

Original Research

Pharmacists and Natural Health Products: A systematic analysis of professional responsibilities in Canada

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ABSTRACT*

Natural health products such as herbs, vitamins and homeopathic medicines are widely available in Canadian pharmacies.

Purpose: to conduct a systematic analysis of Canadian pharmacy policies and guidelines to explore pharmacists' professional responsibilities with respect to natural health products.

Methods: Legislation, codes of ethics, standards of practice and guidance documents that apply to the practice of pharmacy in each Canadian jurisdiction were systematically collected and examined to identify if, and how, these instruments establish professional duties in regard to natural health products.

Results: The majority of Canadian jurisdictions now include some explicit reference to natural health products in standards of practice policy or guideline documents. Often natural health products are simply assumed to be included in the over-the-counter (OTC) product category and thus professional responsibilities for OTCs are relevant for natural health products. A minority of provinces have specific policies on natural health products, herbals or homeopathy. In addition, the National Association of Pharmacy Regulatory Authorities' Model Standards of Practice specifically refers to natural health products. Most policy documents indicate that pharmacists should inquire about natural health product use when counselling patients and, when asked, should provide accurate information regarding the efficacy, toxicity, side effects or interactions of natural health products. Public messaging also indicates that pharmacists are knowledgeable professionals who can provide evidence-based information about natural health products.

Conclusions: Explicit policies or guidelines regarding pharmacists' professional responsibilities with respect to natural health products currently exist in the majority of Canadian jurisdictions.

Keywords: Natural health products. Practice Guidelines as Topic. Pharmacists. Canada.

FARMACÉUTICOS Y PRODUCTOS SANITARIOS NATURALES: ANÁLISIS SISTEMÁTICO DE LAS RESPONSABILIDADES PROFESIONALES EN CANADÁ

RESUMEN

Los productos sanitarios naturales, tales como las plantas medicinales las vitaminas y los medicamentos homeopáticos están ampliamente disponibles en las farmacias canadienses.

Objetivo: Realizar un análisis sistemático de las políticas y guías farmacéuticas canadienses para explorar las responsabilidades profesionales de los farmacéuticos con respecto a los productos sanitarios naturales.

Métodos: Se recopilaron y analizaron sistemáticamente los códigos de ética, los estándares de práctica y las guías que son de aplicación al ejercicio de la farmacia en cada jurisdicción canadiense para identificar si, y como, establecían deberes profesionales en relación a los productos sanitarios naturales.

Resultados: La mayoría de las jurisdicciones canadienses actualmente incluyen alguna referencia explícita a los productos sanitarios naturales en los estándares de práctica, políticas o guías. A menudo se asume que los productos sanitarios naturales están incluidos en la categoría de productos *over-the-counter* (OTC) así que las responsabilidades profesionales para los ORC son de aplicación para los productos sanitarios naturales. Una minoría de provincias tiene políticas específicas sobre productos sanitarios naturales, plantas medicinales u homeopatía. Además, los estándares de práctica de la Asociación Nacional de Autoridades Regulatorias de la Farmacia se refieren a los productos sanitarios naturales. La mayoría de las políticas indican que los farmacéuticos deberían preguntar sobre el uso de los productos sanitarios naturales cuando aconsejan a los pacientes y, cuando se les pregunte, deberían proporcionar información precisa sobre eficacia, toxicidad, efectos adversos o interacciones de los productos sanitarios naturales. La publicidad también indica que los farmacéuticos son profesionales expertos que pueden proporcionar información basada en la evidencia sobre los productos sanitarios naturales. Conclusiones: Actualmente existen en la mayoría de las jurisdicciones canadienses políticas explícitas o guías sobre la responsabilidad profesional de los farmacéuticos con respecto a los productos sanitarios naturales.

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Palabras clave: Productos sanitarios naturales. Guías de práctica como asunto. Farmacéuticos. Canadá.

INTRODUCTION

Over half of Canadians aged 18 or older visit a pharmacy during any given week.¹ A recent survey indicates that 71% have taken natural health products such as herbs, vitamins or homeopathic remedies and many take them on a daily or weekly basis.² Various factors drive consumer demand for natural health products, including individual frustrations with conventional treatments, desire for greater autonomy and empowerment regarding health care choices, chronic health issues, and cultural influences.³⁻⁶ Natural health products are defined by Health Canada to include vitamins and minerals, herbal remedies, homeopathic medicines, traditional medicines, probiotics, amino acids, and essential fatty acids sold over-the-counter (OTC) to consumers. The intent of the regulations is that a product should only be a natural health product if it is considered safe for consumer selection. Products from natural sources that are categorized as not safe for self-selection are to be regulated as drugs in Canada.⁷

Although natural health products are routinely available without prescription, that does not mean they are completely safe for all individuals. Some have known side effects, particularly for children, pregnant or breastfeeding women, seniors, those living with a serious disease, or surgical patients.⁸ Concurrent use of natural health products and prescription drugs is common – 32% of Canadians reported such use in a 2004 survey⁹ – and raises concern about adverse drug interactions. Almost half of all pharmacists responding to a 2006 survey reported they had identified a potential NHP-drug interaction in the past, but only two of these were reported to Health Canada.¹⁰ This suggests these kinds of interactions occur, but are often undetected by federal tracking systems.

