

Pharmacy and Faith Can Intersect



by **Marc A. Sweeney PharmD, MDiv**
Professor and Dean
Cedarville University
Cedarville, Ohio

The Need for a Solid Foundation

The profession of pharmacy is a multi-faceted discipline, requiring an understanding of pathophysiology, patient assessment, pharmacology, pharmacokinetics and pharmacotherapy in the context of patient care. To provide appropriate patient care, knowledge of the disease being treated and the optimal medication, dose, and route of administration used for treatment is necessary. Optimization of medication therapy is not simply based upon the medication's physicochemical properties, but more importantly the patient and related considerations. Often the choice of medication for a patient is based upon a prescriber perspective rather than the patient perspective.

For example, the most effective medication to treat a specific disease might require the patient to assume a high cost, high frequency, or large dosage form. As a result, the patient may not take every dose, compromising the efficacy, because efficacy is based upon the premise that the patient ac-

tually consumes or applies the medication. Determining the most appropriate medication needs to take into account the patient's perspectives, lifestyle, beliefs, financial implications in addition to concomitant diseases, and prescription and non-prescription medications. Conversely, some patients are prescribed medications that result in fostering medication misuse. According to the World Health Organization, medication misuse is a major cause of drug resistance and mortality.¹ In the United States, deaths due to medication misuse now exceed the mortality rates for illicit drug use.²

Appropriate patient care requires that the patient is the starting point for treatment consideration. Fostering medication misuse or adherence issues should be avoided. In order to optimize patient-centered medication treatment plans, four primary building blocks to professional pharmacy education are needed: 1. Foundational Sciences (biomedical, pharmaceutical) 2. Behavioral, social and administrative sciences 3. Clinical sciences 4. Literature and research evaluation skills

Each area requires that the pharmacist be a critical evaluator of information, such that validity of information is considered. However, these building blocks are common to most professional pharmacy programs. At Cedarville University, a foundation for the building blocks is also used. The foundation of the Scriptures as a basis, by which all other information is validated, is essential to creating future pharmacists who seek out the best possible patient care. All information that is learned or generated through the school's research is

first aligned with the truth of Scripture. According to 2 Timothy 3:16 (NIV), All Scripture is God-breathed and is useful for teaching, rebuking, correcting and training in righteousness, so that the man of God may be thoroughly equipped for every good work. The Scriptures are intended to transform people into the likeness of Christ. Therefore, a follower of Christ should desire to filter all scientific literature through God's Word before embracing its potential truth.

The Foundation of Scripture

When literature or scientific evidence is evaluated against the entirety of Scriptures, diligent study and analysis of the Scriptures are keys to appropriate interpretation. Scriptures taken out of context to endorse a specific view undermine the validity and greater value of Scripture. The Scriptures provide basis by which information may be interpreted. Since all information and research may be fallible, an infallible source maintains accountability and grounding to truth. To be an exceptional clinician, researcher and teacher, a faculty member must be praying over the Scriptures and God's revelation of truth through His Word. As a faculty member uses the foundation of Scriptures for all areas of research, teaching and practice, their investment into the development of exceptional, patient-focused pharmacists may be truly realized.

The development of a patient-focused approach to care also requires an understanding of the patient. Not only the patient's disease and its physical manifestation, but the pharmacist must also know the specific person to whom the care is given. Learning what questions to ask and how to ask

the questions is part of the information gleaning process. The fullness of the process requires a genuine care and compassion for the patient.

Most pharmacy curricula include the provision of compassionate patient care. However, observationally, the various curricula appear to assist students in developing the tools necessary to provide compassionate care. However, is the provision of compassionate care the same as being compassionate and caring? Does a genuine desire to put others before oneself really occur apart from Christ? In other words, the transformation that occurs through the Holy Spirit gives individuals the power to actually sacrifice oneself for the care and compassion of others. When faculty members model genuine sacrifice and care of others, providing a Scriptural backdrop to their actions, the hope is that the Christ-focused learners will develop likewise.

Compassion and care for the patient must also include assisting patients in making the right decisions. Many patients desire guidance in difficult, ethical decisions. The existing health care system does not provide any foundation by which to make tough choices. Patients may struggle with deciding to abort a baby through medication use, whether to use high dose pain medication at the end of life, or the ethical implications of using the “morning after pill.” It may be difficult for patients to make decisions about the use of antidepressants, anxiolytics or antipsychotics. They may have questions about substituting a “natural” remedy for conventional therapy. Many health care professionals are ill-equipped to guide patients in these decision-making processes. Regardless of the patient’s spiritual or religious background, patients generally want some basis to make a deci-

sion. Providing scientific data alone is usually not enough to guide patients.

