Is bioethics in pharmacy inconceivable?

Madam, we read with great interest the Editorial "Medical Ethics: A slow but sustained revolution in Pakistan's healthcare" by Shamim and Shamim. In this timely and well-crafted editorial the authors pertinently highlighted the dissemination of bioethics concept not only in medical doctors but also in other health care professionals such as physiotherapists, nurses, technologists and even in school children. As pointed out in the article jargons and lingua franca of bioethics are now well known in Pakistani medical community due to seminars and workshops in medical colleges and universities.

In context to that it is appropriate to sensitize about the presence of pharmacist in the healthcare system of Pakistan and its relevance in the field of bioethics. In fact the profession of pharmacy has taken strides from the traditional business of compounding and dispensing to patient-centered pharmaceutical care; ranging from
therapeutic regimen management, adverse drug reaction monitoring, pharmacogenomics, etc. In context to the rapidly evolving profession, the responsibility of the pharmacist varies widely from one region to another. Thus, pharmacists are the key programmers and performers in academics, industries, hospitals, as well as community pharmacies. Their involvement right from product development to production, quality control, sustainable drug supply chain management, and judicious medicine use speak volume of their status as 'core loop' in the health care chain. To be precise pharmacists are experts on medicines.2 Despite this, the role of pharmacists needs recognition, particularly in developing countries.3 Although the concept of rational pharmacotherapy cannot be fully accomplished until and unless there is flexible understanding among doctor-pharmacist-patient, still, the links of pharmacists to other health care professionals such as doctors and nurses seem to be challenging.4 Moreover, the recent credential sweep of Bachelor of Pharmacy (BPharm) programme to Doctor of Pharmacy Programme (Pharm D) mimics an extra load on academic pharmacists to prepare pharmacy future practitioners not only for the societal needs but also to instruct and train them as world class competitive Pharm D graduates. Likewise, in terms of pharmacy practice, the profession is rapidly evolving in Pakistan with appreciable number of pharmacists joining as well as inclined to join community and hospital pharmacies. These practicing pharmacists (community and hospital) are continuously exposed to bioethical concerns in their day to day practice. Therefore, the application of ethics to the field of pharmacy is the need of time. It is imperative to initially visualize the bioethical issues related to Pakistan's practicing pharmacists (community and hospital). It is meaningful to sensitize pharmacists towards their moral obligation of reasonable and justified arguments with other healthcare professionals in the best interest of their patients, to ascertain the need of right medicine at the right time, and as well as to offer cost containment modalities in the presence of new and expensive medications. Symposia, workshops and lectures in collaboration with the Center of Bioethics and Culture in Karachi,5 Pakistan should be organized and mandatory to attend for both faculty and students.

**Recommendation:**

'Train-the-Trainer' programs by the Center of Bioethics and Culture in Karachi will help to foster and acclimatize the academia towards the concept of bioethics and its importance and relevance in curricula.

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**References**