Pharmacists are increasingly identified as the most suitable health care professional to counsel consumers about natural health products by offering evidence-based information to ensure safe product selection.^{11,12} Pharmacists report increasing frequency of patients seeking NHP advice. In a 1996 study, pharmacists reported that they gave advice on herbal remedies an average of two times each week; four years later, their counselling activities rose to an average of seven times per week.¹³ The National Drug Scheduling Advisory Committee (NDSAC) of Canada's National Association of Pharmacy Regulatory Authorities (NAPRA) identified natural health products as a "growing force" in the future direction of Canadian healthcare.¹⁴ They note that the Natural Health Products Regulations confer new legitimacy on natural health products and intensify pressure on pharmacists to be knowledgeable sources of

information on these products. NDSAC also observes that many consumers have a "thirst for health information" which creates a greater need for pharmacists to be capable of advising consumers who are inundated with health information from a wide range of sources of varying credibility. According to Health Canada's consumer survey, pharmacies are the preferred venue for obtaining information on natural health products in comparison to other sources such as Health Canada's website and publications.² However, the growth in information sources, especially Internet sources, suggests consumers depend less on healthcare practitioners for information.¹⁵ Kwan argues that pharmacists are taking on more of a consultant role as they help consumers interpret information about natural health products from a wide variety of sources.¹²

Kwan et al. note there is high agreement among pharmacists that they have professional responsibilities in regard to natural health products and, as drug experts, they are fittingly responsible for the safe usage of natural health products.¹² Another commentator notes that pharmacists have a "professional responsibility to advise patients about potentially harmful aspects of herbal remedies, including possible interactions or contraindications with synthetic medications and/or current disease states. To do otherwise could leave patients at risk for major problems and jeopardize the public trust accorded to pharmacists".¹⁶ Pharmacy regulatory bodies across Canada have adopted standards of practice and ethical mandates that require pharmacists to be knowledgeable about natural health products and counsel patients about benefits and risks of NHP use. Through public messaging, these professional organizations increasingly emphasize the role of pharmacists in advising patients about natural health products and hold out pharmacists as experts in this area. There is a clear expectation that pharmacists will have requisite knowledge to counsel patients, even though few in the profession report confidence in this area.¹² These emerging professional responsibilities emphasize the need for pharmacy education to ensure pharmacists have capacity to meet evolving standards of practice.¹⁷ In light of burgeoning consumer interest in, and use of, natural health products, the objective of this paper is to provide a systematic analysis of emerging professional responsibilities of Canadian pharmacists in counselling patients about natural health products.

METHODS

To examine emerging professional responsibilities in the Canadian context, we systematically examined all legislation, codes of ethics, standards of practice and guidance documents that apply to the practice of pharmacy in each Canadian jurisdiction to identify if, and how, these instruments establish professional duties in regard to natural health products. Between May and August 2007 all Canadian laws that regulate the practice of pharmacy were identified from up-to-date publicly

accessible statute databases or the QuickLaw legal database. In addition websites for all Canadian pharmacy regulatory and licensing authorities were searched for any additional policies related to natural health products. To supplement this systematic search, we also searched websites of organizations such as the National Association of Pharmacy Regulatory Authorities (NAPRA) to identify relevant instruments such as model standards of practice and policy statements. Key words used in all searches were: natural health products; herbal medicine; botanical medicine; homeopathy; vitamins, minerals; over-the-counter drugs/medicines/medications; non-prescription drugs/medicines/medications. After compiling these materials, they were analyzed by two authors (JF, NMR) using basic content analytic methods to identify provisions relevant to pharmacy practice and natural health products. The relevant provisions were then classified into key themes that focused on how, if at all, each legal or policy document referred to natural health products.

RESULTS

Pharmacy Regulation in Canada

In Canada, provincial and territorial governments have constitutional authority over the regulation of health care professions and each jurisdiction may, in turn, enact legislation to confer self-regulation powers on health professions.¹⁸ Self-regulating professions are governed by professional colleges that set standards to which their members must adhere. Pharmacy is a self-regulating profession across Canada and, in each jurisdiction, a provincial statute sets out the scope and standards of practice for pharmacists. Provincial pharmacy regulation statutes do not explicitly address professional obligations in regard to natural health products, although they typically state that the practice of pharmacy includes provision of non-prescription drugs and information related to drug use. (See e.g. Ontario Pharmacy Act, S.O. 1991, c. 36, s. 3).

