at the pharmacy under his management. Any pharmacist who goes for extensive coffee breaks is showing irresponsibility, doing a disservice to his patients/clients and breaking his professional ethics.

The Pharmacist
April 1985 No. 10

Pharmacy Ownership

The Chamber of Pharmacists has always maintained, and quite rightly, that today's potent medicines left in the hands of a lay person are nothing but a danger to the general public. Dr. Saliba criticised the fact that some pharmacies have only a compounder or a salesgirl in attendance. What he did not say is that it is the health authorities who are responsible for the present situation, with almost 50 per cent of our pharmacies being allowed to be run without adequate pharmacist supervision.

Asking the health authorities to enforce the current laws has been futile for some time.

This is still the best way, however, failing the enforcement of the law, one way by which the present situation cannot aggravate, is by changing the law concerning pharmacy ownership. This should be restricted to pharmacists. Starting with new pharmacies, no new pharmacy should be allowed to be opened unless owned, in whole or in part, by a pharmacist.

The Pharmacist
July 1983 No. 6

Pharmacy Inspections

Every now and then the Health Department seems to feel a sudden surge of responsibility for the proper professional running of pharmacies, which, as pharmacists in retail can testify, are suddenly regaled with inspections, daily, or in some cases even several times a day.

No pharmacist who has the profession at heart can be against these inspections, but they must be carried out in a proper manner and by the right people. Health inspectors are definitely not the ones who should be carrying out such inspections. These should be the responsibility of a Pharmacy Inspectorate which should consist of at least two pharmacists. After all, pharmacists are the people who know how a pharmacy should be run.

The Pharmacist
December 1983 No. 7

LEGISLATION

A Step In The Right Direction

In this Orwellian year of 1984, the last thing which anyone would want to suggest or desire is an increase in Government control. Taken from this point of view, the new regulations regarding the distribution of pharmacies are such an increase in Government control.

An undisputed improvement is the introduction of a pharmacist licensee. It is hoped that in the near future further regulations will clearly define the pharmacist as the owner of a pharmacy. Here it is worth noting that companies are not mentioned at all.

All in all, a step in the right direction has been made. Some positive results of the new regulations can already be felt but whether the improvement in the current situation will be as substantial as desired depends very much on the health authorities. It is useless to issue volumes and volumes of regulations if they are not enforced/implemented.

The Pharmacist
November 1984 No. 9

Legislation — An Eyewash?

A recurrent theme in the memorandum is the lack of enforcement of legislation. This also came up in the forum entitled, 'Is legislation helping us to fight drug abuse?' Any legislation without the necessary enforcement, without the ability of finding and doing justice with the violator is not worth the paper it is written on but only serves as an eyewash; as a pretence that things are improving or under control.

Not only has the lack of enforcement of legislation become chronic but things have moved a step further. At a time when one would expect a caretaker government to do little more than being a caretaker administrator, not so the Minister of Health. Two amendments were made to regulations governing the licencing of pharmacies.

The first amendment adds half the tourist beds in a particular locality to the resident population for the purpose of calculating the population ratio per pharmacy.

The second amendment removes the pharmacist licensee, a concept which was introduced in the legislation of 1984.

These have both been made to suit particular cases. It seems that it is the intention of the powers that be to destroy the progress made through the regulations of 1984.

The Pharmacist
April 1987 No. 15

PROFESSIONAL FEE

* An agreement on establishing a professional tariff of fees for the dispensing of drugs is also a very important matter and we hope we shall have something more to say about this quite soon.

Journal of the Malta Union of Pharmacists
October-December 1967 Vol. I No. 1

Elsewhere in this issue, we are publishing our proposals for a professional tariff. It is hoped that this will be accepted 'in toto' and strong legislation be enacted so that it will constitute infamous conduct if not upheld and followed accordingly. Otherwise what is the use of having a professional tariff if because of a couple of pharmacists the great majority are deprived of a legitimate right?

Journal of the Malta Union of Pharmacists
October 1970 Vol. II No. 3

PHARMACY EDUCATION

Doctorate in Pharmacy

To fill some of the new roles in hospital, the pharmacist is going to need further training beyond the B.Pharm first degree, if he is to stand on an equal footing with other medical specialists with whom he will be working. A postgraduate course should be introduced to fill this need, a course which will lead to a doctorate in pharmacy (D.Pharm.) The course content of this postgraduate course should not be based only on the preparation of a thesis, as in the case of the M.Phil degree taken by B.Pharm student graduates so far, but should include extensive clinical education and training and a hospital internship similar to a medical doctor's.

