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Arbeitskreis 2

**Konsequenzen für eine umfassende
pharmazeutische Betreuung**

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Frei zur Veröffentlichung ab Beginn der Veranstaltung
Es gilt das gesprochene Wort.

The Imperative for Change—Why Pharmacy Practice Needs To Be Different in the Future



German Pharmacy Days
Düsseldorf
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Pharmacy is no stranger to change

1. Targets for change
2. Self-concept of the pharmacist
3. Why pharmacists should want to change
4. Developing a moral compass for pharmacists
5. Recommended actions

Targets for change

1. Level One: Primary mission
2. Level Two: Accommodating the environment
 - Biological sciences and therapeutics
 - Health care delivery system
 - Medical practice
 - Pharmaceutical marketing

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Caveats

1. My focus is on the professional practice of the pharmacist (not the business of operating a pharmacy)
2. Influenced by experience in the United States and observations in developed countries

Pharmacy's primary mission

1. Supply function?
2. Clinical function?
3. Both can co-exist
4. Spiral of development
 - Supply function -> Clinical function
 - Links between pharmacy education and practice
 - Negative example of the United States
 - Mistake to become completely disconnected from supply function

Premises

1. Most pharmacists concentrate on supply function
2. Two reasons to change
 - Patient need
 - Preservation of the profession
 - Supply function can be performed better in other ways
3. Difficult to change self-concept

Evidence about pharmacist's self-concept

Important issues are not being addressed in the typical pharmacist's practice

- Best medicine?
- Any medicine needed at all?
- Patient know what to expect?
- Interfering substances?
- Any patient worries?

Why does this matter?

1. Preventable public health problem
2. 5% hospital admissions
3. Adverse drug event, 25% ambulatory patients
4. 25% adverse drug events preventable
5. Potential for immense cost savings
 - Recent study from Australia showed hospitalization reduced by 45% among heart-failure patients who had benefit of medicines review by pharmacist
 - Analysis of published studies (2001 – 05) showed nearly \$5 benefit for every dollar invested in clinical pharmacy services

Pharmacist's self-concept

1. Pharmacy education
2. Practice patterns
3. Public expectations
4. Expectations of other health professionals
5. Legal scope of practice
6. Corporate employer mandates
7. Independent thought and will

Capacity for independent thought and will

1. Deep knowledge of truth
2. Barriers to action
 - Busyness
 - Fear
 - Failure
 - Immense effort
 - Comfort

Reasons to want to change

1. Personal fulfillment and self-esteem
2. Moral obligation

Steps toward a moral compass

1. Acknowledgement
2. Awareness
3. Alignment

Steps toward a moral compass

1. **Acknowledgement**
 - Gifts received on the way toward becoming a pharmacist
 - Support for education
 - Teachers and mentors
 - Leaders who improved the profession
 - Obligation to use these gifts wisely and respectfully
2. Awareness
3. Alignment

Steps toward a moral compass

1. Acknowledgement
2. **Awareness**
 - People may be harmed by the medicines they use
 - This can be prevented with the pharmacist's help
3. Alignment

Steps toward a moral compass

1. Acknowledgement
2. Awareness
3. **Alignment**
 - Pharmacist has profound duty to help people make the best use of medicines
 - Pharmacist can fulfill this duty through attention to the people served

Critical long-term questions

1. Will traditional focus continue to sustain the profession?
2. Will reform of structural deficiencies be enough to save us?
 - Incomplete information
 - Distance from prescriber
 - Legal scope of practice
 - Lack of payment
3. Also need to address the “inner life” (professional commitment) of pharmacists

Toward an agenda for change

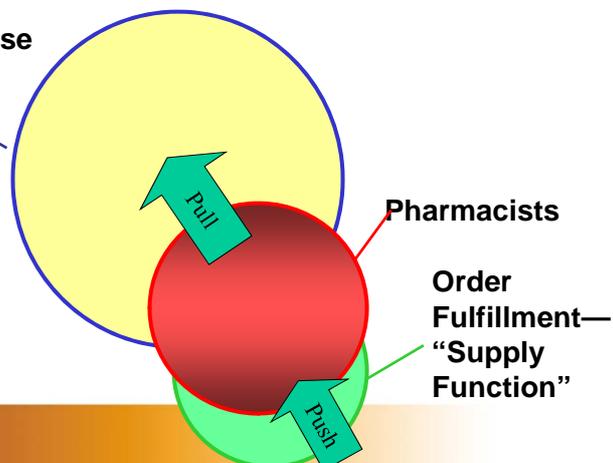
1. Candidly discuss the issues of professionalism
 - Schools of pharmacy
 - Professional organizations and conferences
 - Public forums
 - Informally among colleagues
2. Teach pharmacists how to always act consistently with their knowledge and ethics

Toward an agenda for change

3. Recognize difference between professional practice and business interests
4. Understand where technology and economics will take “supply function”
5. Showcase pharmacists who have added a clinical function to their practice

Pharmacy's long-standing challenge

Preventable Medication-Use Problems



Conclusions

- Structural changes are necessary to preserve pharmacy
 - Education (competency)
 - Payment for clinical services
 - Relationship with the physician

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- Pharmacists must also become more deeply committed to helping people make the best use of medicines

Conclusions

- Structural changes are necessary to preserve pharmacy
 - Education (competency)
 - Payment for clinical services
 - Relationship with the physician
- But these changes alone are not sufficient
- Pharmacists must also become more deeply committed to helping people make the best use of medicines
- **Are you ready to lead this cause?**

The patient is waiting!