

 **Spanish version**

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PHARMACY IN SPAIN

JANUARY 2009

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Introduction

Spanish Pharmacy hails from a long, deeply rooted tradition as a health profession, and justly deserves acknowledgement from the official authorities, and even more importantly, from society. There are more than 60,000 Spanish pharmacists working in various fields of the health sector, especially in community pharmacies, which account for the majority of pharmacists. Alongside this, increasing numbers are working in hospitals, food and nutrition, laboratories and various public sector organisations.

In order to exercise their various professional activities, pharmacists must register with the appropriate provincial Pharmaceutical Association. All of the Pharmaceutical Associations form part of a national body called the Consejo General de Colegios Oficiales de Farmacéuticos (General Spanish Council of Pharmacists). In addition to this, Associations in each of the 17 Autonomous Regions are grouped into Regional Councils.

1- THE GENERAL SPANISH COUNCIL OF PHARMACISTS



1.1- FUNCTIONS



The General Council is the representation, coordination and cooperation body of the pharmacy profession, both nationally and internationally.

The General Council is one of the institutions that must be consulted by the National Government when preparing legislation that affects the pharmaceutical profession and thus undertakes a negotiating role on behalf of pharmacists in all aspects of their activity.

An example of this are the recent discussions with the Health Minister on the Comprehensive Plan for Expenditure Control Measures and the Rational Use of Medicines. Others include discussions on medicines, public information campaigns and pharmaceutical legislation. It is also involved in training pharmacists and postgraduate studies, and is in constant contact with the Ministry of Education and the Commission for Continuous Training in the National Health System.

In the professional sphere, the General Council conducts various activities aimed at the Associations and over 50,000 association members, such as the Health Information Data Base, scientific publications, technical, professional and legal advice, continuous training activities, and the application of communication technologies for its own purposes, as demonstrated by Portalfarma.

The General Council is also responsible for representing Spanish pharmacy at an international level:

- In Europe: with the Pharmaceutical Group of the European Union (PGEU)
- In America: with the Panamerican Pharmacy Federation . (FEPAFAR)
- Internationally: International Pharmaceutical Federation (FIP)

1. 2- INTERNAL ORGANISATION



The General Council's **internal organisation** is structured in the following decision-making bodies: the Association Assembly, the Plenary Session and the Managing Board.

The **Association Assembly** is chaired by the President of the General Council and is made up of the members of the Managing Board and the Presidents of each of

the 52 Pharmaceutical Associations. Assembly decisions are absolute and are made by the Association Presidents, whose voting power is determined by the number of members in their particular Pharmaceutical Association.

The **General Council Plenary** Session is the executive body of the profession. It is chaired by the President of the General Council and is made up of the members of the Managing Board and territorial and professional delegations. The Plenary Session is made up of the following: the presidents of each of the Regional Boards, as well as the Autonomous Cities of Ceuta and Melilla. It was the first professional institution to adapt its organisational structure to represent all of the autonomous territories. It also includes representatives of pharmacists who work in the 11 most representative sectors of Pharmacy. These are: Food, Clinical Analysis, Dermopharmacy, Distribution, Hospital Pharmacy, Industry, Municipal Pharmaceutical Inspectors, Research and Teaching, Community Pharmacy, Ophthalmological Optics & Audiometric Acoustics and Orthopaedics.

The Management Board is the structure which implements the agreements reached in the General Meeting and the Plenary Session, and also represents, governs and manages the General Council in order to better accomplish its objectives. It is made up of the Council President, three Vice-presidents, the Secretary General, the Treasurer and the Accountant.

The General Council's Management Board is constituted as follows:

1. 3 - ACTIVITIES AND SERVICES DIRECTIVE COMMITTEE OF THE THE GENERAL SPANISH COUNCIL OF PHARMACISTS

- **PRESIDENT:** D.ª Carmen Peña López

Pharmaceutical activity essentially focuses on medicine. This not only covers its medicine dispensing functions, but also the various aspects related to research, preparation and distribution of medicines as a professional activity. Through their university studies and professional experience, pharmacists are specialists in medicine. Being aware of the role they play in terms of medicines, pharmacists work with various public sector departments and organisations to conduct health promotion and disease prevention campaigns.

- **VICE-PRESIDENT:** D. Jordi de Dalmau Balaña
- **VICE-PRESIDENT:** D. Jesús Aguilar Santamaría

In order to improve public service provision by pharmacists in their various sectors, the General Spanish Council of Pharmacists provides its members with a series of services and working tools:

- **SECRETARY GENERAL:** D.ª Ana María Aliaga Pérez

- **TREASURER:** D. Luis Amaro Cendón
- **ACCOUNTANT:** D. Iñaki Linaza Peña

1.3.1- Institutional

- Professional advice SECTION MEMBERSHIPS

The General Council constantly works to offer pharmacists professional advice. On a daily basis, it supports and resolves issues raised by the provincial associations.

