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The reason for having a code of pharmaceutical ethics: Spanish Pharmacists Code of Ethics

El porqué de un código de ética farmacéutica: Código Español de Ética Farmacéutica.

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Abstract: The pharmacist profession needs its own code of conduct set out in writing to serve as a stimulus to pharmacists in their day-to-day work in the different areas of pharmacy, in conjunction always with each individual pharmacist's personal commitment to their patients, to other healthcare professionals and to society.

An overview is provided of the different codes of ethics for pharmacists on the national and international scale, the most up-to-date code for 2015 being presented as a set of principles which must guide a pharmaceutical conduct from the stand point of deliberative judgment.

The difference between codes of ethics and codes of practice is discussed. In the era of massive-scale collaboration, this code is a project holding bright prospects for the future. Each individual pharmaceutical attitude in practicing their profession must be identified with the pursuit of excellence in their own personal practice for the purpose of achieving the ethical and professional values above and beyond complying with regulations and code of practice.

KEYWORDS: Code of ethics, Pharmacy.

Resumen: Se necesita un código de conducta propio y escrito, que dinamice la realidad de la profesión farmacéutica en el trabajo cotidiano en sus distintas áreas, siempre como un compromiso individual del farmacéutico con el paciente, con otros profesionales sanitarios y con la sociedad.

Se hace una panorámica de los diversos códigos de ética farmacéutica a nivel nacional e internacional, presentando el más actualizado, de 2015, como un conjunto de principios que debe guiar el comportamiento del farmacéutico desde la prudencia deliberativa.

Se plantea la diferencia ante los códigos de ética y deontología. En la era de la colaboración masiva, el código es un proyecto de futuro de oportunidades. La actitud del farmacéutico en su ejercicio profesional deberá identificarse con la búsqueda de la excelencia en la práctica individual, que tiene como objetivo alcanzar los valores éticos y profesionales que van más allá del cumplimiento de la normativa legal y los códigos deontológicos.

PALABRAS CLAVE: Código de ética, Farmacia.

Introduction

Education in ethical values is fundamental in any era and in any discipline, as it is a way of educating good professionals, people who, on practicing a profession, will be aware of the fact that, in addition to being a means of livelihood, their profession is not even a technical practice, but rather something much more.

In daily practice, pharmacy can be vulnerable to changes in ethics, making it necessary for this profession to have its own code of conduct set out in writing to serve as a stimulus to pharmacists in their everyday work in the different areas of pharmacy.

Technological developments have focused Medicine on finding a cure, but not on providing integral care for the patients. They are much more than a disease. It is necessary to have healthcare professionals who are excellent clinicians and physicians - healthcare professionals in general - who are capable of connecting with the patients and treating the whole person by strengthening them internally, as Cristina Puchalski of the George Washington Institute believes, in the twentieth century¹.

Every moral decision requires ability². In fact, having a paintbrush and a color-filled palette is useless if one does not have the artistry it takes to put them to good use. Technique is important, but does not suffice unto itself. Making a decision requires a special know-how above and beyond mere technique. That's what has traditionally been known as prudence, not in the most common sense of caution, but rather in the strictest sense of *phrónesis* or *prudentia*.

In real life, in everyday professional life, problems do not arise in the form of paradigms neatly fitting any one ethical principle, but rather arise as complex problems encompassing many standpoints. In view of this real-life situation, given that each case is unique unto itself, the only solution consists of dealing with the need for prudence. Beauchamp and Childress, as well as Jonsen and Toulmin take recourse to Aristotle on approaching the subject of prudence³.

Beauchamp and Childress state that it is necessary to distinguish between a right action and a virtuous action, in the sense that virtue is a certain disposition within the subject which, when applied to the rules and principles of ethics, is highly valuable for appropriate professional practice⁴. The nuance of virtue which exists in said practice, on reflecting a certain aspect of care or concern for the patient which is inherent to that virtue. In conjunction with this virtue, they mention a number of virtues, such as compassion, integrity, reliability, righteousness, among which they include discernment in the Aristotelian sense of *phrónesis*⁵.