Scientific data based on the foundation of Scriptural truth provides a great backdrop for decision making, even for the atheist. The foundation of information is based upon a greater truth. Scriptural truth has been validated over the entire course of human history, but scientific “truth” may only have a few years of validity. Furthermore, all challenging decisions result in opportunities to demonstrate the love of Christ to others. In the middle of any difficult decision, the possibility exists to encourage patients to admit to their struggles, fears and concerns. With every physical challenge an opportunity exists to share the love of Christ, which in many cases leads to an opportunity share the Gospel.

The following Scriptures are paramount in integrating faith into teaching:

Oh, how I love your law. I meditate on it all day long. Your commands make me wiser than my enemies, for they are ever with me...I have more insight than all my teachers, for I meditate on your statutes....I gain understanding from your precepts... (Psalm 119:97, 98, 104, NIV).

The love of the Scriptures and meditation on Scriptures provides insight and understanding. Simple knowledge of Scriptures, which Satan possesses, does not have the same outcome. Thus, a faculty member must demonstrate their love and desire for God’s Word.

The fear of the Lord is the beginning of knowledge... (Proverbs 1:7, NIV).

A proper understanding of our relationship with God is the starting place for understanding.

If any of you lacks wisdom, he should ask God, who gives generously to all without finding fault, and it will be given to him (James 1:5, NIV).

Asking God for wisdom is a starting place for humility and understanding. God has ultimate knowledge of His creation. By starting with the Creator, Himself, our perspective is greatly enhanced.

I am the vine; you are the branches. If a man remains in me in me and I in him, he will bear much fruit; apart from me you can do nothing (John 15:5, NIV).

The source of all of our power to impact this world is through Christ. The implications of this passage are beyond the realms of this discussion. However, the truth of this passage is a key foundation to teaching and role modeling world impact.

Daily transformation and the renewing of the faculty member’s mind and heart (Romans 12:2) needs to be starting point for teaching. When there is a disconnection between what is taught and what is lived on the part of the teacher, outcomes are compromised. An atheist can communicate the truths of scripture as information but a follower of Christ needs to communicate the truths of Scripture as transformation.

Application to the Profession

In order for integration of the Christian faith into the profession of pharmacy, diligent study of both is required. If a lack of knowledge, understanding or comprehension of the profession or the Scriptures is lacking, then the fullness of the potential will not be realized. For example, if a pharmacist is fully-versed in God’s Word and is being transformed into the likeness of Christ on a daily basis, but has not been maintaining current

knowledge and understanding of new drug therapy or treatment guidelines, then the care of the patient will be inadequate. The most caring, compassionate, Christ-like individual must still have the necessary skills and knowledge to deliver appropriate pharmacist care. On the other hand, a pharmacist who is noted in their individual specialty may not be able to provide the necessary navigation of ethical decisions or even think to sacrifice their own comfort to care for others without the ongoing renewing of their mind through the Spirit-directed study of Scriptures.

Just as Paul was known, first, as a slave or servant of Christ, so should all followers of Christ. An individual's identity should not be rooted in their career or role within their society or family. A Christian's identity should start with their servitude to Christ. In other words, an individual should not be known as a pharmacist, who happens to be a Christian, but a Christian, who happens to be a pharmacist. Practically, when a patient or health professional interacts with a pharmacist, it is their expertise that draws the interaction. However, ultimately, Christ should radiate through and eventually become their primary identity. A Christian pharmacist once said, "I have found that people need me more than they need my product."

As a pharmacist becomes primarily identified as a follower of Christ, others should note a different type of practitioner. According to Galatians 5:22-23 (NIV), "...the fruit of the Spirit is love, joy, peace, patience, kindness, goodness, faithfulness, gentleness, and self-control..." Because the description of this passage is in singular form, the follower of Christ would demonstrate all of these characteristics on a regular basis. A practitioner, who truly loves others as an outflow of his or her love for God while embracing a genuine joy regardless of his or her circumstances, will be noticeable. Further manifestations of the Spirit create more differentiations between a Christian pharmacist and a non-Christian pharmacist.

