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**Royal  
Pharmaceutical  
Society  
of Great Britain**

## Society continues work to lobby Government on pharmacy issues



From left: Jeremy Holmes, Dawn Primarolo, MP, Hemant Patel, Howard Stoate, chairman of the All-Party Parliamentary Group

A visit to a pharmacy by the Minister of State for Public Health, Dawn Primarolo MP, is being arranged so that the Royal Pharmaceutical Society can demonstrate pharmacy's role in primary health care. Speaking after attending the most recent meeting of the All-Party Pharmacy Group in the House of Commons (*PJ*, 1 December, p611), President of the Society, Hemant Patel, said: "These events are important because we give first hand experience of issues that affect pharmacy to those who are deciding its future."

The APPG meeting, held last month, was the first in a series of engagements expected with Ms Primarolo to discuss issues surrounding the future of the profession. Mr Patel commented: "We have pressed the minister on a number of points made by our members, some of which she has clearly accepted." He said the Society would continue to request a review of practice-based commissioning and for assurance that changes in the distribution process for the global sum will not result in more delay in essential payments to pharmacists. Another issue raised

### This week

- **Health minister to meet Council**  
Opportunities taken by the Society to give its views on pharmacy and to press for action (p659).
- **Premises fees**  
The Society responds to Government's decision (p660).
- **Pseudoephedrine**  
A law and ethics bulletin gives an update on the sale and supply of pseudoephedrine and ephedrine containing medicines (p662).
- **Midazolam**  
A law and ethics bulletin details the change in status of midazolam to a Schedule 3 Controlled Drug (p662).

with the minister at the meeting was continuing professional development.

"We have a commitment from the minister to continue [the] dialogue with us on the issues raised and we will expect the Government to take our views into account as they introduce the new legislation required to enable our profession to take a greater role in primary care provision," Mr Patel added.

Ms Primarolo has also accepted an invitation to speak at the Society's Council dinner this month, to be held in central London.

## President urges even more members to take part in the Pharmacy 2020 consultation

Over 800 pharmacists, technicians and pre-registration trainees have engaged in the Royal Pharmaceutical Society's Pharmacy 2020 consultation and more than 50 Pharmacy 2020 meetings have been organised by 21 pharmacy champions across Great Britain.

Through Pharmacy 2020, the Society aims to determine where pharmacy will be in 10 to 15 years' time and the route it will take to get there. The consultation, which closes on 28 December, is designed to gauge members' opinions on the future of the profession.

The President of the Society, Hemant Patel, this week expressed his gratitude to those who have taken part in the consultation but he added: "Pharmacy 2020 offers us all a unique opportunity to help influence our future. Its success relies on the participation and

commitment of the membership. Please, if you have not already done so, complete the consultation document: together, we can make a real difference to the future of the profession."

External stakeholders, including pharmacy, non-pharmacy and public and patient groups, are also being asked for their input. Letters from the President have been sent, inviting them to contribute to the consultation and to help build a vision for pharmacy in the future.

Members can respond to the Pharmacy 2020 consultation on the Society's website, ([www.rpsgb.org](http://www.rpsgb.org)), or by completing the Pharmacy 2020 document distributed with *The Pharmaceutical Journal* on 6 October.

For further information e-mail: 2020@rpsgb.org.

### Cards

Postcards and greeting cards bearing images from the Royal Pharmaceutical Society's museum collections are available for purchase. The images include 19th century caricatures, botanical bookplates, pages from trade catalogues, old pharmacy photographs, drug storage jars and dispensary tools.

Cards are available by mail order in four sets (including postage and packing): 24 postcards (all different) £9; eight A6-sized, blank greetings cards (two each of four designs) £8; six pharmacy interior postcards £3; six caricature postcards £3. Details and an order form can be downloaded from the museum section of the Society's website ([www.rpsgb.org/informationresources](http://www.rpsgb.org/informationresources)). Alternatively, orders can be placed by telephone (020 7572 2210) or e-mail ([museum@rpsgb.org](mailto:museum@rpsgb.org)).

Individual cards may be purchased at the Society's Library at Lambeth. Postcards are 35p each and greetings cards with envelopes 80p.

## Chief executive visits Scottish hospital pharmacy

The Chief Executive and Registrar of the Royal Pharmaceutical Society, Jeremy Holmes, visited the pharmacy department at the Royal Infirmary of Edinburgh last week, where he met staff, including Scott Garden, pharmacy site lead, and Pat Murray, director of pharmacy at NHS Lothian.