- **NATIONAL MEMBER OF NUTRITION:** D. Aquilino García Perea

The 52 Medicine Information Centres (CIMS) resolve issues raised by pharmacists concerning medicines. In professional publications issued by the General Council, pharmacists can find out about everything that is going on in the profession, from both a scientific and political perspective.

- **NATIONAL MEMBER OF CLINICAL ANALYSES:** D. Apolinar Serna Martínez
- **NATIONAL MEMBER OF INDUSTRIAL PHARMACISTS:** D. Vicente Hernandez Vázquez

- Monitoring Standards and Legal Services

- **NATIONAL MEMBER OF NOMINAL PHARMACEUTICS:** D. Claudio Buenestado Castillo

Preparing preceptive reports during the development of new legal provisions, in all professional spheres, is another aspect of the General Council's ongoing activities. Pharmaceutical legislation, like any other, is constantly being revised with new Acts, provisions and Royal Decrees, etc. The General Council works to ensure that wherever provisions of any type affect the pharmaceutical profession at either the national or provincial levels - at the request of the various Pharmacy Associations in order to guarantee coordination and coherence - the functions of pharmacists are taken into account.

- **NATIONAL MEMBER OF PHARMACY OFFICE:** Teodomiro Hidalgo Sotelo
- **NATIONAL MEMBER OF OPTICS AND AUDIOMETRY:** Teresa Roman Vitoria
- **NATIONAL MEMBER OF ORTHOPEDICS:** D.ª M.ª Carmen Mijangolte Cuadrado

The General Council's functions also include advising and informing the Pharmacy Associations on all matters related to pharmaceutical legislation and everything

related to the profession. National, regional and international legislation, the development of new provisions, etc. It is also responsible for ensuring compliance with health legislation, particularly with regard to medicines, and preventing unqualified persons from entering the profession.

- Technical activities

From a technical angle, the General Spanish Council of Pharmacists works with the public sector to draft reports on pharmaceutical and medicinal matters. It belongs to various official organisations, including the Spanish Medicines Agency. It also works with the health authorities to promote health rights and to set up health education campaigns. It also works with the education authorities to develop study programmes for the postgraduate specialisation courses and continuous training programmes.

- Comunicación

The general public, communication media and various institutions related to the profession have to be informed about everything that is offered by Spanish pharmacy. To achieve this, the Council works on a permanent basis in terms of communication, furthering the promotion of the role of pharmacists and the Pharmacy Association. In this context, it works with various communication media to create health forums and reports that help to educate the public on such subjects as the rational use of medicines.

It also prepares various publications that the Council uses to inform the various Associations about the activities to be implemented and pharmacy news of interest to Association members.

- Internacional

In the international arena, the General Spanish Council of Pharmacists attended the recent FIP (International Pharmaceutical Federation) conference in Basilea from 28th August to 4th September 2008. The Spanish delegation presented a series of documents there, concerning: Portalfarma, Health Information Data Base, Continuous Training and Campaigns.

Since September 2008, Carmen Peña was elected Vicepresident of the International Pharmaceutical Federation.

Nowadays, the General Council of Pharmaceutical is working actively with the Minister of Health and Social Policy in defense of the Spanish pharmacy model.

1.3.2 - Professional



- Health Information Data Base BOT PLUS

The new Health Information Data Base (BOT Plus) is an essential tool in Pharmaceutical Care. In this programme, pharmacy professionals have access to harmonised, updated information on medicines and patients. It provides information on diseases, symptoms, epidemiology, treatments, the detection of problems related to medicines, etc. All entries are harmonised, so that it will also be possible to save and retrieve data in any pharmacy in Spain on any patient who so requests, thereby guaranteeing a common data structure. The BOT Plus health information data base, which is unique in Europe, contains a software application with a Pharmaceutical Care Programme which has a modular structure. In this way, each pharmacist will be able to activate the depth of information which they require, according to their preferences and requirements.

- Strategic Plan for the Development of Pharmaceutical Care

The Strategic Plan for the Development of Pharmaceutical Care is a harmonised, formalised, methodological working proposal. It is provided by the General Council and Pharmacy Associations to all pharmacists working in whatever area related to medicines, in order to facilitate the rational, greater and more effective use of medicines, and to make a positive contribution to solving problems presented by the patient in terms of medication and their state of health. It is based on a criterion of universality, as it develops strategies which enable the greatest possible number of pharmacists who so wish to find out about Pharmaceutical Care, and it is based on documentation about professional practices, coordinating ways of working with Pharmaceutical Care and processing the results. The Strategic Plan for the Development of Pharmaceutical Care, with more than 40.000 participants in the last six year, has been declared to be in the Interest of Health by the Ministry of Health and Social Policy.

- Scientific Publications

The most important scientific publications issued regularly by the General Spanish Council of Pharmacists include: Catalogue of Specialist Pharmaceutical Medicines - published since 1971, Parapharmacy Catalogue and the Medicinal Plant Catalogue. Each of them are extensive compendiums which are updated annually and include all the latest news on pharmaceutical specialities, parapharmacy products and medicinal plants dispensed in pharmacies.