Provincial Standards of Practice and Codes of Ethics

Provincial Colleges of Pharmacists enact bylaws and issue practice standards that further clarify professional roles and responsibilities. Key provisions from each Canadian jurisdiction are summarized in the Appendix to this article. In general, these documents frequently refer to pharmacists' knowledge in regard to OTC products. For example, British Columbia's Standards of Practice document states: "[a]s experts on prescription and non-prescription medications, today's pharmacists are an integral part of our patients' health care teams." Non-prescription pharmaceutical products are defined as non-prescription medications, nutrition supplements, health care devices, home care products and complementary and alternative medicines. Alberta's new Standards of Practice state that, in making prescribing decisions and counselling patients, a pharmacist has a duty to consider "appropriate information" which includes other health care

products, aids and devices or other products being used by the patient that might affect drug response. (See https://pharmacists.ab.ca/document_library/HPAstds.pdf) Health care products, aids and devices are defined in Alberta's Pharmacy and Drug Regulation to include natural health products as they are defined in the Natural Health Products Regulation. Saskatchewan's Standards of Practice require pharmacists to be accessible for consultation regarding non-prescription medication, and s/he "should advise the patient on how, when and whether to take non-prescription medication...."

According to Manitoba's Standards of Practice, the pharmacist must provide patient counselling for any prescription or non-prescription medication. The pharmacist must also maintain patient profiles, making a "reasonable effort" to record information including "non-prescription, herbal, and homeopathic drug use." (See Standard H. 1.34(f)) The document further states that patient counselling must include information about significant interactions with other drugs, non-prescription medication, natural health products, nutraceuticals and food. Ontario's Standards of Practice state that the pharmacist must record appropriate patient information, including known contraindications to prescription drugs, non-prescription drugs, natural health products, and complementary or alternative medicines. Another standard maintains that the pharmacist must be clearly identifiable and available, accessible, and approachable to consult with patients who wish to self-medicate with a non-prescription drug, a NHP, or a complementary or alternative medicine.

Both the Nova Scotia College of Pharmacists and the Prince Edward Island Pharmacy Board offer guidelines on natural health products. They state that their pharmacists shall have a general knowledge of natural health products, have a current and reliable reference, be satisfied that the product is approved for sale by Health Canada (Nova Scotia) or be safe (Prince Edward Island), and that when counselling the consumer, the pharmacist must be satisfied that the product will not interfere or interact with the consumer's possible disease state and/or other conventional medications.

Provincial Codes of Ethics also establish professional conduct obligations for pharmacists. For instance, Codes of Ethics in Alberta, Nova Scotia, New Brunswick, Prince Edward Island and Newfoundland and Labrador state that a pharmacist must hold the health and safety of each client to be the primary consideration. This principle recognizes that "[p]harmacists have specialized knowledge about medicines, health related products, and medicinal and nonmedicinal therapies and are expected to use this knowledge to benefit their patients."

National Standards of Practice and Guidance Documents

Some provinces – Nova Scotia, Prince Edward Island and Newfoundland and Labrador - adhere to

NAPRA's Model Standards of Practice. While these standards are scheduled for review in fall 2007, the current version contains several references to natural health products. One of the model standards of professional competency is that a pharmacist must develop a professional relationship with the patient by, for example, offering assistance in selecting non-prescription drug therapy and natural health products. Another competency element holds that a pharmacist must develop therapeutic plans, which includes recommending therapeutic options and instructions for doses, scheduling and administration. On patient request, the pharmacist must provide accurate information regarding the efficacy, toxicity, side effects or interactions of natural health products. With respect to the professional competency of providing drug information, a pharmacist demonstrates "advanced or exemplary practice" skills if s/he "[r]outinely and efficiently retrieve[s] the information necessary to provide recommendations about all drugs, including herbal and complementary medicines." (Model Standard 2.2)

NAPRA has also promulgated guidelines regarding alternative health products, stating that when pharmacists provide advice or sell alternative health products, the pharmacist must abide by their obligation to act in the patient's best interest by ensuring the products are safe to use, free from product toxicity and not harmful to current disease states. The pharmacist must understand the indications for use, possible side effects and expected outcomes.¹⁹ NAPRA does, however, caution pharmacists about going too far. Pharmacists' endorsements bestow professional credibility to health products, so promoting products with scant or no evidence-based data in support of their efficacy or safety raise concerns. NAPRA provides the following guidance on this situation: "Product recommendations to individual patients based on the patient's current health status are appropriate provided that the patient is informed about the absence of evidence-based product information, if that is the case. However, generalized product endorsements or testimonials are not appropriate".²⁰

Messages to the Public

Messages of regulatory bodies aimed at the public also convey an expectation that pharmacists will take on new responsibilities in regard to natural health products. For example, the College of Pharmacists of British Columbia states that consumers should ask their pharmacist if their medication will be affected by vitamins or herbal supplements. They also claim that pharmacists are experts on all prescription and non-prescription medications. Other statements emphasizing pharmacists' role include: "Please tell your pharmacist about any non-prescription drugs you are taking. Many over-the-counter products including natural health products and herbal supplements may interact with your medication"; "Your pharmacist also knows a great deal about over the counter (non-prescription) drugs and natural health products"; "Please talk to your

pharmacist when you buy natural health products or over-the-counter drugs"; "Many pharmacies offer several brands of natural health products.... Please ask your pharmacist to recommend which one is best for you."

