

Should prescribing authority be shared with nonphysicians?

NO

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Medical training is based on principles of teaching that enable graduates of medical programs who have earned the right to practise to make adequate diagnoses and prescribe appropriate medication. These 2 privileges are the very essence of a doctorate in medicine.

For some years now, certain professional orders have been advocating for the right to make diagnoses and prescribe medication. Has the practice of medicine become so straightforward that other forms of professional training are, for all intents and purposes, equivalent? Or have the various pathologies become so simplified in their expression and evolution that other health professionals are able to manage them easily? Or, could it be that these claims are being made on the basis of other, unacknowledged factors? And, what if the answer to all of these questions were to have everyone sit one examination granting the right to practise medicine in Canada?

Clearly, given the challenge of accessing medical services, there is substantial political pressure to change certain laws to allow medicine to be practised by other professionals. These professionals claim that they are just as qualified to prescribe medication and they are asking that the law be changed to allow them to do just that.

Strangely, these efforts to blend the health professions only seem to be targeting the field of medicine. Nurse practitioners are demanding the right to prescribe medications and to treat pathologies. Pharmacists are also demanding this right, positioning themselves as medication experts. Yet, these 2 professional orders refuse to acknowledge each other and to acknowledge others' rights to certain privileges that they are demanding for themselves. Odd, isn't it?

I am among those who consider medical training to be a unique field of expertise that brings with it the ability to make a diagnosis and to prescribe the appropriate medication. I am also in agreement with those who

believe that, in light of the political pressure that is being brought to bear on the rules of professional practice, physicians should, in the face of these changes and the sharing of the practice of medicine, demand all of the privileges enjoyed by other professional orders. These privileges include the right to sell medications (pharmacists currently have a monopoly that runs counter to all of the rules with respect to competition and conflicts of interest), the right to simultaneously work in the public health system and privately (as many nurses currently do), the right to hire paramedical staff, and the right to invoice the public health system for services rendered.

This blending of privileges cannot be a 1-way street: one group cannot be denied what another is allowed. Nor should the practice of medicine be the only discipline affected by these transformations. Governments responding to political pressure must be consistent; at the same time, they must conduct an in-depth review of all regulations governing professions in the health sector. This is a matter of competitive equity for all professionals working in the field of health in Canada.

I am also of the opinion that if governments grant nurse practitioners and pharmacists the right to prescribe, they must also grant this right to other health professionals. If this were the case, physiotherapists, chiropractors, psychologists, social workers, nurses, nutritionists, respiratory therapists, occupational therapists, and others would assume responsibility for patients, treat various pathologies, and prescribe and sell the medication necessary to their patients' well-being, whether or not they were ultimately successful in doing so. This would at least be fair and equitable for all stakeholders. It would eliminate monopolies and exclusive domains and not discriminate against any health professionals.

I remain firmly convinced that the practice of medicine is complex, with many subtleties and variations, and that the only training that develops the expertise required to correctly make a diagnosis and to adequately prescribe medication is medical training.

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The parties in this debate refute each other's arguments in rebuttals available at www.cfp.ca. Join the discussion by clicking on **Rapid Responses**.

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knowledge and skill have allowed him or her to make the appropriate choice of medication in the first place.

Is prescribing something that physicians should share with other health professionals? Absolutely, because it is good for patients and good for our health care system! 

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Competing interests

None declared

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CLOSING ARGUMENTS

- Health care professionals who are not physicians have been prescribing for many years in the United Kingdom, the United States, and many Canadian provinces. We in Ontario can learn from their experiences.
- Patients deserve the best quality care provided by the right person at the right time.
- Other health care professionals have the knowledge, skill, and judgment to prescribe medications safely and effectively for patients, and, in fact, are currently hampered by their limited ability to prescribe.
- Collaborative, interprofessional practice is the new standard for primary care, and collaborative teams are more effective at managing chronic diseases.

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Physicians should have the right to take on other professionals who act under their authority. We should provide physicians with the financial means to achieve this. In so doing, we would greatly improve the public's access to and the quality of services. Isn't this how most other health professionals in Canada operate? Let's provide Canadian family physicians with this model of care; it can only improve the quality of the health care we deliver to the public and will enable us to avoid a loss of control.

Lastly, for anyone who wishes to make diagnoses and prescribe medication, enrolling in a faculty of medicine is always an option. 

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Competing interests

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CLOSING ARGUMENTS

- Making diagnoses and prescribing medication are the very essence of a doctorate in medicine.
- Any changes to the laws must be accompanied by a review of each of the regulations governing the professional orders in order to ensure competitive equity.
- All those who would like the right to make diagnoses and prescribe medication must sit the same examination granting the right to practise medicine.