Editorial: The promise of Basel

Immense risks are associated with the use of medicines in hospitals. Some of these risks are easily understandable, such as harm to a patient caused by a medication error. Others are more subtle, such as prolonged treatment and added expense related to use of a less-than-optimum medicine regimen. The well-known methods of minimizing these risks are best put into effect under the guidance of an expert, the hospital pharmacist.

The above paragraph encapsulates a primary message of the recent Global Conference on the Future of Hospital Pharmacy, the proceedings of which follow in this publication. Conducted in Basel, Switzerland, under the auspices of the Hospital Pharmacy Section of the International Pharmaceutical Federation, the conference was designed to build a shared vision among hospital pharmacy leaders around the world about the preferred future of hospital pharmacy practice.

As the science of therapeutics has advanced, the complexity, risk, and expense of the medicines used in hospitals have escalated, making the knowledge of pharmacists far more valuable to hospitals and hospitalized patients than ever before. However, from a global perspective, “hospital pharmacy” is a rather amorphous concept.

No single philosophy or tradition has guided the development of hospital pharmacy internationally. A few examples illustrate this point: Hospital pharmacists in some countries are highly advanced pharmaceutical scientists; in other countries, they are essentially supply clerks. Some countries have many hospitals but do not have pharmacists in them because pharmacists are educated primarily for roles in the pharmaceutical industry. Pharmacists in low-income countries are generally so scarce that they must concentrate on ensuring the integrity of the country’s medicine supply; they do not practice in hospitals. The results of a global survey of hospital pharmacy, included in the Global Conference proceedings, document this diversity in detail.

In this age of globalization, it makes sense to strive for a measure of agreement, across borders, about the essential characteristics of hospital pharmacy practice. Such consensus will influence national and international health planners who are inundated with complex issues, including the control of devastating infectious diseases, limited financial and human resources, and the rising demand for higher quality health care. The morbidity and mortality associated with the inappropriate use of medicines in hospitals merits coordinated attention, too.

A sense of the boldness of the vision for hospital pharmacy that flowed from the Global Conference is gained by looking at just a few points of strong consensus:

- The overarching goal of hospital pharmacists is to optimize patient outcomes through the judicious, safe, efficacious, appropriate, and cost-effective use of medicines.
- All prescriptions should be reviewed, interpreted, and validated by a hospital pharmacist before medicine is dispensed and administered.
- The “five rights” (right patient, right medicine, right dose, right route, and right time) should be fulfilled in all medicine-related activities in the hospital.

From the vantage point of hospital pharmacy as it exists today, the Global Conference’s vision is compelling, not because it is near at hand or will be easy to achieve, but because it is the right vision from the patient’s perspective. Achieving the vision will require time, hard work, and astute leadership.

Leaders of hospital pharmacy in every country should study the conference proceedings and begin outlining how to transform their practice into a clinical service that improves the health of patients who are treated with medicines. These leaders may want to conduct consensus-building exercises in their own countries using the Global Conference as a model. They will need to reflect on the typical steps in the evolution of hospital pharmacy to ensure a proper foundation for the ultimate advancements they envision. They will need to engage other stakeholders in the planning process, including physicians and nurses, hospital directors, pharmacy educators, and government health authorities.

If enough hospital pharmacists around the world have a similar vision about their preferred future, and if enough of them have the passion and persistence to work toward that vision, their dreams will be fulfilled. Patient care in hospitals will improve significantly because hospital pharmacists are there. This is the promise of Basel.

Lee C. Vermeulen, M.S., FCCP, Director, Center for Drug Policy University of Wisconsin (UW) Hospital and Clinics Clinical Associate Professor, School of Pharmacy UW—Madison

Arnold G. Vulto, Pharm.D., Ph.D., Director of Research and Education, and Chair of Hospital Pharmacy and Therapeutics Medical Center Pharmacy Erasmus University Rotterdam, The Netherlands

William A. Zellmer, B.S.Pharm., M.P.H., Writer-in-Residence American Society of Health-System Pharmacists 7272 Wisconsin Avenue Bethesda, MD 20814 wzellmer@ashp.org

The authors have declared no potential conflicts of interest.

DOI 10.2146/ajhp080690

Copyright © 2009, American Society of Health-System Pharmacists, Inc., and International Pharmaceutical Federation. All rights reserved. 1079-2082/09/0301-0087$06.00.