



The 25th Conference of the Scientific Association of Colleges of Pharmacy in the Arab World The 1st International Conference of the Faculty of Pharmacy at LIMU

Doctor of Pharmacy Program (PharmD) New Horizon for Pharmacy Education & Practice PREPARED BY DR. MOHAMED A. MOUSTAFA PROFESSOR OF MEDICINAL CHEMISTRY FACULTY OF PHARMACY MANSOURA UNIVERSITY EGYPT

Lecture outlines

- Medicines (Drugs) الأدوية
- Challenges Facing Medicines Use System.
- Physicians' workload and Need for Drug Experts.
- Drug Experts?
- Evolution of Pharmacists Role in Health-care System.
- Bachelor's degrees in pharmacy to PharmD.
- PharmD Curriculum.
- Problems Facing Pharmacists Role in Health Care System.
- New Horizon for Pharmacy Education & Practice.
- Pharmacist is a major supporter of community health.



• Medicines (Drugs) الأدوية



Medicines

- Providing a healthy and respectable life for every citizen is the hope of every country.
- Medicines are essential and critical part of health-care services in all cultures and societies.
- Medicines are often an essential component of many disease prevention programs and virtually all disease treatment plans.









Increase in Pharmacy Spending

- Medicines are increasingly expensive, and their cost is compromising the affordability of health care.
- Managing the costs of medicines is critical to making the best use of limited resources to maximize health care for as many people as possible.

The High Cost of Adverse drug effects:

- Adverse drug reactions (ADRs) are one of the leading causes of hospital admissions and morbidity in developed countries and represent a substantial burden on healthcare delivery systems.
- ADRs are reported to be the fourth or sixth leading cause of death.
- In addition to human health, ADRs also have a significant impact on healthcare costs.

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Fatal adverse drug reactions: A worldwide perspective in the World Health Organization pharmacovigilance database Jean-Louis Montastruc et al. published: 10 April 2021 https://doi.org/10.1111/bcp.14851Citations: 4
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Challenges Facing Medicines Use System Cost of Drug Misuse

Ten years One day's adverse wrong side / wrong site = drug events surgery



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Rapidly increasing number of available medications **Drug Statistics**

Total	Number	of	Small Molecule	
Drugs				
Total	Number	of	Biotech Drugs	4249
Total	Number	of	Approved Drugs	4467
Total	Number	of	Approved Small	2797
Molecule Drugs				
Total	Number	of	Nutraceutical Drugs	135
Total	Number	of	Experimental Drugs	6726
Total	Number	of	Illicit Drugs	205
Total	Number	of	Withdrawn Drugs	333
Total	Number	of	Drugs	17403



The Complex Medication-Use System (Polypharmacy)

- Patients are taking multiple, complex medicines:
- An estimated 44% of men and 57% of women older than age 65 take five or more medications.
- Polypharmacy was shown to increase the risk of adverse drug events from 13%, with patients taking two medications, to 58%, associated with five drugs.
- When patients are taking seven or more medications, the risk of ADEs surpasses

80%.

Polypharmacy in Older Adults: Statistics That Help Tell the Story: S. Michael Ross MD, MHA February 9, 2021



Improper Medication Use

- Over or under use, wrong time.
- Taking the wrong medicine.
- Not finishing medication.
- Administration errors.
- Using another person's medication.
- Using old, possibly expired medication.



Patient Noncompliance

- increased morbidity (sickness).
- treatment failures.
- exacerbation of disease.
- more frequent physician visits.
- increased hospitalizations.
- Death.



The costs of medication noncompliance (Nonadherence)

- Studies have revealed that the cost of medication noncompliance in the US healthcare system is "between \$100-\$289 billion every year in direct costs", when patients don't take their medications correctly.
- In addition, "Losses in productivity due to health-related factors could multiply that by 2.3 times."

The cost of medication non-compliance and how on-site health clinics can help: By Roy Steiner | April $11 \mbox{th}$, 2018

Societal Changes Suggesting Need for Improved Pharmaceutical Outcomes

- Demographic Trends
 - Elderly growing segment of population.
- Cultural Trends
 - Increased self-care; increased self-regulation.
- Epidemiological Trends





- Disease shift from acute (curing) to chronic (manage, monitor, care).
- Technology
 - Computers, robotics provide pharmacists tools to collect and act on patient-specific and population-based information.



