

PHARMACEUTICAL EDUCATION IN HUNGARY: SEEING EFFECTS OF POSITIVE REFORMS



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Pharmaceutical education in Hungary is more than 200 years old; the first university certificate was awarded in 1771. Though there were, of course, many reforms over the last two centuries, education remained essentially science-based until the last big reorganisation, which was introduced in the 1987-88 academic year. This current curriculum provides a more bio-medically oriented pharmacy and introduces new subjects such as the basics of clinical pharmacy in hospital, which is an obligatory subject in the final semester.

Academic semesters are followed by 24 weeks of pre-registry pharmacy practice. Due to the recommendation of the Hungarian Society of Hospital Pharmacists, four weeks of hospital pharmacy practice is obligatory for all students during this pre-registry period.

Pharmacy specialisations have existed since 1981, but some important changes were introduced in 2000. Instead of one central institute responsible for postgraduate specialisations and continuing education of pharmacists (as well as physicians), these curricula are now offered by all pharmaceutical/medical faculties.

The legislative changes of 2000 also reformed the entire system of postgraduate pharmaceutical education. Specialisations include a two-year residency, sponsored in full by the Ministry of Health. The cost of the further year(s) of education is shared by the Ministry and the student's employer. Hospital pharmacy and clinical pharmacy were also recognised as new branches of specialisation in the system.

Aside from the residency, postgraduate education includes both obligatory and optional theoretical courses at the faculties

and practice at accredited hospital pharmacies. At the end of the education period, students take a final board examination, after which a degree and title in the student's speciality is given – for example, “specialist in hospital pharmacy.”

The general structure of the hospital pharmacy postgraduate programme is as follows:

Theoretical courses:

A. Obligatory (200 hours)

- Therapeutics (100 hours)
- Compounding (25 hours)
- Hospital pharmacy management (50 hours)

- Quality assurance (25 hours)

B. Optional (80 hours)

- Biopharmacy
- Special field of therapeutics
- Interactions
- Clinical laboratory investigations
- Clinical Toxicology
- Pharmacoeconomics
- Drug marketing

Practice:

General hospital pharmacy practice and specialised training in the preparation of large volume parenterals and intravenous admixtures

After this reform of postgraduate education in 2000, the Hungarian Society of Hospital Pharmacists, together with the Hospital and Clinical Pharmacists, a professional advisory board in the Ministry of Health, struggled with whether the specialisation title should be given to current pharmacists in hospitals who, of course, had not participated in the new theoretical academic courses. It was decided that colleagues working in hospital pharmacies would take the exam, and more than 200 passed it in the 2001-2002 academic year. Also in the last four years, we registered 21 new hospital pharmacists.

The system of continuing education (CE) was also overhauled in the 2000 reform. Every working Hungarian pharmacist must collect 250 university-accredited points in a five-year period for the renewal of his or her license. A credit point is earned for roughly every hour of study, though this can fluctuate depending on the activity. The pharmaceutical faculties are also responsible for the organisation of CE courses, with the financial support of the Ministry of Health, but pharmaceutical companies and scientific associations may also organise accredited courses.

The strategic reorganisation of the Hungarian healthcare system will also influence the postgraduate education of healthcare professionals (see full article on pages 47-48). The educational budget of the Ministry of Health is being drastically reduced: The two-year residency will not be government subsidised in the future, and there will be a reduction in financial support of specialised education. Exemptions will be given, however, to specialisations where manpower shortages exist, and hospital pharmacy belongs in this group. Therefore, expect the Hungarian pharmaceutical societies to lobby for continued governmental financial assistance!

For Hungary, then, high quality specialisation programmes in education guarantee a future of ongoing improvements within pharmacy in general and within hospital pharmacy in particular.

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