

# The Society

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## Society's Bristol branch provides resuscitation training for members

The Bristol branch of the Royal Pharmaceutical Society has just finished putting 48 of its members through a refresher course on cardiopulmonary resuscitation. Using money from its public relations grant, the branch was able to put four groups of 12 pharmacists through a two-hour course designed to give them confidence to deal

with an unconscious patient in their pharmacy or other place of work.

Branch chairman Jonathan Campbell said: "We all know that if a member of the public feels unwell, they head straight for their nearest pharmacy. Now a good number of pharmacists in Bristol feel better able to deal with an emergency life-saving situation."

## Inspectors' presentations: change of date for session in Portsmouth

Preregistration trainees and tutors in the south of England are asked to note a change of date for the presentation for pre-registration trainees to be given in Portsmouth by the Royal Pharmaceutical Society's inspector for the area, Tim Snewin. The session will take place on Thursday 27 February, and not on the January date given in the list of presentations sent out with a recent preregistration bulletin (P7, 14 December 2002, p869). The venue and starting time are unchanged.

The Society's Professional Standards

Directorate says that details have still not been finalised for the presentations in South Wales (Cardiff and Swansea), where a new inspector has only recently been appointed, and in Blackburn, where the local inspector is still awaiting confirmation of a room booking for early April.

As soon as further details are available, a revised version of the list of presentations will be made available for downloading from the preregistration training pages within the education section of the Society's website ([www.rpsgb.org.uk/education](http://www.rpsgb.org.uk/education)).

## Society hosts European conference on PAT

The Royal Pharmaceutical Society is to host an international conference for pharmaceutical scientists on the application of process analytical technology (PAT).

The three-day conference, presented jointly by the Society and the American Association of Pharmaceutical Scientists takes place at the Society's headquarters from March 24 to 26. It will examine the application of PAT in achieving new standards of manufacturing excellence and regulatory compliance.

The conference, entitled "The key for achieving new standards of manufacturing excellence and regulatory compliance: process analytical technology", is aimed at senior managers and pharmaceutical scientists concerned with all aspects of the production of pharmaceuticals and senior staff from the regulatory agencies.

The meeting is the eighth Arden House European Conference for pharmaceutical scientists. It mirrors an AAPS conference being held in the same week at Columbia

University's Arden House conference centre in New York State's Ramapo Mountains, where the AAPS has held a pharmaceutical technologies conference annually since 1968.

The registration fee, which includes lunches, refreshments, course documentation and VAT, is £1081 for members of the Society or the AAPS and £1,151.50 for non-members. The closing date for applications is 21 February.

Registration forms can be obtained from Dr J. A. Clements, Room 304, Royal Pharmaceutical Society, 1 Lambeth High Street, London, SE1 7JN (tel 020 7572 2261; fax 020 7572

### LIBRARY ADDITIONS

*The following are among recent additions to the Royal Pharmaceutical Society's library in London. Books available for loan can be borrowed by members and by preregistration trainees and pharmacy students who have registered with the library. The loan period is 28 days, and a loan may be renewed unless the item is required by another user.*

#### BOOKS AVAILABLE FOR LOAN

##### Respiratory disease

Asthma. Slavin RG, Reisman RE. Philadelphia: American College of Physicians; 2002.

Comprehensive management of chronic obstructive pulmonary disease. Bourbeau J, Nault D, Borycki E. Hamilton, Ontario: Decker; 2002.

Histamine and H1-antihistamines in allergic disease. Simons FER. New York: Marcel Dekker; 2002.

##### Mental health

Pharmacotherapy for child and adolescent psychiatric disorders. 2nd ed. Rosenberg DR, Davanzo PA, Gershon S. London: Marcel Dekker; 2002.

The creation of psychopharmacology. Healy D. Cambridge (Massachusetts): Harvard University Press; 2002.

Instant psychopharmacology. 2nd ed. Diamond RJ. New York: W. W. Norton; 2002.

Use of drugs in psychiatry: the evidence from psychopharmacology. 5th ed. Cookson B, Taylor D, Katona C. London: Gaskell; 2002.

Fundamentals of clinical psychopharmacology. Anderson IM, Reid IC. London: Martin Dunitz; 2002.

##### Infectious disease

Antiviral drugs. Driscoll JS. Aldershot: Ashgate Publishing; 2002.

Clinical virology. 2nd ed. Richman DD, Whitley RJ, Hayden FG. Washington DC: American Society for Microbiology; 2002.

Cold wars: the fight against the common cold. Tyrrell D, Fielder M. Oxford: Oxford University Press; 2002.

