

A SCOPING REVIEW OF PHARMACY ETHICS



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Introduction – Why study Pharmacy Ethics?

- Pharmacists' professional roles have evolved rapidly — from dispensers to essential members of a rounding medical team, to collaborative prescribers
- Ethical challenges increasingly arise in **new settings**: interprofessional teams, digital health, and corporate environments
- Existing **Codes of Ethics** may no longer capture emerging responsibilities
- Despite this, *pharmacy ethics remains under-researched and unevenly taught worldwide.*
- A scoping review was undertaken to consolidate and map this fragmented field.

Why a Scoping Review?

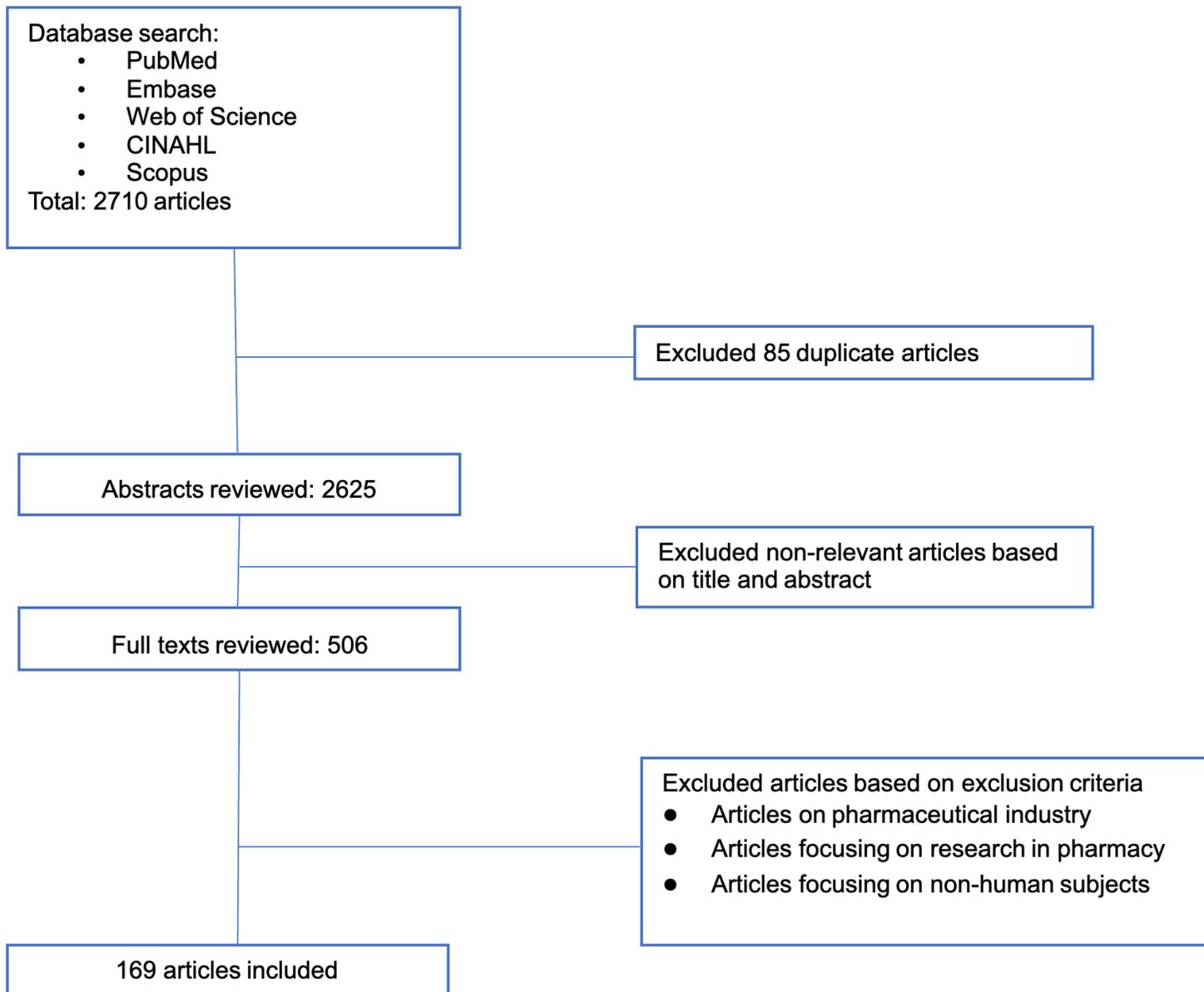
- Scoping reviews **map breadth**, not depth
- Suitable for **heterogeneous and conceptual literature** (bioethics, education, clinical practice).
- Overcomes limitations of systematic reviews which are outcome-driven.
- **Systematic Evidence-Based Approach (SEBA)** chosen for its transparency, reproducibility, and reflexivity — bridging empirical and normative traditions.

