

The Pharm. D. Degree and the Title by Which Pharmacists are Addressed.

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From the time that the Accreditation Council of Pharmaceutical Education (ACPE) issued the Notice of Intent to change the standards for existing dual B. Sc. and Pharm. D. degree programs.^{1,7} to the time that the ACPE proceeded in June 1997 to announce the adoption of a plan to phase out the bachelor's degree in favor of the Doctor of Pharmacy (Pharm. D.) it was a struggle against conflicting opinions. It was in 2000 that ACPE proceeded to make the final announcement that only the Pharm. D. degree will become the sole degree accredited for pharmacists' entry into practice in the USA.^{1, 2} Provisions were made for pharmacists working with the bachelor's or master's degrees to earn the Pharm. D. degree. It was proposed that programs should be tailored to the individual's background and experience and follow nontraditional pathways, but ultimately must yield the same educational outcomes as the entry-level Pharm. D. There have been positive responses to the timeliness and acceptability of the Pharm. D. degree at all levels and the outcomes have also been overwhelmingly positive.

From the time when ACPE made the Pharm. D. degree mandatory in 2000 to 2007, enrollment in pharmacy schools increased from 34,481 to 50,691. New pharmacy schools have been opened leading to an increase in ACPE accredited institutions from 81 in 2000 to 112 in 2007, and new ones are still scheduled to open in the coming years. From 2007 to 2011, the number of accredited pharmacy schools have risen to 124.⁶ In spite of the high increase in the number of pharmacy schools, there are not enough seats for all the qualified students applying to these institutions. It is projected that the number of enrolled students will increase to 13,822 by 2014.⁶ Actually, there is a shortage of practicing pharmacists and available vacancies are difficult to fill. The Pharmacy Management Project assessed this manpower shortfall in terms of Aggregate Demand Index (ADI) using a scale of 1 to 5 to rate the severity of the supply and demand relationship. The larger the value of the ADI, the more severe the shortfall. The national ADI value peaked at 4.33 in 2005 and as of August 2008, the value was still 3.88. All of these suggest that there is a widespread acceptance of the Pharm. D. degree by students seeking admission to pharmacy schools, and there has been no deleterious effect on the retail industry with respect to higher compensatory demand for the Pharm. D. degree holders.

In assessing the ACPE's bold initiative to accredit only the Pharm. D. degree, it is safe to declare that it has been a success. Following on the heels of such a success, other countries including Canada, India, Pakistan and others.^{3,7, 10} are embarking on making the Pharm. D. degree an entry-level requirement for their pharmacists. Another fallout of the success of the ACPE initiative is that other health professions such as physical therapy and dietetics are in the process of making a doctoral degree an entry-level requirement.

However, as the success of the Pharm. D. degree reverberates on many fronts, it is evident that the holders of this degree are not enjoying one of the benefits of holding the degree. According to Wikipedia definition of this degree, "*Pharmacist who acquire a PharmD degree are legally allowed to add the prefix "Dr." before his / her name.*"⁵ From conversations with former students who now hold the Pharm. D. degree, it has become clear that patients do not address their pharmacists by the professional title, DOCTOR. To explore this disconnect between the pharmacists and their patients, I conducted informal interviews with people of various backgrounds to examine the reason(s) why patients have not warmed up to the practice of addressing their pharmacists as doctors.

The overwhelming responses clearly showed that there is a poor public awareness of the pharmacist's degree of Pharm. D. It is evident that if the public is aware of this degree, they would readily address the pharmacist by their professional title, "Doctor". The question that readily comes to mind then is what is the origin of this lack of awareness? While there may be no ready answer to this question, if there is no objection from the profession, then the profession can certainly facilitate a title recognition for the pharmacists who labored to earn the Pharm. D. degree.

It was a battle fought to victory to award this degree to our students. It seems the final battle front for the profession is to win this other battle for addressing the pharmacist by his/her professional title.

Two responders made some interesting comments to the last item on the survey instrument. One responder who answered YES to the question wrote: *“He or she deserves that title as much as some one with a doctor of education or a doctor of divinity.”* A responder who answered NO to the question wrote: *“In a small community, the MD is the doctor, and the pharmacist is the pharmacist. So it will be confusing if we start calling the pharmacist ‘doctor’.”* Although these two responders’ answers were opposite one another, there is no real objection to addressing the pharmacist by the title DOCTOR. Hence since the clients do not have a serious objection to the title DOCTOR for the pharmacist, then it is up to the profession to facilitate a smooth path to make the public aware of the pharmacists’ professional title.

It is apparent that some pharmacists are reluctant to accept being addressed by this professional title while other healthcare professionals recognize the significance of this degree for pharmacists as illustrated by the following quotes.^{5, 7, 9}

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