Hospital acquired infection: causes and control. Filetoth Z. London: Whurr; 2003.

Infection management for geriatrics in long-term care facilities. Yoshikawa TT, Ouslander JG. New York: Marcel Dekker; 2002.

Influenza in practice. Jennings R, Read RC. London: Royal Society of Medicine; 2002.

## DEATHS

**Aarons** Recently, Benjamin Lionel Aarons, MRPharmS, of 5 Telford Avenue, London SW2 4XJ. Mr Aarons registered in 1935.

**Atkinson** On 3 December 2002, John Edmund Atkinson, of 63 Angusfield Avenue, Aberdeen AB2 6AT. Mr Atkinson registered in 1969 and retired from the register in 1978 (see Tribute, below).

**Cross** On 18 November 2002, Kenneth George Cross, of 2 Furze Way, Walsall WS5 3DG. Mr Cross registered in 1939 and retired from the register in 1992.

**Hunterman** On 17 November 2002, Israel Hunterman, MRPharmS, of 224 Drummond Road, Skegness, Lincolnshire PE25 3DA. Mr Hunterman registered in 1938.

**Maddock** On 26 October 2002, David Maddock, MRPharmS, of 16 High Matlock Road, Stannington, Sheffield S6 6AS. Mr Maddock registered in 1959 (see Tribute, Column 3).

**Mellor** On 14 November 2002, Philip Alan Mellor, MRPharmS, of 9 Sparrow Court, Lee-on-the-Solent, Hampshire PO13 8LL. Mr Mellor registered in 1980 (see Tribute, Column 3).

**Robertshaw** On 11 November 2002, Benjamin Arthur Robertshaw, MRPharmS, of Flat 17, The Highlands, 118 Edge Lane, Stretford, Manchester M32 8PX. Mr Robertshaw registered in 1937.

## TRIBUTES

**Atkinson** In a tribute to the late John Edmund Atkinson (see above), Professor HOWARD McNULTY writes: I would like to record the significant contribution to pharmacy made by Dr Ed Atkinson, who died in December at the young age of 62.

Ed will be known to many pharmacists. He trained at Sunderland School of Pharmacy before obtaining his PhD at Aberdeen University after his tutor moved there mid-study. He then worked in Queen's University Belfast before joining Robert Gordon's School of Pharmacy, where he taught biochemistry for some 30 years until retiring in 1995.

He was a member of the Institute of Biochemistry and joined the Royal Pharmaceutical Society through the then open lecturing route. Although, to my knowledge, he never worked in a pharmacy, he read *The Journal* avidly to keep in touch with changes in practice.

He was a man who led by example, set high standards and talked common sense, thereby earning respect from his colleagues and students while retaining a tremendous sense of humour and fun. Geordie warmth and friendship was shown to new staff (like myself and my family) and students alike, such that many remained friends (like us) 30 years on. His enthusiasm and support were a

driving force in much that the school and students did, and he established the first PhD studentship in the pharmacy school in 1974.

His diverse talents included rebuilding a derelict cottage, being a cub leader for 10 years and most recently, before his illness made him too weak, building a boat with his son Malcolm, which Malcolm and a friend used to row across the Atlantic last January. Ed bore his recent illness with humour, great courage and fortitude and retained his dignity to the end. He is sadly missed and survived by a proud family: his wife Joan and children David, Malcolm and Kathryn, to whom we send our deepest sympathy.

Donations made in his memory have now topped the £1,000 mark and can still be made to the Scottish Motor Neurone Disease Association, 76 Firhill Road, Glasgow, G20 7BA, or anonymously by the web ([www.scotnmnd.org.uk](http://www.scotnmnd.org.uk)).

**Maddock** In a tribute to the late David Maddock (see Column 2), SUSAN HAMILTON writes: David Maddock was a true community pharmacist, who for many years had cared for, listened to, and visited anybody who appeared to need special attention. He was ahead of the current trend to offer a collection and delivery service and his willingness to help was inexhaustible.

David practised his pharmacy in accordance with his Christian faith in a quiet unassuming way. This was evident from the 300 people who were present at his funeral from all facets of his life.

His death was sudden and unexpected. It leaves shock waves that will take a long time to fade away. Our sympathy goes to his widow Dorothy and daughter Celia.

