

The Teaching of Medical Law as an integral part of Good Pharmacy Practice

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ABSTRACT

Those aspects of medical law pertaining to medical malpractice are not particularly popular with either teaching staff or under/post-graduate students. The situation changes when an individual is facing Court allegations. This article puts forward the concept, as applied to Pharmacy, that Good Practice demands an integral basic assimilation of the teachings of medical law as a concrete way to enhance positive teaching. Furthermore, both the morality and the legality of practice are becoming more or more an indispensable and often compulsory necessity of knowledge for many specialties of healthcare practice. Although the author is a professor of OBGYN, he also teaches medico-legal studies in a leading university department of pharmacy in Rome. His argument is that this must become the rule and not be the exception.

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Introduction

Most medical and pharmaceutical units tend to consider medico-legal studies pertaining to their practice as belonging to a closed mental cupboard, to be aired only when that dreaded summoning one to Court makes its unwelcome appearance. Modern views consider this attitude not only regressive and harmful but actually wasteful of a potential goldmine of teaching and learning from the mistakes of others. A number of authors have stressed the impact of such studies on the learning curve of the specialty at hand, at both under and post-graduate teaching [1]. Such studies are valuable at both the general level as well as at case-based presentations.

The great majority of schools of Pharmacy in most countries are frequently found unaware of the value of such benefits whereas others are commencing to experiment with the great medico-legal world. Thus, whereas medico-legal studies have as yet to be explored by the great majority of university pharmacy departments, there are those departments with vision who have commenced such interactions. One such is the School of Pharmacy at the University of Rome, Tor Vergata.

Avoiding past mistakes as part teaching of Good Pharmacy Practice

Learning the basics of medical law as applied to pharmacy practice is of crucial importance at a time of increasing public awareness

of legal rights and duties of healthcare professionals including pharmacists. However, such a teaching programme must be viewed in its entirety of scopes and not just as catering for an increasingly legally minded society. Contrary to what some may think, teaching such principles induces confidence and competence and is the only real way to combat defensive practice, since in any form of any course of treatment, the best management involves understanding the legal issues therein involved [2]. This paper proposes that the teaching of applied Medical Law forms one element towards the teaching of Good Pharmacy Practice (GFP).

Pharmaco-malpractice also known as Pharmaceutical Malpractice and Pharmacy Malpractice is one branch of Medical Law.

It refers to any professional sub-standard action performed by a Pharmacist with resultant harm to the patient. It may involve an individual Pharmacist/ group practice/ /pharmacy technician/ / pharmacy/ hospital and may also embrace drug storage, handling, distribution or administration.

Such an action carries legal liability which may be sought in Court, in addition to any peer disciplinary action.

Figure 1

It is also clear that just as GFP applies to all grades/groups of Pharmacy practitioners (see point 2 in Fig.1) so do the relevant principles of Medical law. This paper is mostly concerned with clinical pharmacology and most of the elements discussed purport to such clinical practice. However, there are aspects of the various specialties which cross-over. Thus, package problems

originating at the industrial phase of generation of a medicinal product may present clinically, involving the clinical pharmacist in legal litigation. Some specific areas of potential pharmacoligation are shown in listed in Figure 2. On the other hand, some specific situations which are well known as bases for allegations of pharmaco-malpractice are shown in Figure 3.

Each and every item listed in these two figures may constitute the subject of extensive discussions, analyses and useful conclusions with very practical recommendations to avoid similar occurrences in the future. There is no doubt that such evaluations, both collectively and at case discussion level contribute most clearly to Good pharmacy Practice. Furthermore, using actual Court cases for such teaching makes a very realistic and convincing jump from the dry aspect of book theory to painful regrettable experience. All material to be used can be obtained from published Court material and furthermore one may doubly respect laws of privacy by completely omitting names of plaintiffs and defendants.



Figure 2



Figure 3

The modern pharmacist

The 21st century pharmacist is a fully autonomous healthcare professional with rights and duties pertaining to his profession and subsequently morally, ethically and legally liable for his or her actions. This contrasts sharply with the traditional role of the pharmacist as simply a provider of the medicines ordered by a physician. As expected, the liability associated with such a status shift has also altered. Unfortunately, the consciousness of such liability has not increased *pari passu*. The teaching of Medical Law in the form of an explanation of basic pharmaco-malpractice principles, in general or as applied to case studies, raises this consciousness in a healthy and academic way. Awareness of what may lead to disciplinary action by the local registration body or what may infringe civil and/or criminal law raises competence and diminishes the tendency to over-protect oneself by resorting to defensive medicine, as happens as when one is only half informed of the workings of the law.