Deliberative ethics, set out and expanded upon among Europeans by Diego Gracia, show themselves to be ethics prudential in nature⁶. Ethics must aspire to educate independent and not merely obedient or heteronomous individuals. This is achieved through deliberation, which deals with that which is a matter of opinion.

Background

According to López Quintás, the task of ethics does not consist of prohibiting but rather of transforming, of uplifting⁷. Ethics is philosophical knowledge. Ethics may be defined as the systematic, critical, formal analysis of human behavior in order to distinguish between right and wrong, good and bad or also the systematic study of human behavior in terms of a scale of values⁸.

As from 1978, the U.S. Encyclopedia of Bioethics defines bioethics as the systematic study of human behavior within the scope of life sciences and healthcare by examining this behavior in the light of moral principles and values⁸.

The scopes of codes of conduct and that of bioethics must be distinguished from one another. The scope of codes of conduct has involved the healthcare professional-to-patient relationship, unlike bioethics, which has broadened its analysis to all of the health sciences. A code of conduct is also of a regulatory and mandatory nature (within the members of the Professional Association), which is not so in the case of Bioethics, which additionally employs interdisciplinary dialogue as a working methodology and pursues a moral consensus among those involved in the discussion through the strength and reasonability of the arguments⁸.

A distinction can be made between ethical maximums and ethical minimums. Ethical minimums deal with determining a foundation based on certain elements considered inalienable which a community decides upon as a basis for living together. Such minimums can be demanded of everyone, and failing to comply with them is not only immoral but, in most cases, punishable⁸. Any other process of approaching the levels of excellence which the individual imposes upon himself or herself would mean entering the sphere of ethical maximums, considering a model of perfection which has to do exclusively with each individual or group and which cannot be considered broadly to encompass the entire community as a whole⁸. To be excellent, one must take risks, one must undergo change. And to consolidate excellence, one must believe in what we do and know that being good is not enough.

Codes of conduct do not encompass all professional ethics as a whole, since from the point in time at which they encompass obligations of minimums, they then fall exclusively within the sphere of duty and govern simply those requirements which a professional group considers basic for their practice, being based on autonomy and monopolistic control (these professionals are the experts in their field)⁸. However, a code of ethics identifies the pursuit of excellence as the attitude inherent to individual professional practice⁸.

*Treatises on Ethics for Pharmacists*⁸

The U.S.A. was the first country to have a Code of Ethics for Pharmacists, the Philadelphia Pharmacists Association having been the first to draft such a Code in 1848, which served as the model for the Code of Ethics signed by the American Pharmacists Association signed in 1852 and amended thereby in 1922, the latest amendment having been made in 1994.

In 1984, the International Pharmacists Federation proposed the basic principles of a Code of Ethics for Pharmacists considering the major changes undergone by the Pharmacist Profession over the last 30 years. These basic principles were officially adopted at the Sydney Conference in 1989, which were then later amended at the Vancouver Conference in 1997.

In 1998, the Spanish Society of Hospital Pharmacy prepared the first Code of Ethics for Spanish Pharmacists via the Bioethics Commission, in which the pursuit of excellence was identified as the attitude inherent to individual professional practice. This code is intended to be the code of all pharmacists, as could not be otherwise, because there is undoubtedly more that unites us than divides us, independently of the work each one of us does and the geographical area where we work.

The process of preparing a code of ethics is a dynamic process which is consolidated over the course of time in keeping with the social changes and the actual professional reality of our times. It therefore seems advisable to conduct a review and adaptation of the first edition of the Code of Ethics for Pharmacists, dating from 1998, which was prepared by leading pharmacists from the different professional areas in Spanish Pharmacy, who employed the working methodology of conducting a review of sources of information on the extant professional codes of conduct. The present version (Annex 1) is the result of the review process carried out by professional experts in the fields of Hospital Pharmacy and Ethics, Bioethics, Communications and Law with the support of the Spanish Society of Hospital Pharmacy.

