Although emergency contraception or the “morning-after pill” is not new, recent FDA approval for the drug “Plan B” to be sold without a prescription has brought the controversy again to the forefront of medical and political debate and has renewed the fervor surrounding it. For some, the decision has been heralded as a victory in improving access to necessary women’s healthcare, for others it is viewed as further evidence of a breakdown in the moral fiber of society. The medical, social, and political consequences are currently being discussed at great length, with valid arguments supplied by both sides. Simply turning on the television or reading a newspaper in the last couple of weeks has been enough to expose the viewer or reader to a stream of commentary from women’s groups, medical organizations, and politicians. Interestingly, the voice of a key player in the delivery of emergency contraception has been largely overlooked, that of the pharmacist.

Aside from FDA directives that Plan B will be kept behind the pharmacy counter and that a pharmacist must validate the age of the purchaser, there has been little discussion as to the impact this decision will have on the practice of pharmacy. This is not surprising to members of the pharmacy profession, as we are used to “flying under the radar” and performing our service to the public with little or no fanfare. It is safe to say that most department or grocery store shoppers do not spend much time contemplating what goes on behind the windows or high counters that enclose most retail pharmacies. Many individuals picking up their prescriptions may likewise not know what has gone into the filling of their medications and even those patients being counseled by a pharmacist on how to properly use their medications may similarly not realize what a valuable service is being rendered. An appreciation of the many duties of pharmacists and the quiet diligence by which most conduct themselves is necessary to understanding the overall role they play in the delivery of healthcare and begs the question: what do pharmacists think of emergency contraception without a prescription?

While I cannot speak for all members of my profession, I believe most would agree that the pharmacist of today is different from the pharmacist of 10 or 20 years ago. Advances in medical therapies and the sheer number of drugs have necessitated the separation of a group of healthcare professionals whose primary responsibility is to keep track of the ever-growing number of available medications. Pharmacists fit that bill. They are recognized...
Plan B ~ continued from Page 1...

drug experts who are educated and trained in how drugs work and how they interact with each other. Pharmacists are expected to provide their knowledge to the physicians who prescribe drugs and to counsel patients who take them. This goes for drugs that require a prescription as well as for those that do not. In fact, when it comes to over-the-counter medications, pharmacists have perhaps an even greater responsibility to make sure that they are used correctly, as the pharmacist is probably the only healthcare professional who will see these patients prior to their taking them.

Emergency contraception represents an interesting case for an over-the-counter medication in that there has never been one so controversial. In some ways, Plan B may be regarded as simply a drug, with the same respect due any drug or chemical that patients introduce into their bodies. It must be used appropriately and may cause side effects. Pharmacists who sell it must educate patients on how to take it and what to expect. But in other ways, a drug like Plan B is something different entirely. To some, selling Plan B represents participation in an act that violates deeply-held personal beliefs regarding life and the potential for life.

Although the way emergency contraception works has been widely publicized in recent days, it bears reiterating. The most important point to be made is that Plan B does not and will not cause an abortion. As a medical term, an abortion is defined as the termination of a pregnancy and because of this definition, this would only be possible after a fertilized egg had implanted in the uterus and a pregnancy had begun. Research shows that if Plan B were to be taken by a pregnant woman, it would simply have no effect. The makers of the drug state in their product labeling information that Plan B acts “principally by preventing ovulation (the release of an egg from the ovary) or preventing fertilization (the uniting of sperm and egg).” They go on to say, “in addition, it may inhibit implantation (the embedding of a fertilized egg into the lining of the uterus).” It is this last statement that causes problems of conscience for some. While it is widely agreed that Plan B works predominantly via prevention of ovulation or fertilization, the possibility exists that implantation may be prevented if the drug were to be taken after ovulation had occurred or after an egg had already been fertilized. This is an important point as there are those who believe that fertilization itself brings into being a human life and a drug that may act to block implantation is a drug that could stop the development of that newly created life. While this is different from an abortion, it is still morally troubling for some and among healthcare professionals, becomes a reason not to participate in the provision of emergency contraception. In the case of physicians, this means exercising a right of conscience not to prescribe it. In the case of pharmacists, it means exercising a similar right of conscience not to sell it.