- Other publications, scientific and professional journals: Panorama Actual del Medicamento and Farmacéuticos

- Continuous training

Continuous training is one of the major activities for the General Council and also the Pharmacy Associations, which aims to make tools available so that association members' knowledge can be refreshed and updated.

The various training activities organised by the General Council, which are included within the framework of the National Continuous Training Plan, cover a range of fields.

Some training activities include:

- **PHARMACOLOGY AND PHARMACOTHERAPY COURSE.** This training course is run permanently and is conducted in four-year cycles. Each of the modules is developed independently, their content is completely revised and the material is updated. The first course, which ended in June 2001, was followed by 8,000 Spanish and over 3,000 Argentine pharmacists. The course was accredited by the Commission for Continuous Training of the Consejo Interterritorial de Salud (national health co-ordination body).
- **Brand Name Pharmaceutical Specialities.** Some 3,000 pharmacists have registered for this course, whose two modules aim to provide pharmacists with practical material for patient care in dispensing these specialities, as well as other, non-prescriptive medicines. It also provides information about the pathologies which are usually treated with this type of medicine.
- **MEDICINAL PLANTS.** True, verified information is provided over two years, in four modules, about the rational use of medicinal plants, their indications and contraindications, toxicity, side effects and interactions.
- **Course on Advances in Pharmacology and Pharmacotherapy.** Updated information on Pharmacology and Pharmacotherapy is essential in order to conduct high quality Pharmaceutical Care. This is why the General Council is offering a new four-year training course in Pharmacology and Pharmacotherapy. The material covered is divided into 8 half-yearly modules (book, CD multimedia and assessment questionnaire). Each module is assessed separately. Demand for this course made it necessary to create a second group, in addition to the initial one, starting six months later.
- **Health Products course.** This course has 5 half-yearly modules (book, multimedia CD and assessment questionnaire) in which the technical features of all health products are revised, including indications and correct usage, along with their side effects or contraindications. It also provides extensive information

on the quality checks required in order to obtain approval and the legal framework surrounding these types of products.

- **COURSE ON MEDICINES FOR ANIMAL USE.** This course, in two, half-yearly modules, studies the most appropriate pharmacotherapy for pathologies in various animal species in greater depth, in order to serve both as a reminder and refresh knowledge on the health and legal aspects related to these medicines.

Other examples are:

- Clinical Analysis
- Dermopharmacy
- pharmaceutical care
- nutrition
- otic and ophtHalmic ´s diseases

In 2002, an agreement was signed with the Ministries for Health and Education in which, without causing prejudice to whatever may be established by the autonomous territories, has entrusted the General Council with the following functions at national level:

- To accredit the specific continuous training courses for the pharmacy profession.
- To issue the certificates or diplomas which officially accredit the courses taught.
- To issue reports in order to assess and supervise the activities undertaken within the scope of this Agreement.

- Health campaigns

The Spanish General Council of Pharmacists conducts public health education campaigns in various areas:

- Plenufar. The Food and Nutrition Education Plan for Pharmacists.
- Rational Use of Medicine.
- Medicinal Plants at your pharmacy.
- Sun, skin and photoprotection.
- HIV and drugs of abuse: The General Spanish Council of Pharmacists has taken part in the National AIDS and Drugs Plans for more than 15 years. Since 1998, when an agreement was signed by both institutions, an AIDS prevention and methadone dispensing programme has been conducted through pharmacies. The Ministry for the Interior has recently acknowledged this work, by awarding the President of the General Council the Order of Merit for the National Drugs Plan, for its services to prevent AIDS and the fight against drugs. The latest AIDS prevention campaign to be conducted through pharmacies aimed to increase early detection of people infected by HIV and as a result, begin treatment and step up timely prevention measures. To achieve this almost 20,000 Spanish pharmacies gave advice and distributed informative leaflets to the public which gave details on cases in which it was most recommended to have an HIV/AIDS test. The positive reception given to this initiative, together with the importance of early detection, has enabled a second leaflet to be produced which will be distributed shortly by pharmacies.

More information: [Pharmacy and Health Site \(Spanish\)](#)

- **Portalfarma**

The Spanish General Council of Pharmacists has been on the Internet since 1997, when it created its own web page, making it one of the first professions to offer its members internet access and e-mail accounts. Currently making the most of this technology, it is working to develop the interconnected web concept for Associations, the General Council and its members, in order to improve day-to-day patient care.

Portalfarma is structured in two clearly defined sections: one for the general public and the other for professionals. In the public section, there is information on the pharmacy world, health advice, information on medicines, information for students, etc. The section reserved for professionals includes up-to-date scientific/health advice, along with continuous training and access to professional journals.

There are currently 30,000 pharmacists who are members of the portal. Every day, Portalfarma is visited 2,000 times and is one of the Medical Data Bases whose contents are consulted most frequently.

