

Beyond Medication

Clinical pharmacy services at UMC-RH offer holistic approach

By Paige Kollock



Gone are the days when a pharmacist was seen solely as a dispenser of drugs.

“The practice of pharmacy has evolved tremendously over the last few years, shifting from dispensing medication to a more patient-centered, holistic approach,” says Dr. Aline Saad, assistant professor and chair of LAU’s Department of Pharmaceutical Practice.

Clinical pharmacy is the branch of the field in which pharmacists optimize the use of medication to promote health, wellness and disease prevention. Clinical pharmacists care for patients in all healthcare settings, but the clinical pharmacy movement initially began inside hospitals and clinics.

“Two major shifts in the American pharmacy profession precipitated the emergence of clinical pharmacy in the 1960s: a shift in the focus of pharmacy education from chemistry to biology, and in pharmacy practice from product to patient,” says Dr. Imad Btaiche, associate dean of the School of Pharmacy.

“The medical community had just begun to understand the costs and consequences of inappropriate use of medications, and the nascent field of clinical pharmacy — with its emphasis on patient education — made itself immediately valuable in this area.”

LAU-affiliated University Medical Center-Rizk Hospital (UMC-RH) is the first hospital in Lebanon to establish clinical pharmacy services. Dr. Nibal Chamoun is coordinator of the program, which consists of five medical professionals specialized in the fields of cardiology, infectious disease and outpatient care. Chamoun is hoping to add more staff in the fields of internal medicine, nephrology, and medication safety and discharge by the fall.

“As clinical pharmacists we’re that second set of eyes. As drug experts, we can give recommendations as to a more appropriate drug, notice if there’s a drug duplication, or screen for negative drug interactions,” she says.

Members of her team meet with doctors in the morning and listen to patient cases, focusing on drug therapy.

As clinical pharmacy becomes standard in hospitals worldwide, LAU students will be prepared. “At UMC-RH, they’re doing rotations in the ER, the intensive care unit, so they’re responsible for most of the groundwork, and they discuss it with their clinical faculty.”

For physicians like Dr. Georges Ghanem, head of the Cardiology Department, the benefit of clinical pharmacists is demonstrable.

“They integrated actively into the team, participating in the rounds, discussing the charts, looking closely at the medications, pointing out potential drug interactions or dosage problems, helping us adjust the treatment according to many variables such as the renal function, body weight, age, etc.,” he says, recalling the case of a severely obese patient with a bilateral pulmonary embolism, where the right dosage of anti-coagulation medicine necessitated deep and complicated research.

“It was a complex life-saving approach where the synergy between the clinicians and the clinical pharmacists offered the patient the best quality of care.”

According to Saad, there’s a draft law in Lebanon that would require hospitals to hire a clinical pharmacist, but for now, UMC-RH is playing a unique, pioneering role with the implementation of such services.



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