

# Outstanding or Standing out? - An Opinion on the Position of Pharmacists in India

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**Abstract:** *This commentary or opinion is about the pharmacists position in India. Whether the pharmacist receives due recognition in various fields for which he or she was professionally groomed? As a member of the healthcare team, is he or she really in a position to add value to any related process from manufacturing till administering and follow up of the patient? What is the market scenario? Which other professionals compete with the pharmacist? And how the life sciences professionals share the pharmacists table? Are all commented upon. The teaching and imparting of pharmacy education, though is expanding in terms of quantity, did the pharmacist make an impact in real quality terms? Is what is discussed in this commentary. If there needs to be a change, it should start from education and not by just demanding positions for the pharmacists. Respect and due recognition for the profession is yet to be commanded in full.*

**Keywords:** Pharmacist; Profession; Indian pharmacist; healthcare team

## 1. Introduction

This is an opinion on the current scenario of the various arms of pharmacy in India. This article may take you through our experiences and we sincerely urge the reader to remember while starting every line that "Itsour opinion, and these may not necessarily represent the whole scenario" as our individual limitations do exist. The fact is that pharmacy as a profession is booming in India and the awareness is fast catching, but is a pharmacist a pharmacist in real terms?

### Dispensing of drugs

Anyone across India, would identify a pharmacist as the one who dispenses medicines in the medical store in the community or at a hospital. While the irony of the situation is that many a times a qualified pharmacist is not available at the desk to dispense the drugs with the requisite advice & counselling required. The state (of various states within India) Food and Drugs Administrations (FDA), the implementer of regulations conduct frequent raids and makes it a point to close down the shops without the registered pharmacist at the time of a surprise inspection with time considerations. Though the periodic and the informed inspections of the state regulators are well managed by the proprietor of the community pharmacies to show that the pharmacy adheres to all said regulations, the surprise inspections reveal the lacunas most often.[1]

### Production of drugs

When the dispensing side of the story is so, the manufacturing side of the same is still in its infancy in terms of having the certified and trained professionals in the respective areas. Yes there are trained professionals, but the qualification is the question. Most of the production is filled with the masters or bachelors in the sciences or the arts discipline. If this is the case with the skilled section of the manufacturing industry, the situation in the unskilled sections can be imagined.[2] The very sensitive quality control & the quality analysis departments are not an

exemption to the allowance of experienced non-pharmacy graduates to practice.[3] Next to United States, the highest number of USFDA approved drug manufacturing facilities is in India.[4]

### Pharmacy Act Upheld

The Pharmacy act was challenged and the, Honourable High Court of Bombay (known as Mumbai now) vide judgment dt. 15<sup>th</sup> March 2011, had "upheld section 42 of the Pharmacy Act, 1948 & did not allow the unqualified persons to continue to work in the matter of handling medicines by working as pharmacists since they are not qualified pharmacist under section 42 of the Act". [5] That was a long battle which led to this judgment and the past can be understood from the very act of challenging the Pharmacy Act.

The research development and the formulations development is one area, where again the pharmacists are yet to fully receive their due share as this department is filled with post graduates in the chemical sciences and biological sciences to a considerable extent. A drug discovery and development needs experts from multiple disciplines like chemistry, zoology or biology etc., to integrate and finally arrive at a formulation that's safe & effective.

### Ban on Fixed Dose Combinations

In the recent past, during March 2016, the government of India banned 344 formulations on account of safety or efficacy or for lack of availability of evidences or for the lack of availability of proper clinical trials substantiating the product use.[6] How and why these combinations or drugs were allowed to get marketed in the country is another big question as some of these formulations have been in the market for more than two or three years and some may be beyond a decade, consumed by millions of patients across the sub continent. Not just the small time players are to be blamed for such an inhumane practice but some leading

players from the industry are a party to such drug or combination products availability in India.

### Health care?

Healthcare simply is defined as per the Merriam-Webster's learners dictionary, is the prevention or treatment of illness by doctors, dentists, psychologists, etc.. The full definition reads as follows "efforts made to maintain or restore health especially by trained and licensed professionals —usually hyphenated when used attributively"[7] Now these definitions inform even a learner that both training as well as licensing are required for professionals who are involved in the restoration of health. Now it's for the reader to understand on whether health care involves manufacturing of drugs, the formulation of drugs, the packaging of drugs, the dispensing of drugs, the administration of drugs and the follow-up after administration of the same or just dispensing of the drugs?

### Clinical trials

The most important part of drug development is clinical trials. There are more than a dozen leading clinical trial institutions that also conduct various courses on clinical trials like, post graduate diploma in clinical research, certificate courses and Masters Courses in various branches of clinical trial process. Now with these certifications a chemistry graduate or a biology graduate may get employed in the mainstream clinical trial processes, but a pharmacist who probably is not certified with these courses, though has inclination and the requisite knowledge on clinical trials may not get the necessary attention as a prospective candidate for the said positions in a clinical trial set-up.