2 - THE PHARMACY PROFESSION IN SPAIN



2.1 - PHARMACY STUDIES



Pharmacy is studied in university faculties; there are currently 15 Faculties of Pharmacy in Spain: Elche (Alicante), Barcelona, Granada, La Laguna (Tenerife), Navarra, Madrid-Alcalá de Henares, Madrid-Complutense, Salamanca, Santiago de Compostela, Seville, Valencia, CEU-Valencia, Vitoria, CEU San Pablo and Alfonso X El Sabio, both in Madrid. The degrees awarded by these faculties are recognised throughout the Spanish territory.

The current degree course consists of five years of theoretical-practical training, including six months of supervised professional experience in a pharmacy or the pharmacy service in a hospital, as is laid down in the European directives. Thus pharmacists work with the Administration to teach the subject and have a further, educational role in the supervised practical experience.

Compared with other European countries, there is a surplus of Pharmacy students in Spain: there are currently **19,000 registered students**, resulting in some 2,500-2,700 degrees being awarded every year. This figure is much higher than other European countries, such as France with 1,400 or Germany with 1,600 degrees awarded, where the populations are also higher.

2.2 - PROFESSIONAL FIELD



The Royal Decree 1464/1990, of 26th October, establishes the official university title of Licenciado en Farmacia (Master of Pharmacy) and the general guidelines relating to the study programmes leading to it. Furthermore, the Royal Decree 2708/1982, of 15th October, governs the studies for specialisations and the awarding of the title of pharmacy specialist. Finally, in order to comply with European legislation, there is the Royal Decree 1667/89, of 22nd December, which governs the acknowledgement of diplomas, certificates and other Pharmacy qualifications from the other European Union member States and the effective implementation of the right of establishment.

Pursuant to the Royal Decree 1464/1990, the general guidelines concerning the study programmes leading to the awarding of the official title of Licenciado en Farmacia (Master of Pharmacy) are:

a) Sufficient knowledge of medicines and the substances used to make them.

- b) Sufficient knowledge of pharmaceutical technology and the physical, chemical, biological and microbiological control of medicines.
- c) Sufficient knowledge of the metabolism, the effects of medicines and the action of toxins, along with their use.
- d) Sufficient knowledge to make it possible to assess scientific data relating to medicines, in order to be able to use it to provide appropriate information.
- e) Sufficient knowledge of the legal and other conditions with regard to exercising pharmaceutical activities.

Likewise, students should have an understanding of public health, health education and clinical analyses and analyses related to public health, as required in order to undertake pharmaceutical activities.

These are the minimum requirements that should be provided by the Pharmacy degree, making it possible for the pharmacy graduate to find employment in a wide range of professional openings.

2.3 - PROFESSIONAL OPENINGS



After graduating, the pharmacist can choose from a large number of professional openings, either in the public sector in one of the various governmental departments, or in the private sector. Of all the professional openings available, only three are exclusively reserved for pharmacists. The remaining options are freely open to graduates from other disciplines. The pharmacy, the hospital pharmacy and the technical management of distribution warehouses are the three activities specifically open to pharmacists. This category could also apply to posts in certain Public Administration Bodies, which are open exclusively to pharmacy graduates, such as the National Health Pharmaceutical Body, National Health System pharmaceutical inspectors, Primary Healthcare pharmacists, or military pharmacists. The Pharmaceutical Industry Other professional openings for pharmacy graduates are freely open to graduates from other disciplines: technical management, quality control and manufacturing techniques, technical information about medicines, pharmacology, business management, scientific documentation and dermatopharmaceutical industry specialist, among others.

- Analysis: clinical analysis, clinical biochemistry, parasitology and microbiology, etc.
- Food and nutrition: dietologist and food analyst.
- Others: orthopaedic, optical, medicinal plant or radiopharmacy specialist, expert in drug addiction, environmental specialist and teaching.

2.4 - SPECIALIST TRAINING



There are a range of **Pharmaceutical Specialisations**, regulated by administrative provisions governing the official title of Pharmacy Specialist, along with other specialisations which will be included in the future in Genetics or Immunology. These specialisations are structured into two main groups:

- Those which basically require **hospital training**:

Clinical Analysis, Clinical Biochemistry, Microbiology and Parasitology, and Hospital Pharmacy: which are the exclusive domain of pharmacists.

- Those which **do not basically require hospital training**, Radiopharmacy, Analysis and Control of Medicines and Drugs, Industrial and Galenic Pharmacy: these three specialisations, along with the four mentioned above, are the only ones that are currently regulated.

The following are still pending legislation, which is constantly being called for by both the General Spanish Council of Pharmacists and the Pharmaceutical Associations:

- Experimental Pharmacology.
- Industrial Microbiology.
- Nutrition and Dietetics.
- Environmental Health and Public Health.
- Food Technology and Hygiene.
- Experimental and Analytical Toxicology.
- Analysis and Control of Medicines and Drugs.
- Industrial and Galenic Pharmacy.
- Radiopharmacy.

