



A Piece of my Mind

Editorial Comment

For people working in a pharmacy, in any sector, the past 9 months have had an illusion of some familiarity – you get up and go to work for five or six days a week, then you go home again. Of course, what made it unfamiliar for some was the need to work in shifts – one week on, one week off. It sounds great – a full week off – but in reality, it was completely exhausting. You were expected to double the amount of work because half the staff weren't there.

For people working from home, in some ways it has become a nightmare – it's been easy to forget which day of the week, and sometimes even what time of day, it is. The working week may extend over seven days, and the working day may become six hours longer, with people being more available than ever before, thanks to digital communication.

Are things returning to "normal"? What's that?

What about the class of 2020?

Both university staff and students needed to be particularly creative this year. While UNISA has had distance learning for years, this was a new experience for most pharmacy lecturers and students. Again, virtual lectures became the norm, and I'm sure there were some aspects of the theory that students could read and understand on their own.

It just doesn't work for everything, though. I guess, at a push, that you could give a second year student a couple of eggs and some milk to make mayonnaise, but would that be sufficient exposure to an emulsion? And please don't try any chemistry exercises at home!

For the first, second and third year students, it's fine if they missed some lab work this year – you could probably make a plan and make it up next year. For the fourth years, the plan had to be made for this year.

It actually exposes one of my prejudices – I don't believe that observing a video is always enough to teach practical skills. (Although I've done it myself often enough for things like "how do you change a dry printer cartridge in my new printer?") And apart from the fact that my memory appears to have disappeared, I really don't believe that you remember the things you watched on a video in comparison to a prac that you participated in.

I can remember certain pharmaceuticals, chemistry and pharmacology practical sessions from 40 years ago only because they had a huge impact on me. I fully understand the move away from using animals in undergrad work, and certainly some techniques that have been

developed are more humane. At the same time, I will never forget pracs that would be totally frowned upon nowadays. A rat in a catatonic state, with his tail standing straight up behind him, after administration of morphine. Mice in a histamine chamber – I think that's what induced my asthma because, just watching them, I couldn't breathe either. And some abused mice who showed that with pseudoephedrine they rushed around their cage frenetically. I wouldn't have remembered those if they had merely been observed in a video.

Reliance on tutors

Thanks to the efforts of both the academics and the students, the Class of 2020 will graduate, and will hopefully proceed to internship in 2021. Now, more than in previous years, the interns are going to need motivated, energetic tutors who will be able to fill in the gaps left by difficulties encountered during 2020. Since the curriculum changed to include work integrated learning and exposure to experiential learning, graduates have been better equipped than ever before to manage in today's environment. Because they were, to a large extent, unable to enjoy the luxury of these learning methods this year, the pressure will be on both interns and tutors to ensure that they will make up for it during 2021. I know it can be done – there are many of us who graduated many years ago and relied on our tutors to complete our education. And I know that we have all been integrated into the profession!

Vaccine hesitancy

I read the article on vaccine hesitancy with great interest. Once again it illustrates the important practice approaches that have taken place over the years. We are past the stage of telling patients what to do and how to do it. In difficult situations, such as convincing an anti-vaxxer to consent to immunisation of her children, the dictator approach would just not work. I recently read an article in which the "researcher" presented an opinion that most patients follow a pharmacist's instructions, but it was flawed because it asked for the pharmacist's opinion, not the patient's reality.

The suggestion that motivational interviewing techniques should be used makes a lot of sense. It's been around for many years, and students have been taught about it. Perhaps Mariet Eksteen should organise a webinar CPD session because it appears that the message hasn't necessarily filtered down to those of us who qualified 10 or more years ago.

Lorraine Osman