Mr Holmes learnt about the pharmacy's one-stop dispensing system. "Using the system, patients' medicines are available already labelled and ready for the patient when he or she is ready to go home thus considerably reducing waiting time and enabling beds to become available quicker than before," Mr Garden explained. Mr Holmes also visited the radiopharmacy department

and met principal pharmacist Alistair Millar, a recent recipient of the 2007 Guild of Healthcare Pharmacists Gold Medal for his "outstanding contribution to hospital pharmacy at a national level".

During the tour some time was spent discussing the different approaches to primary, secondary and tertiary care in Scotland compared with England and Wales. Mr Holmes also took the time to encourage individual pharmacists and technicians to respond to the independent inquiry looking into the principles, functions and structure of a future professional body for pharmacy.

Submissions to the inquiry can be made at [www.theclarkeinquiry.com](http://www.theclarkeinquiry.com)



Jeremy Holmes (second from left) with Scott Garden, Pat Murray and Alistair Millar, NHS Lothian

## Society disappointed by DoH restriction of premises fee increase

The Royal Pharmaceutical Society expressed its disappointment following the decision announced by the Department of Health last week to raise premises retention fees by 3.8 per cent, rather than the 56 per cent increase proposed by the Society. This will result in an increased financial burden on Society members, who will be expected to meet the cost, it says.

The Society's Treasurer Andrew Gush said: "We are disappointed that once again the Minister has ignored our arguments and restricted the increase in the premises fees.

Unfortunately, the burden of regulation is likely to fall on individual pharmacists and in particular those who have to pay their own fees."

The full cost of recovering premises retention fees for 2008 is £243 per pharmacy but, following the DoH decision, the Society will only be recovering £162 per pharmacy, leaving a shortfall of £81, which will have to be met through membership fees. This equates to a burden of approximately £22 per member, the Society explains.

The Society has provided detailed analysis of figures relating to premises fees, to the DoH and has made several representations in order to secure the full costs of recovering the retention fee.

"We have been campaigning firmly in order to reduce the financial burden placed on the membership so this news is naturally frustrating. We will be writing to the DoH to demonstrate our feelings and will continue lobbying for more favourable decisions in the future," Mr Gush said.



Pharmacist Raj Aggarwal celebrates his OBE for services to the pharmaceutical industry at the Society headquarters in London

*Royal Pharmaceutical Society (and others)*

### Three-day residential course: The stability testing of pharmaceuticals and related products

- **Dates:** Monday 18– Wednesday 20 February 2008
- **Venue:** The Moller Centre, Cambridge
- **Content:** The course is designed for both experienced colleagues and those new to stability testing. It is based on a blend of current and informative presentations combined with interactive workshops; a format which allows discussion of real challenges encountered in everyday practice, and encourages participative problem-solving with course tutors. Workshop sessions will use practical examples to illustrate essential steps in the development of stability testing protocols. The social programme is also designed to maximise networking opportunities and informal discussion between delegates and the team of course experts.

"This is a thoroughly updated and comprehensive course, covering both traditional and biotech products and devices. The course is designed for a limited number of delegates in order to maximise access to expert presenters and enhance the learning environment. Participants have the opportunity to provide genuine working examples to discuss during the three days. This gives a unique opportunity for delegates to not only learn new problem-solving methods, but to also benefit from practical advice and experience which can be applied directly to their working environment," course leader and associate research fellow Kevin Ryan said.

- **Organisers:** The Royal Pharmaceutical Society of Great Britain in partnership with the Academy of Pharmaceutical Sciences.
- **Fees:** Fees are £1,690 for members of Royal Pharmaceutical Society or Academy of Pharmaceutical Sciences and £1,760 for non-members. The fee includes two nights accommodation, all meals and refreshments, course documentation and a CD-ROM.
- **Registration:** To register as a delegate visit [www.rpsgb.org](http://www.rpsgb.org)
- **Further information:** For more information contact Julie Churchill, Science Programme Manager, The Royal Pharmaceutical Society, 1 Lambeth High Street, London, SE1 7JN (tel 020 7572 2261; e-mail [science@rpsgb.org](mailto:science@rpsgb.org))

## Pharmacy information pointers

### Medicines requiring storage at low temperature in the pharmacy

The Royal Pharmaceutical Society's information pharmacists have updated their list of medicines requiring storage at low temperature in the pharmacy (*PJ*, 17 Jun 2006, p734).

A refrigerator used to store such products should be in the range 2–8C and must contain a maximum/minimum thermometer.

