

# A taste of pharmacy in Saudi Arabia

Sultan Dajani was recently invited to the seventh International Saudi Pharmaceutical Conference to talk about the latest developments in UK pharmacy, including prescribing, repeat dispensing and self care. In this article, he gives his impressions of Saudi pharmacy



Saudi Arabia may be famous for the vast crude oil reserves that quickly turned its once bare desert into a modern-day oasis, but it is also steeped in history and culture. Surrounded by ultra-modern chic, it is hard to envisage that the country has a history that predates the pharaohs.

Pharmacy may only have reached the Kingdom of Saudi Arabia around the 1950s, but the availability of free health care and medicines has ensured that dispensaries are found in every hospital and health centre. Its position was further strengthened when in 1978 a Pharmacy Act relicensed all “drug stores” as community pharmacies and ensured that they were managed by a registered community pharmacist. Before then, drug stores, managed by anyone, sold over-the-counter medicines and most dispensing was done by hospital doctors.

The Saudi Pharmaceutical Society (SPS) was established in 1988 as a voluntary membership organisation, with a council composed of nine pharmacists. Initially, it worked with the Saudi Council for Health Specialties to regulate the profession, the entry of new medicines on to the market and pharmaceutical manufacturing. In 1995, the Pharmacy

Board of the Saudi Food and Drug Authority (SFDA) took over regulation and the SPS became the main scientific and practice research authority, dealing with standard setting, competencies and education.

Registration with the SFDA is mandatory for pharmacists, and is subject to an annual fee and an obligatory 60 continuing professional development credits over three years. Skill mix is also a widely accepted concept to free pharmacist’s time to deliver pharmaceutical care.


## Conference

Under the patronage of Prince Fahad ben Sultan ben Abdulaziz (Prince of Tabuk region), the SPS organises an annual international conference to promote excellence and innovation in clinical pharmacy, practice, research and education. Khalid Alkharfy, chairman of the conference science committee, explained: “One of our ultimate aims of organising this conference is to support phar-

macists to become a formidable force in drug therapy outcomes.”

The seventh International Saudi Pharmaceutical Conference, “Pharmacy climbing new heights”, took place from 19–21 March. Speakers from all over the world were invited to talk about innovative developments within their countries, not only in direct patient care but also with respect to scientific and industrial breakthroughs. Saleh Alsuwayeh, president of the SPS and conference chairman, emphasised the value of how the differing facets of science need to work together. “It is becoming increasingly important to recognise and accumulate knowledge from around the world about recent advances in translational research [research in one country that can be applied in others] and clinical practice,” he said. There were over 50 presentations, including plenary sessions, and the conference provided a platform for leading edge practitioners, researchers, young scientists and students to share experiences and discuss progress.

Opening the conference, the SFDA’s pharmaceutical officer, Saleh Bawazir, agreed that pharmacy practice was one of the most

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important areas to be improved: “Re-professionalisation and establishing pharmacy as a clinical profession will be crucial if we want the true skills of pharmacists to be recognised and it will be pharmacy practice that will continue to evolve for the benefit of our societies.” Dr Alkharfy agreed: “Pharmacy is about making people healthier, smarter and happier. Healthier through better management and prevention of diseases; smarter through educating patients and public about medicines for diseases; and happier through improving patient care and quality of life.”

The presentations were extremely varied and included specialist subjects, such as the production and regulation of biotechnology and biological products, along with other topics, such as therapeutic and disease management, evidence-based complementary and alternative medicine, pharmacy technology and informatics, drug innovation and pharmaceutical integrity and counterfeit medicines.

### Undergraduate training

It was heartening to see so many students present at the conference. In Saudi Arabia, undergraduate pharmacy courses tend to take five years but six-year courses have just begun by which graduates can obtain a doctor of pharmacy (PharmD) qualification. In their final year, in addition to having to complete a graduation project PharmD students will experience, under strict supervision, mandatory rotations in ambulatory care, internal medicine, hospital pharmacy practice and community pharmacy practice. Many have hopes of eventually working in hospital and, having visited a few Saudi hospitals, that is not surprising.

### Hospital pharmacy

In Saudi Arabia, all hospitals have their own systems and are run by different institutions including the military, the Saudi Ministry of Health, the National Guard and universities. To complicate matters, sometimes universities are affiliated with hospitals that are run by the Ministry of Health but they are all governed and regulated.