**Mellor** In a tribute to the late Philip Alan Mellor (see Column 2), BILL TREMLETT writes: Philip Mellor trained at the Portsmouth School of Pharmacy and entered the pharmaceutical register in 1980. He joined Boots The Chemists in Portsmouth for his preregistration training and remained with them as a manager until he joined Tremletts Chemists Portsmouth in 1990, where he was the managing pharmacist at its Kingston Road pharmacy in the city.

Phil died suddenly of pneumonia at his home in Lee-on-the-Solent. His cremation took place at Porchester Crematorium and was attended by his family and colleagues from Boots and Tremletts.

**Reece** In a tribute to the late Phillip Neil Reece (*PJ*, 21/28 December 2002, p893), HUGH GREER writes: I first came to know Phil Reece when he joined the pharmaceutical process development team of the Wellcome Foundation at Dartford in the early 1970s. He quickly established himself as an expert on all aspects of sterile product technology.

His approach to difficult technical problems was characterised by a thoroughness and creativity which inspired those who worked with him. At the same time, he had

an unassuming and affable demeanour which was particularly effective in gaining acceptance of his ideas.

Phil expanded his knowledge into the development of non-sterile dosage forms. As well as leading a non-solids development team at Dartford, he joined an international team who visited Wellcome's overseas manufacturing sites to ensure that the highest standards were achieved worldwide. Auditors are not generally popular but Phil was so helpful in guiding the way forward with the introduction of new technologies and procedures that he was soon welcomed with open arms.

In all, Phil visited 44 countries, and they represent the huge contribution that Phil made to influencing the quality of medicines that millions of people have benefited from around the world. By now there were few people in the world who knew more about the development and manufacture of sterile medicines.

Although Phil was primarily a "steriles" man and I was supposed to be the tablet expert, on more than one occasion abroad I was referred to Phil to solve tableting problems — a measure of the confidence people had in him.

After the merger of Wellcome with Glaxo, Phil rose to head the pharmaceutical development groups at both Dartford and Ware. With the impending shutdown of pharmaceutical development activities at Dartford, Phil moved to Ware to lead a late-stage development group.

More recently, Phil spent a year in Verona where he ran the pharmaceutical development activities there, including analytical development. Once again, his expertise was greatly appreciated as it complemented the work of his new Italian colleagues. His interpersonal skills were greatly praised in smoothing some difficult paths.

Returning to the United Kingdom, he headed new product delivery (an interface between development and manufacturing), managing projects for 12 to 18 months until the merger between GlaxoWellcome and SmithKlineBeecham. After this merger, Phil ran a new chemical entities group, taking molecules from the early stages of development right through to launch.

As a family man, a friend and a colleague there can be few who were as loyal as Phil. During the time I was associated with him in work, he always showed the utmost loyalty and support. Out of work, he was a witty companion and convivial company.

Phil's Christian faith underpinned all that he did in life. He drew strength from it and the gratitude he felt for the gift of Wendy, his wife, and his family, showed in his life. Phil believed that true faith was shown through service to others. This service was carried out quietly and even secretly. Many people experienced Phil's thoughtfulness and kindness, but few will know of his quiet and generous support of several children's charities.

He will be sorely missed by all who knew him. He leaves a wife, Wendy, two sons and their families.

## STATUTORY COMMITTEE

# Striking-off for £20k overpayment claims

A pharmacist who over a period of years made false claims for payment against dispensed prescriptions has been struck off the register by the Statutory Committee

At its meeting on 17 September 2002 the committee inquired into the case of Yui Pui Tsang, of 6 Oakwood Rise, Leeds. Information had been received that on 7 August 2001, at Wakefield magistrates' court, Mr Tsang had pleaded guilty to and been convicted of four counts of obtaining property by deception. Ten similar offences had been taken into consideration. He had received a sentence at Leeds crown court on 11 September 2001 of a community punishment order for 100 hours on each count, to run concurrently, and ordered to pay £167 costs.

There was also a complaint from the Council of the Royal Pharmaceutical Society that Mr Tsang had made false claims for payment against dispensed prescriptions.

Geoff Hudson, of Penningtons (solicitors) attended the hearing to present the facts of the case. Mr Tsang was present and was represented by Sara Morgan, of Brooke North (solicitors).

## POLICE INVESTIGATION

The committee heard that at the time of the offences Mr Tsang had been proprietor of a pharmacy business trading as Harehills Pharmacy at 399 Harehills Lane, Leeds, which he had acquired in September 1995. In August 2000 the Prescription Pricing Authority had become concerned about the disproportionate number of prescriptions

from the pharmacy carrying small pack endorsements. After investigation, an initial 14 instances were identified. The matter was put in the hands of the police and Mr Tsang was tried on the 14 specimen cases, whose total value was £51.05.

