My point of view

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Universal degree for pharmacy?

During the recent International Pharmaceutical Federation (FIP) conference, much discussion took place around establishing a universal degree for pharmacy. This was especially driven after a presentation from an Indian academic, where many of the delegates learnt, for the first time, that in India, most of the dispensing and running of “community pharmacies” is done by pharmacists with a two-year Diploma in Pharmacy (called a DPharm), while those who graduate with a BPharm generally end up in industry or continue with postgraduate studies. This was very difficult to swallow, especially for the American contingent: somebody with a two-year qualification doing what PharmD graduates do in the United States? Or perhaps it was also the thought that the DPharm might be confused with the PharmD. This stimulated an interesting discussion on whether everybody should standardise on the PharmD, or whether we should look at needs-based education where every region does what is best for delivering the service in that region.

From all of this, the international pharmacy community will probably discuss, and hopefully establish, certain minimum criteria for pharmacy education based on the needs of the communities we serve and the role of the pharmacist in a particular region. These discussions could also lead to closer collaboration between training institutions in different regions.

It also made me think about what our needs in South Africa are: that we need to double the number of pharmacists we currently have is a given, but what should their qualification be to optimise service delivery to all our people? Should we think about moving to a PharmD, or move towards a master’s-level degree like much of Europe and Australia? Could we take BSc graduates, of whom there are many out there looking for employment, and with two years of intensive pharmacy training deliver an MPharm graduate who could be registered with the Pharmacy Council? Where does the pharmacy technician fit in all this?

This has surely served to open my mind to alternatives. We may have difficult times ahead with regard to pharmacy and delivering the required services but, with innovative thinking, we might just get to a better solution than we now think possible.