Ethical pharmacy practice in Sothern Region of India

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Abstract:

As per the data given by the authority and different reliable reports, there were fewer pharmacy practitioner registered in southern part of India as compared to the data of last 3 years. So quality practicing is diluted with unethical practice in pharmacy industry. This present the study with specify data analysis of the unethical work under pharmaceutical industry.

Keywords: Unethical practice, time to market ration

I.   INTRODUCTION:

Pharmacy institutions are opening day by day as it is treated as business of pharmacy education. The quality of the students is not maintained by the institutions for producing good pharmacy practitioner. The proper training module is not followed by the colleges for giving good training in hospitals which lacks the quality of the pharmacy practices.

Pharmacy practice with the education system, than masters, research & development, production and storage & distribution. On each level it needs very many intensive Sops. If any step collapse, it will impact ion whole chain. This is a product where quality matters most. It is directly related to human being health. Anybody cannot take risk in any step.
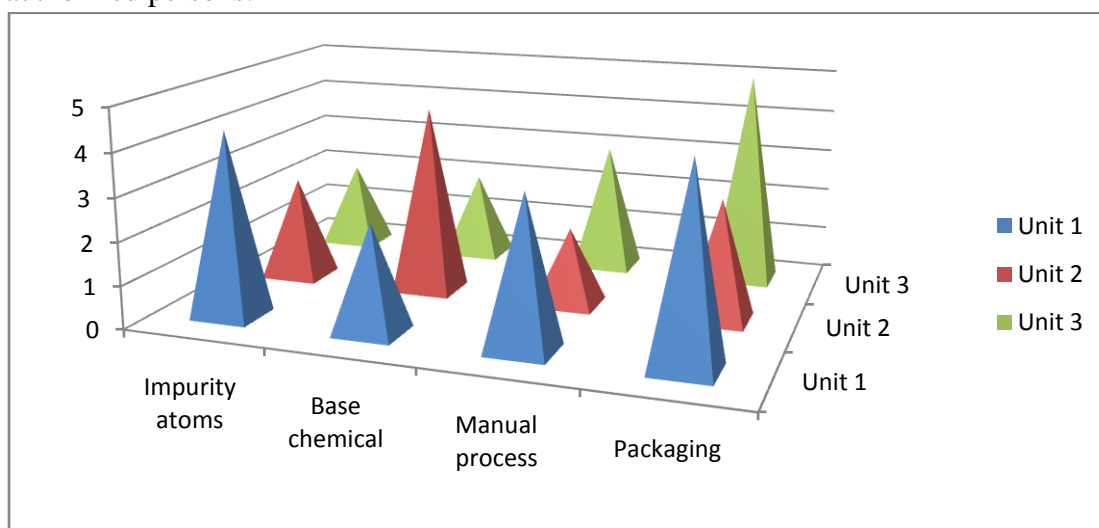
II.   SURVEY METHODOLOGY

Methodology depends on the sample survey of different college and industry related to pharmaceutical sciences of southern region of India. For college level, survey done on the basis of infrastructure, labs, faculty, research work, industrial visit etc. For the industry, survey report is based on the parameters of international need for pharmaceutical country.

The sampling frame refers to a comprehensive list of candidates from which data is collected in a standardized and scientific manner. In this particular study, the author focused on surveying data from colleges in the southern region. The data collection process involved dividing the colleges based on factors such as the number of students, fee structure, and geographical location (city or village). The sampling was conducted randomly, ensuring an unbiased approach, and relied on the data provided by the colleges in the public domain. The author made every effort to verify the data to the best of their ability. However, it is important to note that complete data verification was not possible due to restrictions on investigating or interrogating college authorities. Nevertheless, the data was cross-referenced with the students studying in those colleges to rectify any discrepancies to the greatest extent possible.

a. Unethical practice in Small scale industry

In small scale industry, budget is a big issue. As less amount of contact they are receiving, also they have to maintain the expenditure as per the medium scale industry. Few expenses are fix irrespective to the scale changing of industry type like fixed assert, Machinery, printing and packaging.

We have done surveys of 3 sites based on impurity atoms, base chemical used in the formulation, manual process, packaging process of the formulation. It is separates for different 3 unites belongs to 3 different areas. All 3 unites have different production capacity and different market values and global valuation in developing and developed countries. Market share is different of all 3 unites. All 3 unites are basically manufacturing of drugs in India only. Here we are not disclosing the name of companies due to Government rules and regulations of not disclosing name without the undertaking of the respected company's authorized persons.