Further information can be found in *The Pharmaceutical Codex* (12th edition, 1994). It should be noted that the storage requirement for certain products

may change after reconstitution or dilution, or after supply to a patient. Pharmacists should always check the summary of product characteristics (available online at [emc.medicines.org.uk](http://emc.medicines.org.uk)) or the product labelling and, if in doubt, contact the manufacturer.

Where a temperature range other than 2–8C is specified, this is indicated. The list includes some products that require storage below 15C.

Since most pharmacies do not have a cool room, a refrigerator would probably

provide appropriate storage for such products.

The Society's inspectorate has produced resource tools on "Fridge temperature monitoring" and "How to use your thermometer". These are available on the Society's website ([www.rpsgb.org](http://www.rpsgb.org)). Further advice is available from the information pharmacists by telephone (020 7572 2302) or email ([infopharm@rpsgb.org](mailto:infopharm@rpsgb.org)).

This list will be updated on *PJ Online* ([www.pjonline.com](http://www.pjonline.com)).

Abelcet infusion	Coaguheck control solution vials	Genotropin injection and MiniQuick injection	Lantus injection	Ocreotide injection (Hospira)
Actinac lotion	Coaguheck S test strips	Gonal-F injection	Lederfolin injection	OncoTICE bladder instillation
Actrapid injections	Copaxone injection	Gonapeptyl Depot injection	Leukeran tablets	Oncovin injection
ACWY Vax vaccine	Cubicin infusion	GlucaGen Hypokit	Leustat injection	One-Alpha drops
Agrippal injection	Curosurf vials	Havrix Monodose vaccine	Levemir insulin preparations	One-Alpha injection [store below 15C]
Aldurazyme concentrate for intravenous infusion	Dacarbazine injection (Hospira)	Havrix Junior Monodose vaccine	Lucentis injection	Orencia infusion
Alkeran tablets	Daktacort cream	HBvaxPRO injection	MabCampath infusion	Ovitrelle injection
Ametop gel	DDAVP injection [store at 4–8C]	Haemate P injection	Mabthera concentrate for intravenous infusion	Pabal injection
Anectine injection	DDAVP intranasal solution	Helixate NexGen injection	Mastafu injection	Pabrinex intramuscular high potency injection
Apidra injection	D-GAM injection	Hemabate ampoules	Meningitec injection	Pancorex granules [store below 15C]
Apivus capsules	Depocyte injection	Hemabate vials [store at 0–6C]	Menitorix injection	Pancorex V capsules, tablets and powder [store below 15C]
Aranesp and Aranesp SureClick injections	Digibind injection	Heminevrin syrup	Menjugate injection	Pancuronium injection (Hospira)
Atimos Modulite inhaler [for a maximum of 15 months]	Doxorubin (0.2%) injection	Hepatitis B immunoglobulin (BPL)	Methotrexate injection 25mg/ml injection [1g/40ml only] (Hospira)	Pediacef injection
Ativan injection	Doxorubicin solution for injection (Pharmacia)	Hepatitis A vaccine	Metvix cream (Galderma)	Pegasys injection
Atracurium Besilate injection (Hospira)	DTIC-Dome Injection	Hepatitis B vaccine	Miacalcic injection and nasal spray	Pentagastrin injection (Cambridge)
Avastin concentrate for intravenous infusion	Duac Once Daily Gel	Herceptin injection	Minims Chloramphenicol eye drops	Pharmalgen bee venom
Avaxim injection	Dukoral vaccine	Hiberix injection	Minims Proxymetacaine eye drops	Pharmalgen wasp venom
Avonex injection [prefilled syringe only]	Duodopa intestinal gel	Humalog insulin preparations	Minims Proxymetacaine and Fluorescein eye drops	Pharmorubicin solution for injection
Begrivac influenza vaccine	Dynepo injection	Humira injection	Mircera injection	Poliomyelitis vaccine live oral (GlaxoSmithKline)
BeneFIX injection	Dysport injection	Humulin insulin preparations	Mixtard insulin preparations	Poliomyelitis vaccine inactivated (Sanofi Pasteur MSD)
Beromun infusion	Elaprase infusion	Hypurin insulin preparations	MMR II vaccine	Pork Actrapid injection
BiCNU injection	Eldisine injection	Immucyst bladder instillation powder	Monoclade-P infusion	Pork Insulatard injection
Bleo-Kyowa injection	Emtriva oral solution	Immukin injection	Mononine human plasma coagulation factor IX	Pork Mixtard 30 injection
Boots Pharmacy Antibiotic eye drops	Enbrel injection	Imuvac influenza vaccine	MUSE urethral application	Pneumovax II injection
Botox injection (Allergan) [or in a freezer at or below –5C]	Engerix B prefilled syringe/vial	Increlex injection	Mydrilate eye drops	Pregnyl injection
Brochlor eye drops	Enzira influenza vaccine	Influenza vaccine inactivated (split virion) BP (Sanofi Pasteur MDS)	Myocet injection	Prevenar injection
Busilvex infusion	Epaxal injection	Influnrix IPV and Influnrix IPV+Hib injections	Nardil tablets	Prialt infusion
Byetta injection	Epirubicin injection (Hospira)	Influvac sub-unit injection	Navelbine concentrate for intravenous infusion	Priorix vaccine
Calcium folinate injection (Wockhardt)	Eprex injection	Insuman insulin preparations	Navelbine capsules	Proctosedyl suppositories
Calcium folinate injection (Hospira)	Ergometrine injection (Hameln) [store below 10C]	Insulatard insulin preparations	NeisVac-C injection	Pro-Epanutin injection
Caelyx concentrate for intravenous infusion	Erwinase injection	Integrilin injection and infusion	NeoRecormon preparations	Proleukin Injection
Cancidas infusion	Esmeron injection	IntronA injection and multidosage injection pen	Neulasta injection	Prostin E2 vaginal tablets and vaginal gel
Carboplatin infusion [Onvo-Vials] (Hospira)	Etopophos injection	Inuvac influenza vaccine	Neupogen vials/Singleject	Prostin intravenous solution and extra-amniotic solution [store at 4C]
Caverject injection [40-microgram only]	Factor VIII dried fraction, type 8Y (BPL)	Isovorin injection	Nimbex injection	Prostin VR intravenous solution
Cerezyme infusion	Faslodex injection	Kaletra capsules and oral solution	Nipent injection	Pulmozyme nebuliser solution
Cervarix human papillomavirus vaccine	Fasturtec infusion	Kepivance injection	Norditropin SimpleXx injection	Puregon injection preparations
Chloramphenicol ear drops	Fendrix injection	Ketovite tablets and liquid	Norvir soft capsules	
Chloramphenicol eye drops	Fibrogammin P injection	Kineret injection	NovoMix 30 Penfill/FlexPen	
Chloromycetin Redidrops	Fluarix injection	Kogenate injection	NovoRapid insulin preparations	
	Forsteo injection		NovoSeven recombinant factor VIIa	
	FSME-IMMUN/Junior injection		Nutropin AQ injection	
	Fungizone intravenous infusion		Octim injection	
	Gardasil injection			

