

Pharmacovigilance and pharmacists: Need for enhancing role as active health professionals

Dear Editor,

Clinical pharmacy is a growing field and the dynamics of the profession have changed enormously. A clinical pharmacist has become an essential constituent of every healthcare setting. This gain of reputation and recognition has resulted from the emerging needs for safe, economic and rational use of pharmaceuticals. One of the most vital and proactive role of a pharmacist is the application of pharmacovigilance principles in the day-to-day clinical practice.

The establishment of pharmacovigilance surveillance schemes is mandated by the growing new drug entities, presence of multiple comorbidities, the problematic and at times inappropriate polypharmacy. To keep pace with pharmaceutical companies' race towards development of newer molecules providing greater benefit to patient's health, experts need to implement pharmacovigilance guidelines, policies and concepts that are incorporated within the patient health information system.^[1]

Pharmacovigilance as described by the World Health Organization is "the science and activities relating to the detection, assessment, understanding and prevention of adverse effects, or any other drug-related problem." Adverse drug reactions (ADRs) rank among the top ten causes of mortality in some countries and mechanisms for evaluating and monitoring the safety of medicines are vital components of clinical practice.

^[2] Pharmacovigilance plays a vital role in preventing adverse drug reactions and hence its evolution and growth is crucial for an effective and safe health care delivery. Furthermore, spontaneous reporting system of ADR is a basic component of post-marketing surveillance of drug-induced risks. All sectors of healthcare systems including public and private hospitals, general practitioners, nurses and pharmacists, are required to be involved in the reporting process.^[3,4] However, the role of pharmacists in reporting adverse drug reactions has been found to be of greater importance. In fact pharmacists constitute an invaluable source of spontaneous ADR reports. Unfortunately, a number of pharmacists lack sufficient knowledge regarding pharmacovigilance and ADR reporting systems.^[5,6] This is also evident from the study by Heirdeiro et al which showed hospital pharmacists report 20 times more frequently than community pharmacists as they were better educated and informed about pharmacovigilance practices. Hence creating room for educating pharmacists is essential for developing an effective pharmacovigilance programs.^[7]

In developing countries pharmacists play an active role in the management of patient's medications. Due to ease of access they are generally the first to be contacted for consultations. This places greater responsibility in terms of patient assessment and decision making regarding the safety of medications advised to them.^[5] Hence although their role in pharmacovigilance may vary from country to country, their professional responsibility is the same. However, a multitude reasons exist to discourage pharmacists from reporting ADRs including lack of reliable data from the patient, non-availability of ADR reporting forms, unawareness of national ADRs reporting systems and or simply inability to report ADRs.^[6,8]

There is an urgent need for educational programs to raise awareness towards ADRs reporting systems and develop skills essential for pharmacovigilance. The healthcare organisations in general and the pharmacy societies in particular have an important role in this respect. A collaborative effort from the concerned parties in strengthening the clinical application of pharmacovigilance and marketing this fundamental process in drug development, post marketing surveillance and patient health outcome is strongly urged.

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Conflicts of interest

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