

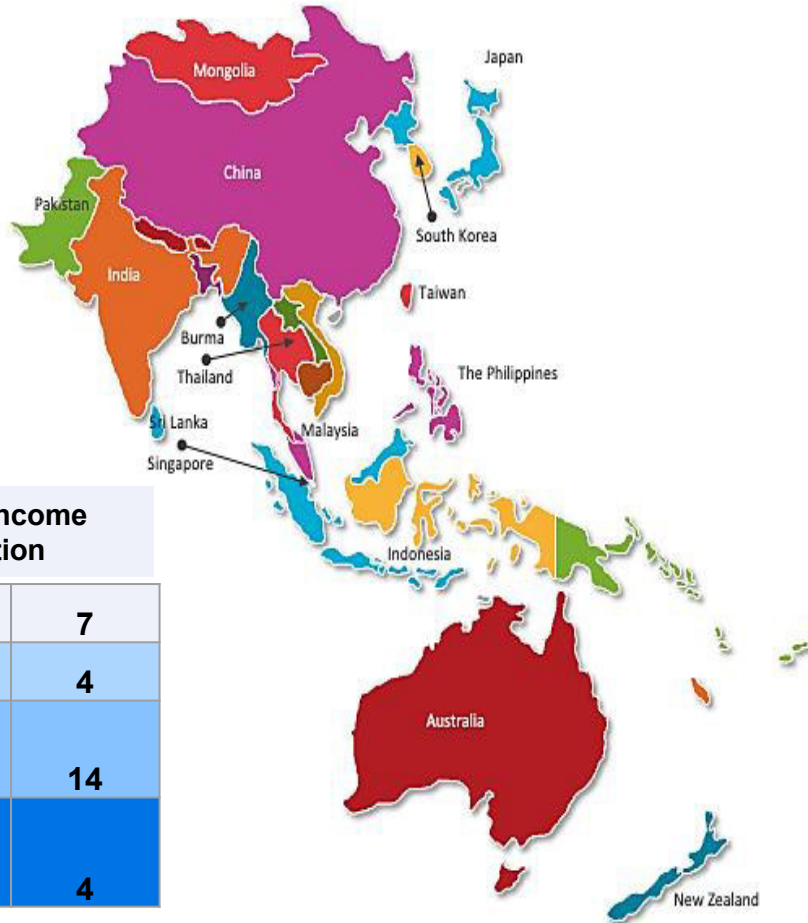
# Pharmacists' Roles in Primary Care in the Asia-Pacific

23 November 2025  
Eaton Hotel  
Kowloon, Hong Kong

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President, Federation of Asian Pharmaceutical Associations

# A Region of Diversity

## ASIA PACIFIC MAP



World Bank Income Classification	
High	7
Upper middle	4
Lower-middle	14
Low	4

Geographic and environmental diversity

Biological diversity

Cultural and ethnic diversity

Economic and political diversity

Social diversity

# Economic Diversity

- By World Bank Classification

High	Upper Middle	Lower Middle/Low
Australia	China	Bangladesh
Brunei Darussalam	Fiji	Cambodia
Hong Kong (China)	Indonesia	DPRK
Japan	Malaysia	India
Korea	Thailand	Lao PDR
Macau (China)		Mongolia
New Zealand		Myanmar
Singapore		Nepal
		Pakistan
		Papua New Guinea
		Philippines
		Solomon Islands
		Sri Lanka
		Viet Nam

# A Region of Health and Healthcare Diversity

ASIA PACIFIC MAP



## Other factors affecting health

- Urbanization
- Nutrition transition
- Inequality
- Covid 19 Impact
- Climate change

## Population structure

- Aging societies
- Youthful populations

## Health status and disease burden

- Non-communicable diseases
- Infectious diseases

## Health Expenditure and Access

- Maternal and Child Health
- Expenditure disparities
- Universal Health Coverage
- Healthcare resources

# Health Status

Countries	Healthy LE (F) at birth	Healthy LE (M) at birth	Survival to age 65 (F)	Survival to age 65 (M)	Under age 5 mortality rate
	In years	In years	% of cohort	% of cohort	Per 1 000 live births
High income	70.7	69.9	94.1	89.2	3.8
Upper-middle income	65.1	63	86.3	70.8	8.1
Lower-middle and low income	61.6	59	78.6	70	27.4










OECD. 2024. Health at a Glance: Asia/Pacific at [Health at a Glance: Asia/Pacific | OECD](#)

