

19 July 2018

## Pharmacist power play risks patient health

Pharmacists must not be allowed to put profits before people, as they push for more power to issue repeat prescriptions without a script from a doctor.

AMA Queensland State President Dr Dilip Dhupelia said pharmacists don't have the high-level medical training or expertise to replace GPs.

"If pharmacists want to diagnose and treat patients, and be allowed to control and manage patient medication, they should devote the many years needed to be a skilled and qualified doctor," Dr Dhupelia said.

"There's an inarguable reason GPs spend so much time training and in ongoing professional development and their expertise can't be duplicated without those qualifications."

AMA Queensland has called on the state government to reject a push to expand the scope of services provided by pharmacists and pharmacy assistants and has warned the government that it would have to take full responsibility for the potential negative outcomes.

Some of the functions being sought by pharmacists include supplying contraceptive pills without a prescription and providing certain medicines to people with cardiovascular disease and respiratory illnesses without the need for a repeat prescription.

"This is the thin edge of the wedge," Dr Dhupelia said. "The pharmacy lobby is riding roughshod over the best interests of our patients. Prioritising convenience over health outcomes and letting pharmacists do what they want puts Queenslanders' health at risk," he said.

"Research shows that people who regularly visit their GP are healthier and live longer<sup>i</sup>.

"Taking shortcuts can lead to chronic and fatal health problems being missed until it's too late.

"Our members can provide numerous instances of where a repeat prescription encounter became a life-saving opportunity.

"For example, a patient went in for a repeat prescription and the GP found a malignant melanoma while taking her blood pressure.

"And, at a time when four people die every day from drug misuse, it is ludicrous to even consider making it easier for people to get drugs by fronting up to a pharmacy without a prescription from a doctor."

Dr Dhupelia said doctors also feared that some pharmacists would 'upsell' to patients by recommending and selling products that were not necessary, a problem identified in a 2016 Federal Government pharmacy review.

"Rather than declaring an open slather free-for-all on our health, the state government should encourage pharmacists to integrate into GP practices," he said.

“It’s much better for patients where pharmacists and GPs work together under one roof, and only provide the services they are actually qualified to give.”

**MEDIA CONTACT: Fran Metcalf, Sequel PR – 0417 627 867**

---

<sup>i</sup> OECD (2017), Health at a Glance 2017: OECD Indicators, OECD Publishing, Paris;  
Pereira Gray DJ, Sidaway-Lee K, White E, et al, Continuity of care with doctors—a matter of life and death? A systematic review of continuity of care and mortality, *BMJ Open* 2018;8:e021161. doi: 10.1136/bmjopen-2017-021161