The Alberta College of Pharmacists also presents their pharmacists as capable to consult on natural health products, stating they can provide advice on non-prescription drugs and natural health products and check that prescription medications will not interact adversely with natural health products. The Frequently Asked Questions section of the College website encourages patients to ask their pharmacist about natural health products: "Please talk to your pharmacist. Too few patients take advantage of the pharmacist's knowledge and ask questions about non-prescription drugs and alternative therapies." Ontario's Standards of Practice recommend signage in pharmacies encouraging consumers to consult with a pharmacist about selecting non-prescription products.

The Canadian Pharmacists Association (CPhA) also sends an important message to pharmacists and the public. It states that pharmacists contribute to the health care system by providing non-prescription drugs and natural health products and help manage minor ailments by offering information to consumers on self-care and non-prescription medications.²¹ The CPhA tells the public that their pharmacist can help them choose non-prescription medicines or health care products and can provide information on vitamins and herbal remedies.²² The CPhA has published brochures for the public on natural health products, suggesting they inform their pharmacist of any herbal products they consume, that their pharmacist can help them choose a herbal or natural product and that their pharmacist can "help you wade through all the pros and cons about the NHP you're considering to help you make the best choice for your health".²³ The CPhA stresses that the public should buy their natural health products from a pharmacy rather than another source, since "the pharmacy is the logical place to buy these products. Why? Because the pharmacy is where you buy medications. And herbal and natural health products are medications".²⁴ The CPhA also stresses that, given the dearth of scientific evidence surrounding natural health products, a consumer should consult their pharmacist for information on scientific evidence about the product, and whether other medications may adversely interact with the NHP the consumer is considering.²⁴

The CPhA asserts that natural health products should be treated with the same respect shown to prescription medication and indicates pharmacists should have comprehensive knowledge, including information about the product, side effects, interactions with prescription and non-prescription medicine, impact on ongoing illnesses, and safe use during pregnancy.²⁴ The CPhA summarizes their advice to the public in a position statement that recommends "you always speak with your pharmacist before taking medications - including herbal and natural health products".²⁵ Health Canada supports this position and advises

consumers to minimize risks associated with NHP use by seeking advice from a health care professional such as a doctor, pharmacist, or complementary/alternative care provider.⁸ Further, in the Canadian Adverse Reaction Newsletter, Health Canada notes that health care professionals must be made aware if their patients are taking natural health products.²⁶

National Drug Schedule Amendments

One regulatory factor that may affect pharmacists' responsibilities is the status of natural health products in the National Drug Schedules (NDS). The NDS, which are accepted through most of Canada, maintain model conditions of sale of medicinal ingredients that are also captured by the Natural Health Products Regulations. The NDS categorizes drugs based on the level of pharmacist involvement required in their sale; however, in April 2006, NAPRA excluded all natural health products from the scope of the NDS because of differing requirements for acquiring market authorization for natural health products and for conventional pharmaceuticals. NAPRA also determined that "the monitoring and enforcement of conditions for sale of natural health products were beyond the scope of the pharmacy regulatory authorities."²⁷ Though changes to the NDS will likely not be made until all identified natural health products listed in the NDS have received a Natural Product Number (NPN) (or a DIN-HM for homeopathic medicines) and the supplemental framework establishing their conditions of sale has been produced by the Natural Health Products Directorate, the implications for patients, pharmacists, and other stakeholders are as yet unclear.²⁸ NAPRA cautions that if scheduling changes are made to products currently listed on the NDS (Schedules I-III), "there will be considerable confusion regarding the role of the pharmacist regarding their sale" because it is technically still possible that a product regulated by Health Canada as a natural health product²⁸ (i.e., deemed safe for self-care), may be require a prescription in a specific Canadian province due to the provincial drug schedules). Furthermore, each of the provincial governments and pharmacy regulatory bodies will have to decide whether to implement the changes made to the NDS. Despite this uncertainty over the NDS, pharmacists will maintain professional responsibilities in regard to NHP counselling as described in this paper.

DISCUSSION

Pharmacists must comply with legal and ethical obligations to avoid malpractice liability and disciplinary actions for failure to meet appropriate standards of professional conduct and patient care. Increasingly, these obligations – as set out in standards of practice, codes of ethics and other instruments – include a responsibility to be knowledgeable about natural health products, counsel patients in regard to NHP selection and

use, and, importantly, to protect patients from adverse interactions between natural health products and other drugs. These responsibilities are heightened as pharmacists gain expanded scopes of practice, including the power to prescribe, which reinforces obligations to seek information about patient NHP use to avoid harmful drug interactions.