Inquiries also revealed that Mr Tsang's pharmacy, on the basis of his prescription endorsements, had dispensed significantly greater quantities of medicines than had been purchased.

As examples, between February 1998 and October 2000, 1,172 tubes of Diprobace cream 50g had been endorsed as having been dispensed when only 78 had been purchased, and prescriptions had been endorsed for the supply of 5,563 Gaviscon 100ml, although only 17 of that size had been ordered. On a prescription for 500ml Gaviscon, for example, where a single bottle of 500ml had been dispensed, the prescription would be endorsed as if five 100ml had been supplied. With other false endorsements made during that period it was estimated that overpayment of £13,431 had been made on seven named products.

The PPA had estimated the total value of overpayments for the period from October 1995 to October 2000 at not less than £20,000. Mr Tsang had repaid that amount.

Giving the committee's decision, the chairman (Lord Fraser of Carmyllie, QC) said that while the amount involved in the 14 offences on which Mr Tsang had been tried was the relatively small sum of £51.05, the Society's complaint against Mr Tsang indicated a significantly more serious set of false claims. It appears that Mr Tsang would

supply a large size pack against a prescription calling for the same quantity but would endorse the prescription as if the medication had been dispensed via smaller packs.

In all, said the chairman, it seemed that over the years something like £25,000 had been claimed. That appeared to be accepted, as Mr Tsang had subsequently paid back £20,000 to the PPA.

## BREACH OF TRUST

The chairman noted that the judge sentencing Mr Tsang had said: "People in positions of trust, particularly professional people, have to keep to that trust and when they stray from it the court views such matters as very serious indeed". That had been said in relation to the conviction, which was for £51.05. "We would echo his remarks," he said, "and would particularly emphasise them where the amount involved is just short of £25,000."

The judge had also indicated that he hoped that Mr Tsang would be dealt with in a way that permitted him ultimately to return to his profession, of which, "these matters apart", he had, according to the judge, been a fine example.

The chairman said that Mr Tsang was undoubtedly a good pharmacist, but such was the breach of trust in this case that the committee ordered his removal from the register. He added that no application for restoration would be considered in less than two years from the date of his striking off.

Mr Tsang had three months in which to appeal.

## Unusual circumstances lead to decision's postponement

The Statutory Committee has postponed its decision in the case of a pharmacist who improperly kept quantities of medicines, including Controlled Drugs, at his garage and house and failed to submit prescription forms to the pricing authority. The decision would be given in March, at the end of a two-year postponement of a decision in an earlier inquiry concerning the pharmacist's drink-related conviction.

At its meeting on 17 September 2002, the committee inquired into the case of Michael Robert Lawrie, of 3 Breton, Stony Stratford, Milton Keynes, Buckinghamshire. A complaint had been received from the Council of the Royal Pharmaceutical Society alleging that Mr Lawrie had been guilty of misconduct that might render him unfit to have his name on the register. It was alleged that Mr Lawrie had stored waste medicines at his home in contravention of the Special Waste Regulations 1996, that he had possessed temazepam at his home in contravention of the Misuse of Drugs Act 1971, that he had dispensed prescriptions that had not been signed by a doctor, and

that he had failed to submit National Health Service prescriptions in reasonable time, or at all, to the Prescription Pricing Authority for payment.

Geoff Hudson, of Penningtons (solicitors), presented the facts of the case to the committee.

Sam Flew, of Radcliffes le Brasseur (solicitors) appeared on behalf of Mr Lawrie, who was present at the inquiry.

## SUPERINTENDENT'S CONCERN

The committee heard that early in 2000, Mr Lawrie was pharmacist in charge of a company's pharmacy at Neath Hill Local Centre, Milton Keynes, which he had formerly managed on a franchise basis. The superintendent pharmacist became concerned about the low numbers of prescriptions submitted for pricing for a period when there had been a considerable amount of dispensing. Mr Lawrie explained that he had taken prescriptions home to sort out queries. In March of that year, Mr Lawrie's wife, who occasionally worked at the pharmacy, had given the

superintendent a bundle of about 3,000 prescriptions, and explained there were further ones which needed endorsement by prescribers. When those prescriptions had not been returned by 14 April the superintendent pharmacist decided to call the police.

Mr Lawrie's home was visited with a search warrant on 29 April 2000 and a substantial quantity of medicines was discovered in the house and the garage. There were also 434 prescription forms that had not been signed but had been dispensed. The medicines included diazepam solution and tablets and temazepam capsules and tablets. There were also five DOOP (destruction of old pharmaceuticals) containers, whose contents included Palfium tablets, in the garage.

