Having a Voice in APhA Scientific Policy

There is a familiar story that most of us have heard in one variation or another. Essentially, it is that people fall into one or another of three groups: (*a*) the great majority, who are doing well if they know what has occurred; (*b*) the relatively few, who are aware of what is presently happening; and (*c*) the very, very few, who are able to foresee where things are headed and what is likely to happen.

This classification has great relevance to policy establishment within the American Pharmaceutical Association. All too many APhA members—as in the case of most professional or scientific societies—learn belatedly of some position the organization has adopted. At that point their reaction is either "why wasn't I told?" or "when was this done?" or "how did that happen?" or "why didn't the leadership inform or consult the membership?"

No one wants to admit that he or she might have been "asleep at the switch," and that he or she has only one's own self to blame for being ignorant on the status of the subject.

At one time or another, we probably have all had this experience and the same reaction to it. Our point in discussing it in this column is simply to be sure that all our readers are aware that they can avoid this situation—at least as far as APhA policy positions that will be established by the Association's House of Delegates during the 1984 Annual Meeting this coming May.

Right now, the 1983–1984 Policy Committee reports, including the recommendations of the Policy Committees, are being released and publicized through APhA publications and *via* news releases to the pharmacy professional and trade press.

At this stage, the recommendations are only in a proposed status. They are open for review, debate, and consideration until early May when Reference Committee open hearings will be held to listen to verbal testimony and to review written comments that have been submitted. The Reference Committees will then make their recommendations to the House of Delegates for final action and policy establishment—but, again, only after further opportunity for debate on the issues within the full House of Delegates.

So, between now and early May, there is ample time for individual members to express their views and to offer their input before those proposals are acted upon. Consequently, everyone has plenty of opportunity to be numbered among the usually select few, who are in the category of knowing not only where we've been, and where we are, but even where we are going.

In addition to presenting this reminder, we would like to clarify another point. That is, the fact that APhA policy issues cover the full spectrum of concerns that are of interest to the membership. Four separate Policy Committees (and four similarly oriented Reference Committees) are appointed each year and are assigned topics considered most appropriate to their individual designations—which are, respectively, Educational Affairs, Professional Affairs, Public Affairs, and Scientific Affairs.

Hence, there is a committee specifically established to study, review, and recommend policy positions on scientific issues.

In recent years, the Association has formally adopted official policy positions emerging from its Policy Committee on Scientific Affairs on such diverse subjects as: (1) the pharmacist's role in postmarketing surveillance for approved drugs, (2) the utilization of institutional review boards (IRBs) for expediting new drug approval, (3) federal regulation of salt in processed foods, (4) the use of animals in drug research, (5) carcinogenicity testing, (6) needed drugs of limited commercial value (orphan drugs), (7) vaccine liability programs, (8) drug product therapeutic equivalence, (9) food labeling, (10) therapeutic orphans, and (11) the medicinal use of marijuana.

When many of these issues were originally debated and the policies established, there was relatively little public interest in those matters. At most, public awareness was just beginning to stir. But then, when the issue "caught fire" in the public eye and in the national political arena, APhA was ready with a well researched, thoughtfully considered, and clearly articulated policy position.

Two typical examples were the use of animals in research and the development of orphan drugs; both of these issues developed into hotly debated topics within the U.S. Congress over the past 2 years, and the Association was ideally positioned to influence the direction of legislation because of its already adopted policy statements.

Currently, APhA members have an opportunity to react to recommendations regarding four subjects, as just proposed by the 1983–1984 Policy Committee on Scientific Affairs. These are relative to: (1) abbreviated new drug applications (ANDAs) for post-1962 drugs, (2) a national center for human organ acquisition, (3) the freedom of scientific information, and (4) the availability of potassium iodide for nuclear accidents.

Moreover, many of the subjects that have been considered by the other three APhA Policy Committees have scientific-related aspects which make them of interest to pharmaceutical scientists.

Therefore, it behooves every member to take the time and effort to study these issues and their corresponding policy proposals. Having done so, any views—either pro or con—ought to be conveyed to the pertinent Reference Committee, either by letter or at the open hearing in May.

Obviously, everyone's wishes cannot be satisfied, particularly when different members will express diametrically opposite views. However, every voice will be heard and every opinion will be taken into consideration in formulating the ultimate policy statement.

And, in a democratic organization—as in a national democracy—that is what we can expect, and all that we can expect.

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