Some instruments promulgated by professional bodies, such as guidance documents that recommend desirable practices but do not prescribe standards, may not go so far as to establish legally enforceable rules of conduct. These recommendations nonetheless may be used as evidence of an appropriate standard of practice in liability claims or professional discipline proceedings against pharmacists. Indeed, the registrar of the Nova Scotia College of Pharmacists has warned that pharmacists risk liability if they provide little to no patient counselling on non-prescription drug treatment.²⁹

Natural health products are available for sale in a variety of locations outside pharmacies (e.g., health food stores, grocery stores) where patients may buy products from clerks with little or no training. Although a full discussion of the implications of allowing natural health products to be sold in such a wide range of retail settings is beyond the scope of this paper, it is important to note that pharmacists are held to standards regarding their professional responsibilities for natural health products that differ significantly from the general lack of standards for other retailers. This may have many implications. For example, consumers have little recourse if they follow ill-advised recommendations from retail clerks; however, as licensed health care practitioners, pharmacists are held to a higher standard regarding the advice they provide consumers.

CONCLUSIONS

Since January 1, 2004 natural health products such as herbs, vitamins and other supplements have been regulated in Canada as a subset of drugs under the Food and Drugs Act. Provinces and territories have been slow to develop policies and standards of practice documents that provide explicit guidance regarding pharmacists' professional responsibilities with respect to natural health products. However, it is clear from this review that pharmacists have an obligation to be able to counsel patients about the natural health products they sell, especially about potential interactions with other drugs.

CONFLICT OF INTEREST

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References

1. Canadian Pharmacists Association. Expanding the Role of Pharmacists. http://pharmacists-ca.inf.ca/content/consumer_patient/resource_centre/working/pdf/Expanding_the_Role_of_Pharmacists_Mar07.pdf. (Accessed on 19 August, 2007).
2. Ipsos Reid. Baseline Natural Health Products Survey Among Consumers. http://www.hc-sc.gc.ca/dhp-mps/alt_formats/hpfb-dgpsa/pdf/pubs/eng_cons_survey_e.pdf. (Accessed on 19 August, 2007).
3. Caulfield T, Feasby C.. Potions, promises and paradoxes: Complementary and alternative medicine and malpractice law in Canada. *Health Law J*. 2001;9:183-203.
4. Kelner M, Wellman B. Health care and consumer choice: medical and alternative therapies. *Soc Sci Med*. 1997;45(2):203-12.
5. Verhoef MJ, Balneaves LG, Boon HS, Vroegindewey A. Reasons for and characteristics associated with complementary and alternative medicine use among adult cancer patients: a systematic review. *Integr Cancer Ther*. 2005;4(4):274-86.
6. Truant T, Bottorff JL. Decision making related to complementary therapies: A process of regaining control. *Patient Educ Couns*. 1999;38(2):131-42.
7. Natural Health Products Regulations.
8. Health Canada. Safe Use of Natural Health Products. http://www.hc-sc.gc.ca/iyh-vsv/med/nat-prod_e.html. (Accessed on 19 August, 2007).
9. Be MedWise. Survey on Canadians' Use of OTC Medications. <http://www.bemedwise.ca/english/usagesurvey.html>. (Accessed on 18 August, 2007).
10. Charrois TL, Hill RL, Vu D, Foster BC, Boon HS, Cramer K, Vohra S. "Community identification of natural health product drug interactions. *Ann Pharmacother*. 2007;41(7):1124-9.
11. Boon H, Hirschhorn K, Griener G, Cali M. The ethics of natural health products in pharmacies and pharmacy practice: a systematic documentary analysis. (Submitted to *Am J Health-Syst Pharm* August 2007).
12. Kwan D, Hirschhorn K, Boon H. Canadian pharmacists' attitudes, knowledge and professional practice behaviours toward dietary supplements: A systematic review. *BMC Complement Altern Med*. 2006 Sep 19;6:31.
13. Bouldin AS, Smith MC, Garner DD, Szeinbach SL, Frate DA, Croom EM. Pharmacy and herbal medicine in the US. *Soc Sci Med*. 1999;49:279-89.
14. National Drug Scheduling Advisory Committee. A Preliminary Review of the Relevance of Canada's National Drug Scheduling System: A Report to the Council of Pharmacy Registrars of Canada. http://www.napra.ca/pdfs/drugsched/preliminary_review_NDS_system-final.pdf. (Accessed on 18 August, 2007).
15. Eysenbach G, Jadad AR. 'Evidence-based patient choice and consumer health informatics in the internet age, *J Med Internet Res*. 2001; 3, 2, e19.
16. Bennett J, Brown CM. Use of herbal remedies by patients in a health maintenance organization. *J Am Pharm Assoc*. 2000;40(May-Jun):353-8.
17. Johnson T. Canadian Pharmacy Students' Knowledge of Herbal Medicine. MSc Thesis. Department of Pharmaceutical Sciences, University of Toronto, 2007.
18. "Regulation of Health Care Professionals" by Tracey Epps in *Canadian Health Law and Policy*, 3rd ed. Jocelyn Downie, Timothy Caulfield & Colleen Floods, eds. (Markham: LexisNexis Canada Inc., 2007).
19. National Association of Pharmacy Regulatory Authorities. Pharmacist's Responsibility in Providing Advice About or Selling Alternative Health Products (NAPRA Position Statement). <http://www.napra.ca/docs/0/95/158/183.asp>. (Accessed on 19 August, 2007).
20. National Association of Pharmacy Regulatory Authorities. Model Regulatory Statement on Pharmacists' Involvement in Product Endorsements and Testimonials. <http://www.napra.ca/docs/0/95/158/744.asp>. (Accessed on 19 August, 2007).
21. Canadian Pharmacists Association. The Role of the Pharmacist. http://www.pharmacists.ca/content/consumer_patient/resource_centre/working/pdf/Role_of_the_Pharmacist_Mar07.pdf. (Accessed on 19 August, 2007).
22. Canadian Pharmacists Association. Working with Your Pharmacist. http://www.pharmacists.ca/content/consumer_patient/resource_centre/working/get_your_answers.cfm. (Accessed on 19 August, 2007).
23. Canadian Pharmacists Association. Herbal and Natural Health Products. http://www.pharmacists.ca/content/consumer_patient/resource_centre/natural_medicine/pdf/comda_Herbal.pdf. (Accessed on 18 August, 2007).
24. Canadian Pharmacists Association. Thinking About Herbal and Natural Health Products? http://www.pharmacists.ca/content/consumer_patient/resource_centre/natural_medicine/pdf/herbalbrochure5.pdf. (Accessed on 19 August, 2007).
25. Canadian Pharmacists Association. Frequently Asked Questions. http://www.pharmacists.ca/content/hcp/resource_centre/faqs/index.cfm#12. (Accessed on 19 August, 2007).
26. Health Canada. Canadian Adverse Reaction Newsletter, Volume 12, Issue 4, Oct 2002. http://www.hc-sc.gc.ca/dhp-mps/medeff/bulletin/carn-bcei_v12n4_e.html#nathealth. (Accessed on 18 August, 2007).
27. Health Canada. Record of Decisions: Health Canada – Health Products and Food Branch, Therapeutic Products Directorate, Bilateral Meeting Program. http://www.hc-sc.gc.ca/dhp-mps/prodpharma/activit/assoc/2006-04-24_e.html. (Accessed on 18 August, 2007).