# Risk Factors for Health

Countries	Tobacco Use (F)	Tobacco Use (M)	Access to basic sanitation	Access to drinking water	Children & Adolescent Overweight
	% of current users	% of current users	% of population	% of population	% of population 5-19 years
High income	9.3	29.7	100	100	36.1
Upper-middle income	1.6	43.3	93	91.1	25.7
Lower-middle and low income	8.1	45.3	71.5	88	17

OECD. 2024. Health at a Glance: Asia/Pacific at [Health at a Glance: Asia/Pacific | OECD](#)






# Quality of Care

Countries	Breast cancer mortality	Cervical cancer mortality	Vaccination for DTP3	Vaccination for measles
	Age-standardised rates per 100 000 women	Age-standardised rates per 100 000 women	Coverage (%), children	Coverage (%), children
High income	13.3 	2.3 	97.8 	94.7 
Upper-middle income	14.4	6.9	97 	97 
Lower-middle and low income	11.9	8.1 	85.5 	74.5 

OECD. 2024. Health at a Glance: Asia/Pacific at [Health at a Glance: Asia/Pacific | OECD](#)

# Quality of Care

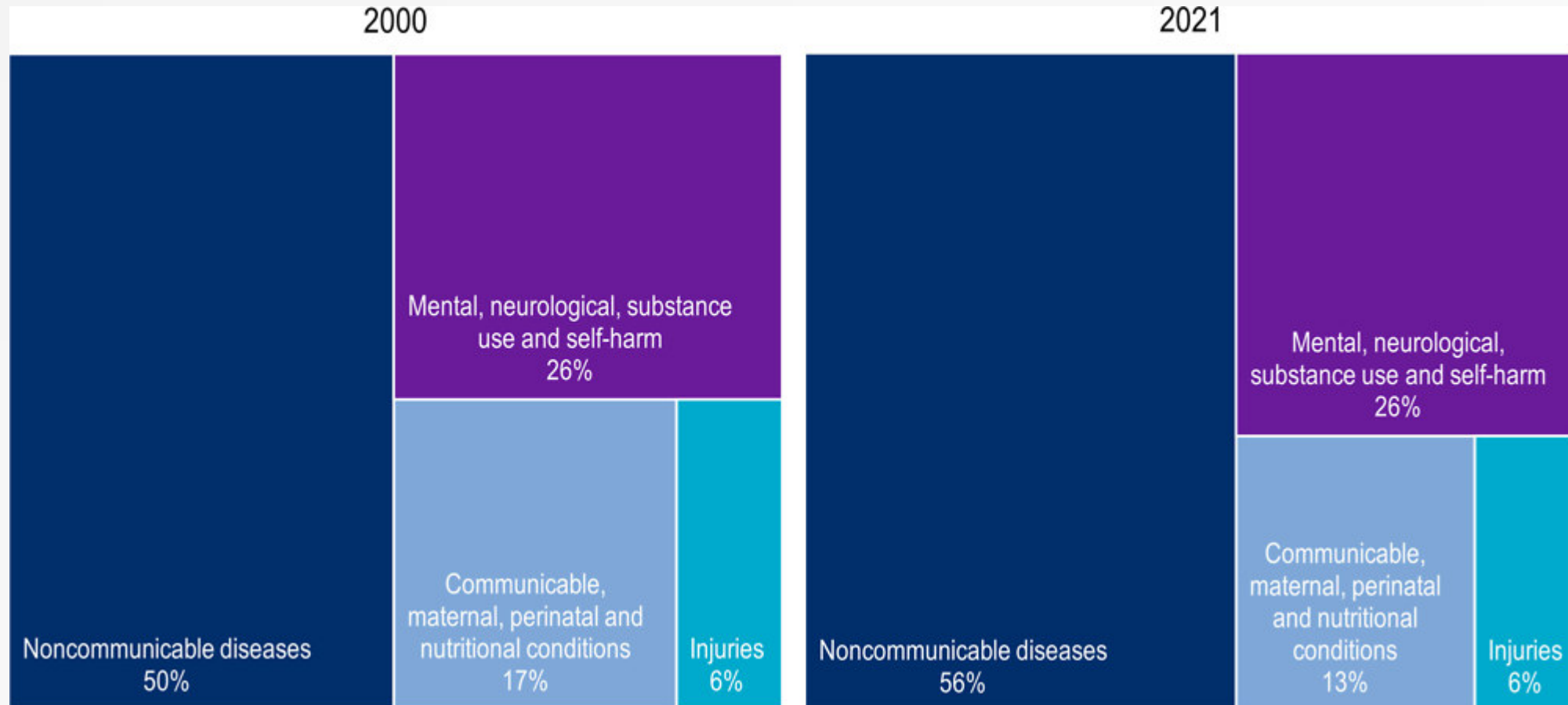
- Health Spending, OOP Spending, Doctors/1000, Nurses/1000, Hosp Beds/1000

