

Pharmacists' regulator's proposal to remove conscience rights

Unethical, unnecessary and quite possibly illegal



hould pharmacists be forced to dispense drugs for what they consider to be unethical practices – like emergency contraception, gender reassignment, abortion and assisted suicide? Or should they have the right to exercise freedom of conscience by either referring to a colleague or opting out?

The General Pharmaceutical Council (GPhC), ¹ the independent British regulator for pharmacists, pharmacy technicians and pharmacy premises, is proposing to replace the current 'right to refer' with a 'duty to dispense' in what it admits represents 'a significant change from the present position'.

The Council frames this 'person-centred' care in terms of a universal right for clients to 'access' legally prescribed drugs and devices. Pharmacists would thereby be pressured to comply or risk disciplinary procedures and/or possible loss of employment. Potential trainees could be dissuaded from pursuing a career in pharmacy altogether. CMF has made a submission² to the consultation on the draft proposal, which closed on 7 March 2017. The Council is expected to report its conclusions in the next month or two.³

Pharmacists who believe that human life should be respected from the time of fertilisation will generally object to dispensing 'emergency contraceptives' like *levonelle* and *ellaOne*⁴ that may act by preventing the implantation of an early embryo. ⁵ Highly contentious gender reassignment procedures, involving hormones to block puberty in children, or to aid transsexuals to 'transition' to the opposite gender, are another area where the new regulations will put pharmacists under pressure to comply. Assisted suicide, euthanasia and home abortion are currently not legal in Britain, but were they to become so, this would leave pharmacists further exposed.

Freedom of conscience has been a core ethical value, foundational to healthcare practice as a moral activity, from the Judeo-Christian ethic and Hippocratic Oath ⁶ to the General Medical Council's *Good Medical Practice*. ⁷ The right of conscientious objection is not a minor or peripheral issue. It goes to the heart of medical practice as a moral activity. It helps to preserve the moral integrity of the individual clinician, preserves the distinctive characteristics and reputation of medicine as a profession, acts as a safeguard against coercive state power, and provides protection from discrimination for those with minority ethical beliefs. ⁸

Most people can understand and respect the right of health professionals not to be involved in activities which they regard as abhorrent – obvious examples in other jurisdictions where doctors have been complicit include female genital mutilation, punitive amputation, torture, capital punishment or organ harvesting from prisoners or street children. But equally we need to recognise that many healthcare professionals in Britain, not all Christian, regard practices such as abortion, assisted suicide, gender reassignment or embryo disposal or experimentation to be similarly morally wrong.

Pharmacists are healthcare professionals in their own right. They are not rubber stamps or vending machines. Accordingly they deserve to be treated by their regulators with the respect due to their professional status and should not be forced to do things they regard as clinically inappropriate or morally wrong.

There are better ways to ensure that freedom of conscience is respected whilst still enabling people to access services to which they have a legal right.

The GPhC could, for example, leave the current guidance, which grants a right to refer, unchanged. They already admit that only 'a *small number* of complaints' relating to 'fitness to practice' are received annually. Second, they could follow the GMC, which permits doctors to 'opt out of providing a particular procedure because of [their] personal beliefs and values...'. Third, they could adopt the approach of the pharmacists' professional body, the Royal Pharmaceutical Society (RPS), which proposed, in the event of assisted suicide being legalised, that those pharmacists willing to dispense lethal drugs should 'opt in' by placing their names on a register. 11

If instead the GPhC presses ahead with imposing a 'duty to dispense' it will not only be running roughshod over the professional status of pharmacists, but could also be opening itself up to a legal challenge.

There is already a substantial body of law on conscience protection, not least Article 9(1) of the European Convention of Human Rights (ECHR), which provides a right to freedom of 'thought, conscience and religion'. Whilst this is not absolute, and needs to be balanced against other democratic rights, any intervention must be shown to be *both* necessary and proportionate. It is hard to see how this move by the GPhC fulfils either of these requirements.

The GPhC's proposal to remove pharmacists' conscience rights is disproportionate, unethical, unnecessary and quite possibly illegal. Let's ensure that we speak out in support of our pharmacist colleagues and pray that the GPhC chooses a more flexible, tolerant, respectful and sensible path.

Peter Saunders is CMF Chief Executive.

references

- GPhC Website bit.ly/2mlXVcZ
 Response of the Christian Medical Fellowship to the General Pharmaceutical Council consultati
- Pharmaceutical Council consultation on 'Religion, Personal Values and Beliefs'. CMF 9 March 2017 bit.Jy/2mYS2dB
- 3. GPhC. Consultation on religion, personal values and beliefs in pharmacy practice. GPhC; 2016 bit.ly/2nEbOn8
- Saunders P. UK retailers are not being honest about the mode of action of new morning-after-pill ellaOne (ulipristal acetate). Christian Medical Comment 4 November 2010 bit.ly/TwW.JIS
- Alvare H. 'Emergency contraception' can cause abortions, Big Pharma admits. Mercatornet 17 January 2017 bit.ly/2iuplzZ
- 6. Hippocratic Oath bit.ly/1FxOzal
- GMC. Personal Beliefs and Medical Practice. GMC; 2013 bit.ly/1xzSjzm
- Wyatt J. The doctor's conscience. *CMF Files* 2009; 39 bit.ly/2502Vdq
 GPhC Meeting. 12 April 2012
- bit.ly/2n9AHil

 10 GMC Personal Beliefs and Me
- GMC. Personal Beliefs and Medical Practice. GMC; 2013(8) bit.ly/1QvEZbx
- Royal Pharmaceutical Society. Policy Statement on Assisted Suicide. RPS; 2013 bit.ly/2nmS6EX