PHARMACY COUNCIL 1 EVS



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As we move towards the end of 2020, we must rethink and reflect back what have we done and achieved in the past years. I think we have lost our professional standing simply because our clients cannot visualize us as tradesmen and professionals simultaneously. Yet we are gradually embracing changing our roles as professional but still

there are number of factors that opposes such changes. Those factors include lack of consensus regarding the professional goals, resistance to broaden pharmacist role beyond dispensing functions, lack of professional competence and self- confidence.

The truth is, there are still opportunities to bring changes considering positively on the impact of the patient's drug therapy outcomes through disease state management, expanded use of pharmaceutical technicians in the dispensing process, increase demand for drug information among the health professionals and consumers. This has not done optimally and therefore called upon all pharmacists to articulate and see how best this can be done. We need to acquire continuing education particularly in clinical pharmacy practice to embrace such changes.

However, there should be a number of steps to be considered as we prepare to shift towards a profession-wide, patient centered practice model. A collaboration between pharmacy educators and the profession is important to improve education and training systems and develop a patient-centered practice model. We look forward to revise the pharmacy practice system to support a level of patient care that genuinely will impact the health outcomes. It is a high time for the educators to look again for the curricula and address these issues seriously. The Council is looking forward to establish an environment by projecting a unifying vision for the profession by providing mentorship program. We must become agents of change and acquire greater leadership and management abilities.

Elizabeth Shekalaghe Registrar

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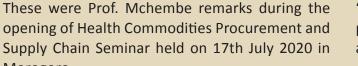
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Prof. Mchembe Stresses on Professional Ethics

The Permanent Secretary in the Ministry of Health, Community Development, Gender, Elderly and Children, Prof. Mabula Mchembe asserted the importance

of pharmacist's adherence to professional ethics and their commitment in delivering high quality pharmaceutical services to the public.

Morogoro.



"I want all pharmacists to reorganize themselves and align with the current situation. Since the country has been categorized as middle income country, you as professionals must equip yourselves and ensure services and patients' demands are met across the country" said Prof. Mchembe.

Prof. Mchembe further narrated that through Corona Pandemic we are now at speed and more proficient in manufacturing our locally made masks and hand sanitizers. He however insisted on improvement of pharmaceutical services in all health facilities including dispensaries and public health centers to ensure availability of all essential medicines. Access and availability of such medical supplies will limit patients from purchasing medicines and supplies from private vendors.

"Improvement of health services is among the priorities of our President. There are hospitals that are well equipped but lack professional expertise.

I urge you professionals to not choose or specify work stations but rather be in accord to provide services at any health facility" Prof. Mchembe insisted.

To curb this challenge, the Permanent Secretary directed the Chief Pharmacist Daudi Msasi to provide a guide that will facilitate effective allocation of pharmacy professionals to available health facilities. This will ensure provision of excellent pharmaceutical services to the public.

Prof. Mchembe was firm on the use of data and record keeping through GoT-HoMIS and similar systems in order to streamline health service delivery and effective patients' record keeping.

Participation of Pharmacy Council in the 2nd Tanzania International Students Graduation Ceremony

By Annette Ezekie



Deputy Registrar of Pharmacy Council, Pharmacist Zainabu Nyamungumi on interview with various media during the 2nd Tanzania International Students Graduation Ceremony

Students pursuing Pharmacy profession from different universities within the country and abroad are required to undergo practical trainings in recognized hospitals, regulatory authorities and industries under supervision of recognized pharmacist as a requirement of registration by Pharmacy Council.

This was elaborated by the Deputy Registrar of Pharmacy Council, Pharmacist Zainabu Nyamungumi during the 2nd Tanzania International Students Graduation Ceremony organized by Global Education Link Limited in September, 2020 at Mlimani City grounds, Dar es Salaam.

Over 410 students and only eight (8) being pharmacists students were enrolled through Global Education Link and have successful met their academic curricular requirements and graduated in overseas universities in various fields including Medicines and Allied Sciences. The ceremony was graced by various government officials, education

stakeholders, employing institutions, business entities, officials from various embassies in Tanzania and dignitaries.

