



## Editorial

# [Translated article] Creating a profession

## Crear una profesión



On several occasions, I have been asked to reflect on the challenges we face and the paths open to us in our profession. This has led me to organise and structure my impressions and intuitions such that I can explain them clearly. In this editorial, I will try to convey the current state of the profession and, in particular, the crossroads at which we find ourselves and the factors that I believe are key to our immediate future. Naturally, I am fully aware of the limitations of prediction, the importance of taking advantage of unforeseen events, and the certainty that we create the future ourselves.

I will, of course, attempt to avoid the temptation to approach this reflection from the perspective of pressing issues in the field of medicine, such as the new European regulatory framework, the European Union's loss of competitiveness in pharmacological innovation compared to markets such as the USA or Asia, or the existing problems of equity of access. It is also relevant to avoid limiting this reflection to purely professional issues, such as new trends and opportunities in hospital drug dispensing or efforts to re-evaluate the speciality, which would expand the scope of hospital pharmacy to include chronic conditions and the community as a whole. This is pertinent, because I believe that it would constrict the discourse to a narrow and temporary view of the current situation, reducing the focus on broad professional challenge to short-term concerns. So, my focus is to engage in a deep reflection based on a perspective that goes beyond the standard talking points.

With this commitment, I believe that it is essential to identify and separate what constitutes a professional challenge from the tools used to address it; we must not confuse the ends with the means or the ends with the tools to achieve them.

We could define the challenges facing hospital pharmacy in 3 ways: defining the profession, improving the health outcomes of pharmacotherapy, and emphasising the importance of people in the therapeutic process, both professionals and patients.

Firstly, we need to define the professional role of hospital pharmacy in healthcare systems, which involves outlining the responsibilities assumed and the commitment acquired in the healthcare process. In my view, this role has been evolving for years towards clinical pharmacy, which includes the active participation of specialist pharmacists, not only in pharmacotherapy, its management, and results, but also in patient therapy. This role will grow in significance because pharmacotherapy is becoming increasingly complex, specific, and precise. However, it is also becoming more costly, with potential adverse effects, necessitating individual decisions to be positioned within broader social contexts. For this reason, the professional participation of the hospital pharmacy is required throughout the entire clinical decision-making and

management chain, from criteria for drug use to outcome evaluations, from health equity in genomic medicine to safe drug administration. Whether we are dealing with an advanced therapy, a monoclonal antibody, or a chemical molecule, the pharmaceutical management of therapeutic processes must involve pharmacists with specific and applied clinical training. This is because no single professional has a complete view of the process and no speciality encompasses all therapies with this multifaceted, integrative, and global vision of hospital pharmacy.

Secondly, hospital pharmacy, along with the healthcare system as a whole, needs to definitively orientate itself towards outcomes, embrace systematic and population-based performance measurement, increase the use of automated data analysis, and fully accept the real-world contribution of these data to management and clinical decision-making.

It is impossible to contemplate health management without addressing the correct and ethical management of the people who make it possible, which is a key element that requires training and a definitive cultural change. This transition is undoubtedly necessary for healthcare organisations, working towards people-based management that not only considers patients but also professionals, making it possible to leverage individual capacities, adapt to individual profiles, and recognise the value of collective decisions.

In this sense, care based on patients' perceptions and values is fundamental, requiring their active participation and a change of attitude, while providing them with the means to be structurally involved in decision-making. This requirement necessitates profound changes in outlook, but also impacts management elements, such as the time dedicated to patients, the redesign of established care circuits, social assessment, and therapeutic accompaniment.

The tools to meet these challenges are closer than ever to professionals, are increasingly affordable, and can be defined in 3 ways: clinical specialisation, the appropriate use of technology, and professional collaboration.

In view of current developments in medicine and pharmacology, specific training is required in each field as well as specialisation that provides in-depth knowledge of the treatment of each disease. This situation is already a reality in our profession, where the concept of a general hospital pharmacy is no longer viable. Instead, hospital pharmacies are now closely integrated with specialised areas of healthcare and in every type of healthcare centre. Hence, we are moving towards specialisation in therapeutic areas, which should not be confined to medical specialities alone. Rather, we should go beyond this structure to broaden our vision, enrich our perspective, and take a more holistic

view of patient therapy, enabling us to take a global approach to therapeutic challenges.

A pending revolution in health and healthcare is the appropriate use of available technology. While healthcare information and systems have been digitised and computerised, respectively, challenges persist concerning the interoperability, sharing, and integration of these systems, as well as access to the data they contain. However, we are only at the beginning of the correct use of clinical, healthcare, and economic data to enable the appropriate and intelligent use of technology. This revolution is yet to be developed and implemented, and will be a real game changer for health, healthcare, and hospital pharmacy.

Any attempt to define the profession would be incomplete without considering the third essential tool: appropriate professional collaboration. Above all, we must never work alone in the field of healthcare. We need to collaborate not only with the physicians and nurses who care for each patient, but also—while adopting a broad and generous vision—with other professionals, including IT services, business management, clinical management, primary care, and community pharmacy, among others. In this sense, we need to take the initiative in meeting this professional challenge.

By shifting the focus away from immediate action, while acknowledging that these challenges are always present and that the tools to meet them are always available, we can take the necessary steps, one by one, day by day, to use every situation and conversation to create a profession.

#### **CRediT authorship contribution statement**

**Olga Delgado Sánchez:** Conceptualization, Data curation, Formal analysis, Funding acquisition, Investigation, Methodology, Project administration, Resources, Software, Supervision, Validation, Visualization, Writing – original draft, Writing – review & editing.

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