

# Putting theory into practice

*Researchers agree that pharmacy has reached a turning point—though it's up to individual pharmacists to reach the destination*

by Sonya Felix



Some of Canada's top pharmacy researchers are optimistic about what the future holds for community pharmacists.

While all agree that community pharmacists are currently struggling with issues related to the drug policy reforms and the rising demand for pharmacy services, "greener pastures are coming," says Zubin Austin, associate professor, Leslie Dan Faculty of Pharmacy at the University of Toronto. "We are on the verge of something new and exciting that will create not only many new job opportunities but also provide better remuneration."

The biggest opportunity lies in pharmacists' ability to help people better manage their medications, he says. "Over time, patients and other healthcare providers will feel confident in pharmacists' ability to do that."

Community pharmacists are well positioned to take a more prominent role in improving medication safety and adherence, agrees Neil MacKinnon, former associate director for research and professor at Dalhousie University's College of Pharmacy (now a professor at the University of Arizona). "In the past there has been a major gap between what pharmacists are trained to do, what they should do and what many are doing in actual practice," MacKinnon says. "But

there are encouraging developments in recent years that are helping to eliminate that gap. It used to be that there were big BUT statements for why pharmacists couldn't do more: no evidence, no authority and no pay. Now we are seeing these old excuses falling by the wayside."

Pharmacists' integration into primary care is a major area of research for Lisa Dolovich, research director and associate professor, Department of Family Medicine, McMaster University. Based on her research, the ideal role for Canadian pharmacists is to work collaboratively as the drug therapy expert on a team of healthcare providers. Several practice models can accommodate this, including weekly consults at the physician's office and physician referrals to community pharmacies.

"As medicine becomes increasingly complex and our aging population uses more drugs, pharmacists will hopefully be seen more and more as the member of the healthcare team that takes responsibility for making sure patients get the best outcomes from their drugs," Dolovich explains. "It may feel challenging at times but change can also bring new professional and financial opportunities that will allow our profession to flourish."

Pharmacy schools across Canada are revamping curricula to put more focus on clinical skills, including collaborative learn-

ing with multiple healthcare faculties. Some also now offer, or will in the near future, entry level PharmD programs. As students graduate with the skill sets associated with a PharmD, employers will expand pharmacists' clinical roles, says Henry Mann, dean, Leslie Dan Faculty of Pharmacy at the University of Toronto. "This happens most quickly in areas where there is an immediate need for interface between professions, so the hospitals are most likely to see the increase first. This is followed most often by clinics, but if the reimbursement model allows a primary care role for pharmacists in the community... then we should see dramatic changes here."

After many years studying the impact of pharmacists' interventions, Ross Tsuyuki, PharmD and professor of medicine at the University of Alberta, has gathered more than enough evidence showing improved patient outcomes. The challenge has always been continuing the work once the pilot project is done. With growing support from educators and pharmacy associations, as well as new remuneration models, the tide finally appears to be turning. Ultimately, however, success is up to the individual pharmacist. "Pharmacists will need to decide if they want to cling to old practices such as dispensing, or embrace the paradigm of taking responsibility for patient care," says Tsuyuki. ■

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