With a population of nearly 59 million people, Tanzania has only 2079 registered pharmacists to-date. This means that there is a huge opportunity for upcoming students and as a middle income economy; the country depends on both healthy population and promotion of medical producing industries, which raises the need for more qualified pharmacists.

"Currently, the Council is encouraging and channeling intern students not only to hospitals and health centers but also to pharmaceutical industries so that they can acquire more practical experience in manufacturing medicines and get motivated to engage in the pharmaceutical industries so that more medicines and infusions can be processed locally and used in the hospitals and create jobs in the future", deputy registrar insisted.

Pharmacist Nyamungumi also urged students studying abroad, especially the pharmacy professionals, to ensure that they register with the Tanzania Commission for Universities (TCU) and be recognized.

For her part, Head of Education and Training Department, Pharmacist Grace Mallange said that those who pursue the same academic discipline abroad are below 40 who graduate every year, and the need for more qualified and trained pharmacists was also rising due to the reality on the ground that the population depends on the number of pharmacy professionals.

She added that while the demand continues to grow as the government builds new hospitals and health centers, yet there are a number of opportunities arising in private businesses and industries.

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Capacity Building: Teaching Methodology Course

By Emily Mwakibolwa



Tutors attended Teaching Methodology and Assessment Course, CEDHA, Arusha (03rd – 27th August, 2020)

From 3rd – 27th August 2020 Pharmacy Council in collaboration with Christian Social Services Commission (CSSC) coordinated one (1) month training on Teaching Methodology and Students Assessment course at Centre for Education and Development in Health (CEDHA), Arusha. A total of 29 tutors from different Pharmacy Institutions from all over the country attended the training.

The purpose for this training was to build the capacity of pharmacy tutors in teaching methodology skills and students assessment and to enable the participants to become competent teachers.

The training was divided into two parts, Teaching Methodology which was conducted for two weeks and Assessment for the remaining two weeks.

Before the course commencement tutors were given a pre-course examination and after finishing the course they were given a post-course examination for the purpose of evaluating the pre and post course knowledge of participants.

At the end of the Course participants were given their certificates by the Guest of Honour Mr. Peter Maduki from CSSC, who encouraged the graduates to go on searching and attending short /long courses so as to improve their career and practice thus bringing positive impact to the whole society.

Similar training was conducted under auspicious of the Pharmacy Council in 2017, whereby each pharmacy training school nominated one participant to attend. The Council insists that in future no pharmacy training institution will obtain approval unless all the pharmacy tutors have qualified for such an important training.

↔ From Pg.2

"Most people rush to pharmacies for treatment than hospitals, this means that, we need more qualified pharmacists who will provide credible pharmaceutical services so that safe and timely recovery is guaranteed", she pointed out.

Sharing Best Practice with Mbeya Zonal Referral Hospital

Presence Of Infusion Unit - A Solution Towards Shortage Of Rehydration Fluids

Mbeya Zonal Referral Hospital (MZRH) is one of the highly ranked hospitals entrusted to provide both preventive and curative healthcare services in Tanzania. The hospital was upgraded to serve as a tertiary hospital in 1984. In the realm of providing healthcare services, the hospital serves almost 8 million people in a zone that encompasses the Southern Highland Regions of Ruvuma, Iringa, Songwe, Mbeya, Rukwa and Katavi.



Mbeya Zonal Referral Hospital Executive Director Dr. Godlove Mbwanji

Speaking with the Hospital Executive Director Dr. Godlove Mbwanji, he emphasized that, through the spirit of team work, they have managed to be a center of capacity building through training and research activities, patients and client care and treatment.

"In executing day to day duties, our hospital collaborates with many strategic partners in various activities and research such as Baylor International Pediatric AIDS Initiative (BIPAI), Walter Reed Program, Mbeya Medical Research Center (MMRC) among many others to create better value and user experiences" he added.

The Director highlighted that, the hospital has 20 departments that work as one entity to achieve common goals. All staff members are regularly trained on customer care and equipped with both technical as well as corporate change.

CORE VALUES

The Core Values of the Hospital includes but not limited to Excellence, Respect, Team work, Accountability and Transparency.

Infusion Unit in MZRH

The Hospital Director further narrated on the Infusion unit which started production of rehydration fluids on 27th Feb 2019. The initial running cost on investment of the unit was about 120,000,000/= TSH but currently the running cost is only human resources, water and electricity.



