

Pharmacist Prescribing: Striving for Excellence in Patient Care

Margaret Gray

With the turn of the calendar to 2002, the 21st century is now well established, so it seems fitting to look back at the history of the pharmacy profession, to see where we've been and where we're heading. Pharmacists have come a long way as health care professionals. Within the last century we have evolved from compounders of medicines, to dispensers of medications, to now having direct involvement in therapeutic choices with and for our patients. That's substantial growth for our profession in a relatively short period of time. CSHP, established in 1947, has been around for much of this evolution. A key objective of the Society since its inception has been to support the work of pharmacists in health care settings. As pharmacists have incorporated pharmaceutical care in their practice, CSHP has been a leader in supporting these decentralized, direct patient care roles. This support is apparent through our Standards and Guidelines, our Direct Patient Care Curriculum, and, most recently, through the publication of our Statement and Information Paper on Pharmacist Prescribing.

You'll find in this issue of *CJHP* the CSHP "Statement on Pharmacist Prescribing" (page 55), as well as the accompanying Information Paper (page 56), which were approved at the 2001 Annual General Meeting in Halifax. With these documents, CSHP is "setting the course" for Canadian pharmacists with regard to prescribing, in keeping with Vision 2003.

Legislation in several states has given American pharmacists limited prescribing privileges, but to date no province in Canada has achieved this status. Nonetheless, when CSHP conducted a membership survey in 1996, we found that a significant number of our members were already involved to various degrees in prescriptive activities. To a large extent these activities were occurring in an unmeasured and unregulated environment. Whether it involved pharmacokinetic drug

monitoring, prescribing within agreed-upon protocols, or individual physician-pharmacist agreements, the concept and practice of prescribing were familiar to many of our members.

Many provinces in Canada have recently begun planning to update their health professions acts. This creates an opportunity to discuss the issue of pharmacist prescribing and its implications for patient care here.

The issue of pharmacist prescribing remains controversial, even though we know, from both our own survey and the literature, that pharmacists in hospital practice have been doing this for many years. The most recent evidence of this is the Position Statement on Pharmacist Prescribing put forward jointly by the American College of Physicians (ACP) and the American Society of Internal Medicine (ASIM).¹ In that paper, the ACP and ASIM support many of the innovative practices that have evolved in pharmacist practice, but state clearly that they do not support independent prescribing by pharmacists and that this practice should remain the sole responsibility of physicians. No doubt this is a challenge we will face in Canada as well. When CSHP decided to pursue a paper on pharmacist prescribing, it was to support the work of many members across the country in their efforts to move into new practice areas.



continued on page 91



rôle de leader de la profession. Nous voulons ainsi appuyer nos membres dans chaque province, au moment où les organismes de réglementation commenceront à étudier cet important tournant de notre pratique. Nous sommes fiers du travail de Glen Pearson et de Nesé Yuksel, et de celui d'autres membres du Groupe de travail sur le droit de prescrire des pharmaciens. C'est au nom de la SCPH que je désire souligner ici les efforts qu'ils ont accomplis dans ce domaine.

Référence

1. Pincus, T., T. Sokka et C.M. Stein. «Pharmacist scope of practice», *Ann Intern Med*, 2002; 136 : 79-85.

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With the publication of our statement and information paper, CSHP continues its leadership role in the profession. Our goal is to support our members in each province as the regulatory bodies begin to examine this important change in our practice. We're proud of the work of Glen Pearson and Nesé Yuksel and the other members of the Task Force on Pharmacist Prescribing and, on behalf of CSHP, I would like to take this opportunity to thank them for their work on this important issue.

Reference

1. Pincus T, Sokka T, Stein CM. Pharmacist scope of practice. *Ann Intern Med* 2002;136:79-85.

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Advertisers' Index

	Ad Page	Prescribing Information
Pfizer / Lipitor	IFC	66, 67
Medi-Dose Inc. / EPS	3	—
BMS / Tequin	5	68, 69
Health Canada / Prescription Pad	7	—
Pharmacia / Zyvoxam	9	70, 71, 72
GlaxoSmithKline / Zofran	11	73, 74
Pharmaceutical Partners of Canada / Corporate	IBC	—
Pharmacia / Camptosar	OBC	75, 76, 77, 78, 79, 80