*Continues on p662*

Continued from p661

Rabies Immunoglobulin (BPL)	Roferon-A injection	Syntometrine injection	Typherix injection	injection Pen
Rabies vaccine (Sanofi-Pasteur)	Rogitine injection	Tetanus immunoglobulin (BPL)	Tysabri infusion	ViraferonPeg injection and injection Pen
Rabipur vaccine	Rotarix oral suspension	Thiotepa injection	VAQTA paediatric injection	Viroflu influenza vaccine
Rapamune oral solution	Saizen injection	Thyrogen injection	Varicella-Zoster immunoglobulin (BPL)	Vistabel injection
Raptiva injection	Sandostatin injection	Ticovac injection	Varilrix injection	Vitlipid N
Rebif injection	Sandostatin LAR	Ticovac Junior injection	Varivax injection	Vivotif capsule
Refacto injection	Simulect injection	Timodine cream [store below 15C]	Vfend powder for oral suspension	WinRho SDF injection
Refolinon injection	Somatuline LA injection	Tisseel Kit	ViATIM injection	Xalacom eye drops
Regranex gel	Somatuline Autogel injection	Tobi nebuliser solution	Vigam liquid (intravenous)	Xalatan eye drops
Remicade injection	Somavert injection	Tracrium injection	Vinblastine injection (Hospira)	Xigris infusion
Reopro injection	Stamaril yellow fever vaccine	Tractocile injection	Vincristine injection (Hospira)	Xylocaine with adrenaline solution for injection
Repevax vaccine	Survanta suspension	Tractotile concentrate for intravenous infusion	Vinorelbine infusion (Medac)	Xyloproct ointment
Replagal infusion	Suxamethonium injection (Goldshield)	Twinrix Adult vaccine Injections	Vinorelbine infusion (Hospira)	Xolair injection
Replenat injection	Synacthen injection	Twinrix Paediatric vaccine Injections	Vinorelbine infusion/injection (Wockhardt)	Zenapax infusion
Restandol capsules	Synacthen Depot injection	Typim Vi injection	Viraferon injection and	Zevalin kit for radiopharmaceutical preparation for infusion
Revaxis vaccine	Synagis injection			Zomacton injection
Rhophylac injection	Synercid intravenous infusion			
Risperdal Consta injection	Syntocinon injection			