Pic 1: survey small scale industry 3 units

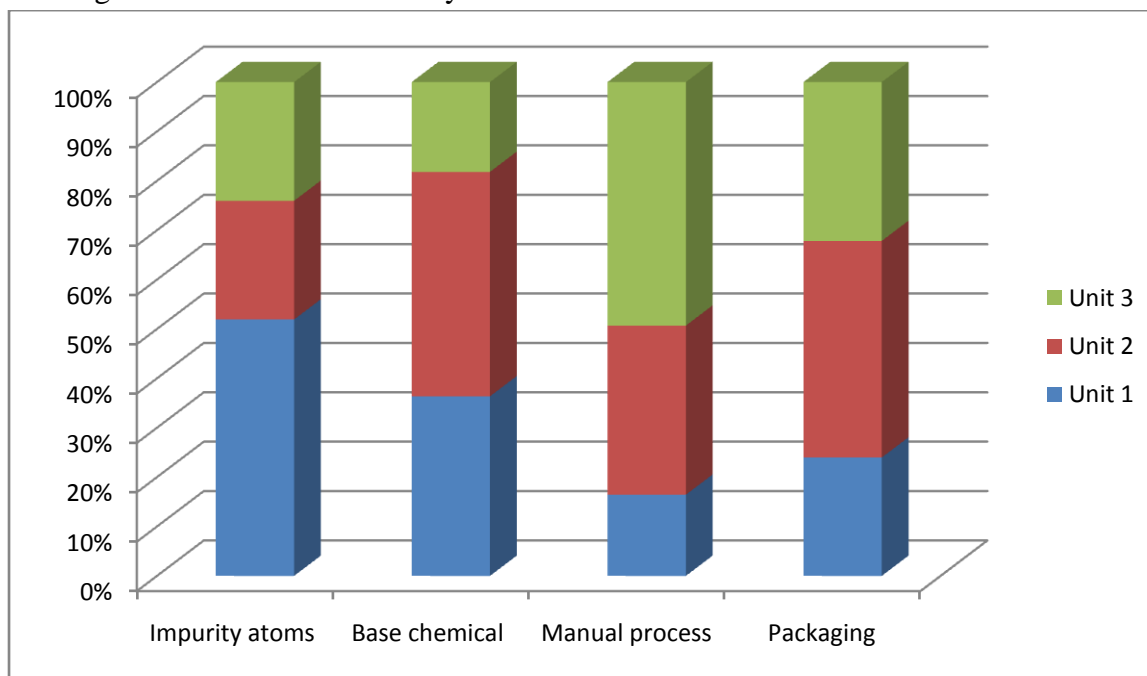|	Unit 1	Unit 2	Unit 3
Impurity atoms	4.3	2.4	2
Base chemical	2.5	4.4	2
Manual process	3.5	1.8	3
Packaging	4.5	2.8	5

Table 1: survey small scale industry 3 units

b. Unethical practice in medium scale industry

Medium scale industry commonly not belongs to the category which are making medicine for own brand. It used to manufacture medicine and equipments for another company. The progress of these scale industry is depends on the attached brand industry for which, they are making the products.

Medium scale industry has the low turnover as compared to large scale industry. They used to work on the contract manufacturing. So the manufacturing provider decides the quality of the product. So quality cannot be decided by the scale type of industry.

But by adopting the standard operating procedure by the governing authority can resolve this issue. After it cost of manufacturing may be higher than present rate but after a financial year, all things will run on the better way.
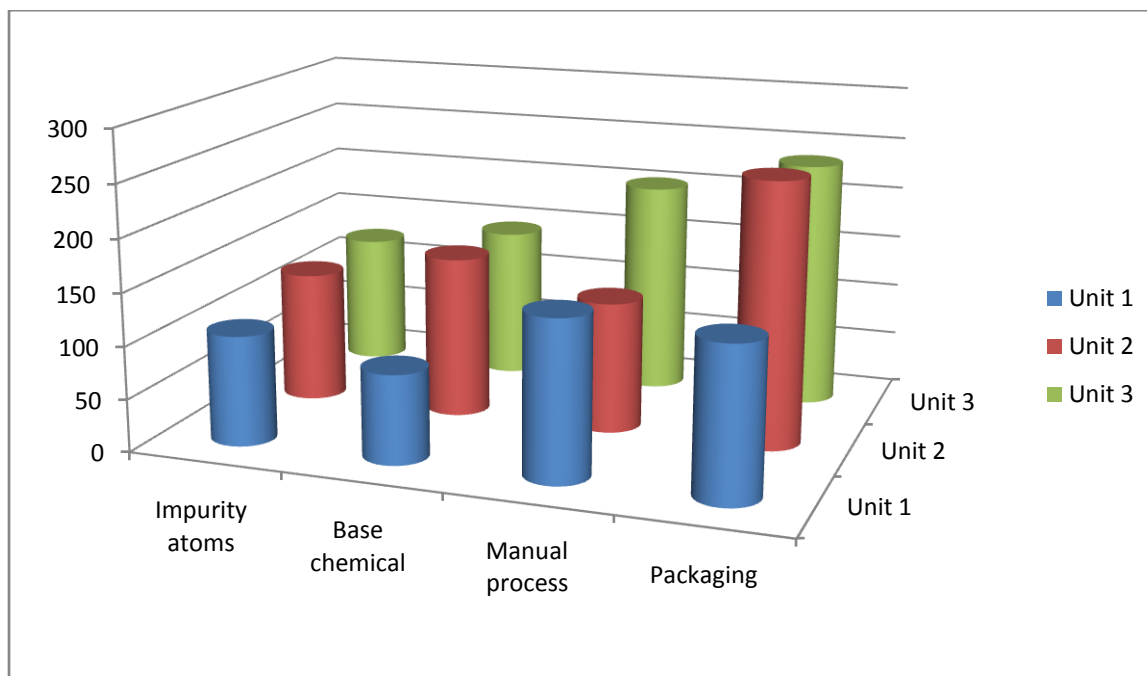