Countries	Health spending	OOP spending	Doctors per 1 000 population	Nurses per 1 000 population	Hospital beds per 1 000 population
	USD international per capita	Share of health spending	Number	Number	Number
High income	4714.6 	12.9 	2.6 	9 	3.9 
Upper-middle income	948	27.2	0.9	3.3	2
Lower-middle and low income	254	43.6	0.8	1.4	1.3

OECD. 2024. Health at a Glance: Asia/Pacific at [Health at a Glance: Asia/Pacific | OECD](#)



# Major Causes of Morbidity



**Mental, neurological, and substance use disorders and self-harm (MNSS) place a significant burden on the population in the Asia-Pacific region**

# Highlights of the 2024 World Health Statistics

Published by the World Health Organization (WHO)

The COVID-19 pandemic had reversed over a decade of gains in both life expectancy at birth and healthy life expectancy

Deaths due to NCDs rose to 73.9% while the share of communicable diseases surged back to 23% due to COVID.

COVID-19 ranked among the three top causes of death in 2020 and 2021 and in some Regions, it ranked No. 1.

At the middle point of SDGs, progress on 42 out of 52 health-related goals were in the right direction although targets have not been achieved yet.

# Highlights of the 2024 World Health Statistics

The world is off-track in achieving Universal Health Coverage (UHC), health emergencies preparedness, and healthier populations “Triple Billions” targets in 2025.

The world has double burden of malnutrition (undernutrition and overweight/obesity).

Health challenges are faced by persons with disabilities, and refugees and migrants, inequity of access to health care.

# Universal Health Coverage (UHC)



# Critical Components of Primary Health Care

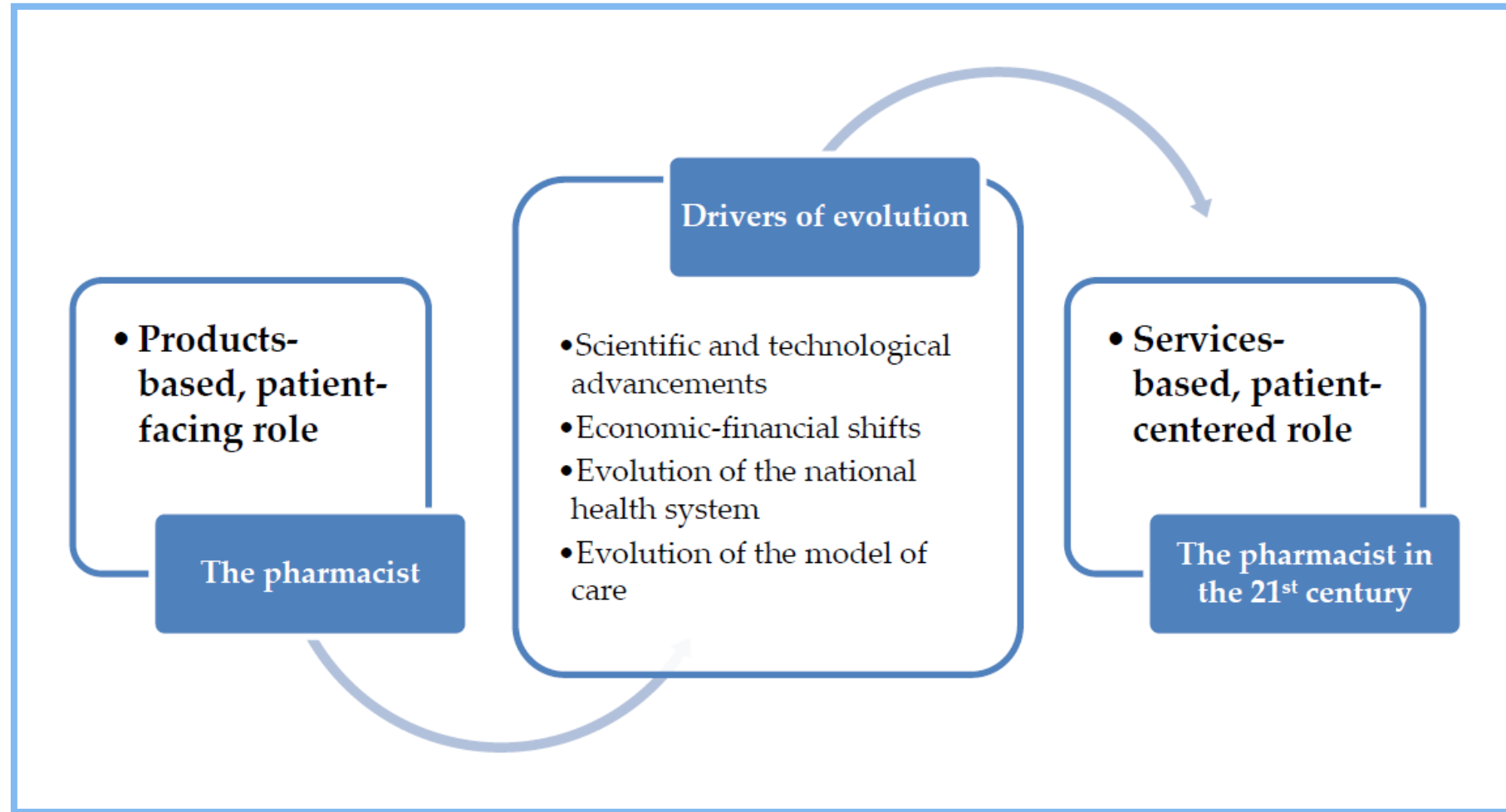
- Comprehensive integrated health services
- Multisectoral policies and functions and
- Engaging and empowering individuals, families and communities for self-reliance in health

