

Pharmacy 2.1—Systems, Safety, Community, and Technology



The publication of Volume 33, Issue 2 of the Hong Kong Pharmaceutical Journal reflects the diverse responsibilities of pharmacists in today's healthcare system. This issue spans regulatory frameworks, geriatric safety, community based preventive care and technological innovation. Together, these contributions illustrate how our profession is evolving to meet both systemic demands and patient centered outcomes.

Regulatory Science: Post Approval Change Management

Beginning with policy and systems, the article on optimising post approval regulatory change management for pharmaceutical products in Hong Kong (p. 45) highlights the importance of regulatory vigilance. As medicines undergo manufacturing updates, labeling revisions and distribution adjustments, pharmacists play a critical role in ensuring continuity of safety and efficacy. In an era of biologics and advanced therapies, robust change management processes are indispensable. This work reminds us that clinical excellence must be anchored in regulatory stewardship.

Clinical Practice: Anticholinergic Burden in Older Adults

The next article addresses the anticholinergic burden in older adults (p.51), a pressing issue in geriatric care. Polypharmacy and multimorbidity increase vulnerability to cognitive decline, falls and hospitalizations. Pharmacists are uniquely positioned to assess cumulative anticholinergic load, conduct medication reviews and implement deprescribing strategies. This contribution exemplifies how pharmacists translate pharmacological expertise into interventions that directly improve patient safety and quality of life.

Community and Preventive Care: Expanding the Pharmacist's Reach

Two articles in this issue highlight the growing importance of community and preventive care.

The first article (p. 59) provides a comparative review of quality assurance (QA) systems for community pharmacy services across jurisdictions including Australia, Canada, Macau, Mainland China, Singapore, the United Kingdom and the United States. The analysis maps regulatory foundations, accreditation approaches, inspection practices and incentive alignment strategies. Findings show that while statutory regulation remains the baseline, mature systems incorporate structured quality programmes, incident reporting, external assessment and accreditation to support continuous improvement. The article suggests that Hong Kong may benefit from a phased QA model—strengthening statutory compliance in the short term, introducing peer review in the medium term and developing an independent, multi stakeholder accreditation pathway in the long term as community pharmacy expands within primary healthcare reform.

The second article (p. 65) draws on insights from a three week fellowship in the United Kingdom (UK) under the Primary Care Pharmacy Fellowship Scheme of the Jockey Club PHARM+ Community Medication Service Network Project.

Observations from the UK National Health Service (NHS) demonstrate how community pharmacists are integrated into primary care as clinical hubs. The article highlights operational bottlenecks—such as high volume technical workloads—that must be mitigated through enabling infrastructure like Original Pack Dispensing and hub and spoke systems. It further emphasizes the value of commissioning structured clinical services, including minor ailment triage and medication reviews within multidisciplinary teams, to enhance patient access and relieve frontline general practice pressures. While structural reforms in Hong Kong must be phased and context specific, the UK model offers a roadmap for collaborative chronic disease management and patient centered care, enabling community pharmacies to transition into sustainable healthcare providers.

Together, these contributions show that preventive care is not ancillary but central to our professional identity, positioning pharmacists as leaders in both individual and population health.

Pharmaceutical Technology: Readiness for Artificial Intelligence

This issue also features an article under pharmaceutical technology, summarizing the plenary debate at the Hong Kong Pharmacy Conference 2026 (p. 73) on whether the profession is ready for artificial intelligence (AI) by 2030. The "For" team argued that infrastructure, professional evolution, governance frameworks and empirical evidence position pharmacy well for AI integration. The "Against" team highlighted regulatory gaps, data security concerns, ethical challenges and immature applications.

Adjudicated by AI experts, the debate underscored both global regulatory trends and local cybersecurity challenges, while stressing AI's potential role in clinical workflows. Importantly, it emphasized the need for proactive training, policy development and ethical safeguards to harness AI's promise without compromising patient safety. This article situates pharmacy at the intersection of technological optimism and cautious realism, reminding us that innovation must be balanced with accountability.

Conclusion: A Profession Anchored in Accountability and Innovation

Taken together, the contributions in this issue illustrate the breadth of pharmacy's evolving mission: regulatory stewardship, geriatric safety, preventive care and technological innovation. The trajectory of Pharmacy 2.1 is clear. Our profession is moving toward a model where systemic vigilance and patient centered outcomes converge.

As Editor in Chief, I invite you to engage with these articles not only as scholarly discourse but as a roadmap for practice. By embracing innovation, strengthening regulatory frameworks and maintaining unwavering focus on patient safety, we will ensure that pharmacy remains at the heart of a resilient, evidence based healthcare system.

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Editor-in-Chief
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