

**Editor and Editorial Director**  
OLIVIA TIMBS

**Personal Assistant to the Editor**  
LYN MCCULLOCH

**Deputy Editor**  
ANDREW HAYNES, *MRPharmS*  
(The Society Section)

**Managing Editor**  
GRAEME SMITH, *MRPharmS*  
(Letters, Broad Spectrum,  
Original Papers, Articles)

**Assistant Editor**  
MICHAEL THOMPSON, *MRPharmS*  
(Editor, *Pfj Online*)

**Senior Staff Editors**  
HARRIET ADCOCK, *MRPharmS*  
(Clinical News)  
JONATHAN BUISSON, *MRPharmS*  
(General News)

**Staff Editors**  
DAWN CONNELLY, *MRPharmS*  
(Contributions, Reviews)  
ZOE GROSS, *MRPharmS*  
(Notice-Board)  
LIN-NAM WANG, *MRPharmS*  
(Continuing Professional Development)

**Production Editor**  
CHRISTOPHER ICHA

**Website Controller**  
GOWAN CLEWS

**Administrative Assistant**  
PAULINE HESLOP  
(Copyright and Permissions)

**Editorial Advisory Board**  
ANGELA ALEXANDER, *FRPharmS*  
JUDY CANTRILL, *FRPharmS*  
ANTHONY COX, *MRPharmS*  
NOEL DIXON, *MRPharmS*  
NICK HALE, *MRPharmS*  
JOHN HALL, *FRPharmS*  
NORMAN LANNIGAN, *MRPharmS*  
CHRISTINA LOWE, *MRPharmS*  
BOB RIHAL, *MRPharmS*  
STEVE WICKS, *MRPharmS*

**Head of Business Development**  
PHILIPPA STAHELIN

**Office Administrator — Sales**  
JO COOK

**Classified and Systems Support — Sales**  
CLARE KNIGHTS

**Display Sales**  
STUART THOMAS

**Classified Sales**  
DORINDA LEWIS  
ZIA NAMOOYA

**Head of Publishing Services**  
JOHN WILSON

**Production Manager**  
JOANNE MARKS

**Production Assistants**  
HELEN BLOY  
ADAM JONES

**Director of Publications**  
CHARLES FRY

*The Pharmaceutical Journal*  
1 Lambeth High Street  
London SE1 7JN

**Telephone** *editorial*, 020 7572 2420  
*advertising*, 020 7735 9141  
**Fax** *editorial*, 020 7572 2504  
*advertising*, 020 7572 2505

**E-mail** *editorial*, editor@pharmj.org.uk  
*advertising*, advertdept@rpsgb.org.uk  
(see also "Notice-Board" page)

**Pfj Online** www.pfonline.com

## MONEY TALKS

Some original research conducted in the West Midlands and published in this week's *Journal* (p276) adds more evidence to the argument that there are financial benefits to be gained from pharmacists taking a more proactive role in questioning doctors' prescribing.

The study, which involved 26 community pharmacists serving 52 general practitioners in 17 practices across two primary care groups, identified potential annual savings of £17,000. The authors argue that, if this level could roughly be matched over the entire United Kingdom, there are potential savings of £12m to be made.

What is interesting is that the interventions made by the pharmacists were hardly radical or controversial and included recommending single higher dose formulations rather than two lower doses. Pharmacists also tried to rationalise decisions where two courses of unequal length were prescribed, to check that all items were required when repeat prescriptions were requested and to raise the level of generic substitution. None of this is rocket science.

Further and greater savings are likely to be made if pharmacists play a much larger role in prescribing — either in an advisory capacity or as supplementary prescribers.

The only note of caution for pharmacists to consider is the pressure they may come under after they have made all the obvious savings they can. In the beginning, forward-looking doctors and primary care organisation wallahs will be delighted to see the drug budget curbed, but as the years go by pharmacists will have to be ever more creative in case the finance people decide that these savings should be year-on-year.

Pharmacists will be able to protect themselves by continuing to help control the budget by other means, by improving the quality of prescribing, by increasing compliance through concordance and by showing that patients can be as effectively and more cheaply treated in the community than in hospital.

## NO SMOKING DAY IS NOT A YAWN

Pharmacists' role in helping people to stop smoking is one of the successes of which the profession should continue to be proud. With No Smoking Day approaching (12 March), pharmacists can again help those struggling to kick the habit.

If each of the 22,000 pharmacists in community practice targets five or six customers most likely to stop smoking and supports them fully in the difficult first few weeks, the number giving up could match the number of deaths each year from smoking-related causes.

*See News Feature, p262, and Special Feature, p273.*