• Physicians' workload and Need for Drug Experts.



Physicians' workload and Need for Drug Experts

- Many studies and surveys have revealed that heavy physician workload may compromise the quality of medication use and associated with higher risk of prescribing inappropriately.
- Patients are engaged in risk assessment with each dose due to problems of medicine selection, dosages, improper administration of medicines and lack of adherence by patients to prescribed treatment.
- Possible medicine-medicine and medicine-food interactions, and adverse medicine events.



Key Solution

 It is important now than ever to have Drug Experts in the patient care team.



Who are the Drug Experts?

Many significant facets of medication are schools pharmacy covered at offering Bachelor's degrees; however, these programs lacking courses and experiential training that empower graduates to make decisions based on pharmacologic principles in the situation of clinical problems.





• Evolution of Pharmacists Role in Health-care System.

Evolution of Pharmacists Role in Health-care System, How?

- The changes in the pharmacy practice calls for and drives changes in pharmacy education.
- Guidelines and recommendations on a new model for pharmacy degree courses have guided to innovation in pharmaceutical education.
- These documents define courses in therapeutics and practice experiences as essential components for developing the competencies necessary for clinical practice of pharmacists.
- This brings universities and healthcare services closer together, enhancing the potential contribution of the two institutions to society.



• New Model of Pharmacy Education, Bachelor's degrees to PharmD.



New Model of Pharmacy Education Bachelor's degrees to PharmD, Why?

- The educational philosophy of pharmacy schools should be reformed in order to establish professional pharmacy programmes that assure graduates are Drug Experts and health care providers.
- Professional Program in Pharmacy leading to "Doctor of Pharmacy Degree 'PharmD' (حيدلة) (ميدلة) that follows the general accreditation standards and guidelines can provide competent pharmacists as Drug Experts and health care providers.

PharmD

The Doctor of Pharmacy degree, (PharmD)

- The Doctor of Pharmacy degree (دکتور صیدلة), abbreviated as PharmD, is a professional doctor degree in Pharmacy.
- PharmD is very much similar to professional degrees like Doctor of Medicine (MD) or Doctor of Dental Surgery (DDS) in USA or equal qualifications in other countries.
- Today PharmD became a global program available in almost all countries in the world.
- Through the PharmD programs the pharmacists are trained to become active and integral members of the patient care team (Pharmaceutical Care).





PharmD Curriculum

PharmD Curriculum

- PharmD Program is a 4 years program (+ 2 years of prerequisite courses).
- The core curriculum must include a balance of coursework in:
- biomedical sciences, pharmaceutical sciences, behavioural, social and administrative sciences, and clinical sciences,
- In addition to Early and Advanced practice experience, interprofessional educational experiences and research project.
- A successful PharmD program will graduate confident pharmacists who are able and willing to assume responsibility and accountability for drug therapy management.
- PharmD graduates are equipped with the philosophy of pharmaceutical care: "to provide the patient with safe, effective and cost-effective medications".



1) Basic & General Courses [but is not

limited to] (Prerequisites)(10-12%):

- General Chemistry
- Organic Chemistry,
- Biology,
- Physics,
- statistics,
- Mathematics,
- English Language,
- Communication Skills,
- Digital Transformation.



2) Behavioural, social, and

administrative pharmacy sciences [but

is not limited to] (10-12%)

- **Biostatistics**
- Pharmacoeconomics
- Ethical and Professional Standards.
- Business and practice management
- Pharmacoepidemiology
- Health system





3) Biomedical Sciences Courses

[but is not limited to] =13-17% :

- Physiology,
- Anatomy,
- Biochemistry,
- Molecular and cell biology
- Microbiology & Immunology,
- Pathophysiology



4) Pharmaceutical Sciences Courses

[but is not limited to] = 28-32%:

- Physical Pharmacy
- Pharmaceutics
- Pharmacokinetics
- Biopharmaceutics
- Pharmacology
- Medicinal Chemistry,
- Biotechnology





5) Clinical Sciences Oriented Courses [but is not limited to] = (20-22%)

- Intensive Courses in Therapeutics,
- Clinical pharmacokinetics,
- Clinical Toxicology,
- Clinical Biochemistry
- Nutrition
- Drug abuse and dependency
- Emergency first care
- Geriatrics
- Herbal Medicine



Therapeutics (Pharmacotherapy)?