Pharmaceutical Professionals during production of IV formulations



"Under outstanding supervision of Hospital Pharmacist, pharmaceutical personnel participate fully on production of intravenous fluids and compounding of extemporaneous preparations. Pharmacy Department has collaborated well with other departments to ensure that they deliver effective and quality pharmaceutical services as one of the commitments to support the Nation in achieving Universal Health Coverage by 2030" Dr. Mbwanji added.

Pharmaceutical Personnel Roles in Hospital

He stressed that, among other functions, Pharmaceutical personnel perform well in management of pharmaceuticals, medical devices, production of intravenous fluids and compounding of extemporaneous preparations.

The pharmacy team also oversees proper logistics of medicines and medical devices with collaborations with procurement team making sure that medicine and medical devices are available and of the quality desired.

Advantages of Infusion Unit to MZRH

The Head of Pharmacy Department, Pharmacist John Mallya commented on the tangible significance of the infusion unit. "Currently rehydration fluids are readily available and they have reduced purchasing cost from Medical Stores Department and other suppliers" he said.

Pharmacist Mallya added that, they produce distilled water for various hospital use including methadone and dialysis unit. He also pointed out that, irrigation procedures are well supplied with already made fluids in special containers.

Besides that, various compositions are made in the unit which cannot be found easily in the market, e.g. Nacl 3%, and various formulations as per physicians need, he added.

"The facility produces different types of infusions including Ringer Lactate (Lactated ringers, LR), Normal saline, dextrose 5% in water, 3% sodium chloride, 10% dextrose, water for injection and 50% dextrose when needed. The infusion unit in the hospital has been fundamentally a benefit to the ICU, Dialysis and Maternity wards" said Pharmacist Mallya.

"The highest regard for human life through pursuance of the highest level of pharmaceutical services, commitment to a client centered working relationship and transparency demonstrated in the management of the unit have altogether played a vital role in making sure that the production and other supporting logistics are consistently reinforced" he added.

Production Capacity

The unit can produce 3840 litres (7680 bottles of 500mls) of infusion per month whilst the hospital demand is 5232 (10,464 bottles of 500ml) litres. This means they save 73% of the total hospital demand.

Various compositions are made in the unit which cannot be found easily in the market, e.g. Sodium Chloride 3%, and various iv formulations as per physicians need

Future Plan of Infusion Unit

- To increase the production so as to supply 100% of the hospital need.
- Production of ophthalmic preparations which are rarely available in the market but highly needed in the hospital.
- The unit will also be used as a teaching facility for pharmaceutical students from various colleges and universities.

The hospital management came up with the idea of starting their own production of iv preparation using internally raised funds as one of the strategies to overcome the challenge of running out of stock and have reliable supply of the product.

As part of teamwork spirit and shortage of technical staff in the unit, we have been working with other health staff members in executing production and operational activities.

The commonly performed duties in the iv preparation unit include collection of raw materials, such as glass bottles and rubber stoppers, mixing, refilling, sterilization, packing and labeling, ordering and records keeping. Personnel are well equipped with skills to perform their duties and regular capacity buildings that have been conducted in collaboration with the Kilimanjaro School of Pharmacy, Moshi.

Challenges

Due to the increasing demands for services, the number of staff is insufficient to meet the demands and this makes client centered care a huge task. Production involves multiple processes and therefore a sufficient workforce is required to produce the required quantity.

Shortage of operating machines is also another challenge; they still need financial boost to buy enough machines to suffice the huge amount of infusion they target to produce. Sometimes, they have to stop production to allow the machine to cool which would as a result affect the availability of infusion.



Display of bottles containing IV formulations ready for use

Chief Medical Officer Commends Pharmacy Council Efforts in Regulating Professional Exams

By Anna Temu



The Chief Medical Officer, Prof. Abel Makubi

The Chief Medical Officer, Prof. Abel Makubi has complimented the efforts put forth by the Pharmacy Council in coordinating professional exams to all pharmacy personnel. These remarks were given by the Chief Medical Officer when addressing several issues in a meeting with registrars of professional council's on 16th September, 2020 in Dodoma.

