Conscientious Objection: The Pharmacist Perspective

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Overview

- What Conscientious Objection is **NOT**
- Pharmacist’s role in patient care
- Current legal/ethical framework
- Implications of new legislation for the Pharmacy profession
What Conscientious Objection is NOT

• Squeamishness
• Imposition of values/beliefs on others
• Choice

In the depths of his conscience, man detects a law which he does not impose upon himself, but which holds him to obedience…For man has in his heart a law written by God; to obey it is the very dignity of man.

_Gaudium et spes_, 16
Pharmacists as Functionaries

• Check prescriptions for
  – Clarity and completeness
  – Legality
  – Compliance with licensed dosing (and indications?)

• Accurately dispense

• Rudimentary patient information
Pharmacists as Healthcare Professionals

• Check prescriptions for
  – Clarity and completeness
  – Legality
  – Clinical appropriateness

• Accurately dispense

• Comprehensive patient information, education and support
Pharmacists’ Duty of Care

• Regulation of Retail Pharmacy Businesses Regulations (S.I. No. 488 of 2008)
  – Review of medicine therapy
  – Counselling of patients on foot of a prescription
• ‘Pharmaceutical and therapeutic appropriateness’:
  – therapeutic duplication
  – interactions with other medicinal products
  – incorrect dosage or duration of treatment
  – allergic reactions
  – clinical abuse and/or misuse
Counselling of Patients

- identity of medicinal product
  - dosage form
  - method and route of administration
  - duration of therapy
- therapeutic benefit expected
- any special directions and precautions for the correct preparation, administration and use
- importance of compliance with directions for use including techniques for self-monitoring
- any common severe side-effects adverse reactions, interactions and contraindications, including how to avoid them and what to do if they occur
- action to be taken in the event of a missed dose;
- methods for safe disposal of medicine if treatment is not completed
- any other matters which may be included or referred to in the summary of product characteristics
Refusal to Dispense

‘If the pharmacist has concerns with regard to the content of the prescription they should discuss these with the prescriber. If having discussed these concerns with the prescriber the pharmacist still has concerns they may decide not to dispense the medicinal product…’

PSI Guidelines on the Counselling and Medicine Therapy Review in the Supply of Prescribed Medicinal Products from a Retail Pharmacy Business to facilitate compliance with Regulation 9 of the Regulation of Retail Pharmacy Businesses Regulations (S.I. No. 488 of 2008) Version 2 May 2017
Professional Ethics

• Statutory Code of Conduct for Pharmacists (2009)
• 6 Principles and Guidance Notes
• First and overarching principle:

‘The practice by a pharmacist of his/her profession must be directed to maintaining and improving the health, wellbeing, care and safety of the patient. This is the primary principle and the following principles must be read in light of this principle’
Guidance Notes (1)

• Principle 1:
  – Health of the patient is the primary focus
  – Safety of the patient must be ensured – even if this involves decisions which conflict with patient’s preference
  – Where unable to provide prescribed medicines or pharmacy services…must take reasonable action to ensure these medicines/service are provided and the patient’s care is not jeopardised
Guidance Notes (2)

• Principle 2
  – Be cognisant of *societal requirements* for the provision of pharmacy service
  – *Prevent discrimination* against any class of patient or sector of the community
  – ‘Safeguard society as a whole by ensuring that the *protection of vulnerable individuals* is given due significance…’
Guidance Notes (3)

• Principle 3
  – Involve patients in decisions regarding their health; explain options available to *help patients make informed decisions* regarding service and treatment options
  – *Not allow personal views prejudice care* and treatment of patients
  – *Disclose material risks* associated with medication therapy
  – ‘*Ensure the patient is at all times acknowledged as a person.*’
• Principle 4:
  – ‘Not practise under conditions which compromise their ability to exercise their professional judgement and integrity or the quality of their practice’
  – Not impose conditions on other pharmacists or health professionals which compromise their professional judgement, integrity or quality of service…’
Guidance Notes (5)

• Principle 6:
  – ‘Ensure that he/she takes account of the views of those under their jurisdiction, but reaches his/her own conclusions and decisions.’
  – ‘Ensure that he/she practises, and encourages others to operate, in as open and transparent a manner as possible.’
Who is the Patient?

• Prior to 25th May, 2018: two-patient model of maternity care
• Code of Conduct:
  – ‘a patient includes a person or persons who stand in such a degree of relationship to a pharmacist that the pharmacist ought to reasonably apprehend that such a person or person’s health and wellbeing are likely to be affected by the acts or omissions of that pharmacist.’
• Post-Repeal: profound cognitive dissonance and imposition of healthcare doublespeak
An alcohol-free pregnancy is best for your baby.
Smoke during pregnancy and you leave your baby no choice

For advice and information to help you stop smoking, call 882 3408 to be put in contact with a trained smoking cessation counsellor.

Cigarette smoke contains over 4,000 toxic substances, many of which cause cancer. Smoking harms babies and children.
If there is any chance that you may be pregnant please inform the Radiographer before you are X-rayed.

PLEASE, MUM, TELL THEM I'M HERE!
Healthcare Doublespeak in Pharmacy

• 2017/2018: alerts and warnings on Valproate
  ‘Epilim, sodium valproate can seriously harm an unborn child when taken during pregnancy.’
  -Epilim® Patient Information Leaflet, August 2018

• Misoprostol
  – ‘If termination of the pregnancy fails after taking this medicine there is an unknown risk to the foetus’
    - Topogyne® Patient Information Leaflet
  – ‘If Mysodelle is left in place after onset of active labour, it may lead to increasing contractions or the baby may become distressed’
    - Mysodelle® Patient Information Leaflet, November 2017

• Potassium Chloride/Digoxin
‘termination of pregnancy means a medical procedure which is intended to end the life of the foetus’

*General Scheme of a Bill to Regulate Termination of Pregnancy, 27 March, 2018*
Challenges for Pharmacists Post-Repeal

• No current provision for conscientious objection
• Provisions for Doctors, Nurses and Midwives inadequate – obligation to refer
• Professional bodies silent or contented with illusory ‘accommodation’
• Incoherence of Professional Code of Conduct
Career Prospects for Pro-Life Pharmacists?

- Local accommodations possible but these will be revocable and contingent.
- Some niches of practice
- Constraints on progression and promotion
- Leadership positions closed or untenable
- Deterrent effect: many will leave the profession, many others will be discouraged or prevented from entering
Wider Ramifications

• Erosion of patient trust, previously grounded on expertise and integrity
• Existential crisis for Medicine, Nursing, and Pharmacy: healthcare redefined, *primum non nocere* principle abandoned.
• Corruption of public discourse
• Repudiates aspirations to a pluralist society
Reasons for Hope

• Obduracy of Truth
• Testimony of ‘converts’ from the abortion industry
• The ‘Power of Powerlessness’
• Patient courage of ‘creative minorities’
Thank You