



EDITORIAL

Continuing Pharmacy Education and training in Libya

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Lifelong learning is becoming part of the philosophy of professional education. Continuing medical education is the responsibility of all personnel who are responsible for the delivery of components of the healthcare delivery system. Continuing education is becoming increasingly obvious for medical universities, hospitals, and health care providers. Pharmacists who practice in a community pharmacy and hospital, and who are participating in residency recognize that the traditional role of the pharmacist is changing. Over the last decades, a host of new services have been identified as a function of the pharmacist [1]. A review of these services revealed a personal commitment to continuing education. It is the absolute need to develop a level of competence that will improve patient care. In Libya, pharmacists working in the community practice setting are pharmacists with a diploma of pharmacy or with a Bachelor of Pharmaceutical Science, Master of Science, and Doctor of Pharmacy (Pharm D). The main objective is that the graduates possess the knowledge and skills needed to optimally manage the pharmaceutical services [1, 2]. Patient's expectations from pharmacists are that the medicine should be effective, safe and affordable. Other expectations from Libyan pharmacists would be to dispense the drugs according to the rules with the right advice on how and when the medicines should be used, and what to do in the case of adverse drug reactions, and the provision of advice on common illnesses. Nevertheless, it is an undeniable fact that the pharmacist has failed to provide all these patient-oriented services [3]. It should be noted that the quality of pharmacy education and training can be improved through certain accreditation processes.

The need for the continuing education of pharmacists was highlighted during the 1950s. The concept of continuing education has also existed among scholars but in recent times it has evolved conspicuously as an integral part of the education process. The concept of continuing education becomes one of re-enforcement of the primary objective in the life of a professional person. Some feel that continuing education should be a fringe benefit of employment. But others feel that mandatory continuing education should be essential and indispensable while the opposition is equally adamant. There is a great deal of justification for supporting the position that continuing education be provided as a fringe benefit of employment. In Libya, pharmacy education and training are relatively new but become more required. However, fifty years ago, there was no education in pharmacy or training in Libya. The oldest faculty of pharmacy is located in Tripoli (the University of Tripoli, established in 1975) which is considered the mother of pharmacy education, training, and practice in Libya [3]. Now, there are about ten public faculties and several private faculties offering pharmacy



education at the bachelor's level. Pharmacy education in Libya is regulated by the Ministry of Higher Education. Libyan Pharmacy Union is responsible for the registration of persons fulfilling the prescribed eligibility criteria and issuing a license permitting them to practice. Thereafter, services and identified functions of pharmacists were hosted in Libya by both governmental and non-governmental organizations to provide different courses in continuing pharmacy education for community and hospital pharmacists. In addition, postgraduate studies leading to a professional degree in pharmacology and pharmaceuticals (Master of Science) were established at the University of Tripoli for more than 20 years [2]. Other attempts by pharmacy Libyan board in clinical pharmacy (pediatrics, oncology and internal medicine) have not been fully successful due to certain reasons such as a lack of teaching and supervising staff in university hospitals [2]. Libyan Pharmaceutical Association and Society have organized some professional pharmacy courses for community and hospital pharmacists toward better patient care and practice including clinical pharmacy, drug quality control and good drug storage. In hospitals, the education and training division supervises a general staff educational meeting of broad educational interest to all members of the staff of the pharmacy. Some examples of the type of continuing educational activities that may be desirable for a group of pharmacists are drug information conferences, pharmacy clinical conferences, professional health conferences, and pharmacist therapeutic committees.

Conclusion: till now, pharmacy education in Libya has not succeeded in creating pharmacists as a member of the healthcare team that fails to figure in National Health Policy, and this proves that the pharmacy education programs need modification regarding curriculum. There is a need for all-out efforts from all stakeholders to promote pharmacy practice and build up public perception of pharmacists as in many of the developed countries.

Conflict of interest: The author declares the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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