## Law and ethics bulletin

### Update on sale and supply of pseudoephedrine and ephedrine containing medicines

At its October meeting, the Council of the Royal Pharmaceutical Society discussed whether sales of medicines containing pseudoephedrine or ephedrine should be restricted to pharmacists only, following a recommendation by the Medicines and Healthcare products Regulatory Agency that sales of these medicines should only be made by a pharmacist. The Council decided not to support the MHRA recommendation, but to issue the following guidance:

Pharmacists are reminded that the Society's Code of Ethics for Pharmacists and Pharmacy Technicians states that they must ensure that individuals to whom tasks are delegated must be competent and fit to practise. Pharmacists must ensure that all staff involved in the sale or supply of over-the-counter medicines are trained, or are undertaking training relating to pseudoephedrine and ephedrine issues,<sup>1</sup> and are aware of situations where referral to the pharmacist may be necessary. If support staff have not been trained in pseudoephedrine and ephedrine awareness, personal sale by the pharmacist is recommended.

Following discussions with the Commission on Human Medicines (CHM) Expert Working Group, the Society advises

that pharmacists review their written sale of medicines protocols. The written protocols should incorporate details of any medicines containing pseudoephedrine or ephedrine held in stock.<sup>2</sup> They should also make reference to criteria for referral of sales to the pharmacist.

Pharmacists and pharmacy staff should continue to be alert to unusual requests for any items or products containing pseudoephedrine or ephedrine and refuse to make a supply where there are reasonable grounds for suspecting misuse. Requests for more than one product containing pseudoephedrine or ephedrine should have personal involvement from a pharmacist and supplies should only be made in exceptional circumstances.

Pharmacy medicines must not be accessible to the public for self-selection.

1. Training modules are available from [www.MethguardUK.learnsomething.com](http://www.MethguardUK.learnsomething.com) and [www.npa.co.uk/members](http://www.npa.co.uk/members).
2. A list of pseudoephedrine containing products is available from [www.pagb.co.uk/media/downloads/doc/PSEUDOEPHEDRINE%20CONTAINING%20PRODUCTS%20LIST\(3\).doc](http://www.pagb.co.uk/media/downloads/doc/PSEUDOEPHEDRINE%20CONTAINING%20PRODUCTS%20LIST(3).doc) (7 March 2007).

### Change to the status of midazolam on 1 January 2008

Pharmacists are advised that on 1 January 2008, midazolam's legal classification will change from its current status as a Schedule 4 Part I Controlled Drug to a Schedule 3 Controlled Drug.

Pharmacists should refer to p24 and pp36–37 of the "Medicines, Ethics and Practice: a guide for pharmacists and pharmacy technicians" (31st edition) for a summary of the legal requirements for Schedule 3 Controlled Drugs.

When it is reclassified, midazolam will be exempt from the requirements relating to safe custody, and will not legally require storage in a controlled drug cabinet meeting the requirements of legislation.

Midazolam will be the only Schedule 3 Controlled Drug that, in certain circumstances, can be included in a patient group direction (PGD). Under no other circumstances can any other Schedule 3 Controlled Drug be legally included in a PGD.

## OFFICIAL NOTICES

Communications to the Royal Pharmaceutical Society should be addressed, unless otherwise stated, to: The Chief Executive and Registrar, Royal Pharmaceutical Society of Great Britain, 1 Lambeth High Street, London SE1 7JN (tel 020 7735 9141; fax 020 7735 7629). Official Notices also appear in the Notice-Board section of PJ Online ([www.pjonline.com/notices](http://www.pjonline.com/notices)).

### Erasures from the Register on the direction of the Statutory Committee

The names of the following people were erased from the Register of Pharmaceutical Chemists on 30 November 2007 following the direction of the Statutory Committee at its meeting on 31 August 2007: **Anil Paul Khanna** (registration number 75094), of Jesmond, Newcastle Upon Tyne, and **Sunil Paul Khanna** (registration number 75526), of Jesmond, Newcastle Upon Tyne.