The Pharmacist
July 1982 No. 4

Foreign Recognition

The local course has never to date had recognition and we feel that the Student Worker Scheme in some ways was a setback to the progress towards this aim, which has slowly been approached over the years. The recognition is of paramount importance so that pharmacy graduates can continue post-graduate studies without the difficulties which they currently face. Considering the recent advances and developments in pharmacy internationally, postgraduate education is of utmost importance if pharmacy in Malta is to keep abreast with these developments.

The Pharmacist
January 1987 No. 14

Pharmacist as Head of the Pharmacy Department

We look forward not only to a change in the system but also to an improvement of the staffing of the pharmacy department. It is a pity that the department has been without a head since the introduction of the Student Worker Scheme in pharmacy. It is high time that a suitably qualified head who we strongly believe should be a pharmacist is appointed in the near future. Without this it will be very difficult for the desired progress to be made.

The Pharmacist
January 1987 No. 14

Faculty of Pharmacy

The institution of a properly organised Faculty of Pharmacy at the Royal University is another vital necessity and your Union is taking very good care that this comes about.

The Pharmacist
October-December 1967

The possibility of setting up Pharmacy as a separate faculty must be seriously studied. There certainly is no lack of students. The lack of a sufficient number of lecturers must be dealt with by making better use of local talent and the utilization of foreign lecturers as required.

The Pharmacist
September 1987 No. 16

Pharmacists Against Drug Abuse

Traditionally, patients have confidence in their pharmacist and ask for advice on the correct use of medicaments. Pharmacists should educate the whole family to **USE MEDICAMENTS WITH CARE AND NOT TO MISUSE THEM.** There is no such thing as 'Pure' hard drug addict, the problem is polypharmacy. We are a drug using society and a drug abusing one as well.

The Pharmacist
May 1986 No. 13

It is important not to alienate the general public from drug therapy but to instill an awareness of the danger of misusing drugs. This is where pharmacists have a major role to play.

The Pharmacist
January 1986 No. 12

CONCLUSION

The above editorial extracts span a period of twenty years of Pharmacists' Union publications.

As can be seen, there are a number of recurrent problems. The profession still lacks sufficient identity in the public's eyes, the problem of nominal management is still with us. This is not to say that no progress has been made, that these union's efforts have borne no fruit. We can see the success of the Union's intervention to stop the Heatherington Commission's recommendations, the establishment of the Pharmacy Board and the legislation of 1984 re the opening of dispensaries.

Back to square one

Unfortunately, the lack of political and Government administration, understanding as to what pharmacy is about and the various interests which may have been involved, have resulted in a situation where we are back almost to square one. Thus we see that the 1984 legislation brought about after several discussions between the Chamber and the government, were with the stroke of a pen reduced to nothing, all to suit certain individuals. The situation in Pharmacy education has been allowed to deteriorate to such an extent that there is only one full time lecturer for over a hundred students. In 1961 the Union called for the setting up of a Faculty of Pharmacy. This is being reiterated by the Chamber. Administrators, politicians, educators must understand that pharmacy is neither medicine nor chemistry.

The Pharmacy Board has been almost a continuous set up in 1968, three years later, the union was already complaining of its ineffectiveness. Why has there been so much disillusionment with the Pharmacy Board? This board is responsible for the ethics of the profession, the maintenance of professional practice in pharmacies and yet there have been no inspections, the professional image of a pharmacy has been allowed to deteriorate, no professional fee has been introduced. In 1983 the board was reduced to ridicule. The quorum was no longer proportionate to the size of the board and furthermore there are now so many non pharmacists, that board meetings can be held in the absence of pharmacists.

Inertia!

What we fail to understand is why it is taking this administration so long to normalise situations. Surely what a previous administration reversed and ruined with the stroke of a pen need not have taken so long to bring to normal.

Over the last 10 years, the activities of the Chamber have increased tremendously as can be seen from the editorial extracts. The Chamber has been continuously on the alert to safeguard the interests of the profession and improve professional standards. This without forgetting the pharmacist's responsibility and contribution to society.

Thus we see the efforts against drug abuse and the encouragement for pharmacists to play an active part in the education of the general public to use medicines properly.

It must be noted that without government's support through suitable legislation and measures to enforce it, the Chamber's efforts cannot produce the desired results.