Pharmacists' code of ethics analysis

A code of ethics is for the purpose of doing good and avoiding evil. It must be clear, precise and concrete. Its standard is to determine "what the good is" that each profession provides to society, mainly the idea that "he who does not do what he should do right is a wrong-doer". The code is no guarantee of good practices actually being carried out⁹. The code aspires to what a good professional should be in order to assess not only what is prohibited but rather as a recommendation of acting as best possible by complying with ethical maximums. A code of ethics could also be described as a detailed account, but that would require constant updating so that it would not become outdated as soon as it is approved and would have to be set out with fear and trembling in view of any possible spurious

interests and due to its definitively involving commitment, which always commands respect.

Pharmacists are healthcare professionals who contribute to to improvement disease prevention gogod use of medicines.

A pharmaceutical's attitude in his or her professional practice must be identified with the pursuit of excellence in individual practice, which is for the purpose of achieving the ethical and professional values above and beyond compliance with the legal standards.

For the process of updating the Code of Ethics for Pharmacists, the principles and responsibilities of pharmacists to patients, other healthcare professionals and to society are made public.

According to Adela Cortina, professional ethics demands that professionals aspire to excellence. The reasons include this being a fundamental commitment, not a commitment to red tape, but to specific persons, to real live people whose benefit making any social institution and activity meaningful¹⁰. In short, all of us are potential patients, given that, as the saying goes, healthiness is a temporary condition that doesn't have very good prospects looking to the future.

The Code sets out ten principles related to patients. The first of these principles stresses the importance of the Health-Related Quality of Life, an aspect which has been progressively taking on greater importance in recent years, having now become a core objective of healthcare and a yardstick of health outcomes. This is why it is included in this new version of the code that in order to achieve a patient's well-being, which is the pharmacist's prime responsibility, the pharmacist must improve or preserve the patient's health and quality of life.

The patient's right to the intervention of the pharmacist, as an expert in pharmacotherapy in any of the processes in which medicine is involved has been added to the code for the first time ever under article two.

The principles related to other healthcare professionals comprise the second section of the code. This section is of great importance, given that the relationship with other fellow pharmacists, physicians, nurses, nursing assistants..., in other words, with all of the personnel connected with the healthcare provided, is included

These principles related to other healthcare professionals include some new aspects set out in the updated version of the Code regarding the obligation of reporting "with due discretion" the violations of authority or of the ethics proper on the part of other healthcare professionals, as well as principles which mention the involvement of pharmacists in research and teaching.

The final section of the Code sets out the principles in relation to society.

The society in which we are living today is held together by a number of values by way of which it is shaped and defined which cannot be overlooked. There are some values constant over the course of time as a result the very nature of mankind, which are therefore untouchable in all those who are of that same nature. What holds the world together, the moral and prepolitical principles of the liberal state¹¹. Our environment

is undoubtedly one of a relativist society, in which, as the well-known philosophers Habermas and Ratzinger say or as the recipient of the Prince of Asturias Award for Concord, Sartori put it: “If due to a tragic darkening of the collective conscience, skepticism and relativism succeed in cancelling the founding principles of the natural moral law - human decency, respect for human life and the family institution, equality in the social order - democratic order itself would be radically wounded at its roots”. It is for this 21st-century world in which we live today and for the pharmacists of generations yet to come that we take this commitment of conduct upon ourselves.

The “safety culture”, so important to establish within all of the healthcare organizations, is introduced into the updated Code, aspects such as respect for human life and human dignity and human rights being firmly established.

The last principle reflects the pharmacist’s commitment concerning issues related to sustainability and environmental improvement.

The Code reached full completion on September 25, 2015, World Pharmacists Day.

Conclusions

A code of ethics for pharmacists is a tool at the individual and group level, as a profession, making it possible to pursue excellence as the pharmacist’s attitude. In day-to-day practice, the Code serves as guide for decision-making in keeping with an ethical commitment. The process of preparing a code of ethics is a dynamic process which is consolidated over the course of time in keeping with the social changes and the actual professional reality of our times.