# Core Benefits of Strong Primary Health Care

Benefit	Real-world Effect
Preventive care	Reduced incidence of vaccine-preventable diseases
Chronic disease management	Lower rates of complications (e.g., fewer strokes from uncontrolled hypertension)
Cost savings	Countries with strong PHC spend less per capita on hospital care
Equity	Rural and low-income populations gain access to essential services

Are community pharmacists ready to take on the challenge of PHC?

# Evolution of the Pharmacy Profession and Enablers of Change



Bragazzi NL, et al. 2020. The role of hospital and community pharmacists in the management of COVID-19: Towards an expanded definition of the roles, responsibilities and duties of the pharmacist. Pharmacy 8:140.



# Community Pharmacy Practices: Examples

- Low Middle Income Country: Philippines
- Higher Middle Income Country: Thailand
- High Income Country: Japan

# The Impact of COVID-19 on Community Pharmacy Practice

ORIGINAL ARTICLE

## **Challenges, Adaptive Measures, and Opportunities of Community Pharmacy Practice in the Philippines during the COVID-19 Pandemic**

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*Department of Clinical, Social and Administrative Pharmacy, College of Pharmacy, University of the Philippines Manila*

Ngo, FL, Gloria MA, and YR Robles. 2024. Challenges, adaptive measures, and opportunities of community pharmacy practice in the Philippines during the COVID-19 pandemic. Acta Medica. Manila

# Materials and Methods

## Study Design

This study employed a qualitative, cross-sectional study design using purposive sampling. Data collection was performed through focus group discussions (FGD), key informant interviews (KII), and documentary review of existing government regulations for triangulation.

## Study Population

- chain drug stores
- independent drug stores
- online and other stores that provide service variations, and
- people who are working in professional pharmacy organizations that have relevance to the community pharmacy settings.

Table 1. Summary List of Respondents

	Pharmacist	Pharmacy Administrator
Chain drugstores	5	3
Independent drugstores	5	2
Pharmacy organizations	0	1

# Findings of the Study

## Adaptive Measures

- The provision of **telepharmacy services** to which pharmacists were able to provide counseling and answering queries from patients
- **Online messaging** where medication-related advice were given
- Introduction of **chatbots** to facilitate communication
- Pharmacists encouraged patients to **buy medical devices for symptom monitoring** or **call the pharmacy for assistance** when doing the procedure at home.
- There was an increase in the purchase of vitamins and food supplements and **pharmacists provided guidance in their proper use.**
- Patients with chronic ailments were informed of the **importance of taking their medicines regularly.**
- There was also effort to **correct wrong information about medicines and food supplements** coming from the social media sources.
- Pharmacists were tapped to join government team as **vaccinators for COVID-19 prevention.**