Prof. Makubi underscored the requirement for all professionals in the health sector to adhere to prescribed regulations and to abide to professional ethics. "All professionals must be registered by their respective council's and renew their license to practice within six months from today" Prof. Makubi directed. "To those who have pursued further career progression in line with their profession should submit their certificates upon completion so that they are recognized" Prof. Makubi insisted.

The CMO further instructed the Medical Council to expedite the procedures for medical professional examinations in the spirit of safeguarding professional standards with regard to service delivery

The CMO instructed the Regional and District Medical Officers, Institutional Directors and Medical Officer's in-charge to closely monitor and capacitate interns in their areas of practice so that they acquire the required competencies, skills and professional morals.

The Government has encountered a number of challenges in some hospitals regarding interns completing their internship period without obtaining significant skills to empower them provide excellent services to the public. In this regard, the Chief Medical Officer directed all professional council's to regulate professional examinations to all interns upon completion of internship period in order to assess their competencies.

"We have started to look into these hospitals and if we are convinced that interns that have been allocated do not receive ample training, we will revoke the respective hospital approval previously awarded as an intern center" Prof Makubi said.

Prof. Makubi urged the interns to be enthusiastic and committed to the practical training through the internship period. "Health Professionals should be presentable, obedient, adhere to professional Oath and Ethics and reliable while providing services to patients and the general public" the Chief Medical Officer stressed.



Registrars of professional council's during a meeting with Chief Medical Officer on 16th September, 2020 in Dodoma.

More Pharmaceutical Personnel Sit for Pre- Registration and Professional Examinations

By Emily Mwakibolwa

On 30th June, 2020 and 01st July, 2020 Pharmacy Council conducted pre-registration and professional examinations for **650** candidates across the country as part of pre-registration requirement. Among the candidates were **74** pharmacists, **534** pharmaceutical technicians, **26** pharmaceutical assistants and **16** pharmaceutical dispensers. The exam was conducted at five centres of Dar es Salaam, Mwanza, Mbeya, Moshi and Dodoma.



Candidates who sat for examinations at Mwanza Bugando centre

Quiz Corner

Topic: The best way to remove ear wax

- 1. Earwax is good for your ears; true/false
- 2. It is OK to use a cotton swab in your ear if you are gentle; **true/false**
- If you see gunk in your ear, get rid of it; true/false
- 4. Which part of the ear makes earwax; Inner ear/ ear drum/ outer ear
- 5. There is something you should do everyday to help move old earwax out of your ear canal; chewing /blinking /lying down
- 6. Ear candles (wax melting) are good way to remove wax; **true / false**

- 7. What is the best way to remove earwax build-up at home? sunction device / water pick / hydrogen peroxide
- 8. Your earwax may be hard if you have; arthritis/eczema/kidney stones
- 9. Earwax can give your doctor clues about your; ancestry/heart heath/eyesight
- 10. Earwax is mainly made of; dead skin/ cells plasma /wax
- 11. Earwax is more likely to build-up if you have; hairy ears/ eczema /both
- Extra earwax can cause hearing loss; true/ false

Submit your answers to the Council via pro@pc.go.tz



We invite submissions of articles from individuals, health institutions, facilities and organizations that focus on the medical practice in particular areas that have benefits in enhancement of pharmacy practice.

We believe that those articles will help document and reflect on how the scope and practice of pharmacy has been engaged in various areas and create awareness to the public. We encourage the professionals to public or showcase their work, innovation which will also inspire young professionals.

The Pharmacy Council newsletter aims to provide readers with insight and understanding of organizational activities and strengthen communication among its stakeholders apart from informing the public on matters related to the pharmacy profession and practice.

We therefore call upon health professionals to deliver educational, informative and entertaining articles that can be features in our newsletter as it has a wide distribution countrywide and through our website which is read internationally.

Be a Goal Digger, Get Inspired

By Rhobi Chacha Mwita - Proprietor and Superintendent of Aureate Pharmacy

Started off my career back in 2009 in industrial pharmacy, quality assurance and production department. I also practiced in hospital pharmacy in the emergency medicine department.

I have been in the community pharmacy for the past 7 years running my own retail outlet. I am also the founder and head formulator of a growing organic skin and hair care luxury brand.

