It happens from time to time that a decision has to be made based on a choice between the devil and the deep blue sea. Often in the service of the PSSA, a similar decision has to be taken. The specific one of which I am thinking happened quite recently, when the Competition Commission published a document stating that it will be performing a market enquiry into the private healthcare sector. It all began with an article in *Noseweek* that highlighted the distortion in the market place in the pharmaceutical arena. Pharmacy was not included in that document, so my initial thought was: "What a relief. We are being scrutinised by everybody, and this time, for once, we are being left alone!"

But that was only until I read the document and realised that it would actually be of benefit to let the world and government see to what extent the profession is overregulated! Subsequent to that, Ivan Kotzé, the PSSA Executive Director, and the team set out to prepare a document that would set the record straight.

There is a continuous flow of complaints that the marketplace is not fair (although there is a single exit price), and that smaller pharmacies are struggling to survive and that logistics fees differ between wholesalers, while marketing fees and data fees add more confusion to the already complicated pricing structure. This flood of complaints is so vast that it should not be ignored, and while the Competition Commission is investigating the private healthcare sector, it would be worthwhile to examine the entire marketplace to see to it that an equitable and fair solution is reached that will deliver cheaper medicine to the patient, while at the same time providing a stable environment in which pharmacists can practise alongside one another, where service, rather than price, becomes the distinguishing factor.

Between a rock and a hard place is an autobiography of Aron Ralston that was published in 2004. The book tells of Ralston's experience of being in Blue John Canyon in the Utah desert, and how he was forced to amputate his own right arm with a multi-tool in order to free himself after his arm had become trapped by a boulder.

Incidentally, Inc.com named Ralston's account as one of seven "great entrepreneurship books that have nothing to do with business". As Bill Murphy, the writer of the article, explains: "My rationale is that at its core, entrepreneurship isn't so much about business, as it is about pursuing opportunity. Instead, entrepreneurship is a management style focused on the relentless pursuit of opportunity, without regard to resources currently controlled". Perhaps this is because often, in business, one has to decide between the lesser of two evils and there is no university programme which prepares you for these situations other than the University of Life.

Perhaps one of these decisions should be to let go of the role of the pharmacist as we know it as a "maker of medicine" and to leave that to our colleagues in industry. We could even relinquish our role as a "dispenser" of medicine, so that instead we can become the caregiver who adds value to the medicine received by the patient. That way, we could ensure a positive outcome regarding diseases that have a debilitating effect on patients' lives, while deriving our income from that service and we wouldn't have to hesitate about charging for services rendered as that is what our future is based upon!

This seems to be one of the biggest problems that pharmacists face, especially those coming out of the "markup to discount" era of conducting business. Part of the business runs on a cost plus markup model and part of it is derived from a professional fee. Subsequently, a continuous change to the business approach is required. Anybody would sympathise with why pharmacists become confused, but as I have said so many times before, I believe that pharmacists will overcome this problem and work out a model that will be practical and acceptable to the patient and consumer.

This only illustrates one of the many challenges that face us in our daily lives, whether or not you are a community pharmacist, production pharmacist faced with raw material and labour challenges, an academic with budgetary constraints, or a hospital pharmacist with stock and manpower challenges. The problem has to be identified, a uniquely effective way of solving it formulated, and an improvised strategy executed.

**Johann Kruger**

President: PSSA