### Jeremy Holmes Chief Executive and Registrar

#### Disciplinary Committee

The Disciplinary Committee met at the Royal Pharmaceutical Society of Great Britain on Tuesday 4 and Wednesday 5 December 2007 to hear the following Statutory Committee inquiry:

1. The new inquiry into a complaint by the Council of the Society against **Robert Lyndsey Sherman** (registration number 78127) which alleges that the submission to the Prescription Pricing Authority for payment prescriptions endorsed to the effect that all the items called for had been dispensed when this was not true, resulting in payments of £6467.15 and £2996.81 to which he was not entitled; the supply of Quetiapine 100mg tablets at a dosage of one per day against prescriptions calling for 2 per day, and endorsing the prescriptions to the effect that all the items called for had been dispensed; the supply of Folic Acid 5mg tablets at a dosage of one per day against prescriptions calling for 2 per day, and endorsing the prescriptions to the effect that all the items called for had been dispensed; the supply of Sinemet-Plus 125mg tablets at a dosage of one tablet to be taken twice a day against

prescriptions calling for one tablet three times per day, and endorsing the prescriptions to the effect that all the items called for had been dispensed; certifying on the reverse of two NHS prescriptions that a patient was over 60 years of age and accordingly exempt from payment of NHS prescription fees when in fact that patient was 57 and had paid the required fee; a failure to promptly transfer patient-returned medicines to disposal containers; the storage of patient-returned medicines in the garage of his home and in his car, may amount to misconduct.

The Disciplinary Committee will meet at the Royal Pharmaceutical Society of Great Britain on Monday 10, Tuesday 11, Wednesday 12 and Thursday 13 December 2007 at 9.30am to hear the following Statutory Committee inquiries:

1. The new inquiry into a complaint by the Council of the Society against **Khalid Hag-Ali** (registration number F785) which alleges that: allowing an individual who was not fully registered with the General Medical Council to work as a doctor at the medical centre Mr Hag-Ali owned; failing to take adequate steps to check the individual's status with the GMC and/or to check that, if registered with the GMC, such registration permitted him to lawfully perform the work that he was engaged to perform as a doctor at the medical centre; when it was brought to the attention of Mr Hag-Ali that the individual was not fully registered with the GMC, telling that person that it was none of his business, or words to that effect, and allowing the individual to continue working at the medical centre as a doctor; and, allowing the individual to issue numerous prescriptions when he was not authorised to do so, may amount to misconduct.
2. The new inquiry into a complaint by the Council of the Society against **Alexander Stanislaw Bachanek** (registration number 68515) which alleges that: the supply of four boxes of Omnic (Tamsulosin Hydrochloride) MR 400mcg capsules for a patient in response to a prescription calling for 112 x Tamoxifen tablets 20mg; the sale of 60 x Solpadeine Plus

tablets and 160mls of Night Nurse by an employee when a pharmacist was not present in the pharmacy to supervise the sale; and causing or permitting unqualified members of staff to supply, in circumstances corresponding to retail sales to approximately four patients, medicinal products which were not on a general sale list, may amount to misconduct.

### Fitness to Practise Committee Secretariat

## DEATHS

**Ashmore** On 24 November, John Watford Ashmore, aged 98, of Maypole Court Nursing Home, 99 Lower Northam Road, Hedge End, Southampton, Hampshire SO30 4FS. Mr Ashmore registered in 1936 and retired from the Register in 2006.

**Bedford** On 29 November, John Marmoy Bedford, aged 78, of 3 Oakley Straight, Wimborne, Dorset BH21 1SB. Mr Bedford registered in 1953 and retired from the Register in 2004.

**Bolton** On 16 November, Mary Jane Patricia Bolton, aged 65, of 49 Mossom Lane, Norbreck, Blackpool, Lancashire FY5 1RJ. Mrs Bolton registered in 1964 and retired from the Register in 2006.

**Depledge** Recently, John Trevor Depledge, MRPharmS, aged 86, of 178 St Helen's Road, Hastings, East Sussex TN34 2EA. Mr Depledge registered in 1943.

**Neath** On 16 November, Barbara Neath, MRPharmS, aged 64, of Vorlich, 6 Barclay Mill Road, Rockcliffe, Dalbeattie, Kirkcudbrightshire DG5 4PR. Mrs Neath registered in 1967.

**Rogers** On 5 June, James Lionel Rogers, MRPharmS, aged 80, of 24 Treza Road, Porthleven, Helston, Cornwall TR13 9NB. Mr Rogers registered in 1953.

**Sharkey** On 25 September, Joanne Marie Sharkey, MRPharmS, aged 27, of 30 Carrick Crescent, Giffnock, Glasgow, Lanarkshire G46 6PP. Ms Sharkey registered in 2003.

**Taylor** On 23 November, Albert Taylor, MRPharmS, aged 87, of 4 Adel Park Close, Adel, Leeds, West Yorkshire LS16 8HR. Mr Taylor registered in 1941.