The committee was reminded that Mr Lawrie had appeared before it on 13 March 2001, when a decision had been postponed until March 2003.

Giving the committee's decision, the chairman (Lord Fraser of Carmyllie, QC) said that the earlier hearing involving Mr Lawrie had related to a conviction for driving with excess alcohol in his blood and

dangerous driving. The committee had taken a lenient view of the matter and postponed its decision.

The present case resulted from what the police search of his home had revealed. Mr Lawrie had explained that the drugs found at his garage had been brought from the pharmacy where he worked so that he go through them and separate the packaging from the drugs, which could then be destroyed. That seemed to the committee a somewhat curious explanation.

The police had also found in his house three bottles of temazepam and some paracetamol tablets carrying dispensing labels for named patients and dating back to 1997. Mr Lawrie had said they were not intended for use by any resident in his house, said the chairman, but it seemed odd that they were the only drugs in the house.

The other part of the discovery by the police was that no fewer than 434 prescription forms were in the house. Some had yet to be submitted to the Prescription Pricing Authority and others had been returned by

the PPA with requests for clarification or endorsement by the prescriber. That was odd, the committee felt, because if the prescriptions had been submitted and payment made on them, Mr Lawrie would, at least in part, have been the beneficiary.

"It cannot be an appropriate course of action for medicines to be stored in the garage", said the chairman. Mr Lawrie had acknowledged that. He should not have had the temazepam tablets in the house for the protracted period they were there and he should have made sure the prescription forms had been submitted to the pricing authority or had been clarified when so requested.

If those matters had been before the committee at the same time as they had been considering the drink driving conviction, said the chairman, there was little doubt that they would have directed that Mr Lawrie's name should be removed from the register.

The drink driving offence and the matters before the present hearing appeared to

have been going on at the same time and it would have been more appropriate if they had been considered together. However, it was delay on the part of the Crown Prosecution Service (not the Society) that made it impossible for the two matters to be dealt with simultaneously.

In consequence, said Lord Fraser, the committee faced the problem that if Mr Lawrie had been removed from the register in March 2001, he would now have been about halfway through the period which had been indicated as appropriate before any application for restoration could be made. That caused an element of unfairness to Mr Lawrie.

In those unusual circumstances, said the chairman, the committee would postpone its decision until March 2003, the same date as that to which the March 2001 decision had been postponed. At that resumed hearing the committee would want to have reports and evidence that Mr Lawrie had been abstinent for that two-year period before coming to its decision.

## Restoration refused after second removal from register

The Statutory Committee has refused an application for restoration to the Register of Pharmaceutical Chemists from a pharmacist who was removed from the register two years ago for professional misconduct.

The application for restoration was made at the committee's meeting on 19 September 2002 by Michael John Wallace Haynes, who had had been removed from the register on 14 September 2000. Mr Haynes had sold 39,200 Valoid (cyclizine) tablets to one customer over a six-month period from the pharmacy he had run in St Helier, Jersey (*PJ*, 2 September 2000, p326).

Geoff Hudson, of Penningtons (solicitors) attended the meeting to present the facts of the case.

Mr Haynes was present at the meeting and was represented by David Reissner of Charles Russell (solicitors).

Giving the committee's decision, the chairman (Lord Fraser of Carmyllie, QC) said that the application had been considered carefully. Mr Haynes had previously been removed from the register in March 1988 and restored on 10 February 1998. Just over a year after his restoration he had embarked on the unethical course of conduct that had led to his second removal, with effect from 14 September 2000.

Mr Haynes was now 62 years old and living in Spain. The committee recognised the difficulty he must have had in securing references. However, of those he had presented, none was particularly fulsome and one was scarcely a reference at all.

It was accepted that the matter complained of on the second occasion on which he had appeared before the committee was different to the complaint against Mr Haynes on the first occasion. However, given the protracted period he had already been off the register and the limited period that had elapsed before he had begun the course of conduct that led to his second removal, the committee could not order his restoration.

## Pharmacist given an opportunity to correct deficiencies

In a case arising from a pharmacist's errors of judgement in dispensing, the Statutory Committee has given him a 12-month opportunity to correct deficiencies in his pharmacy practice before the committee gives its decision.