During the Covid – 19 pandemic, I took part in the fight against the virus in formulating and distributing our own

hand and surface sanitizer that served the community I work in and other neighboring outlets.

In the spirit of giving back to the community, I organize small scale formulation classes for women in rural areas training them in small scale soap and oil production and business skills.

My advice to young pharmacist, our pharmacy profession is very diverse; do not be afraid to navigate your way through until you find your spot... and when you do, achieve every goal you set.

Asepsis Should be the Foundation, Antibiotics are Not a Substitute.

Prepared by Dr Nkungu Daniel, practicing Obstetrician and Gynecologist and Assistant Hospital Director for Mwananyamala Regional Referral Hospital.



As a practicing obstetrician and gynecologist for over six years, with an experience of performing over a thousand major and minor surgeries both caesarean sections and gynecological procedures, with a notably minimal number of surgical site infections, I have come to note that, observing aseptic technique in surgery is the foundation for better patient outcome and I cannot substitute meticulous observation of asepsis, to the use of antibiotics.

By definition; while antisepsis is concerned with the removal of microorganisms immediately before, during, and after surgery or other work, asepsis is concerned with the maintenance of sterile conditions through good hygienic procedures. The use of antiseptics and adhering to aseptic techniques in the operating theatre is a superior method to the excessive use of antibiotics post operatively.

It is an indisputable fact that in most of the health facilities, especially those providing surgeries, both major and minor, there is an increasing irrational use of antibiotics in terms of empirical treatment, which is not further guided by culture and sensitivity. Empirical treatment is the mainstay reason for antibiotic use. Antibiotics have been used for prophylaxis, this seems to substitute practices that have been tried and proven to mitigate sepsis.

More over it is the ongoing practice that we prescribe antibiotics, and more often, very strong antibiotics like cephalosporins, microlides, penicillins and fluoroquinolones etc, without a clue of what exactly are we treating. Patients seem to recover despite the fact that prescribers have no clue of what kind of germs are being treated. It is the thing they call, "the end justifies the means".

The toxicity and resistance that is with associated irrational use of antibiotics hasn't received the needed attention in such kind of medical malpractice. In surgery, the excessive use of post operative

antibiotics adds to this malpractice and burden to the patient in terms of cost and hospital stay.

It is due to such irrational use of antibiotics that I call for methods that mitigate risk of infections especially in surgery. I call for strict observation of asepsis in surgery as the foundation to prevention of Surgical Site Infections (SSI). If we were to observe simple methods of proper patient preparation, proper operating theater etiquette and strict approach to aseptic techniques in the presence of sterile equipment and materials, as pioneered by observations of Florence Nightingale (Am J Public Health. 2010 September; 100(9): 1591) in the Crimean war, where simple observation of aseptic techniques saved a lot of soldiers from death due to sepsis (In 1907, she was the first woman to be awarded the Order of Merit).

In the 1840s, the Hungarian surgeon Ignaz Semmelweis (J Turk Ger Gynecol Assoc. 2013; 14(1): 35-39) noted that on maternity wards where doctors who also worked in other areas of the hospital were present, the mortality rates were significantly higher than on those wards

that were operated

by midwives only. He introduced hand washing procedures on these wards. The number of deaths due to infection on these maternity wards dropped dramatically following the implementation

this aseptic technique initiative. This earned him a title of "savior of mothers and father of infection control".

Antiseptics use in surgery plus observation of aseptic techniques may reduce antibiotic use after surgery; this will reduce hospital stay after surgery, and hence reduce resistance to antibiotics due to irrational use. Reduction in antibiotics use reduces the cost of treatment; hence we can provide the best, evidence based health care, by observing aseptic techniques. Probably we would reduce the empirical use of antibiotics.

Asepsis should be the foundation, antibiotics are not a substitute.



"Reduction in antibiotics use

reduces the cost of treatment:

hence we can provide the best,

evidence based health care, by

observing aseptic techniques."

Departed Souls

It is with deep grief we announce the death of five pharmacy professionals in the period of July to September 2020. Our heartiest condolences to their families, colleagues and pharmacy professionals for such a loss. May their souls rest peacefully.