## TRIBUTES

**Devis** In a tribute to the late Anthony Devis, (formerly the Royal Pharmaceutical Society's chief technician and a member of

the Society's staff for 25 years), who died on November 15, aged 78, RAY MARSHALL writes: For over 20 years Tony Devis was one of the best known members of staff at the Society's London headquarters. As chief technician, he was responsible for the projection and sound services in the hall. From a Nobel Prize winner to the presenter of a first paper at a Joint Pharmaceutical Analysis Group meeting, they all relied on him to handle this important part of their presentation and were not disappointed.

Tony trained as a photographer, a "snaps" in the Royal Navy. He saw service in the Far East and then went on to work as a commercial photographer.

When he joined the scientific and technical services section (SATS) of the Department of Pharmaceutical Sciences in the 1960s, his first task was to maintain the photographic panels of the "Medicines — with care" national exhibition. He remade the large number of panels four times, colouring the final version with dyes.

Like other members of the section, he was involved in the transport of the exhibition at weekends, making long trips by van. The exhibition was taken down late on a Saturday and erected in a new venue on Sunday. Tony always recalled an epic journey from Rhyl to Peterborough. This ended with the local Fire Brigade carrying bundles of the panels to an upstairs exhibition hall and the discovery of a refreshing keg of beer left over from a wedding reception the previous day.

Tony's role of chief technician was varied. He carried out artwork and photography for *The Pharmaceutical Journal*, the Society's

## The Diary

Announcements of branch and regional meetings for the Diary column should reach *The Journal* by 1pm on the Tuesday before publication. Branch programme cards are welcome at the beginning of the season, provided that branches subsequently notify *The Journal* in good time about any programme changes and any essential meeting information that was not available when the card was printed.

museum and Council members. There was further small-scale exhibition work. He was also involved in assisting with the growing number of postgraduate schools, conferences and group meetings organised by the SATS.

In 1972, while preparations were being made for the British Pharmaceutical Conference 1973 in London, Tony was taken gravely ill with a brain tumour. He came through the serious operation and showed great resilience by returning to play a full part in the organisation. When the conference returned to London in 1983, Tony was again much involved.

During this time, Tony's health was affected by further surgery and treatment for cancer but he was always cheerful and determined. Above all he had a real gift of working easily with the wide range of persons he met. It was, therefore, a great pleasure to his many friends when he was awarded the British Empire Medal before he retired.

After retirement, Tony and his wife, Joyce, gave a great deal of their time to their four grandchildren. In spite of Tony's illnesses they worked hard on their garden and home improvements.

All his former colleagues send their sympathy to Joyce, his son, Paul, and their grandchildren.

**Mohr** In a tribute to the late Catriona Ann Mohr (*PJ*, 24 November, p605), ALMA MILLS writes: I was extremely sad to learn of the death of Catriona Mohr. Catriona and I first met in 1998, fellow students at the Welsh School of Pharmacy. As a mature student I did not really expect to find a great friend among the younger people but Catriona became that friend from day one. She was a very clever and capable girl and a great support to me throughout the four years. Although her career was cut short by illness I know that the profession has lost a very good pharmacist. I know that the thoughts of all who knew Catriona are with her family at this difficult time.

**Neath** In a tribute to the late Barbara Neath, ISHBEL CLARK writes: Barbara Neath and Geoff Neath were pillars of the communities in Edinburgh in which they owned their pharmacies. They had met at Heriot Watt University where Barbara was a student and Geoff was a demonstrator. After Barbara registered as a pharmacist in 1967 they bought a pharmacy in Moredun. The pharmacy was not busy as it had lost business due to the illness of the previous

proprietor and they played football in the shop to keep warm and to pass the time.

By the mid-seventies they had two daughters, Morag and Catriona, and they moved to the family home in Fairmilehead. When the local pharmacy became available they bought it and ran it with extreme efficiency and friendliness, eventually selling the Moredun business which they had, of course, built up. They gave particularly excellent service to the local Marie Curie hospice. They were well known in the district where they both sang in the choir and were elders of the local Church of Scotland.

They had long been aficionados of the outdoor life and their rescue dogs, who were in their turn important family members, must have been among the fittest in the country. When Barbara and Geoff retired in 1996 at the relatively early ages of 53 and 58 they moved to Rockcliffe on the Solway Firth, a beautiful, if less well-known, part of Scotland. They continued to be avid walkers, played golf, swam almost daily and entertained their many friends from Edinburgh with whom they were anxious not to lose touch. Those friends were saddened when, two years after retiring, Geoff developed a brain tumour and died in 1999.