28. Piszczek, Jolanta. Identifying Natural Health Products Listed in NAPRA's National Drug Schedules. http://www.napra.ca/pdfs/drugsched/Identifying_NHPs_in_the_NDS-Final_Oct%2031_formatted.pdf. (Accessed on 19 August, 2007).
29. Kristan Wolfe. Could an error ruin you?: As pharmacy practice expands, so does liability. *Pharmacy Post News*, 11:1,12, 2003.

Appendix: Canadian Pharmacy Policies and Guidelines: Summary by Jurisdiction

British Columbia	<u>Framework of Professional Practice:</u> Non prescription pharmaceutical products are defined as non-prescription medications, nutrition supplements, health care devices, home care products, complementary and alternative medicines.
Alberta	<u>Standards of Practice</u> Note: Health care products, aids and devices are defined in Alberta's Pharmacy and Drug Regulation to include natural health products as they are defined in the NHPR s.1(1)(f). 2. A pharmacist must consider appropriate information for each patient. 2.1 Each time a pharmacist (d) conducts a review of a patient's drug utilization, or (e) provides advice to a patient about a drug, a blood product or drug therapy, the pharmacist must consider appropriate information. 2.2 Appropriate information means the following information in relation to a patient: (h) other health care products, aids and devices or other products being used that may affect the pharmacist's decision; 8. A pharmacist must take reasonable steps to offer assistance and information to a patient who wishes to purchase a schedule 3 drug or a health care product, aid or device. 8.1 A pharmacist must be available and accessible to a person who wishes to purchase a schedule 3 drug or a health care product, aid or device. 8.2 A pharmacist must take reasonable steps to enter into a dialogue with or provide information to a person who: (a) requests a schedule 3 drug or a health care product, aid or device; (b) requests assistance in making a choice about a schedule 3 drug or a health care product, aid or device; (c) appears to be having difficulty in making a choice about a schedule 3 drug or a health care product, aid or device; (d) is observed to be making purchases of a schedule 3 drug or a health care product, aid or device in a quantity or at a frequency that are therapeutically inappropriate; or (e) the pharmacist recognizes as someone who may face a risk from the selection or use of a schedule 3 drug or a health care product, aid or device. 17. An authorized pharmacist who administers an injection to a patient must have proper regard for the interests of the patient and take all steps necessary to ensure that the injection is administered safely. 17.1 A pharmacist who administers an injection to a patient must: (c) ensure that: (i) there is ready access to drugs and health care products, aids and devices used to treat reactions to injectable drugs, and (ii) the pharmacist is trained to administer the drugs and health care products, aids and devices used to treat reactions to injectable drugs; <u>Miscellaneous</u> The Manitoba Pharmaceutical Association: Pharmacy Standards (Minimum Pharmacy Site Requirements): 4) The Minimum Library Requirements are: c) Interaction references for drugs, herbs, nutraceuticals and food; d) Information references for drugs, herbs, and nutraceuticals
Saskatchewan	<u>Standards of Practice</u> Non-prescription Medication Counselling: <ul style="list-style-type: none">• The pharmacist shall be accessible for consultation.• The pharmacist should advise the patient on how, when and whether to take non-prescription medication, and when appropriate, advise the patient to consult a physician or other health care professional. NB. Natural health products are not explicitly identified as being non-prescription medications <u>Supplemental Standards of Practice for Schedule II and III Drugs (NAPRA)</u> See end of Table.

