

Never overlook a cough!

Ask most community pharmacists what is the most popular specialist service offered at pharmacies and smoking cessation is bound to be near the top. But even pharmacists who run successful schemes may be missing a trick — unless suggestions in this week's **Continuing professional development** centre section are followed (p521).

Smoking is a risk factor for a huge number of conditions and diseases and is often said to be responsible for over 100,000 deaths per annum in the UK. However, while concentrating on encouraging customers to stop smoking it is important not to overlook the role that pharmacists can play in directing them for further investigations if there are suspicions about their underlying health. This may be of critical importance to people with a cough.

Next month is Lung Cancer Awareness month. Lung cancer is more common in older, male, working class smokers than in other socioeconomic groups, which goes some way to explaining why the national media take less notice of it than, say, breast cancer, and also why research has been less well funded and has not led to reductions in mortality that are seen in other cancers. In 2002, nearly 34,000 people in the UK died from lung cancer and it kills many more women than breast cancer in many parts of the world, including the UK. If the disease is not caught in its early stages, treatment is little more than palliative.

Pharmacists, therefore, should not only be on the look-out for smokers who might wish to stop. They could also be more vigilant when they come across customers who complain about a cough. Smoker's cough is a bit of a misnomer, according to the CPD article. One of the slogans used by the UK Lung Cancer Coalition is "There is no such thing as a smoker's cough" — the reason for a cough and breathlessness should always be investigated and not dismissed as a side effect of smoking. The advice is clear for pharmacists and is neatly summarised in a series of questions at the end of the CPD article. If every pharmacist encourages just one person to have prompt investigations of a cough, those lung cancer figures might start to look less grim.

Food for thought from New Zealand

Two years ago we wrote about the splitting of the Pharmaceutical Society of New Zealand into separate regulatory and professional organisations. This week, we found out how successful the split has been (p509). There is a clear lesson for pharmacists in Britain who are considering the implications of the Foster review into non-medical regulation. It seems that New Zealand's professional organisation has been successful because membership is more or less obligatory. The new professional body is the only organisation offering the equivalent of continuing professional development, a registration requirement for practising pharmacists. Food for thought for everyone.

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