One hospital I visited was the King Khalid University Hospital. If this is typical of secondary care in Saudi Arabia then no pharmacist could find a more advanced and professional environment anywhere. Not only are the procedures and systems consistently of a high quality but, on my visit, the pharmacy department was being expanded to accommodate the increasing workload — hospital pharmacy is becoming increasingly recognised as a major clinical resource. In addition to the cytotoxic unit, the aseptic rooms, the medicines store and the dispensing area an additional 40 per cent of space is being added. According to the hospital director Ayed Al-Shamrani, the increasing workspace is indicative of the rising workload as the importance of the pharmacy department and the skills of its pharmacists are becoming more widely recognised.

Dr Al-Shamrani said the strategy is simple: “We want to ensure the physicians recognise the roles of clinical pharmacists by encouraging multidisciplinary working.” He said that many GPs now find pharmacists clinical skills are indispensable and this has resulted in an increasing pharmacy workforce, currently standing at 45 pharmacists, 25 technicians and four toxicologists. In addition, technicians are being up-skilled to help with the increased workload the doctors expect of the pharmacists, Dr Al-Shamrani said. They are being

trained to dispense in addition to other jobs, such as putting stock away.

### Community pharmacy

Medicines are free to all nationals and the range of medicines in the community is good. Many medicines are available from pharmacies without prescription as in the UK (although antibiotics can no longer be bought over the counter). Community pharmacies are privately owned and although there are no large multiples, there are plenty of chains of up to five pharmacies, some of which, like hospital pharmacies, open 24 hours a day. Many community pharmacies run clinics offering screening services, such as blood pressure monitoring and measuring cholesterol.

### The press

Community pharmacists receive two main publications: the monthly *Arab States Pharmaceutical Journal*, launched in January under licence from this *Journal*, and another magazine, the *Saudi Pharmaceutical Journal*, which is circulated quarterly. Both publish scientific and patient-oriented articles, book reviews and clinical and research papers. Other publications include *Professional Pharmacist*, which generally reports on management and clinical developments.

### Conclusion

Pharmacy and public health play a big part in Saudi Arabia although, unfortunately, as in the rest of the world, there are problems forging links between secondary and primary care. Pharmacy may not be as old as some of the antiquities found in Kingdom of Saudi Arabia but there is no doubt that pharmacists have become an established and integral part of the culture of Saudi health care.



### IPSF

The International Pharmaceutical Students Federation was established in 1949, following an initiative by the British Pharmaceutical Students Association. It is a non-political, non-religious organisation represented in more than 45 countries. It has 33 national pharmacy student associations as full members, plus a number of local student organisations as associate members. Individual membership is available to students, new pharmacy graduates and pharmacists who have been registered for less than five years.

The focal point of IPSF activities is its 10-day annual congress. This includes general assemblies, at which policy issues and future projects are discussed, plus symposia, workshops, a poster exhibition and social activities. Jointly with the International Pharmaceutical Federation, the IPSF also presents a students' day during the annual FIP congress. IPSF projects include work on national and international educational and health issues and “village concept” schemes, in which pharmacy students work with others to improve the standard of living and health conditions in remote areas of developing countries.

A student exchange scheme gives IPSF members the opportunity to work in a branch of pharmacy in another country for a short period. The federation's publishing activities include project reports and a thrice-yearly news.

Those wishing to support IPSF through individual membership should apply to the IPSF Secretariat, International Pharmaceutical Federation, Andries Bickerweg 5, 2517 JP Den Haag, The Netherlands (tel +31 70 3 63 1925; fax +31 70 3 65 9047; e-mail [ipsf@fip.nl](mailto:ipsf@fip.nl); website [www.ipsf.org](http://www.ipsf.org)).



### Listening Friends

The Listening Friends Scheme offers free telephone help to pharmacists under stress.

A call to the scheme will put the pharmacist in touch with a fellow pharmacist who will be there to give time to talk about the problems that are causing stress. The Listening Friend will have insight into the particular pressures that apply in pharmacy but the service is also there to help with problems not related to work, such as illness, disability, bereavement and relationship issues, which can all place strain and stress on an individual at any time in life.

The service is run by a team of volunteer pharmacists, who are all mature and experienced professionals in their field of practice. They have all been trained in listening skills and may be able to direct pharmacists under stress to more specialist help if needed.

Contact with the Listening Friends is made initially by telephoning 020 7572 2442 where a voicemail answering service will take details of a first name, a telephone number and a convenient time to call. A Listening Friend will then call back, usually on the evening of the same day or within 24 hours. Arrangements will be made to make further calls if the pharmacist would like some additional telephone time with the Listening Friend.

The scheme is supported by the Royal Pharmaceutical Society's Benevolent Fund and is part of the fund's aims in supporting pharmacists in need.

For additional information about the scheme, or the fund and the services it offers, call 01327 264739 or 01323 890135 or e-mail [benevolent.fund@rpsgb.org](mailto:benevolent.fund@rpsgb.org)