From Dispensers to Clinical Providers—Charting the Course for Pharmacy 2.0

The release of Volume 33, Issue 1 of the Hong Kong Pharmaceutical Journal (HKPJ) marks a watershed moment for our profession. As we stand at the threshold of 2026, the traditional image of the pharmacist—as a custodian of "medication logistics"—is rapidly being eclipsed by a vision of the pharmacist as an indispensable clinical provider and primary care leader. This issue serves as both a manifesto and a roadmap for this transformation, blending global trends and strategic blueprints for service expansion with insights from local and international leadership.

Global Trends: The Clinical Pivot of Community Pharmacy

One article in this issue examines the global expansion of community pharmacy services (p. 7). Internationally, pharmacists are repositioning from traditional dispensing roles toward patient-centered clinical delivery. In jurisdictions such as Australia, the United Kingdom and Canada, pharmacists have successfully integrated vaccination services and independent prescribing into their standard scope of practice. Central to this global shift is the implementation of structured medication management programs, such as Home Medicines Reviews (HMR) and MedsCheck. These services, often supported by government remuneration frameworks, ensure that life-saving cognitive interventions are financially sustainable and accessible, proving the pharmacist's role as an irreplaceable pillar in public health.

The Australian Inspiration: Systemic and Clinical Strategies for Hong Kong

Drawing on these international successes, we delve specifically into how systemic and clinical strategies inspired by the Australian model can elevate the pharmacist's role in Hong Kong (p. 25). The path forward for our local profession is anchored in "system-level enablers." In Australia, the success of clinical pharmacy is not accidental; it is the result of a deliberate integration of pharmacists into the primary care infrastructure. This includes the development of robust quality care programs and formal accreditation standards that ensure service consistency.

For Hong Kong to bridge the gap, we must move beyond pilot projects and advocate for permanent systemic changes. This includes expanded eHRSS functionality to allow two-way clinical communication between doctors and pharmacists and the formalization of clinical service integration within the District Health Centre (DHC) framework. Simultaneously, we must enhance our professional readiness, ensuring that every pharmacist possesses the advanced clinical reasoning skills required to manage complex multimorbidity in a modern primary healthcare system.

Strengthening Community Capacity: The Jockey Club PHARM+ Network

A practical and highly promising embodiment of this evolution is highlighted in our report on the Jockey Club PHARM+ Community Medication Service Network (p. 30). This initiative, funded by the Hong Kong Jockey Club Charities Trust and led by the University of Hong Kong (HKU), represents a sophisticated effort to build the clinical capacity of our community pharmacies.

The recent roundtable meeting focused on developing smoking cessation services underscores the potential of community pharmacies to lead high-impact public health initiatives. By engaging a diverse array of stakeholders—including non-governmental organizations and academia—the PHARM+ project is standardizing service quality and fostering a collaborative environment for knowledge exchange. This network serves as a vital proof-of-concept for capacity building; it demonstrates that through structured evaluation of service effectiveness and rigorous professional training, community pharmacies can transition into high-functioning clinical service hubs. These hubs are capable of delivering consistent, high-quality interventions that address chronic disease risk factors at the grassroots level.

A National Voice: An Interview with Mr. Zhao Ning

Our professional transformation also requires a robust and unified organizational structure. In an exclusive interview, Mr. Zhao Ning emphasizes the necessity of a "national voice" and a unified pharmacist network to advocate for our interests (p. 12). Mr. Zhao points out that in many advanced healthcare systems, the influence of the pharmacy profession is proportional to its organizational unity. A fragmented profession struggles to negotiate with policymakers or secure the necessary legislative changes to expand the scope of practice.

His insights remind us that individual clinical excellence, while vital, must be paired with collective policy advocacy. By building a unified network, we can ensure that pharmacists are recognized as key stakeholders in the healthcare ecosystem—expert providers whose input is essential to the design of health services—rather than mere suppliers of medicinal products.

Advancing Clinical Practice: Management of Resistant Hypertension

On the clinical front, this issue addresses the management of resistant hypertension within our "Drugs & Therapeutics" section (p. 15). We provide a detailed review of aprocitentan, a newly FDA-approved endothelin receptor antagonist, and reaffirm the established role of spironolactone in the treatment pathway. As medication regimens become increasingly complex, pharmacists must master these pharmacological nuances—such as the clinical value demonstrated in the PATHWAY-2 trial—to fulfill their roles as clinical consultants and provide precise guidance to patients.

Conclusion: Embracing Our Clinical Future

The evidence presented in this issue makes one thing clear: the future of pharmacy lies in our ability to translate expert drug knowledge into direct clinical outcomes. As we navigate this transition, we must remain proactive in redefining our boundaries. The shift from "dispensing" to "providing" is not merely a change in title, but a commitment to clinical accountability and patient advocacy.

With the burden of chronic disease rising in our society, the clinical expertise of the pharmacist has never been more vital. By embracing innovation, advocating for systemic reform and maintaining an unwavering focus on evidence-based practice, we will ensure that the pharmacy profession remains at the heart of a resilient and patient-centered healthcare system.

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