# Findings of the Study

## Opportunities

- The role of the pharmacist as a health care provider was highlighted during the pandemic as **patients prefer pharmacy visits over clinic or hospital visits.**
- Patient visits became an opportunity for pharmacists to guide patients on **the use of OTC medicines and household remedies.**
- The pandemic paved the way to accelerate the **training and certification of pharmacists as immunizers.**
- Some pharmacies became vaccination sites for COVID-19 vaccines and provided the avenue to provide **patient education and to correct misconceptions about vaccines.**
- The crisis built a **two-way informal referral system among community pharmacies and with the nearby hospitals** in a collaborative manner.
- The introduction of **e-prescription, telemedicine and telepharmacy** opened the gate for community pharmacies to expand their services and provide medicine information in a convenient manner.

Ngo, FL, Gloria MA, and YR Robles. 2024. Challenges, adaptive measures, and opportunities of community pharmacy practice in the Philippines during the COVID-19 pandemic. Acta Medica. Manila

# Thailand

## Key Developments in Community Pharmacy Services

- **Expanded Scope of Practice**
  - Medication Therapy Management for Chronic Diseases (NCDs)
  - Health Screening (blood pressure, glucose, cholesterol)
  - Vaccination services in selected areas
  - Patient education and adherence support
- **UHC Impact**
  - Gold Card system has expanded patient access to medicines
    - Pharmacies are being recruited to offer medicines for 16 minor ailments
    - Operational in pilot regions—Phrae, Roi Et, Phetchaburi, and Narathiwat
    - Patient counseling is part of the services

# Thailand

## Key Developments in Community Pharmacy Services

- **Smoking Cessation Program Outcomes**

- The SMART Quit Clinic Program (FAH-SAI Clinics) was launched in 2010 to provide smoking cessation services by a multidisciplinary team.
- There are currently 552 FAH-SAI Clinics established across all 77 provinces of Thailand.

- Of **58** community pharmacies, **532** smokers (93% male, mean age of  $42.4 \pm 14.9$  years) received smoking cessation services from community pharmacists.
- Of 235 smokers with complete data, 153 (28.8%, **153/532**) smokers reported smoking abstinence by self-report.
- The mean number of cigarettes smoked daily **reduced from  $15.3 \pm 8.7$  to  $1.9 \pm 3.8$  cigarettes**,  $p$ -value  $< 0.001$ .
- The exhaled CO levels of smokers significantly reduced from  **$11.7 \pm 5.9$  ppm to  $7.2 \pm 4.4$  ppm**,  $p$ -value  $< 0.001$ .
- The %PEFR also significantly increased from  $84.2 \pm 19.4$  to  $89.5 \pm 19.5$ ,  $p$ -value  $< 0.001$ .

Chaisai C, et al. 2022. Assessment of the real-world impact of the Thai smoking cessation programme on clinical outcomes: protocol for a multicentre prospective observational study **Primary Health Care Res Dev** 10:23:e71

Lertsinudom S, et al. 2021. Smoking Cessation Services by Community Pharmacists: Real-World Practice in Thailand. **Int. J. Environ. Res Public Health** 18(22): 1 1890



# Japan

## Scope of Community Pharmacy Services

- Community pharmacists' effectiveness in optimizing inhalation therapy in COPD patients in coordination with a hospital and professional organization
  - **Educating patients** on proper inhalation techniques
- Usable information was obtained from 55 patients with COPD at baseline, and from 51 patients 4 years later.
- Compared with baseline values, a **significant decrease** was observed in the frequency of **COPD exacerbations** ( $1.5 \pm 1.6$  versus  $0.8 \pm 1.4$  times/year,  $P = 0.017$ ). **Adherence to the inhalation regimen increased** significantly ( $4.1 \pm 0.7$  versus  $4.4 \pm 0.8$ ,  $P = 0.024$ ), but health status was unchanged. At 4 years, of 51 COPD patients, **39 (76%) patients who visited the certified pharmacies showed significantly higher medication adherence** than those who did not ( $4.6 \pm 0.6$  versus  $3.9 \pm 1.0$ ,  $P = 0.022$ ).

Takemura M, et al. 2013. Effect of a network system for providing proper inhalation technique by **community pharmacists** on clinical outcomes in COPD patients. **Int J Chron Obstruct Pulmon Dis.** 9;8:239-44.