Appendix: Canadian Pharmacy Policies and Guidelines: Summary by Jurisdiction

Manitoba	<p><u>Standards of Practice (Community):</u></p> <p>1.4. For any prescription medication, or regulated non-prescription medication to be provided to the patient by delivery, the pharmacist must:</p> <p>1.4.4. include printed drug information plus contact pharmacy information, in addition to patient counselling.</p> <p>1.34. Patient Information: Pharmacists shall maintain patient profiles for all patients. A reasonable effort shall be made to obtain and record the following information:</p> <p>f. Non-prescription, herbal, and homeopathic drug use</p> <p>2.3 Patient counselling shall provide information to the patient on the following aspects of medication use:</p> <p>2.3.5 instruction required to achieve the intended therapeutic response, which shall include, but not be limited to:</p> <p>2.3.5.1 information regarding significant drug interactions with other drugs non-prescription medication, natural health products, neutraceuticals and food;</p>
Ontario	<p><u>Standards of Practice</u></p> <p>Standard 1</p> <p>The pharmacist, using unique knowledge and skills to meet a patient's drug-related needs, practices patient-focused care in partnership with patients and other health care providers, to achieve positive health outcomes and/or to maintain or improve quality of life for the patient.</p> <p>Operational Component 1.2</p> <p>The pharmacist ensures that appropriate patient information is gathered and recorded to establish a profile for the provision of patient-focused care and that the information is maintained in a manner which ensures ease of use for patient care activities and confidentiality for the patient.</p> <p>The profile shall include demographic information about the patient as articulated under the Drug and Pharmacies Regulation Act and Regulations or the CSHP Standards of Practice and may also include, where appropriate, other information that is considered important for continuity of care and achievement of an optimal therapeutic outcome. This could include known patient risk factors for adverse drug reactions, drug allergies or sensitivities; known contraindications to prescription drugs, nonprescription drugs, natural health products, and complementary or alternative medicines, and other medications or treatments the patient is currently taking that may contribute to their condition or interact with suggested therapy.</p> <p>Operational Component 1.6</p> <p>The pharmacist is clearly identifiable and is available, accessible and approachable to consult with the patient who is seeking to self-medicate with a nonprescription drug, a natural health product, or a complementary or alternative medicine.</p> <p>Standard 5</p> <p>The pharmacist, in collaboration with the designated manager or hospital pharmacy manager, manages drug distribution by performing, supervising, or reviewing the functions of selection, preparation, distribution, storage and disposal of drugs to ensure safety, accuracy and quality of supplied products.</p> <p>Operational Component 5.2 - (Applies to community practice)</p> <p>The pharmacist locates drugs in the area of the pharmacy consistent with the appropriate drug schedule classification, regulations and safety consideration which reflect the level of risk of the drug for the patient.</p> <p>5.2.3 The pharmacist ensures that all personnel know:</p> <ul style="list-style-type: none"> - That only a pharmacist, intern, or registered pharmacy student under the direct supervision of the pharmacist may provide information or advice respecting the use of nonprescription products, natural health products and complementary or alternative medicines - Where Schedule II, III and other nonprescription products are located in the pharmacy - Why these products are located where they are - When the pharmacist is required or expected to intervene/consult - When to refer patients to the pharmacist <p>5.2.4 Schedule III drugs and all other nonprescription products should be located in an area of the pharmacy adjacent to the prescription services department (dispensary) which should allow self selection of Schedule III drugs by a patient, and provide opportunities for patient/pharmacist consultation.</p> <p>5.2.5 The pharmacist should endeavour to enhance patient awareness of the benefits, limitations, appropriate use and risks associated with nonprescription products through one or more of the following:</p> <ul style="list-style-type: none"> - Signage which encourages patients to consult with the pharmacist regarding the selection of nonprescription products
Quebec	<p><u>Standards of Practice</u></p> <p>None located relevant to natural health products.</p>
Newfoundland and Labrador	<p><u>Standards of Practice</u></p> <p>See Model Standards of Practice for Canadian Pharmacists (NAPRA, 2003)</p>