Although healthcare professionals may assert such a right to act according to their consciences, this right must be tempered by other considerations. Like any healthcare profession, pharmacists belong to a group that shares a commitment to serving the good of society. But in addition to their medical responsibilities, pharmacists are also moral individuals who are entitled to decide for themselves in which activities they will participate. Conflict arises when an appropriate balance is not struck between healthcare professionals’ responsibilities to their patients and the personal demands of their individual consciences.

There are some who propose that pharmacists should not be allowed to incorporate their own personal beliefs into their professional conduct. They say that pharmacists must place the needs and desires of their patients above all else. There are others who will argue that pharmacists should be allowed to refuse to participate in anything they consider to be immoral, because they are moral beings with a right to choose. I would propose a compromise that allows for the appropriate care and service due to patients while at the same time respecting as much as possible the moral sensibilities of the pharmacist.

Pharmacists, as healthcare professionals, must hold sacred their duty to serve patients and realize that given the line of work they have chosen, there may be times when dilemmas of a moral nature arise. When faced with such situations, they must never use their position to intimidate, coerce, or preach to patients who seek services that may be against the pharmacists’ own personal values. In these situations, pharmacists are professionally obligated to provide a way for patients to obtain their medical needs and desires, if necessary by referral to another pharmacist or pharmacy. In extreme situations where there may be no other pharmacist or pharmacy available, it may become necessary to provide for the patient, despite any personal beliefs the pharmacist may have. No healthcare professional has the right to play a moral “trump card” and invoke his or her conscience as the final word on the care a patient may receive.

The debate surrounding emergency contraception is far from over and the decision to move Plan B over-the-counter promises to make a difficult situation even dicier. Because the drug is not expected to be available in retail pharmacies until the end of the year, there is still time to educate the public on what emergency contraception is, what it isn’t, and hopefully determine what impact the FDA’s decision may have on different parts of the healthcare system and society. While there are many interests and opinions to consider, the point of view of the pharmacist is one that should not be left out. Pharmacists have much to contribute to this dialog and as the gatekeepers of over-the-counter medications, they have important and unavoidable responsibilities as well.
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The College of Pharmacy Professional Achievement recipient is honored at the annual Pharmacy Graduation Banquet the evening before commencement.

A list of qualification and nomination forms for the 2007 Professional Achievement Awards may be found at [www.isu.edu/departments/alumni/proawards.htm](http://www.isu.edu/departments/alumni/proawards.htm)

Help us honor our deserving alumni and nominate a friend, fellow graduate or colleague today.

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Hillcrest Country Club
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6 p.m. social - 7 p.m. dinner
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$30 per person
RSVP by Oct. 1st
208-282-4597
kal@pharmacy.isu.edu

Alumni & Friends - Please Join Us!

ISU & College of Pharmacy events:

- **I Love ISU Scholarship Campaign**
  - Sept. 11 - 21 - Idaho Falls & Pocatello - calling to area businesses and alumni for scholarships

- **ISU Homecoming 2006 ~ “Harvest of Memories”** ~ Sept. 23. Bengals vs. Northern Arizona, Kick-off at 3:05 p.m., Holt Arena

- **Treasure Valley Alumni Banquet**
  - Oct. 13, Hillcrest Country Club
  - Boise - choice of halibut or prime rib - Funny Bone Comedy Club comedian - RSVP to 208-282-4597 or kal@otc.isu.edu by Oct. 1st

- **Pharmacy Game Day ~ Oct. 21,)**
  - Bengals vs. Montana State, Kick-off at 3:05 p.m., Holt Arena

For more information regarding pharmacy events, contact Andrew at 208-282-3393 or andrew@pharmacy.isu.edu