

'Still peddling drugs?' or making the most of fresh opportunities?

Jeremy Johnson maintains that the post-review medicines market offers new opportunities for those who want to get more involved

A FEW YEARS ago, I attended the "Audience with the Competition Commission" at BVA congress. Afterwards I ran into a vet friend from college at the bar. His first words to me were, "Hello Jeremy, still peddling drugs?" A light-hearted comment over a pint, yet it reminded me of first joining the pharmaceutical industry in 1991: whilst we were calling on veterinary practices, a well-respected salesperson, but not a vet, gave me his view of sales ethics. He said to me, "You should always tell the truth and never ever sell anything to anybody that they do not need."

A few years on now, the market is changing as a consequence of the recent reviews. I had other frustrations as a manager in the pharmaceutical industry, but as a member of both the veterinary and marketing professions, the aspect of the Competition Commission enquiry that I

I found myself behind some people trying to buy basic, non-prescription human wound care products. It became apparent to me that not only did they not understand what was in the products, they also had no idea what to do with them – and there was nobody available to help them.

object(ed) to strongly was removing the vet's right to charge for a prescription.

At about the time that the DTI was conducting its own investigations, I was at a meeting attended by a senior member of the pharmacy profession who said to the group, "By the way, we [the pharmacy profession] think it is absolutely wrong that vets should not be allowed to charge for prescriptions."

So our preconceptions of others involved in the market we are in may not be accurate. Awareness of potential competitors is good, but they may be potential allies. Even if not allies, paying them too much attention can hold us back from focusing on our customers and responding to the most important changes around us.

Most of the coverage of the Competition Commission enquiry has been negative; yet the end result of the regulatory reviews is largely positive because the people who have sculpted the new regulatory framework are close to the market for animal medicines.

So what's positive?

The market has opened up

Previously the animal medicines regulations were in a mess. The policy officer at the VMD responsible for co-ordinating the changes did a good job of balancing the conflicting demands of a variety of vested interests. Whilst it seems likely that many former POMs will be reclassified POM-VPS, vets will be able to dispense them to animals not under their care and the market has opened up for everybody.

Although not perfect, the new regulations are flexible enough to allow further positive change, every year if necessary: e.g. calls to allow responsible advertising to veterinary nurses, recently highlighted by NOAH.

Standards are going up

Formerly, the Animal Medicines Inspectorate (AMI) of the RPSGB had to inspect premises distributing medicines, yet it was not responsible for the conduct of SQPs, who

were governed instead by a self-regulating code of practice. Now AMTRA (the Animal Medicines Training Authority) is on a sound legal footing, and the bar is being raised for SQPs who must upgrade their current qualifications within three years.

The market is also open for any organisation wishing to provide a competitive service to AMTRA should one be desired, although AMTRA's board is already comprised of people who understand the market well. The AMI moved into the VMD in December, for the benefit of all, including the RPSGB. All of the above will raise standards, whilst ensuring that medicines are available to those who need them.

New opportunities for nurses

One of the bigger new opportunities is for veterinary nurses to train and register as cSQPs. I personally feel that many of the difficulties the veterinary nursing profession has suffered in recent years would be resolved if the nursing profession were allowed to continue to grow in value and economic importance to the veterinary industry – so further career development opportunities are as important for nurses as they are for vets.

Early enrolment on the cSQP course for qualified nurses (available from March of this year) was slow. Yet it is not expensive: cheaper than the cost faced by a pharmacist enrolling for the "new Certificate in Companion Animal Healthcare" from the RPSGB.

The customers need you...

I find it easier these days to put myself "in the shoes of a customer" than I did when in practice, as I no longer carry large stocks of animal medicines. I usually buy them from vet practices, but occasionally from pharmacies, according to where I am and how busy I am.

Recently I was shopping in a major high street pharmacy chain for some Witch Hazel

gel for the kids. I asked a lady stacking shelves where it was, but she did not know the product or where to find it. While looking I found myself behind some people trying to buy basic, non-prescription human wound care products. It became apparent to me that not only did they not understand what was in the products, they also had no idea what to do with them – and there was nobody available to help them.

Those businesses that are able to put teams of professionals together who understand these customers and are able to provide them with a range of quality services appropriate to their needs at all times will do well in this market, and deserve to.

A few weeks later I needed to treat an ulcer on our rabbit. I was busy that week and whilst in a local community pharmacy buying some more medicine for the kids, I asked the pharmacist if he stocked Dermisol. He did not and were you to ask me what wound care product I asked for next, I would have to "take the fifth amendment", as it is not licensed for animals ... but as it happens he did not have this product either.

Do not be misled into thinking that the above anecdotes are intended as negative comments about pharmacists – far from it. All the pharmacists I know are ethical, professional, helpful and good at what they do. Furthermore, my father is a pharmacist; so I know that whilst my knowledge of medicines is good, his surpasses mine.

Extensive experience

Yet despite his extensive experience and knowledge of medicines, his hands-on knowledge of animals, veterinary clinical medicine or animal husbandry would not approach mine, or that of a qualified and experienced veterinary nurse.

Customers like me are going into medicines outlets every day. They have young children, visit frequently, are more likely to have pets, have little time and need ethical, honest, knowledgeable people to sell products to them. The post-review veterinary

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medicines market is a dynamic new market in which vets can employ pharmacists, pharmacists can employ vets, and both could employ veterinary nurses trained as SQPs.

Those businesses that are able to put teams of professionals together who understand these customers and are able to provide them with a range of quality services appropriate to their needs at all times will do well in this market, and deserve to. In the end this will create market growth and new opportunities both for vets and for veterinary nurses.

So are you ready to make the most of the new opportunities over the next few years?

More on the new regulations for nurses training as SQPs is at www.veterinaryreview.com and www.pmark.co.uk.

Medicines legislation and other topical issues to be aired at BEVA Congress



Jeremy Mantell.

At the BEVA Congress in the ICC Birmingham from September 13 to 16, issues relating to the ever present (and changing!) medicines legislation will be open for discussion in a session on Thursday 14, to be chaired by Jeremy Mantell.

As an introduction, the current regulations themselves

will be presented by Professor Josh Slater, who is the BEVA officer with responsibility for medicines. This will be followed by David Dugdale, from Greenwood Ellis & Partners, who will be discussing the implications that these regulations have on equine practice.

This session will be followed by a look to the future

when Jeremy Mantell, a partner at the Liphook Equine Hospital, presents a partner's view of the challenges and opportunities for equine practice, which will then be contrasted with a limited liability company's view as presented by Chris Shepherd, from the Willesley Equine Clinic.

Following these presentations the session will be opened for audience discussion and debate where delegates will be able to put forward their own views and experiences.