Objectives of the review

- Describe: What is known about pharmacy ethics?
- Identify: What are the emerging themes?
- Recommend: Can the findings inform actionable interventions in practice?

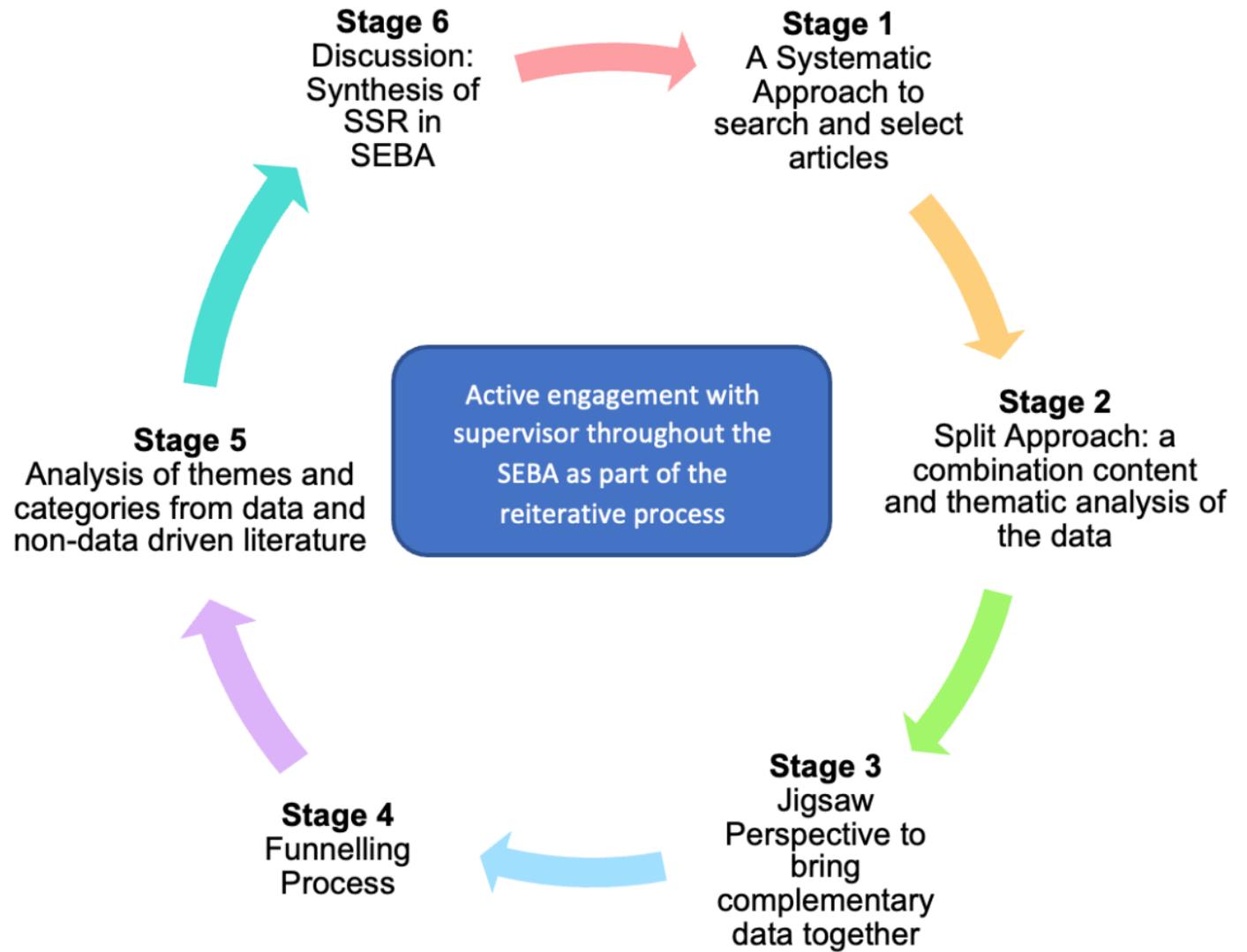
Aim and research question of scoping review