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Appendix 1. Pharmacists Code of Ethics v.2.

Pharmacists are healthcare professionals who contribute to improving health, preventing disease and putting medicines to good use.

Each individual pharmacist's attitude in practicing their profession must identify with the pursuit of excellence in their own individual practice for the purpose of achieving the ethical and professional values above and beyond complying with regulations.

PATIENT-RELATED ETHICS

1. A pharmacist's prime responsibility is to achieve the patient's well-being by means of properly adapting and monitoring the patient's drug therapy for the purpose of improving or preserving the patient's health and quality of life.

2. Patients are entitled to the intervention of the pharmacist, as an expert in pharmacotherapy, in any of the processes in which medicine is involved.

3. A pharmacist promotes the patient's right to avail of safe, effective treatments.

4. A pharmacist respects the patient's privacy and promotes the bioethical principle of personal autonomy so that patients may take part in the decisions which have a bearing on their health.

5. A pharmacist establishes individual communications with patients which will humanize and facilitate the pharmacist's professional measures and fosters the relationship of trust even when their beliefs and values may differ.

6. A pharmacist provides truthful treatment information suited to each individual patient.

7. A pharmacist takes joint responsibility with the patients for proper treatment adherence.

8. A pharmacist respects the patients' cultural and personal differences, provided that they not infringe upon the personal dignity and rights of others.

9. A pharmacist safeguards the privacy and confidentiality of the patients' personal data, keeping professional secrecy, save those cases for which provision is made under law.

10. A pharmacist puts the benefit of the patients first over his/her own personal, professional, economic or commercial interests.

ETHICS RELATED TO OTHER HEALTHCARE PROFESSIONALS

11. A pharmacist keeps his/her professional skills and abilities up to date.

12. A pharmacist avoids working conditions, behaviors or practices which may be detrimental to his/her independence, objectivity or professional judgment.

13. A pharmacist cooperates with his/her colleagues and other healthcare professionals by acting honestly and with integrity in his/her professional relations, regardless of the hierarchical relationship among them and shall avoid unfair competition.

14. A pharmacist respects the authority and actions of his/her colleagues and of other healthcare professionals, even when their beliefs and values may differ from his/her own, provided that they not infringe upon the personal dignity and rights of others.

15. A pharmacist objectively and discreetly informs the respective instances of whatever infractions of the rules of ethics and conduct which he/she has noticed in other colleagues or healthcare professionals.

16. In his/her professional practice, a pharmacist makes certain to contribute to the progress of science and the profession by researching in his/her discipline, abiding by the established rules of ethics and law.

17. When a pharmacist carries out a teaching activity in his/her professional practice, the pharmacist is under the obligation of ensuring good quality instruction, making special mention of the ethical principles inherent to the pharmacy profession.

ETHICS RELATED TO SOCIETY

18. A pharmacist takes responsibility for promoting or preserving the improvement in the health of the population.

19. A pharmacist ensures fair distribution of the health-care resources based on objective, transparent criteria, particularly when these resources are limited.

20. A pharmacist intervenes in the care-providing processes for the purpose of guaranteeing the safety and communication of the problems related to pharmacotherapy, by jointly determining the corrective measures necessary for improvement in conjunction with their colleagues.

21. The pharmacist respects the provisions of law and regulations and cooperates in the amendment thereof whenever, according to technical or scientific criteria, this may contribute toward a greater benefit for the patient and the profession.

22. A pharmacist's responsibility and individual freedom entitles him/her to exercise their right of conscientious objection. In any event, the pharmacist must inform the competent authority thereof so that the patient will not be deprived of the pharmaceutical care.

23. A pharmacist refrains from contributing toward, advising or taking part in those professional practices or measures in which their knowledge and skills are placed at the service of acts attempting on the life or personal dignity or which infringe upon human rights.

24. A pharmacist fosters respect for the surroundings and environment in relation to medicines by promoting policies for appropriate waste disposal which are educational on environmental protection.

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WORLD PHARMACISTS DAY

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Conflict of interest declaration

Conflict
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interest