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Nova Scotia	<p><u>Standards of Practice</u> See Model Standards of Practice for Canadian Pharmacists (NAPRA, 2003)</p> <p>Supplemental Standards of Practice for Schedule II and III Drugs (NAPRA) See end of Table.</p> <p>Policies, Positions & Guidelines: Sale of Natural Health Products in Pharmacies</p> <ul style="list-style-type: none"> • The pharmacist shall have a general knowledge of natural health products. • The pharmacist shall have a current, reliable reference. • The pharmacist shall be satisfied that the products have been approved for sale by Health Canada and have been assigned an NPN or DIN-HM designation. • When counselling, the pharmacist shall be satisfied that the product(s) will not interfere/interact with the patient's possible disease state and/or other traditional medications. • When counselling, the pharmacist shall be satisfied that the patient understands that the product is not to be used as an alternative to his/her traditional therapy, unless so directed by his/her physician. • When counselling, the pharmacist shall encourage the patient to inform his/her physician of the decision to try new therapy. <p>The pharmacist shall recognize the need for intervention and/or referral to a physician.</p>
New Brunswick	<p><u>Standards of Practice</u> None located.</p>
Prince Edward Island	<p><u>Policy Statement</u> Pharmacist's Responsibility in Providing Advice About or Selling Alternative Health Products: Prince Edward Islanders are increasingly using complementary therapies, including botanical and homeopathic medicines, as an adjunct or alternative to allopathic treatment. Pharmacists commonly offer such medicines for sale and are frequently consulted about the appropriate use of both botanical (plant based remedies) and homeopathic products (extremely small doses of substances aimed at stimulating healing). The following general guidelines are commended to pharmacists providing advice or selling alternative health products:</p> <ol style="list-style-type: none"> 1. All botanical and homeopathic products distributed to patients should be safe to use in keeping with the pharmacist's obligation to act in the patient's best interest. Safety includes reasonable assurance of freedom from product toxicity as well as not causing harm with respect to ongoing disease states. 2. The pharmacist must have an understanding of the indications for use, possible side effects and expected outcomes of these products, and maintain appropriate references. 3. The pharmacist recognizes the need for intervention and/or when to advise referral to the purchaser's physician for treatment or ongoing management of a disease state, in keeping with the pharmacist's role in identifying, preventing or solving therapeutic problems. <p>Guidelines for the Sale of Herbal Products and Homeopathic Remedies in Pharmacies</p> <ul style="list-style-type: none"> • The pharmacist shall have a general knowledge of herbal products. • *The pharmacist shall have a current, reliable reference. • *The pharmacist shall be satisfied that the products are safe. • *When counseling, the pharmacist shall be satisfied that the product(s) will not interfere/interact with the patient's possible disease state and/or other traditional medications. • *When counseling, the pharmacist shall be satisfied that the patient understands that the product is not to be used as an alternative to his/her traditional therapy, unless so directed by his/her physician. • *When counseling, the pharmacist shall encourage the patient to inform his/her physician of the decision to try new therapy. <p>*The pharmacist shall recognize the need for intervention and/or referral to a physician.</p>
Yukon	None located.
Northwest Territories	None located.
Nunavut	None located.

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Model Standards of Practice for Canadian Pharmacists (NAPRA)	<p>1.1 A pharmacist must develop a professional relationship with the patient. Example: ...offers professional assistance in selecting non-prescription drug therapy and natural health products.</p> <p>1.2 A pharmacist must gather patient information and assess its relevance to patient care. Required performance indicator: Routinely collect the information necessary to address the patient's drug related needs or questions, such as:</p> <ul style="list-style-type: none"> • the seriousness of symptoms, particularly when addressing problems associated with self care / non-prescription drugs • the history of current condition, particularly when addressing problems associated with self care / non-prescription drugs • other medications or treatments that the patient has tried for this condition and effects, particularly when addressing problems associated with self care / non-prescription drugs <p>1.5 A pharmacist must develop therapeutic plans, recommending therapeutic options, doses, scheduling / administration, required drug devices and compliance aids. Required performance indicator: When requested by a patient, provide accurate information concerning efficacy, toxicity, side effects or interactions of natural health products.</p> <p>1.6 A pharmacist must refer patients to other health care providers when required. Optional Performance Indicators reflecting advanced or exemplary practice: Routinely refer patients to appropriate health organizations and health care professionals within the community, including complementary and alternative health care providers.</p> <p>1.7 A pharmacist must develop, implement and fulfil plans to monitor the patient's progress towards desired therapeutic outcomes Required performance indicator: ... appropriately educate patients on the following when dispensing prescription and non-prescription drugs, when patient counselling on discharge medications or when providing recommendations about management of specific drug related problems:</p> <ul style="list-style-type: none"> • name and class of the drug (e.g. antibiotic, pain reliever) • directions for use including education about drug devices • special storage requirements • common or important drug-drug or drug-food interactions <p>2.2 A pharmacist must retrieve information from relevant sources. Optional Performance Indicators reflecting advanced or exemplary practice: Routinely and efficiently retrieve the information necessary to provide recommendations about all drugs, including herbal and complementary medicines.</p> <p>2.4 A pharmacist must organize and disseminate information. Optional Performance Indicators reflecting advanced or exemplary practice: Provide recommendations about all legal drugs, including herbal and complementary medicines.</p> <p>4.1 A pharmacist must perform, supervise and/ or review drug preparation and distribution activities. Required performance indicator: Appropriately identify and perform professional functions associated with drug distribution, including:</p> <ul style="list-style-type: none"> – providing assistance with the selection of unscheduled* non-prescription drugs when requested <p>* according to NAPRA's National Model Drug Schedules</p>
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