At its meeting on 16 September 2002, the committee inquired into the case of Shiraz H. Mitha, proprietor of a pharmacy at 8-9 Hermitage Road, Hitchin, Hertfordshire. A complaint had been received from the Council of the Royal Pharmaceutical Society alleging that Mr Mitha had supplied 535ml of sucralfate liquid without a prescription. It was also alleged that he had supplied Percutol 2 per cent ointment against a prescription for glyceryl trinitrate (GTN) 0.2 per cent ointment when he knew, or should have known, that the 2 per cent ointment was not suitable for treating the patient. Having substituted the stronger ointment, he had not counselled the patient on its use. Further allegations related to

breaches of the legislation applying to the supply of prescription only medicines on private prescriptions.

The facts of the case were presented to the committee by Fenella Morris, of counsel, instructed by Penningtons (solicitors).

Mr Mitha attended the meeting and was represented by Denis Keegan, of Turner & Debenhams (solicitors).

### REMAINDER OF BOTTLE SUPPLIED

The committee heard that on 10 November 2000 a customer had presented a veterinary surgeon's prescription for her cat at Mr Mitha's pharmacy. It called for 25ml of sucralfate 0.2g/ml suspension. Mr Mitha had advised the customer that he would obtain the medicine for the following day. When the customer returned to collect the medicine on the next morning she was charged £14.50. She pointed out that she had been told the cost would be significantly

lower and said she believed Mr Mitha had charged her for the whole bottle of 560ml. He agreed. The customer responded that, if that were the case she should be given the remainder of the bottle. Mr Mitha gave her the remaining 535ml but did not attach a dispensing label to the bottle. The entry in the private prescription register showed only that 25ml had been dispensed.

Then on 2 December 2000 a patient suffering from an anal fissure presented a consultant's prescription for GTN ointment 0.2 per cent to be applied twice daily. Mr Mitha did not have that strength in stock and asked the patient if 2 per cent ointment would be acceptable. The patient was not prepared to discuss dosage and suggested Mr Mitha should telephone her consultant surgeon. He went to telephone the hospital and returned to say that he had spoken to the consultant and that the 2 per cent strength "would be fine". In fact, he had not spoken directly to the consultant.

He gave the patient the Percutol ointment but did not advise her as to its use. When she reached home, she read the patient information leaflet in the box. This stated that the ointment should be applied to the chest, arm or thigh every three to four hours. However, that conflicted with the instructions given her by the prescriber. For treatment of anal fissure, Percutol diluted to 0.2 per cent ointment should be applied directly to the affected area. The patient had been confused, as the dispensing label stated it should be applied twice daily, but thought she should follow the information on the leaflet. This she had done for two weeks, during which she suffered severe side effects, and a personal injury claim resulted.

When the Society's inspector had visited the pharmacy following the receipt of complaints about those matters she had found additional causes for concern. A private prescription dispensed for eight 25mg Viagra tablets, dated 5 April 2001, was a photocopy. Another private prescription, for five 2.5mg Fentanyl patches, did not give a dose. And two undated private prescriptions calling for prescription only medicines had been dispensed even though they had both been written by a doctor who was not registered with the General Medical Council.

Giving the committee's decision, the chairman (Lord Fraser of Carmyllie, QC) said that Mr Mitha had admitted the errors and accepted the breaches of his responsibilities as a pharmacist. To have supplied the 535ml of sucralfate was clearly wrong. Pharmacists should know that they could not dispense a greater quantity than is called for in the prescription. Mr Mitha had accepted that it was an error of judgement on his part.

The second error was clearly serious. It was regrettable that the patient who had been supplied with 2 per cent Percutol ointment had applied it in accordance with the patient information leaflet and had suffered unpleasant side effects. Any query about what had been called for should have been followed through by Mr Mitha to the original prescriber. Had he done so, it would have been explained to him why 0.2 per cent was the appropriate strength. And if he had thoroughly checked that, he would have been able to offer the correct advice.

Taking those matters together with the deficiencies that had concerned the Society's inspector, the committee concluded that, cumulatively, they amounted to misconduct such as to render Mr Mitha unfit to be on the register.

However, the inspector had stated she intended to spend some time with Mr Mitha discussing the deficiencies she had found in his pharmacy and he had indicated that he was willing to accept advice from her.

So that the committee could be confident that all that was deficient in the pharmacy was suitably remedied, a decision in the case would be postponed for 12 months. If Mr Mitha was co-operative and there was evidence that the deficiencies had been made good, he could expect that the sanction against him would be restricted to a reprimand.