- Aim: To map the ethical landscape of pharmacy practice
- Research question: "What is known about pharmacy ethics?"
- Search Period: 1971–2024
- 5 major databases: PubMed, EMBASE, CINAHL, Web of Science, Scopus
- Articles Included: 169
- Core inclusion via PCC framework:
 - Population: Pharmacists, pharmacy students
 - Concept: Pharmacy ethics/practice/education
 - Context: All pharmacy practice & education settings



Methodology

- **Systematic Scoping Review guided by SEBA**
 - **Stage 1:** Systematic Approach (PCC + PRISMA-P)
 - **Stage 2:** Split Approach (Thematic + Directed Content Analysis)
 - **Stage 3:** Jigsaw Puzzle (Synthesis of themes/categories)
 - **Stage 4:** Funnelling (Comparative thematic refinement)
 - **Stage 5:** Analysis (Decade-by-decade trends)
 - **Stage 6:** Discussion (Interpretive synthesis of moral terrain)



Results

- Dispensing controlled substances: balancing pain relief vs. misuse risk
- End-of-life requests: autonomy vs. conscience
- Commercial pressure in community pharmacies: profit vs. patient welfare
- Collaboration with physicians: moral deference and role invisibility

Interprofessional Dimensions

- Ethical decisions increasingly occur in **shared team spaces**
- Interprofessional ethics education (IPE) fosters mutual respect and shared reasoning, yet boundaries blur
- Studies show pharmacists often experience **moral deference** even when ethically better positioned
- Highlights need for **interprofessional ethics education** as a joint moral vocabulary

Emerging themes

- **Ethics Education in Pharmacy**
 - Inconsistent integration into curricula
 - Faculty often lack ethics training
 - Weak assessment of ethical competence
- **Professional Relationships**
 - Tensions with physicians and other HCPs
 - Role ambiguity and moral distress
- **Conscientious Objection**
 - Recurrent dilemmas in contraception, end-of-life care, vaccination
- **Financial Tensions & Professional Conduct**
 - Conflicts of interest in retail and corporate settings
 - Balancing business metrics with patient-centred care

Discussion

- The field is **fragmented** — most work focuses on education or isolated ethical issues
- A holistic account of pharmacists' **ethical responsibilities in evolving roles** is lacking
- There's a disconnect between **codified ethics** and **everyday realities**
- Interprofessional ethics could be the bridge between these spheres

Possible ways of applying findings

- Education:
 - Integrate ethics longitudinally and contextually in curricula
 - Use interprofessional, reflective, and case-based methods
- Practice:
 - Establish ethics reflection groups or consult forums
 - Train pharmacists in moral reasoning and communication
- Policy:
 - Re-examine national Codes of Ethics for relevance to collaborative and prescribing roles
 - Support faculty development in ethics education

What follows from here

- **Empirical Phase:** Interviews with pharmacists to explore lived ethical experiences
- **Integrative Phase:** Reflexive balancing of “boundary principles” (possibly Code of Ethics) and “recalcitrant experience” (practice realities)
- **Goal:** Normative recommendations for evolving ethical frameworks and educational strategies
- **Broader Contribution:** Strengthen the moral foundations of modern pharmacy practice in Singapore and beyond

Significance

- A comprehensive up-to-date mapping of pharmacy ethics literature
- Demonstrates *why bioethics methodologies can inform professional ethics evolution*
- Lays theoretical groundwork for shaping future **codes, curricula, and ethics discourse**

Conclusion

- Pharmacy ethics is no longer confined to dispensing right or wrong products
 - it is about *redefining responsibility* in a shifting healthcare landscape.
- The scoping review provides a foundation for reconciling **ethical ideals, professional evolution, and patient-centred care.**

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