Pic 2: survey medium scale industry 3 units

	Unit 1	Unit 2	Unit 3
Impurity atoms	54	25	25
Base chemical	44	55	22
Manual process	12	25	36
Packaging	41	75	55

Pic 2: survey small scale industry 3 units

c.   Unethical practice in large scale industry

These types of industry are mainly manufacturing the products for its own brands. So it has to achieve the goals as per the selling standards and commitment. So for making manufacture process speed low & down, they have not any problem as feedback is looping on every day interval as per their process.

Pic 3: survey medium scale industry 3 units

	Unit 1	Unit 2	Unit 3
Impurity atoms	105	125	125
Base chemical	85	154	145
Manual process	152	125	203
Packaging	145	252	236

Table 3: survey medium scale industry 3 units

d.   Unethical practices by private practitioners

Lots of medicines are outdated and if any practitioner is selling it, it means he is doing the unethical practice. Also the medicine which are banned by the authority, are selling unethically by these persons.

III.   SURVEY SAMPLING FOR PHARMACY PRACTICE

For doing the survey report, one to need to collect the data for doing the research survey. This process of collecting the data is called as sampling process. It is a process to collect the data for doing survey report.

Sampling frame is list of candidates from which one need to collect the data as it should be in a uniform and scientific manner. For example in this paper author surved the data of the colleges of sourthern region. Data was collected by dividing the colleges on the basis of number of students, fees structure frame, region based in city or village . It was done on randomness basis. Sampling was by unbiased based and based on the data given by the colleges in public domain. Author verified that data as much more possible.   All data

verification is not possible as colleges do not allow instigating or interrogating any college authority related to that data. Also data was correlated by the student's studding in that colleges that it can be rectified as much as possible.

In case of companies also, sampling was done on the basis of various reports of company like the previous cases if any, company valuation in the government records, types of products, marketing share of product of that company, global market share of that company based on their product. Also share divided in developing and developed country. Data was based in company hygiene and R& D data, patients filled etc. It was also based on the feedback to the doctors who used to advice that medicine or currently advising the medicine of that company that why are they referring this product and result comparison of competitor companies' product.

Here survey team has conducted probability sampling and non- probability sampling. In probability sampling, researcher chooses the samples based on probability. In non-probability, researcher toll 1/ 1000 samples from each type of population category.

IV.   RESULTS & REPORTING OF SAMPLES

Pharmacy institutions are proliferating rapidly due to the commercialization of pharmacy education. Unfortunately, these institutions are failing to uphold the standards necessary for cultivating competent pharmacy professionals. The absence of a comprehensive training module in colleges' results in inadequate preparation for pharmacy practitioners, particularly in hospital settings, thereby compromising the quality of pharmacy services provided. Pharmacy practice encompasses various aspects such as education, specialization, research and development, production, and storage and distribution. Each of these components requires strict adherence to standardized operating procedures. Any deviation from these protocols can have a ripple effect throughout the entire chain, ultimately impacting the quality of the products and services offered. Given the critical nature of pharmacy practice in safeguarding human health, there is no room for error at any stage of the process.

V.   CONCLUSION:

As per the presented survey data, it is clear the impurities percentage changes as per the scale of industry small, medium and large. So it is necessary to make proper standard operating procedures for the manufacturing hubs based on the scale of data.

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