A pharmacist was recently indicted on eight counts of product tampering and 12 counts of adulteration and misbranding drugs used to help chemotherapy patients. The government alleges that the doses provided to the patients contained a fraction of the dose prescribed. It is possible that hundreds of patients received diluted chemotherapy solutions.

This is a troubling case for those of us in the pharmacy community and healthcare. Pharmacists, one of America’s most trusted professionals, are reduced to the level of the common thief. There are legal ramifications that will hit this practitioner on all sides: criminal, civil and administrative. The part most troubling is the damage to these patients and to the reputation of pharmacists as caregivers at a time when the profession is trying to achieve federal recognition as a provider under the Social Security Act.

A question of ethics: what are the ethical ramifications of this type of incident? In pharmacy ethics we try to determine what we should do as pharmacists in a given situation. What are our legal and moral obligations as pharmacists? In practice, there is the legal duty of the pharmacist to act on behalf of his or her patients, but what about the ethical duty? When asking, “What are the ethical ramifications for the pharmacist in this case?”, we know that the conduct displayed by this practitioner had a direct effect on the welfare of the patients and infringed upon their rights. Pharmacists have an ethical duty to act on behalf of their patients with honesty. This extends and overlaps with some of the legal duty pharmacists have to ensure right drug, right patient, right route, right duration of therapy, appropriate indication, etc., and all of the other parameters included in pharmaceutical care. The public expects that pharmacists will do everything within their ability to make sure this legal duty is met. But there is an ethical duty that comes with being a professional. We are not only bound by the laws that govern our practice, but as professionals, we hold ourselves to the highest ethical and moral standards. We take this responsibility voluntarily and without influence.

This situation can happen in any pharmacy environment. The lesson to be learned is, what are we doing to safeguard our patients from this type of illegal and unethical practice? In today’s competitive market, is it beneficial to market the highly ethical nature of the practitioners employed? Should a company, hospital, or managed care plan share with their customers the quality assurance measures in place to prevent these incidents from occurring?

The American Pharmaceutical Association (APhA) Code of Ethics for Pharmacists (see above) has been endorsed by many pharmacy organizations. It is timely that we remind ourselves of the professional code by which we live and practice our profession on behalf of our patients. Clearly this case demonstrates that the covenantal relationship between the pharmacist and patient was not considered. An ethical pharmacist would never compromise a patient to make a profit. At a time when there are skeptics about health care regarding everything from medication errors to practices within managed care, this case affects the trust that patients have in their providers.

Why this reminder? Sometimes we get caught up in our daily activities and lose sight of the reason we do what we do. We are all so busy, doing more with less, that we forget the purpose and our focus. As pharmacists, we are there to protect the health, safety and welfare of the patients we serve. It is up to us to maintain the highest ethical standards knowing that we are the protectors of our patients.

When I heard the reports about this case on the national news, two thoughts came to mind. First, how many people were harmed by this individual and second, what can we learn from this incident? Is this representative of pharmacy practice in general, or hopefully an isolated incident? I believe it is an isolated incident and not representative of how most pharmacists practice. What it does is serve as a reminder of not only the legal principles that govern our practice, but also the ethical and moral duty we have to patients.

Diane B. Ginsburg, M.S., R.Ph., F.A.S.H.P., is Clinical Associate Professor, Division of Pharmacy Practice and Administration, College of Pharmacy, the University of Texas at Austin College of Pharmacy, and a JMCP Contributing Editor. Author correspondence: dbgbox@mail.utexas.edu.

References

Principles of the APhA Code Of Ethics for Pharmacists

I. A pharmacist respects the covenantal relationship between the patient and the pharmacist.
II. A pharmacist promotes the good of every patient in a caring, compassionate, and confidential manner.
III. A pharmacist respects the autonomy and dignity of each patient.
IV. A pharmacist acts with honesty and integrity in professional relationships.
V. A pharmacist maintains professional competence.
VI. A pharmacist respects the values and abilities of colleagues and other health professionals.
VII. A pharmacist serves individual, community, and societal needs.
VIII. A pharmacist seeks justice in the distribution of health resources.