Pharmacist Noel S. Mushi, graduated from the University of Dar es Salaam in 2001 Reg No. 0100375 of 2003



Pharmacist Ngilishi L. Maseru, graduated from the University of Dar es Salaam in 1977 Reg No. 0100420 of 2003



Pharmaceutical Technician Joakim Joseph,
Rugalabamu, graduated from the University of
Dar es Salaam in 2006
Reg No. 0400290 of 2006



Pharmaceutical Assistant Liberatus Rwechungura Babanzi, graduated from Bugando Medical Centre in 2003 Reg No. 0500149 of 2006

Celebrating Pharmacists Day: Various Professional Opinions

"Taaluma ya famasi ni moja ya taaluma muhimu sana kama itaheshimiwa vizuri. Kwa sasa nchi yetu ipo katika uchumi wa kati, na msukumo upo katika ufunguzi wa viwanda. Natoa wito kwa wafamasia vijana kuongeza juhudi na kutumia elimu waliyopata kuanzisha viwanda vidogo vya dawa na kupanua wigo katika uendeshaji wa sekta ya afya kwa kuwa uwezo tunao" **Mfamasia Elisania Lema**, *Mkurugenzi Mtendaji, Hospitali ya Rabininsia Memorial*

"Uwezo wetu wafamasia ni sababu ya jamii kupata yaliyo bora wanapotumia dawa. Tunatumia uzoefu, ujuzi na utaalamu wa kufanya ulimwengu wa matibabu kuwa mahali bora na salama kwa kila mgonjwa. Tuwajue na kuwatumia wafamasia wetu, tubadilishe afya ya sasa kuwa bora zaidi"

Mfamasia Marsha Macatta - Yambi Mkurugenzi - A Plus Pharmacy na mwenyekiti TAWOPHA



"Kuna maendeleo makubwa ya kisayansi katika utoaji wa huduma za afya nchini na ulimwenguni kwa ujumla. Ni vema wafamasia tukaendelea kuboresha huduma zetu ikiwemo kuongeza ujuzi ili kuendana na mabadiliko hayo"

Daudi Msasi Mfamasia Mkuu wa Serikali



Siku ya Wafamasia

> **Duniani** Septemba 25





"Nahimiza wafamasia kutumia taaluma yenu katika kuongeza nguvu ya upatikanaji, utunzaji na usimamizi wa dawa pamoja na kuhakikisha huduma bora ya dawa inatolewa kwa wananchi wakati wote. Kuweni chachu ya kuleta mapinduzi ya viwanda vya dawa nchini"

Dkt. Amani Malima Mganga Mfawidhi - Hospitali ya Rufaa ya Mkoa-Amana

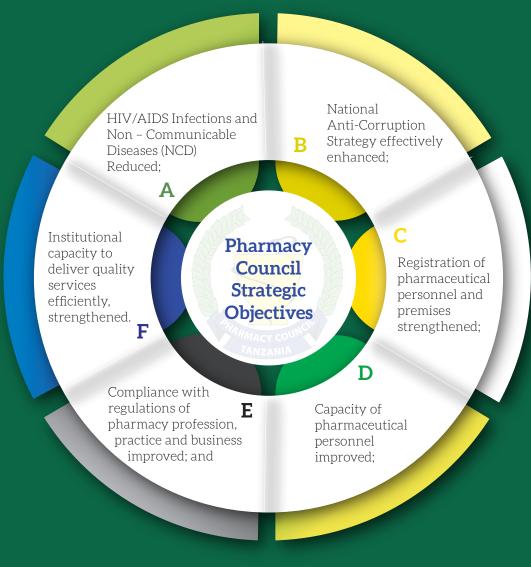


"Tumedhamiria kutumia ujuzi na utaalamu wetu ili kuhakikisha wananchi wanapata huduma bora za dawa. Ni wajibu wetu" **Mfamasia Elizabeth Shekalaghe** *Msajili, Baraza la Famasi*



"Taaluma ya famasi ni sehemu muhimu ya mhimili wa utoaji huduma za afya. Programu za famasi thabiti ni msingi wa kuboresha huduma hizo. Nawapongeza wafamasia wote kwa siku hii muhimu na kuwatakia maadhimisho mema"

Sisawo Konteh CEO Aga Khan Hospital Dar es Salaam



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