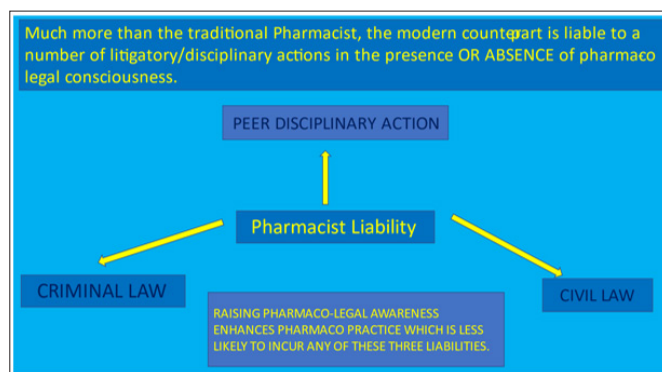


Figure 4

There is little doubt that no modern teaching of healthcare science should be embarked upon without the moral and legal compasses guiding such practice. Any such science, be it neurosurgery or pharmacy practice requires an applied and working knowledge of such principles not only to avoid incurring malpractice liability but even as an inevitable human and practical guidance to practice.

Some of the advantages of raising the consciousness of those aspects of Medical Law pertaining to pharmaco-malpractice are listed in Figures 5 and 6. In the words of one student attending a course of Medico-Legal Lecture programme, "Learning about law in Pharmacy, tends to keep us on our toes about the science!" Aptly voiced. In fact becoming familiar about pharmaco-malpractice cases which unfortunately faced Court, stresses the very humanity of the pharmacist and the kind of errors challenging tired, overworked or plain careless humanity, unless kept on its toes.

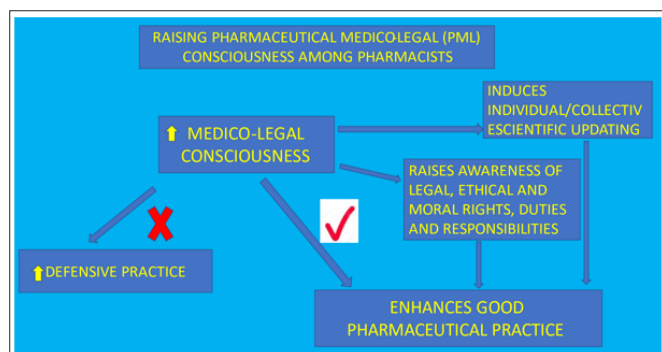


Figure 5

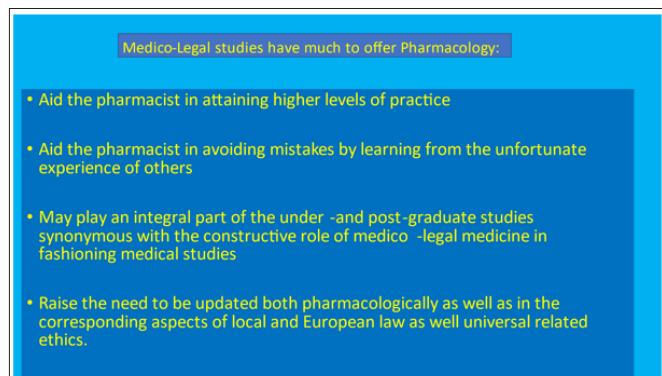


Figure 6

In all frankness, even if these positive factors did not accompany such teaching, it is still incumbent on the pharmacist, especially in his or her training days to familiarise himself /herself with

the morality and legality of the profession. It is a sad fact that all aspects of the healthcare professions are daily becoming an increasing target of legal litigation. Patients are no longer prepared to be patient [3].

This increase in general litigation is one reason why defensive medicine has been raising its ugly head and as is well known such a reaction is extremely harmful at both individual level as well as collectively. In healthcare professions in general, defensive medicine itself is on the rise and even in countries such as Portugal where no reliable statistics were generally available prior to 2007, 25% of interviewed healthcare practitioners admitted to practising a negative type of defensive medicine [4,5].

Conclusion

Just as all countries benefit from medico-legal feedback reflecting the actual related status quo, so does any discipline which takes the principles of Medical Law seriously and analyses its standing position vis-à-vis malpractice and the local proffered solutions [6]. The specialty of Pharmacy is no exception. In fact, it would be unrealistic for such a major discipline, to ignore the teaching of principles of Medical Law at both under and post-graduate levels while trying to achieve Good Pharmacy Practice. This indispensable addition to the curriculum is a requisite which will be inevitably encompassed and ingrained with all other crucial materia pharmaceutica, to day or tomorrow. But, added it will be! And the sooner it is, the sooner the obvious advantages will allow richer rewards to be reaped.

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