2.5 - THE PHARMACIST'S ROLE



Apart from dispensing medicines, the pharmacist has a significant role as a health adviser, as statistics show that one in four people who visit a pharmacy only ask for health advice and do not buy any medicines. Pharmacists also work actively for the rational use of medicines from hospitals and health centres; they are active in the development and control of drugs from laboratories and distribution warehouses.

The increasing importance of the pharmacist's role in the health sphere has been recognised by various national and international organisations. The most recent of these was a European Council Resolution in March 2000, which advises the member States to extend the role of pharmacists in the context of health security. In this sense, express reference was made to an area in which the pharmacist has an essential role in the rational use of medicines: the use of non-prescriptive medicines.

The use of brand name medicines and non-prescriptive medicines are on the increase, creating an area of great responsibility for the pharmacist, as the only health professional in direct contact with people who take this type of medication. In this sense, the General Council of Pharmacists is aware that Brand Name medicines are just another type of medicine, the difference between medicines with and without prescriptions is purely administrative and therefore should be subject to the same health requirements. Brand Name medicines are essential for good health, but they can also cause undesirable effects as a result of their indiscriminate use. The dispensing of Brand Name medicines in community pharmacies is justified by their function as health promoters.

We should also bear in mind the work that is conducted alongside medicines and the ongoing activity of Pharmaceutical Care. Pharmaceutical Care consists of making the patient the focal point of professional activity, monitoring the prescribed treatment, supervising its observance, being committed to the results obtained and recording the entire process as if it were a medical history. In Pharmaceutical Care, the medicine ceases to be an end in itself and becomes a means to achieve expected therapeutic aims. In line with the World Health Organisation, beyond this definition we find the commitment of the pharmacist to ensure that the indication is appropriate, the medicine is suitable, and the administration, dosage and duration of the treatment are correct.

In order to develop his or her profession optimally and to offer a truly efficient response to the health problems presented by the patient, the pharmacist works in coordination with other health professionals, such as doctors, nurses, and others, and forms an active part of the multidisciplinary health team.

2.6 - NUMBER OF PHARMACEUTICAL ASSOCIATION MEMBERS PER SECTOR



Total number of pharmaceutical association members in Spain : 61,975

- Number of pharmacists who work in community pharmacies: 42,371
- Number of pharmacists working in industry: 1,505
- Number of pharmacists working as clinical analysts: 3,250
- Number of pharmacists who work in hospital pharmacies: 1,612
- Number of pharmacists working in distribution: 664
- Number of pharmacists working in dermopharmacy: 9,645
- Number of pharmacists working in nutrition and dietetics: 8,053
- Number of pharmacists working in orthopedics: 6,992
- Number of pharmacists working in optic and acoustic: 1,039
- Number of pharmacists working in teaching and research: 6,992
- Number of licensed who work in Public Administration Bodies and public health: 1,167
- Another activities: 3,716

3 - COMMUNITY PHARMACIES IN SPAIN**3.1 - DEFINITION AND FUNCTIONS**

The **Act 16/1997 of 25th April 1997 relating to the regulation of Community Pharmacy services establishes that** "community pharmacies are private health establishments in the public's interest, subject to the health planning rules laid down by the autonomous territories, in which the licensed-owner pharmacist, assisted where appropriate by assistants or auxiliaries, should provide the following basic services to the community:

1. - The acquisition, custody, storage and dispensing of medicines and health products.
2. - Vigilance, checking and custody of the prescriptions of dispensed medicines.
3. - Guaranteeing pharmaceutical care, in their pharmaceutical territory, for the population groups where there are no other community pharmacies.
4. - Preparing magistral formulae and medicinal preparations, where appropriate and in accordance with the established procedures and checks.
5. - Information and monitoring of patients' pharmacological treatment.
6. - Contributing to the checking of individualised use of medicines, in order to detect any side effects which could occur and notifying the responsible drug surveillance organisations of them.
7. - Working on programmes promoted by health administrations to guarantee the quality of pharmaceutical care and health care in general, promotion and protection of health, prevention of diseases and health education.

8. - Working with the health administration in the training and informing of other health professionals and users on the rational use of medicines and health products.
9. - Coordinated activities with the assistance structures in the autonomous territories' Health Services.
10. - Contribution to education for the obtention of the Master of Pharmacy degree, in accordance with the provisions in the European Directives and regulations of the state and universities which establish the corresponding study programmes for each of them."

3.2 - GENERAL PHARMACEUTICAL PLANNING CRITERIA



In Spain, the licensed pharmacist must obligatorily be a **qualified pharmacist**, either alone or working with other pharmacists, each of whom may only be the owner of one pharmacy.

The planning of pharmacies is provided for in Article 2.2 of the Act 16/1997, of 25th April, relating to the Regulation of Services in Pharmacies, which states that they will be opened in accordance with demographic and geographical criteria. These criteria relate to a regulation for community pharmacies for the benefit of the general public and thus of patients, and not the professionals.