*Communications to the Royal Pharmaceutical Society should be addressed, except where otherwise stated, to the Secretary and Registrar; Royal Pharmaceutical Society, 1 Lambeth High Street, London SE1 7JN (tel 020 7735 9141; fax 020 7735 7629).*

#### Statutory Committee inquiries

The Statutory Committee will meet at the Royal Pharmaceutical Society of Great Britain, 1 Lambeth High Street, London SE1, at 10am on Monday 20 January, Tuesday 21 January, Wednesday 22 January and Thursday 23 January 2003 to hear the following inquiries and applications:

#### Monday 20 January

1. An inquiry into a complaint by the Council of the Society against a pharmacist which alleges that a dispensing error made by the pharmacist may, in the light of advice given by a Society inspector following an earlier similar error, amount to misconduct.

#### Tuesday 21 January

2. An inquiry into a pharmacist convicted of a number of offences resulting from failure to comply with Regulations made under the Misuse of Drugs Act 1971. The inquiry also includes a complaint by the Council of the Society against the pharmacist, which alleges that the pharmacist's failure to comply with the provisions of Regulation 19 of the Misuse of Drugs Regulations 1985 amounts to misconduct.
3. An inquiry into a pharmacist convicted of theft of a quantity of Dexedrine and Ritalin tablets.

#### Wednesday 22 January

4. A resumed inquiry (adjourned from Wednesday 18 September 2002) into a complaint by the Council of the Society against a pharmacist proprietor and his locum pharmacist which alleges that the sale without prescription of a quantity of co-proxamol tablets amounts to misconduct. The complaint against the pharmacist proprietor also includes allegations that the failure to account by means of valid prescriptions or emergency supplies for co-proxamol and Rohypnol supplied from the pharmacy and failure to ensure that all medicines possessed for the purpose of sale or supply are properly licensed, amounts to misconduct.
5. An inquiry into a complaint by the Council of the Society against a pharmacist which alleges that the theft of prescription-only medicines from a pharmacy while that pharmacist was employed at the pharmacy as a locum amounts to misconduct.

#### Thursday 23 January

6. An inquiry into a complaint by the Council of the Society against a pharmacist, which alleges that dispensing errors made by the pharmacist, amounts to misconduct.
7. An application for restoration from a person whose name was removed from the Register.
8. An application for restoration from a person whose name was removed from the Register.

M. B. PAWLUCZYK (Mrs)  
Secretary to the  
Statutory Committee

HEADQUARTERS MEETINGS

*The following meetings take place at the Royal Pharmaceutical Society's headquarters, London*

Monday 20 January  
Statutory Committee 10am  
Hospital Pharmacists Group Committee 10.30am

Tuesday 21 January  
Statutory Committee 10am  
Community Pharmacists Group 10.30am

Wednesday 22 January  
Statutory Committee 10am

Thursday 23 January  
Statutory Committee 10am

LOCAL MEETINGS

*Events listed below are meetings of branches or regions of the Royal Pharmaceutical Society. Details of all future meetings notified to The Journal appear in the Diary section of PJ Online (www.pjonline.com/noticeboard)*

Monday 20 January

**Bromley** "Diabetes update" by Dr Ibrahim (consultant diabetologist, Queen Mary's Hospital). Postgraduate Centre, Queen Mary's Hospital, Sidcup, Buffet 7pm, meeting 8pm.

**Hull** "Tuberculosis treatment" by Ms K. Cartlich. Castle Hill. 7.30 for 8pm.

**Manchester, Salford and Trafford** "Diabetes: what can we learn from the expert patient?" by Robert Hallworth (pharmacist and expert patient) and Jayne Wood (associate director for diagnostic and support services, Pennine Acute Trust). Postgraduate Medical Centre, Manchester Royal Infirmary. Buffet 7.30pm, meeting 8pm. Joint meeting with Manchester LPC and Salford & Trafford LPC.

**North Hampshire** "How to influence your member of Parliament" by Sandra Gidley (pharmacist and Lib Dem MP for Romsey) Ark Centre, North Hampshire Hospital, Aldermaston Road, Basingstoke. Buffet 7.30pm, meeting 8pm.

**Slough** "Clinical nutrition" by Dr Jackie Edington (senior clinical nutrition manager, Abbott Laboratories). John Lister Postgraduate Centre, Wexham Park Hospital, Slough. Buffet 7.15pm, meeting 8pm.

Tuesday 21 January

**Cheltenham and Gloucester** "Skin: dermatology guidelines" by Dr James Milne (consultant dermatologist, Cheltenham General Hospital). Cheltenham Postgraduate Centre. 7.15pm for 8.15pm.