Barbara rallied after Geoff's death and made a life for herself, carrying on the life which they had had together and also travelling abroad with friends. She was captain-elect of the local golf club. To the horror of her family and friends, in 2006 she was diagnosed with the same cruel illness through which she had nursed her husband and which had claimed his life. This was particularly hard for Morag and Catriona.

Barbara and Geoff were great ambassadors for community pharmacy. They were always more interested in people than in bureaucracy.

**Thursday 13 December**  
Disciplinary Committee. 9.30am.

### Local meetings

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

### Monday 10 December

**Bromley** "The holly and the ivy: drug/herbal interactions" by Samantha Scragg (local CPPE tutor). Frogna Postgraduate Centre, Queen Mary's Hospital, Sidcup, Kent. Buffet 7pm, meeting 8pm.

**Nottingham** "Developments in interventional radiology" by Rob Lenthall (consultant radiologist, QMC, School of Pharmacy). University of Nottingham. 7.30 for 8pm.

### Tuesday 11 December

**West Surrey** "Dental problems in primary care" by Jackie Sowerbutts, (dental adviser, Surrey PCT). Park Room, Guildford College, Stoke Road, Guildford. Buffet 7pm, meeting 8pm.

### Wednesday 12 December

**Barnet** "The science and practice of drug control in sport" by David Cowan (head, department of forensic science and drug monitoring, and director, drug control centre, King's College London). Education and Information Centre, Barnet Hospital. Hot meal 7.15pm, meeting 8pm.

**Bath** "Pharmacy 2020 consultation: what do you want from your profession in 2020?" by Bev Stevens (local pharmacy 2020 champion). The Royal Oak, 8 Summerlays Place, Pulteney Road, Widcombe, Bath. Buffet. 7.15pm.

**Harrogate** "Latest updates and changes in contraception". Seminar Room, Fewston Wing, Harrogate District Hospital. Buffet 7.30pm, meeting 8pm.

### Thursday 13 December

**Colchester** "Health by chocolate including tasting". Education Centre, St Helenas Hospice, Colchester. 7.15 for 7.30pm.

Moving?

Are you moving home? Remember to update your registration details with the Royal Pharmaceutical Society. Contact the registration section (tel 020 7572 2322; e-mail [registration@rpsgb.org](mailto:registration@rpsgb.org)).



## Royal Pharmaceutical Society of Great Britain

#### London headquarters

Switchboard 020 7735 9141; direct dialling, see 'Medicines, ethics and practice'; fax 020 7735 7629; e-mail [enquiries@rpsgb.org](mailto:enquiries@rpsgb.org); website [www.rpsgb.org](http://www.rpsgb.org)

#### Scottish office

Headquarters of the Society in Scotland (including library and information service) 0131 556 4386 (see also 'MEP' guide); fax 0131 558 8850; e-mail [info@rpsis.com](mailto:info@rpsis.com)

#### Welsh office

Headquarters of the Society in Wales 029 2073 0310; fax 029 2073 0311; e-mail [wales@rpsgb.org](mailto:wales@rpsgb.org)

#### Information centre

Book loans and information Library (loans, photocopies) 020 7572 2300; e-mail [library@rpsgb.org](mailto:library@rpsgb.org) Information pharmacists, 020 7572 2302; fax 020 7572 2499; e-mail [infopharm@rpsgb.org](mailto:infopharm@rpsgb.org)

#### Pharmacists' advisory service

Information on legal and ethical matters relating to pharmacy practice, 020 7572 2308; fax 020 7572 2510, e-mail [ftp@rpsgb.org](mailto:ftp@rpsgb.org)

#### Pharmaceutics information

Information, advice and problem-solving in pharmaceuticals 020 7572 2302; fax 020 7572 2499; e-mail [pharmaceutics@rpsgb.org](mailto:pharmaceutics@rpsgb.org)

#### Benevolent fund

Financial help for pharmacists and their dependants and information about convalescence 0161 427 9776 or 01323 890135

#### Pharmacists' health support programme

Confidential help and support for pharmacists who experience problems with alcohol and other drugs of addiction 01327 264531

#### Listening friends scheme

Help from pharmacists trained in dealing with stress 020 7572 2442

#### Pharmaceutical press

Purchase of books and subscriptions to journals 01767 604971; fax 01767 601640; [rps@turpin-distribution.com](mailto:rps@turpin-distribution.com); website [www.pharmpress.com](http://www.pharmpress.com)

## DIARY

### Headquarters meetings

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

### Monday 10 December

Disciplinary Committee. 9.30am.

### Tuesday 11 December

Disciplinary Committee. 9.30am.

### Wednesday 12 December

Disciplinary Committee. 9.30am.