In order to guarantee ideal distribution and easy access for patients, the 21.051 community pharmacies form an evenly distributed network across the entire national territory, which ensures that the provision of pharmaceutical services from community pharmacies reaches the entire population of Spain, as 98% of citizens have a pharmacy in the place where they live.

The competent Autonomous Regional Administrations are those that, on the basis of the planning criteria set forth in the State Act 16/97, lay down the population modules required to open pharmacies, such that concentrations of pharmacies are avoided in densely populated areas, thereby neglecting the health services available in less popular areas, whilst also providing for sufficient pharmaceutical care. This situation means that for many people, the only health professional immediately available is the local pharmacist.

3.3 - RECOMMENDATIONS FROM OFFICIAL INTERNATIONAL INSTITUTIONS



The prescribing of medicines is a health necessity, required to maintain services to patients and consumers. This is the opinion of the main international health organisations, as in their official recommendations and directives they have recommended greater and more comprehensive health guarantees from medicines. The latest of these recommendations was made by the European Council, which on 21st March 2001 approved an important Resolution relating to the role of the pharmacist in the context of health security. It advises member States to encourage responsible self-medication, highlighting the advisory role of pharmacists in the use of medicines and the positive acknowledgement of their role in controlling medicines.

In addition to this, the World Health Organisation, European Union institutions and other international organisations have also issued recommendations along the same lines.

3.4 - REGULATION OF MEDICINES



In order to guarantee the appropriate services to patients and consumers, the prescribing of medicines is undertaken as a health necessity. These criteria have been compiled in the laws of the state and autonomous regions of Spain since 1985, in terms of health and medicines:

- General Health Act of 1986
- Medicines Act of 2006
- Community Pharmacy Services Regulation Act of 1997
- Autonomous Pharmacy Planning Acts

3.5 - PHARMACEUTICAL SERVICES AND THE NATIONAL HEALTH SYSTEM



The health functions provided by the Spanish pharmacy model focus on the acquisition, custody, storage and dispensing of medicines, health products and parapharmacy products, including a wide range of activities focusing on promoting and protecting health, preventing diseases and undertaking health education functions. In addition to this, as a result of their service provision responsibility to the National Health System and their direct users, pharmacists have developed a structure of professional support services, through the Pharmacy Associations, paid out of their own remuneration. All of these activities are conducted with the sole objective of providing proper health care:

- **Dispensing of medicines and health products.** In order to conduct their main activity of dispensing medicines, the pharmacy requires an infrastructure which is essential for it to guarantee both the accomplishment of their professional activity, and to obtain sufficient financial resources to pay for the operative running costs and acquisition and subsequent maintenance of necessary investments. This section includes: a sufficient stock of medicines, commercial premises with a minimum series of requirements, fittings and personnel. We should also bear in mind the emergency services provided by pharmacies, at no extra cost to the National Health System, unlike in other European Union countries.
- **Pharmaceutical advice.** Apart from dispensing medicines and health products, pharmacists' tasks also include giving advice on medicines and health-related matters. In 1997, the sociological study "The pharmacist's contribution to the quality of health care in Spain" highlighted that during that year, Community Pharmacies had provided a total of 150 million services related to health advice tasks, in response to actual requests from the public.
- **Prescription invoicing system.** This service is undertaken by the Pharmacy profession. This invoicing system guarantees the ongoing health and financial control of medicine consumption, making it possible to find out exactly the expenditure on medicines dispensed under the National Health System. It also enables essential epidemiological studies to be conducted in order to formulate health policies.
- **Information on medicines.** Through the Pharmacy Associations and the General Council, the pharmacy profession undertakes a series of investments in order to provide professionals with a range of information sources on medicines. Thus there is a Medicine Information centre within the General Council and 52 provincial Medicine Information Centres for each Association. The Medicines Database is constantly being updated. Publications used by pharmacists and other health professionals. Scientific journals on medicines and Technical Reports supplement the broad range of information resources on medicines.
- **Health campaigns.** The Pharmacy Associations and General Council of Pharmacists undertake health education campaigns aimed at the general public in such areas as: Nutrition, Weight control, Prevention and Control of Nicotine addiction, Medicinal Plants, Sun Protection, etc. The financial cost of these activities is assumed by the individual pharmacists.
- **Supervised professional experience.** For ten years now, Spanish Pharmacists have been contributing to the teaching of the subject, offering a greater

number of credits for Pharmacy studies: through supervised professional experience. Of the 2,500 students who complete their Pharmacy studies each year, some 2,000 of them undertake 6 months training in Community Pharmacies. For this, pharmacists make available to the University - free of charge - the premises, material resources, qualified, experienced personnel and training time.

