

# A strong dose of reality

Mike Smith puts the world to rights...

Having attended the European Pharmacists Forum (EPF) in Paris this summer, it is clear that many pharmacists across mainland Europe are suffering similar problems to those we experience in the UK. And I have to say, in some countries, this is to a far greater extent.

The EPF was set up in 1999 by Omella Barra of Alliance Boots to bring together influential independent community pharmacists from across our trading countries to discuss matters of mutual interest and concern. It is also a good platform to identify areas of best practice that may be adopted in other countries.

We all know that things are tough in the UK, but country reports from delegates indicate that many of our colleagues are in far more difficult situations. The desire to drive down margins and reduce drug costs is universal, because we are living longer thanks to more sophisticated medical interventions and treatments.

The pressure for de-regulation and cost reduction is irreversible and this has led to widespread fears of closures and bankruptcies. In countries such as France and Spain, where there is a surfeit of pharmacies, there are clear indications that numbers will be significantly reduced.

The fact is that those in positions of power, whether they be the state or insurance companies, are quite determined to force down costs, regardless of protests from the pharmacy sector.

Pharmacy offers much to the community it serves, not only the safe and cost-effective delivery of medicines, but also the promotion of public health.

The latter, of course, contributes to the increase in quality of life and life expectancy. However, this is a long-term gain and not the quick win that our paymasters are looking for in times of austerity.

So what about the UK? I cannot comprehend the lack of progress in resolving the burning issues facing our profession. I fully support the position of Pharmacy Voice and the Independent Pharmacy Federation (IPF) – these problems must be addressed now.

The delays to the final decision on scrapping the 100-hour exemption went on too long, leading to a lot of unnecessary applications. This will take a long time to work itself out of the system, even now that the decision has been announced.

Pharmacy needs some stability in the sector to enable us to make the necessary investment to further develop the invaluable services we offer to our patients. The failure to address underpayments by the NHS is inexcusable in these times of sophisticated IT. I also receive many calls (as do our

customer service teams) about drug shortages and I fully accept that this situation cannot continue. I have investigated this at some length and what I am staggered at is the level of export trade carried out by some pharmacists. I know it is legal, but it is these individuals who cause the everyday problems that we all experience.

Pharmaceutical companies tell me that they supply 120-140 per cent of UK market requirements, so it is clear that the blame cannot be laid at their door. Wholesalers have developed extensive new solutions that sit outside the core business to manage quotas and I know and respect the team at Alliance Healthcare who have done much in this area. I can also report that supplies have improved.

On a more positive note, I have to commend the wholesalers who, working with the British Association of Pharmaceutical Wholesalers, made arrangements to ensure continuity of supplies during the London Olympic Games. This memorable event was to inevitably involve some traffic problems. Wholesalers receive much criticism, but they need a real pat on the back for the planning, which was many months in its genesis. Their commitment to supply vital medical supplies can never be doubted.

Finally I echo (again) the words of Earl Howe, to network and engage with opinion formers now – these contacts will be invaluable in the new age of commissioning.

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