# Japan

## **Scope of Community Pharmacy Services**

### • **Drug Event Monitoring**

- A retrospective cohort study on the use of femafibrate and fenofibrate using baseline and event data in community pharmacy was conducted by JPA.
- A total of 1294 patients using pemafibrate and 508 patients using fenofibrate were identified as new drug users.
- The most reported events involving suspected adverse reactions and add-on drugs were increased blood pressure and lipid-lowering effects with pemafibrate use, and nasopharyngitis, pruritus, dizziness, and lipid-lowering effects with fenofibrate use.

Takahashi M, et al. 2022. Event monitoring and evaluation by community pharmacists in Japan: A pilot study on fenofibrate and femafibrate. **Curr. Drug Saf.** 17(4): 350-356.

### • **Sexual and Reproductive Health Services**

- 50% of 534 community pharmacists surveyed were providing these services with 21% dispensing emergency use of contraceptives.
  - Counseling on use of pregnancy test kits
  - Patient education on ovulation tests
  - Provision and patient counseling on barrier and hormonal contraceptives

### • **Cognitive behavioral therapy–based interventions on medication adherence of patients with depression**

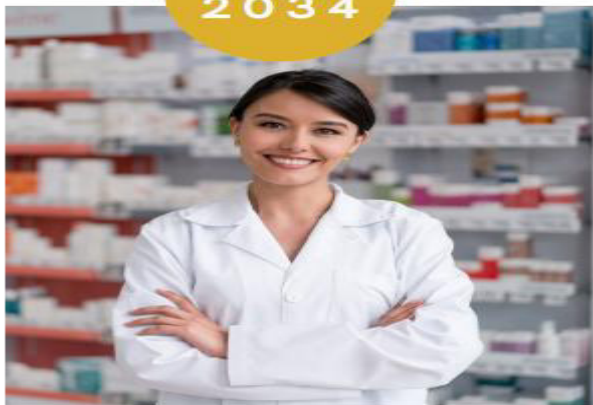
- CBT-based medication support provided by community pharmacists may improve patient medication adherence to antidepressant therapy and symptoms.

# Sustaining Pharmacists' Health and Wellness Promotion Role through Professional Organizations

## Roadmap Timeline

From its 60th to 70th Founding Anniversary, FAPA will focus its resources and efforts on addressing 3 key issues in pharmacy. This period spans 3 terms allowing FAPA leaders and its member associations to execute long-term plans and initiatives.

2024  
2034



FAPA aims to lead the efforts to tackle the 3 biggest issues that pharmacists need to address in Asia using the following approaches:

- data collection
- development of standards
- statements and advocacies
- capacity building
- implementation support mechanisms.

We are confident that our joint efforts will bring value to the public and other stakeholders through the pharmacy profession.

For more information on how to support our initiatives, visit our website: [fapa.asia](https://fapa.asia)



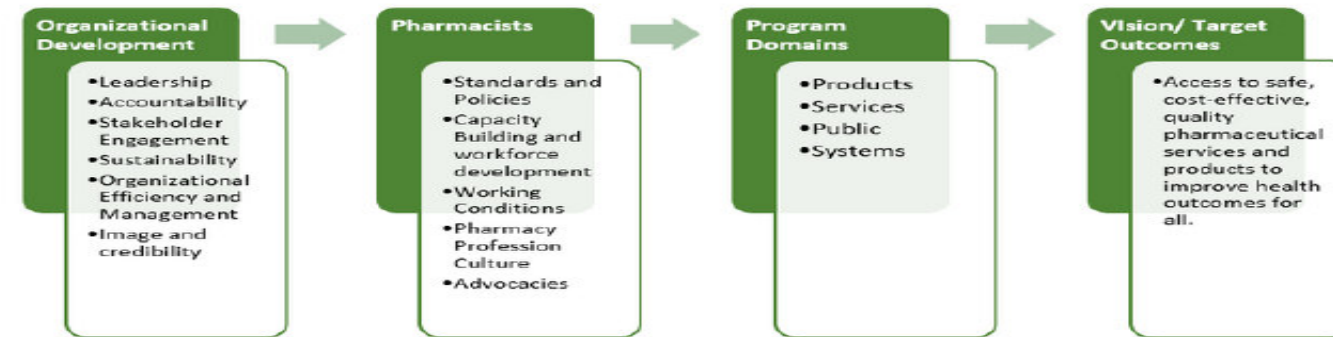
**FAPA**  
**Roadmap**  
**2024 - 2034**

# Sustaining Pharmacists' Health and Wellness Promotion Role through Professional Organizations

## STRONGER AND BETTER, TOGETHER

The key to creating impact and achieving our vision is through mobilization of pharmacists in Asia to work on our key program domains. This can be made possible by a responsive and effective regional organization, strongly supported by its member associations and leaders of the pharmacy profession in our region..

