THE INTEGRATION OF PATIENT COUNSELLING WITH PHARMACOLOGY TEACHING

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In recent years there has been a shift of emphasis in the role of both the hospital and general practice pharmacist from that of a compounder and dispenser of medication to that of consultant and adviser on the use of medicines in the broadest sense. This change has been most apparent in the USA where alterations to the curriculum have quickly reflected the changing role (Lawrence and Linn, 1978). As in most spheres, changes in the United Kingdom take place more slowly and tend to be smaller in extent. Nevertheless, such changes have occurred and the purpose of this demonstration is to illustrate the shift in emphasis towards the application of pharmacological knowledge in patient counselling which has taken place in the Bradford School of Pharmacy.

In earlier articles on the teaching of applied pharmacology (Clarke et al, 1968, Foy et al, 1972) the value to the subject of the use of a wide variety of different teaching methods has been stressed. The importance of this approach increased in parallel with the need for the introduction of more clinical material. Ideally all clinical teaching should involve the student in the personal experience which comes from training in a real situation. In practice such teaching can take place on only a very limited scale and may even be counterbalanced by possible adverse learning situations in a clinic or hospital ward. In a large department the sheer weight of numbers renders the use of recorded clinical and related information essential.

A variety of teaching methods are used in the final year of the course in an attempt to fulfil the central objective, viz, to enable the student to apply pharmacological knowledge to patient care. The majority of the teaching methods employed demand some participation between student and lecturer or student and student in an attempt to accustom the student to communicating his knowledge of drugs through the spoken word. The videorecording demonstrated illustrated part of one of these methods, namely a pre-recorded simulated patient counselling session followed by the kind of discussion between student and tutor which could ensue. Similar teaching may form a part of many dispensing courses but its relevance in the content of pharmacology teaching has been clearly shown by the other workers in this area (De Simone et al, 1977), who found that in the majority of pharmacist-patient interactions the pharmacist needs to draw on his knowledge of pharmacology.

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