According to Romans 12:10 (ESV), followers of Christ should "...outdo one another in showing honor." How might a pharmacist come across to others if they were committed to competing with others in giving honor? What if every action was evaluated based on honoring those whom they serve? Every employer wants to hire individuals who are known for honoring others. It is a great business model and a great success model. However, the end-point is not honor, in and of itself, but to give glory to God. If every action is rooted in the question, "are my actions resulting in more individuals desiring Christ?" This

might result in revival. Honor is not dependent upon the other person's beliefs or disbeliefs. It is easy to honor those who agree with us, but what if the individual holds a different view? A Christian pharmacist holds to truth, but always honors those whom they serve.

When King Solomon, known for His gift of wisdom, was visited by Queen of Sheba, she proclaimed,

"...praise be to the Lord your God, who has delighted in you and placed you on the throne of Israel..." (1 Kings 10:9, NIV).

God was truly honored when Solomon gave glory to God for His gift of wisdom that he gave as a gift to others. Imagine if Christian pharmacists were to be good stewards of the wisdom that God has given them? Could Christian pharmacists actually provide guidance or solutions to very challenging issues or questions that people or our society faces? Could Christian pharmacists be a source for answers to a hurting world? Every patient who enters the pharmacy (or the health system) has a physical need. That physical need is the starting point where Jesus began His ministry. Many times, spiritual needs are not realized until the physical needs are being met.

Ultimately, the Christian, who embraces the health care system as their mission field through the profession of pharmacy, should be an individual who brings glory to God through his or her actions and tongue. Furthermore, that individual should be able to communicate truth in an honoring and loving manner that places God first and their patient second, regardless of the situation.

Pedagogical Implications

The task of training up Christians who are pharmacists is no easy undertaking. Developing an entire school of pharmacy with this mission is challenging. The plan begins with faculty members who embrace living for Christ as a pharmacist. Faculty members must work through what this looks like, personally and professionally, to be able to effectively teach and be a role model. Teaching the philosophical tenets of being a Christian pharmacist will not have much impact. However, embracing the notion of discipleship, "come follow me as I follow Christ," has life changing implications.

All pharmacists are trained in knowledge, skills and attitudes based upon accreditation standards. Bloom's Taxonomy of cognition (identified in 1956 by Benjamin Bloom) ranks knowledge as the lowest level of cognition. Building off of knowledge is understanding, application, analysis, synthesis and evaluation. Each of these areas would

be part of the development of skills. Attitudes, an individual's degree of like or dislike, are created through the whole process. As a follower of Christ, the faculty member should shape the attitude of learning by instilling into learners a motivation to learn about God's creation. The faculty member should like what they do and be passionate towards Christ and His calling in his or her life. The faculty member should desire to serve others in a tangible way in the profession of pharmacy. Many times, what is "caught" is more impactful than what is "taught". As parents, children often embrace who we are and how we act rather than what we say. Extrapolation to students could also be made. A faculty member's passion for Christ and desire to serve others will create momentum and desire to do the same. God, the Father, informed His people about his expectations for life, but Jesus role modeled what that life looked like.

Beyond the role modeling of the faculty members, the faculty member should embrace Scriptural inclusion, when appropriate, into their discipline. In pharmacy, it can be applied in patient care areas, missions, science foundations, ethics, etc. Because new drug therapy and research in areas of pharmacogenomics can create new areas of ethical concern, the opportunities to integrate Scripture into areas continue to be dynamic. In fact, with over 20,000 new articles published monthly in health care, it is unlikely that any faculty member will deliver the same material twice from year to year. This provides opportunity to constantly evaluate the impact of Scripture on new information.

Personal Testimony

With each month that passes, God is challenging me in new ways. I am always looking for new ways to have an impact on people, make the Gospel real and encourage a hurting world through the truths of our Creator. I am hopeful my perspective integrating my faith into my teaching will become more dynamic through continued collaboration and engagement of my Cedarville University colleagues.

References

1. World Health Organization. World health day 2011. http://www.who.int/mediacentre/news/releases/2011/whd_20110406/en/, accessed 21 November 2011.
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Marc A. Sweeney, Pharm.D., M.Div., is a Professor and Dean of the Cedarville University School of Pharmacy. He completed his B.S. in Pharmacy from Ohio Northern University, his Pharm.D. from The Ohio State University and his M.Div. from Southwest Bible College and Seminary. He also completed an Academic Leadership Fellowship at Ohio University College of Osteopathic Medicine.