### FAPA Pharmacy Development Framework



In October 2023, the first data from the Asian Pharmaceutical Landscape Report had provided us a glimpse of the key issues and prevailing inequities in healthcare where pharmacy is relevant. Through a series of workshops conducted, 3 key action areas emerged, and a plan of action was developed to deliver outcomes in the region by 2034.

### FAPA Target Outcomes for 2024-2034

Priority Area	2023-2026	2027-2030	2031-2034
<b>Patient Safety</b>	Pharmacists as Patient Safety Advocates	Pharmacists as Patient Safety Champions	Pharmacists as Patient Safety Experts
<b>Pharmaceutical Systems Strengthening to Support UHC</b>	Developing the Evidence on the Roles and Impact of Pharmacists and services in the attainment of UHC	Standardization and building of expertise	Recognition of the value of pharmacists in the health care system through remuneration, policy and identity
<b>Health Promotion</b>	Service Model Pilot implementation	Scaling-up, promotion and advocacy	Pharmacists as wellness expert in a wellness hub (pharmacy)

## FAPA ACTION Areas

**1 Patient Safety First!**

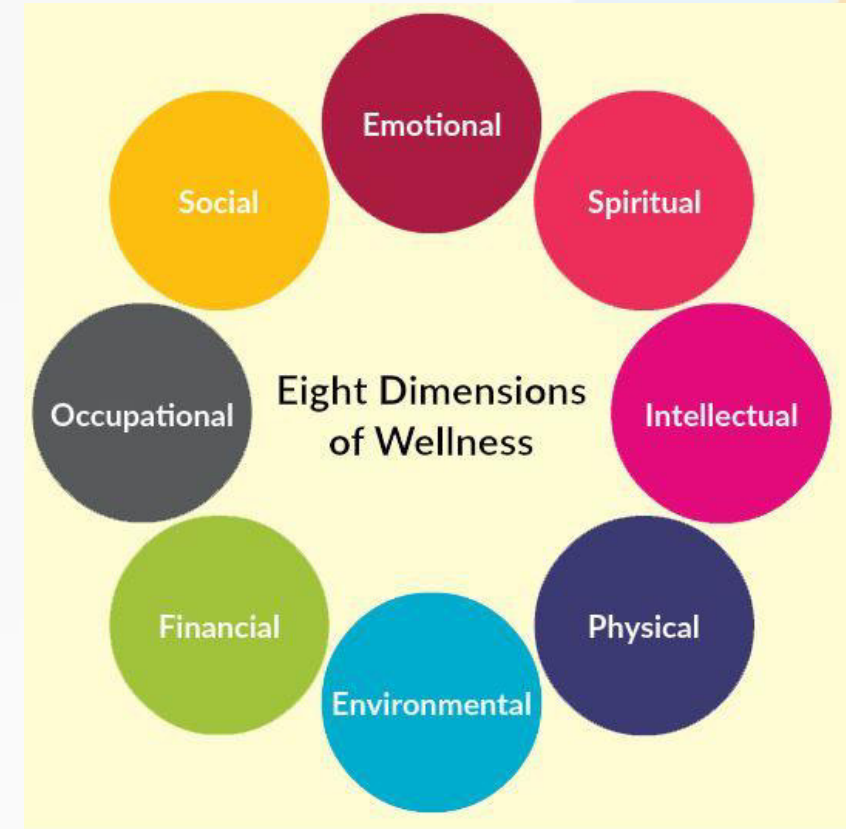
**2 Pharmaceutical Systems Strengthening for UHC**

**3 Health Promotion and Wellness**



# Conclusion

- Community pharmacy practice had continuously evolved due to various drivers of change over time.
- The current assumption of role in the promotion of health and wellness was further enhanced by opportunities brought about by the pandemic & UHC.
- Sustainability of new roles could happen with reforms in pharmacy education, advocacy and capacity building provided by professional organizations and other stakeholders.



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