### Injections – Can or Cannot?

Now with all the above positions where a pharmacist can be a right choice, in India the pharmacist is not trained in the diploma, graduate or post-graduate curriculum to inject, whether its sub-cutaneous, Intra muscular or any other injectable route of administration in human subjects. In rats and in some selected experimental animals, he gets trained, but not for human. The nurse or the clinician can inject a drug. Now a simple question that has gone unanswered since decades is that a trained and a certified professional who is involved from raw material processing till dispensing and the one who counsels and the professional who is expected to play a major role in the non-pharmacological services to the patient cannot a inject a drug?. Practically they are not extensively trained on the various routes of administration and a casual question many a times to various registered pharmacists, on whether they can inject leaves them with an obvious confusion.

The basic understanding is that the Diploma in pharmacy graduates are for dispensing and the bachelor of Pharmacy graduates are for the manufacturing. No one is limited from taking up higher studies though. But due to various reasons including the wages, most of the bachelor of pharmacy graduates opts for marketing and sales positions in the pharmaceutical companies. The pharmacist entering this commercial area also is not devoid of competition from the arts and sciences graduates. Now the Masters of Pharmacy with various specializations reach the target job destinations but not without compromises.

### Government is promising

But one promising destination is the government jobs like the drug inspectors of various state governments, the central laboratories, the pharmacopoeial commissions and the drug law enforcement authorities like the CDSCO & the office of the DCGI etc, where strict adherence to the educational qualifications are followed with no compromise, but the no of positions are limited compared to the no of pharmacy candidates available. The various government agencies like the Indian railways, the various undertakings of the central and the state governments like the government general hospitals, the primary health centres etc., do have qualified pharmacists practicing the profession in full.

When an Engineer is an engineer, A clinician is a clinician and a carpenter is a carpenter, why a Pharmacist is not given his dues as a Pharmacist? "Supply may be more than the demand" Or "The right supply is less than the demand", and so the requirements are matched by workforce that meets the expectations of the particular discipline or industry.

### How many? How long & How serious are they?

There are approximately 400 + teaching institutes who are engaged in imparting diploma courses and an equal number of institutes involved in imparting the undergraduate bachelors degree in Pharmacy each producing approximately 20000+ (above twenty thousand) candidates every year (Figures mentioned are not exact and are estimates). Added to these are the post graduate pharmacy degrees in a particular discipline (Master of Pharmacy), like Pharmaceutics, Pharmacology & Pharmaceutical analysis etc. [8,9]

### New direction

The latest addition to the professional skill sharpening efforts and the healthcare team value addition efforts is the initiation of the Doctor of Pharmacy course, which is an integrated program for 6 years with an aim of developing clinical, hospital & community pharmacists with professional skills equipped to deliver the right treatment at the right time with the right drug in the right dose. The outcome expected is the customized pharmaceutical care for the patient with ultimate focus on improved care with decreased adverse events. The Clinicians and the other healthcare professionals need to be educated and should be made aware of the goals of such a course. This may be incomplete and is partially visible in the way the pharmacists are accepted into practicing pharmacy in day to day life as a part of the healthcare team implementing pharmaceutical care plans.

But all these are in the initial stages and so this is time for mass awareness amidst the other healthcare professionals. In a situation where the diploma and the degree pharmacy professionals are already not being given their right share, if the awareness on the new integrated course is not extensively taken up on a mass scale by the respective authorities, then the fear psychosis or procrastination amongst these professionals about their future would be a truth in near future. All these needs to happen immediately as it's just not the question of the professionals future, but also about the provision of pharmaceutical care to the

patients and its effectiveness in reducing the adverse effects may remain unfulfilled.

### Respect – Demand or Command?

Respect cannot be claimed, but commanded. The expert authority that can give respect to the pharmacist can be earned not by just formulating laws but by ensuring support from the other components in the industry like the clinicians, the business owners, the hospital management, the academic institutes and the law making and enforcing authorities. The pharmacist need not be considered a competition to anyone but a component in delivering quality or customized healthcare as is the requirement of the situation.

### Individual change in Pharmacist!

Above all, the pharmacist should also understand that professional respect comes with the knowledge; attitude and the skills gained in the respective profession and is not just a matter of gaining a degree or its certificates. Passionate professional pharmacists are the need of the hour and not just Pharmacists on paper.

## 2. Disclosure

These are authors personal opinion and are based on his or hers limited experience and cannot be taken as conditions in general. Reader is advised to do his own research before arriving at any decision.

## 3. Limitations

Extensive research in every area mentioned with statistics may provide a substantial overview of the existing conditions mentioned in the article. This is an eagle's eye view only and can be taken-up for further studies in-depth.

## 4. Acknowledgements

Nil

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