- **Continuous training.** The pharmacists themselves are responsible for their own training and updating of their knowledge. Since 1997, more than 30,000 pharmacists are registered with the National Continuous Training Plan of the General Council of Pharmacists, exceeding the participation rate of any other health profession. In addition to this, the Pharmacy Associations organise other training activities mainly undertaken by pharmacists. All of these training activities are financed by the profession.
- **Pharmaceutical distribution of medicines.** The pharmaceutical ownership of distribution entities benefits the nation's and private individual's Health. The average distribution of medicines is estimated at three times a day, which would not be profitable from a purely financial standpoint. It ensures that medicines arrive even in the furthest reaches of the country, under the same conditions: the same medicine, at the same price, under the same storage conditions and at the same time as in a major city.
- **New professional projects.** Implementing the Strategic Plan for the Development of Pharmaceutical Care through the Pharmaceutical Associations, in order to offer the general public a personalised health service which guarantees the rational use of medicines and appropriate treatment provision, and encourages the promotion of health and healthy habits. The health card is the ideal way of organising Pharmaceutical Care, through the provision of a universal, high-quality service. In order to provide this service, which implies an enormous saving for the health system, the pharmacist provides the logistical structure and support technology. In this sense, the General Council of Pharmacists together with the Ministry for Health and Social Policy, has created a Health Card and Electronic Prescription working party. Lastly, the portal of the pharmaceutical profession (www.portalfarma.com) aims through this communication system to focus the individual activities of pharmacists and their Pharmaceutical Association, in the form of a corporate intranet. This method is also used to offer the general public, health administrations, pharmacy faculties, the media, institutions and businesses in the sector with a series of professional services, for the benefit of Spanish Health.

3.6 - THE COMMUNITY PHARMACY MODEL FACTS AND FIGURES



For some time and particularly over the past fifteen years, Spanish pharmacy has been working to develop a Community Pharmacy model that enables a service to be maintained in line with the other services provided by the National Health System.

The data below reflects the true facts about Spanish Community Pharmacies:

- Spanish pharmacy, compared with other surrounding countries, is closer and more accessible to the public.
- The pharmacy is more efficient and offers a higher service quality. For 98% of the population, there is a pharmacy in their place of residence.
- Spain is one of the countries with the highest proportion of pharmacies per inhabitant. This average actually currently stands at a critical level, as if it fell, it would have a significant impact on the service quality.
- Data from the Pharmacy industry, the OECD and the EU Pharmaceutical Group demonstrates that Spain, compared with other European Union countries, has:
 - The lowest average price for medicines, excluding France.
 - The lowest average sales per pharmacy in Europe.
 - The highest average consumption of medicines per inhabitant, after France.Spain is the European country with the highest number of pharmacies opened over the past ten years.

- Every day, a sufficient number of pharmacies throughout Spain operate a 24-hour duty service, in order to provide emergency services to the entire general public.
- From the 21.051 community pharmacies throughout Spain, independent health advice is provided on medicines and health-related matters.
- The pharmacists' professional activity results in one in four people visiting a pharmacy requesting a non-prescriptive medicine leaving without purchasing anything, as it is the most advisable solution for their health problem.
- The health advice work undertaken by pharmacists as being worth some 1,740 million euros, which implies a saving of the same amount for the public and private health systems, as this work is undertaken by Community Pharmacies, without directing patients to other health structures.
- The pharmacist is one of the most highly **regarded health professionals by the general public**.
- The current pharmaceutical planning enables medicines to arrive **under the same conditions for people** living in urban areas and in villages in the most outlying areas of Spain.
- Pharmacy is not a financially homogenous sector: 6,000 pharmacies earn less than 1,200 euros per month.
- 48,000 families currently live from pharmacy, which is a far higher employment figure than other activity sectors and the majority of industrialised sectors.
- Spanish pharmacy permanently finances the National Health System, by dispensing medicines to the System's beneficiaries, owing to the delay in payment.
- Expenditure on medicines means that diseases which were previously treated in hospital are now treated on an out-patient basis, resulting in a freeing up of hospital beds.

