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SEEN BUT NOT HEARD

You can agree with some of the people some of the time, but you can never agree with all of the people all of the time. In the case of pharmacists, if you agree with anyone for just part of the time there is bound to be someone else who thinks you are beyond the pale, at the very best misguided and with few, if any, redeeming aspects to your character or your opinions.

Take the reaction to the Office of Fair Trading report published in the middle of last month. Although the "nos" are shouting louder and being heard more clearly, there are pharmacists who see there may be benefits to deregulation. The companies that you might expect to find in that camp are well represented — see p158 for the Asda view — but there are also individuals daring to express unpopular opinions, as some contributions to the letters section this week (pp149–52) testify.

When confronted with a controversial issue, pharmacists can be radical and conservative in equal measure, and that is what makes the letters pages in *The Journal* sometimes throb with righteous indignation. Another factor is that, unlike other health professions, individual members of the pharmacy profession are often in direct conflict with other members — particularly in the community sector. This is not always because they want it that way, but because it is the way that the provision of pharmacy services have developed. So, for example, there are locums pitted against owners and managers of multiples; independents at loggerheads with small multiples; small multiples resentful of the bigger boys; and, at the moment, nearly everyone against the supermarkets. And they can blame the Government, the Royal Pharmaceutical Society, the Pharmaceutical Services Negotiating Committee and the National Pharmaceutical Association for everything else — when they have caught their breath!

This is, of course, only part of the pharmacy picture. The other, bigger, part is the professional dedication that pharmacists show on a daily basis to the welfare of their patients and customers. Whatever the outcome of the OFT report, that will not go away. The outcome may mean that pharmacy is not practised as it is today. Inevitably, for some, this will be immeasurably bad; for others, a great deal better than they expect or even hope. But the most fundamental tenet of pharmacy practice will not be lost because it is people that make up the profession, not the way it is organised. Let us hope that the Government is able to recognise that and work out how a high quality professional service can best be maintained and delivered.