While I finished dispensing another prescription, a welcome breeze had me glancing up to find 3 grinning faces intently watching me at work through the open window. As I put the handwritten prescription label on the little resealable bag containing a few tablets and looked around for a Spanish translator to help me with my patient counselling, I knew I was far from home. The “pharmacy” was actually a table in one corner of a schoolhouse in a remote village in the Peruvian Amazon, which had been converted for the day into a medical clinic. At the other end of the room a couple of tables were curtained off to serve as examination areas for the volunteer physicians, and in another corner the local shaman was seeing patients, providing advice and dispensing various local plants and roots. And all around these makeshift workstations were many, many people! Whole families were moving around together as each person had his or her medical concerns addressed, and of course there were the many curious onlookers.

All this took place a few years ago, when I had the opportunity to volunteer for the Rainforest Health Project, a nonprofit, international relief organization providing humanitarian medical assistance in Peru. Four times a year, volunteer teams of medical professionals travel to villages in the Peruvian jungle that have asked for the Project’s assistance. Basic medical care is provided, and sustainable health practices are encouraged. To do this, the teams work with area shamans; learn about local traditions of healing, including the use of medicinal plants; and teach (by example) safer waste removal, water supply management, and nutrition. My medical team included 3 physicians, 4 nurses, 1 lab technician, 7 nonmedical people, and myself as the pharmacist. Our trip lasted 2 weeks, during which time we flew from Miami to Iquitos in northern Peru, then travelled by boat up the Amazon River and a smaller tributary to the jungle lodge.

In our most recent federal election, in November 2000, there was some discussion of the future of health care in Canada, including the possibility of a “two-tiered system” and its effect on universal access, a hallmark of the Canadian system. In 2001, our front cover features pictures to illustrate the stories of Canadians who have volunteered or worked in health care in other countries.

In 1996, Beth Sproule, currently a Researcher in the Psychopharmacology Research Program at Sunnybrook and Women’s College Health Sciences Centre in Toronto, Ontario, travelled to the Peruvian Amazon as a pharmacist volunteer with the Rainforest Health Project. This picture shows the table that was used as the pharmacy in a converted schoolhouse on one of the daily trips to a remote village. Through the window can be seen 2 of the local homes, which are built on stilts to accommodate the regular flooding of the nearby rivers.

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hospital pharmacies have been published recently, one in this journal and one in a medical journal.\(^5\)

Widespread media coverage was given only to the one published in the Canadian Medical Association Journal.\(^5\)

There has been, I think, a negative price to pay for this invisibility. It reflects either a low expectation of pharmacy services on the part of the media and the public or their narrow perception of our role.

How can we overcome this label? On an individual basis, we should all make a greater effort to be more visible to patients and other health care professionals in the provision of care and in all other functions of our jobs. Personally, I try to make sure that patients know I am a pharmacist; however, a recent Australian study found that 14% of patients were unaware that a pharmacist had spoken to them.\(^6\) The challenges faced by our profession as we try to increase the resources available for pharmaceutical care need to be delineated in understandable but more forceful terms to all stakeholders. When the media are covering issues related to drug therapy they need to hear from us. If they do not seek our opinions initially, then we must at least respond in follow-up correspondence when appropriate. Pharmacy-generated research with broad implications should be submitted to major journals that are scanned by the media, and pharmacy journals should alert the media to any high-impact research that they are publishing. As a profession, we must become better acquainted with and more involved in some of the broad social issues affecting us all.

An increase in positive visibility could lead to recognition of our vision for the role of the pharmacist in health care, now and in the future. The profession’s visibility has increased over the past several decades, but the examples I have cited attest to the need for further improvement. We cannot afford to remain “invisible” — the price is too high. Let’s get visible!

References


William R. Bartle, PharmD, FCSHP, is Clinical Coordinator, Sunnybrook and Women’s College Health Sciences Centre, and Associate Professor of Clinical Pharmacy, Faculty of Pharmacy, University of Toronto, Toronto, Ontario. He is also an Associate Editor for CJHP.

Address correspondence to:
Dr William R. Bartle
Sunnybrook and Women’s College Health Sciences Centre
2075 Bayview Avenue
Toronto ON
M4N 3M5
e-mail: bill.bartle@swchsc.on.ca

Beth Sproule, PharmD, is a Researcher in the Psychopharmacology Research Program at Sunnybrook and Women’s College Health Sciences Centre, Toronto, Ontario. She can be reached by email at bethsproule@sympatico.ca

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that served as our base. From there, we travelled by river and through the jungle to reach remote communities. My contributions were organizing the many bags and boxes of medications, identifying donated drug products from various countries, selecting appropriate drugs and dosages for patients from what was available, dispensing medications, providing drug information through an interpreter, and identifying the pharmacy needs for the next trip. I was also able to learn from the local shamans about the medicinal plants they use in their practice. For example, ayahuasca is a hallucinogen used in healing ceremonies, and the bark from una de gato (also known as cat’s claw) is used to make a tea for infections and cancer.

The trip was a wonderful experience — we were able to provide a basic service to people in need, and the experience confirmed for me the unique contributions that pharmacists can make to these medical teams. More information about the Rainforest Health Project can be found at their Web site (http://www.rainforesthealth.org). I have compiled a small Web site with information about pharmacists volunteering or working overseas (http://www3.sympatico.ca/bethsproule). If you have information or experiences you would like to share with other pharmacists, please let me know so I can add your contribution to the site.

Beth Sproule, PharmD, is a Researcher in the Psychopharmacology Research Program at Sunnybrook and Women’s College Health Sciences Centre, Toronto, Ontario. She can be reached by email at bethsproule@sympatico.ca