- Therapeutic courses are the most important feature of the PharmD program.
- These courses are designed to consolidate student skills in the selection and use of drugs commonly prescribed in medical practice.
- The courses focus on therapeutic decision-making in the context of clinical problems based upon pharmacologic principles.
- The courses demonstrate the rational application of core pharmacologic principles with general applicability to clinical situations.





- 6) Experiential Pharmacy Training:
- Experiential training is viewed as an essential requirement for the development of practical skills of graduates.

a] Early Pharmacy Experiential Experience (EPPE) of pharmacy students should begin early in the educational program and should run in parallel with other components of the curriculum.

b] Advance Pharmacy Experiential Experience (APPE): Clinical Clerkships (Rotations = 20-15%) (Last Year of the program):

- 6-8 clinical rotations (4-5 Weeks each) as Ambulatory care, Hospital Pharmacy Practice, Internal Medicine, Drug Information, Community Pharmacy Practice, Infectious Diseases,....etc. (*It should be conducted under cooperative and official contracts with the training site*).
- APPE is 1200 hrs and EPPE is 400 hrs minimum.

 Problems Facing Pharmacist's Role in Health Care System

 In most of the Arabic countries, the contribution of pharmacists in patient care system still facing logistic and financial problems.



Problems Facing Pharmacist' Role in Health Care System

- The perception of the Pharmacist as dispenser of drugs still persists.
- Health care system is physician-centered.
- There is some initial restraint for a role of pharmacist in the healthcare team.
- Some health practitioners have uncertainty regarding the pharmacist's pharmacotherapy knowledge and abilities.
- Physicians had some concern about having their prescribing scrutinized by Pharmacists.



New Horizon for Pharmacy Education & Practice



New Horizon for Pharmacy Education & Practice

Pharmacy Education

- Pharmacy schools have to implement WHO and FIP guidelines for pharmacy education.
- The accreditation standards of ACPE or CCAPP are excellent resources for developing a robust PharmD program.





UNIVERSITY



World Health Organization



New Horizon for Pharmacy Education & Practice

Pharmacy Practice

- The health authorities must now put in place a health care policy that maximizes the contribution of PharmD graduates and place them at the frontline of the patient care system.
- Legislations must provide reliable reimbursement for pharmacists for their new role in the health care system.
- The interprofessional collaboration between pharmacists and physicians would assist in optimizing patients' pharmacotherapy and reduce risk factors that might arise from medication errors.





الصيدلي داعم رئيسي لصحة المجتمع Pharmacist is a major supporter of community health

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- Pharmacists can work independently or in aboration with physicians and other healthcare providers for the benefit of patient care.
- The pharmacists position themselves as a final checkpoint before the medications are handed over to patients.
- The pharmacy is narrated as society's last line of defense against medication errors.
- The pharmacists, therefore, consider their profession unique in the sense that there is zero tolerance for making mistakes.
- Most importantly, the pharmacists position themselves as filling gaps in the communication between the patient and the GP.



الصيدلي داعم رئيسي لصحة المجتمع

Pharmacist is a major supporter of community health

- Community Pharmacy are easily accessible without previous appointments.
- Community pharmacies are situated in high street locations, in neighbourhood centres, in supermarkets and in the heart of the most deprived communities.
- Many are open long hours when other health care professionals are unavailable.
- Community pharmacies are providing a convenient and less formal environment for those who cannot easily access or do not choose to access other kinds of health service.
- Most pharmacies now have a private consultation area specifically for confidential or sensitive discussions.



"It is not the strongest species that survive, nor the most intelligent, but the ones most responsive to change" Charles Darwin

To The Faculty of Pharmacy at LIMU