**East Metropolitan** "Future research and development in children's medicine" by Dr Ian Wong (director and reader, centre for paediatric research, University of London). Churchill Room, Wanstead Public Library, London E11. Buffet 7.30, meeting 8pm.

**Great Yarmouth and Waveney** "Continuing professional development" by Dr

Robert Dewdney (head of education, Royal Pharmaceutical Society). Burrage Centre, James Paget Hospital, Gorleston, Norfolk. Buffet 7pm, meeting 7.30pm.

**Hertford** "Drug developments in neurology" by Dr Gibb. Postgraduate Centre, Lister Hospital, Stevenage. Hot buffet 7.30pm, meeting 8pm.

**Plymouth** "Cytochrome P450 enzymes" by David Temple. Postgraduate Medical Centre, Derriford Hospital, Plymouth. Buffet 7.15pm, meeting 8pm.

Wednesday 22 January

**Barnet** "Safety aspects of herbal medicinal products" by Dr Jo Barnes (lecturer, School of Pharmacy, University of London). Postgraduate Medical Centre, Barnet General Hospital. Food from 7.30pm, meeting 8pm.

**Bedfordshire** "Supervision and professional accountability" by Sally Greensmith (member of the Royal Pharmaceutical Society's Council. Star & Garter, Silsoe. Buffet 7.15pm, meeting 8pm.

**Leeds** Annual general meeting and "Nutritional support, dietetics and obesity" by Celia Firmin (dietetics manager, City of Leeds), Sue Lawrenson and Sarah Munford (dietitians, Leeds primary care trusts) and Sue Faulding (Prescribing Support Unit). Leeds Business Centre, Clarendon Road. 8pm.

**Reading** "Management of stroke" by Dr Peter Tun (staff grade physician) Abbott Laboratories, Maidenhead. Buffet 7.30pm, meeting 8pm.

**Worthing and West Sussex** "Obesity and weight management: a professional service". Worthing Postgraduate Medical Centre, Park Avenue, Worthing. Buffet 7.30pm, meeting 8pm.

Thursday 23 January

**Birmingham** "Diabetes" by Dr A. Burden (community consultant diabetologist). Birmingham Medical Institute, 36 Harbourne Road, Edgbaston, Birmingham. Buffet 7.15pm, meeting 8pm.

**Chelmsford** "Alcohol and drug misuse" by Lorraine Bush (Changes). Room 003, Sawyer's Building, Anglia Polytechnic University. 8pm.

**Halifax** "Diabetes in paediatrics" by Dr Yvette Oade (consultant paediatrician) and Nancy Harrison (paediatric diabetic nurse). Learning and Development Centre,

Replicas of three ceramic jars from the collections of the Museum of the Royal Pharmaceutical Society are available for purchase from the Society:

- 1 Leech jars — copies of a fine example of a 19th century glazed earthenware show jar for leeches, 15cm high, £50
- 1 Drug storage jars — replicas of a pot used for storing candied orange peel, bearing the inscription "C: CORT: AUR", an abbreviation of the Latin "Conditus Cortex Aurantiorum", £75
- 1 Syrup jars — copies of a jar bearing the inscription "S ROSAR. CU AG", an abbreviation of the Latin "Syrupus Rosaceus Solutivus cum Agarico" (solutive syrup of rose with agaric), £105

Photographs of the jars can be found on the museum section of the Society's website ([www.rpsgb.org.uk/museum](http://www.rpsgb.org.uk/museum)).

All the jars may be purchased from the library at the Society's London headquarters. Further information is available from the museum office (tel 020 7572 2210; e-mail: [museum@rpsgb.org.uk](mailto:museum@rpsgb.org.uk)).

The leech jars may also be purchased direct from the museum by mail order at £50 each plus £19 postage and packing for up to five jars. Orders should be sent with payment to: Museum of the Royal Pharmaceutical Society (Sales), 1 Lambeth High Street, London SE1 7JN. An order form can be downloaded from the Society's website. The other jars are not available by mail order.

Calderdale Royal Hospital. Buffet 7.30pm, meeting 8pm.

**South Cheshire** "The Pharmacists' Health Support Scheme". Fourways Inn, Oakmere. Refreshments 7.30pm, meeting 8pm.

Saturday 25 January

**Clwyd** Social function: "Musical dinner". Soughton Hall Hotel, Sychdyn, near Mold. 7 for 7.30pm.

Monday 27 January

**Clwyd** Annual general meeting. Llwyn Y Mawn Pub, Brynford. 7.30pm, followed by buffet and business meeting 8.15pm.

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