As promised in the 4th issue of the SAPJ, this issue contains highlights from some of the presentations from conference 2018. At roughly 4800 words (trust me on this one), it’s a long article. And I needed to choose just 21 photographs from the 645 photographs that various photographers gave me. (Dave Sieff, thank you. Again.) It took what felt like weeks to complete, but I guess it was really just days.

And I was only halfway through. What to do? For the second issue in a row (probably more but the RAM in my brain doesn’t want to acknowledge it), I needed to argue with myself about it. I won’t bore you with the thought processes (as I did for the last issue), but I eventually decided to be kind. To our poor long-suffering colleagues at Medpharm who had to wait for me for ages, to you because you’d suffer from information overload, and to myself because it was exhausting sifting through everything. So the rest of the presentations will be featured in the next issue. Believe me, it’s better that way.

One of the advantages to me is that I relived the presentations. And by looking at the abstracts (from those people who had sent them – I forgot to send mine, but don’t tell Mariet) and at the presentations, I could hear the presenters’ voices in my head. Somehow, my mind registered not only what I had heard at conference, but also took note on some details that had escaped me at the time. And that was a wonderful experience because it felt as though new truths took hold in my head.

I can’t give you highlights from all the presentations which are featured in the PSSA Perspectives pages, but here are some of the random thoughts that occurred to me while I was preparing the pages.

### Pharmacists have become the most over-trained and under-utilised professionals

How often have we heard this? How often have we used these words ourselves. Own up. I know that I have. It’s often in a “poor me” or “LISTEN TO ME!” context, when we feel that no-one understands what we actually do.

Michael Brown, who is a registered nurse and diabetes educator said the following: “Today, as before, many pharmacists provide patient-centred services like medication coordination, medication management, patient education, and more. We are the front line of the health care team and often see patients more than any other provider. Pharmacists have become the most over-trained and under-utilised professionals in America.”

We do and we are in this country, not so? Our lives have changed. I know that I’ve been in the profession for more than 40 years (if you count my student days), but surely we have all seen changes in the profession? Even the young graduates, who are trained to be patient-centred, are living in a state of flux as we prepare to be integrated into the universal health coverage system for which National Health Insurance will pay.

### The ethics of antibiotic use in animal farming

This was the topic addressed by Captain Precious Ncayiyana. Some of you will remember that it’s something that has bothered me for slightly more than 23 years. When I left Wits University, I went to work as a regulatory pharmacist for an animal health company.

I was so pleased when Precious mentioned that intensive factory farming of pigs and poultry poses the greatest risk of antimicrobial resistance. This is mainly because, as you already know, I very nearly turned vegetarian when I worked for that company. I’ve been a flexitarian ever since. I’m ashamed to admit that it wasn’t antimicrobial resistance that did this to me, even though in another life, 51 years ago (yep, you read it correctly) when I left school to work in a clinical microbiology laboratory, we already had antimicrobial resistance. (Mostly it was because medical practitioners had too little knowledge of the pharmacology of antimicrobials. Oh no! Don’t tell me that it’s still the same nearly two generations later?) In the mid ’90s it was because I was battling with the ethical problem of giving these animals antimicrobials just so that we could keep them alive and well so that we could kill them and eat them. I became far too fond of pigs and chickens in those days.

Of course, nowadays the implications of antimicrobial resistance impacts on human health even more than it did in those days. It’s an entirely different ethical dilemma, but perhaps my ethical problem is also relevant. Not so, Merv Prof Malan? (Sorry – private conversation going on simultaneously.)

### Dr Google

I cannot let this opportunity go by without referring to Prof Nadine Butler’s presentation on Dr Google – pharmacist’s friend or foe? Mainly because as a pharmacist, I have my favourite websites and apps. I cannot live without the online professional Merck Manual or a whole bunch of professional websites, like Medscape. And I am a huge fan of the EML/STG app, which masquerades as the EML Clinical Guide.

I do suspect that, although we use Dr Google for ourselves, we always suspect cyberchondria in patients. We are paranoid that patients can research any symptoms and come up with their own diagnosis of rare or serious condition. And we believe that they’ll be wrong in 99% of cases.

Nadine and her students garnered some fascinating data and came to some interesting conclusions. She didn’t report on the most interesting conclusion though – if you’re a young Xhosa pharmacist, there’s a great opportunity out there. Go for it!

Lorraine Osman