4 - STATISTICAL DATA ON PHARMACY SERVICES



4.1 - THE COMMUNITY PHARMACY MODEL FACTS AND FIGURES

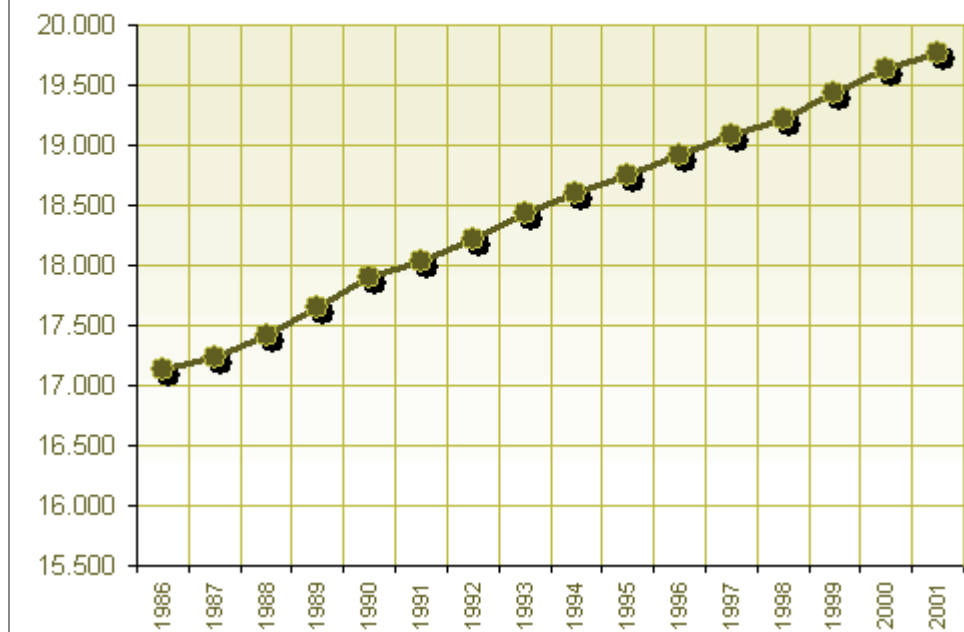


N° of Community Pharmacies / Annual Increase		
YEAR	N° OF COMMUNITY PHARMACIES	ANNUAL INCREASE IN THE N° OF COMMUNITY PHARMACIES
1986	17.138	150
1987	17.240	102
1988	17.415	175
1989	17.651	236

1990	17.896	245
1991	18.031	135
1992	18.217	186
1993	18.429	212
1994	18.593	164
1995	18.745	152
1996	18.909	164
1997	19.080	171
1998	19.222	142
1999	19.439	217
2000	19.641	202
2001	19.766	125
2002	20.098	332
2003	20.348	250
2004	20.461	113
2005	20.579	118
2006	20.741	162
2007	20.941	200
2008	21.057	116

Source: C.G.C.O.F

Number of Community Pharmacies



4.2 NUMBER OF INHABITANTS PER PHARMACY IN EUROPE (2007)



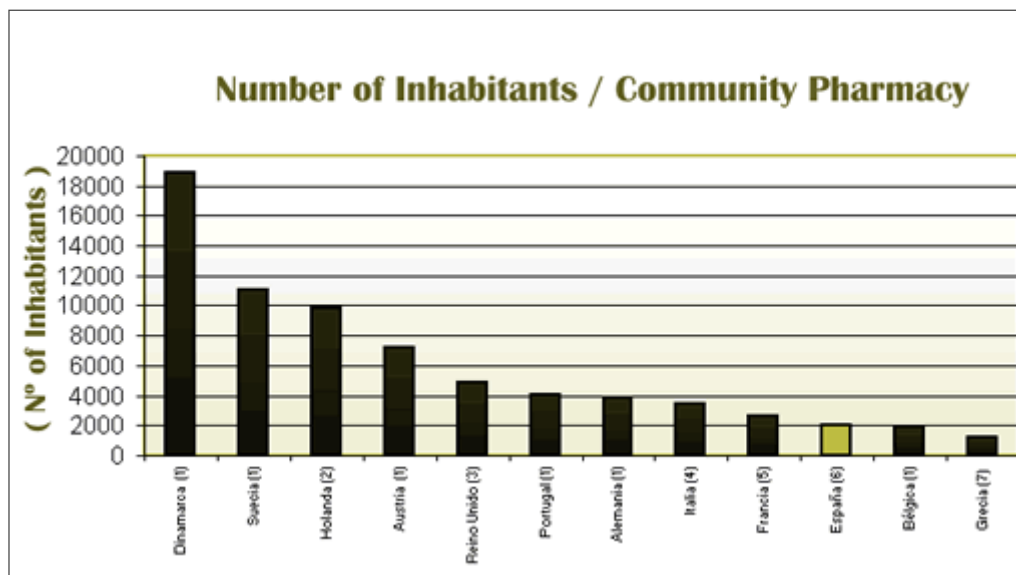
Number of Inhabitants / Community Pharmacy

COUNTRY	Nº OF INHABIT./COMMUNITY PHARMACY
Dinamarca (1)	16.957
Suecia (1)	10.395

Holanda (2)	8.832
Austria (1)	6.734
Reino Unido (3)	4.732
Portugal (1)	3.827
Alemania (1)	3.814
Italia (4)	3.376
Francia (5)	2.824
España (6)	2.159
Bélgica (1)	2.045
Grecia (7)	1.176

Source: (1) P.G.E.U.; (2) S.F.K.; (3) R.P.S.; (4) Pharmacy industry; (5) C.N.O.P.; (6) C.G.C.O.F.; (7) E.C. Eurostat.

Spain, Belgium and Greece are the European Union countries with the lowest numbers of inhabitants per Community Pharmacy. In Spain, 98% of the population has a pharmacy in their place of residence.



More information: Report Distribution of Pharmacy in Spain (February 2009. Spanish)

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