

A Look at Community Pharmacy Practice in Pakistan



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Key takeaways:

- The primary regulatory body for the pharmacy industry in Pakistan is the Drug Regulatory Authority of Pakistan (DRAP), which oversees everything from clinical trials to manufacturers and medication approvals.
- Health insurance consists of a mixture of public and private, with public being administered on a provincial level and targeted toward low-income households.
- Prospective pharmacists in Pakistan must earn a 5-year Doctor of Pharmacy degree to practice. And the vast majority of jobs are in the pharmaceutical industry.



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Community pharmacies are those that dispense medications to patients who aren't hospitalized or in nursing facilities. This series explores how community pharmacy practice differs around the world. In doing so, it gives us the opportunity to view our own system in a new light and potentially find opportunities for improvement.

So far, we've explored the practice of pharmacy in [Japan](#), [Finland](#), [Australia](#), [Switzerland](#), [England](#), the [United Arab Emirates](#), [Iran](#), [Malawi](#), [Argentina](#), and [Portugal](#), and [Egypt](#). In this post, we'll look at community pharmacy practice in Pakistan.

To help us better understand pharmacy practice in the country, we interviewed [Afsah Hassan, PharmD](#). Dr. Hassan is an aspiring medical writer and graduate of the [Faculty of Pharmacy at the University of Karachi](#), who is currently finalizing her licensure in Pakistan.

How Pakistan's pharmacy system works

[Pakistan](#) is a country in South Asia that is bordered by India to the east, Afghanistan and Iran to the west, and China to the north. It consists of four provinces: Punjab, Sindh, Khyber Pakhtunkhwa (KPK), and Balochistan.

Some functions of Pakistan's healthcare system are centralized, but each province also has significant autonomy and influence over regulation and the delivery of healthcare services.

Health insurance

Health insurance in Pakistan is provided through a mixture of both public and private entities:

- **Public insurance:** The public healthcare system in Pakistan covers low-income individuals who meet certain financial requirements, similar to the [Medicaid](#) system in the U.S. Termed [Sehat Sahulat](#), public insurance is provided by provincial programs, like the ones in [KPK](#) and [Punjab](#).
- **Private insurance:** Many people in Pakistan have private insurance coverage. Two of the largest private insurers are [Alfalah](#) and [Jubilee](#).

Out-of-pocket costs account for around 50% of the country's total annual healthcare expenditures, according to the [most recent data](#) from the [Pakistan Bureau of Statistics](#). In fact, from 2017 to 2018, out-of-pocket costs were nearly double the costs incurred by provincial governments, which were collectively the second largest payer. In the U.S., by comparison, out-of-pocket costs make up around [11% of total annual healthcare spending](#).

Outcomes

In 2019 — the most recent year data is available on — Pakistan's annual healthcare spending was about [\\$40 per person](#), or [3.4% of GDP](#). By comparison, in 2020, the U.S.'s healthcare spending was [\\$12,530 per person](#), or [19.7% of GDP](#), according to the Centers for Medicare and Medicaid Services.

Pakistan's under-5 mortality rate, a key indicator of health-system performance, was [65.2 per 1,000 live births](#) in 2020. While that is far higher than in the U.S. — where it was [6.3 per 1,000 live births](#) the same year — Pakistan's 2020 number represents a 21% reduction from the under-5 mortality rate in the country 10 years ago, which was 82.8 per 1,000 live births.

In Pakistan, the life expectancy at birth — also sometimes used to evaluate health-system performance — was [67 years](#) in 2020. That is quite a bit lower than in the U.S., where it was [77 years](#) the same year.

Pharmacy regulation

The primary federal regulatory body for the pharmacy industry in the country is the [Drug Regulatory Authority of Pakistan \(DRAP\)](#). The agency regulates clinical trials, manufacturers, distributors, repackagers, the importation of medication into the country, and the approval of medical devices and new medications.

The [Pharmacy Council of Pakistan](#) accredits pharmacy schools and oversees the registration of pharmacists and technicians. Each provincial council, like the [Punjab Pharmacy Council](#), [reports](#) to the national council.

[Medication pricing](#) in Pakistan follows a [maximum-price model](#). For brand-name medications, there is a reference pricing system based on the average retail prices in India and Bangladesh. For generic medications, prices are set between 20% to 30% lower than their brand-name counterparts.

To help prevent pharmacies from charging more than a medication's maximum price, Dr. Hassan notes, the price is printed on the box for customers to see. Pharmacies can also be inspected for compliance with pricing.

There are private and public hospitals in the country, and both types can provide services to patients with public and private insurance. Facilities just need to register with insurers, public or private, in order to bill for services. In KPK, those with public insurance can find the numerous hospitals registered with Sehat Sahulat in the [program's directory](#).

Daily pharmacy practice in Pakistan

In Pakistan, pharmacies can be located inside other businesses, like malls and general department stores, or be freestanding businesses. But there are no drive-through windows at pharmacies, Dr. Hassan says.

Pharmacists practicing in Pakistan are not able to give vaccinations. And, as a whole, there are [a number of barriers](#) to the implementation of advanced pharmacist services in the community setting, including a lack of legislative reforms.

To become a pharmacist in Pakistan, candidates must first complete a [program recognized](#) by the Pharmacy Council of Pakistan. This is also true for prospective pharmacy technicians. Once a prospective pharmacist or pharmacy technician completes their program, they must register with their provincial council, according to the [Pharmacy Act of 1967](#). Each provincial council is overseen by, and reports to, the national Pharmacy Council of Pakistan.

The current standard of education is a 5-year Doctor of Pharmacy degree, which was updated from a Bachelor of Pharmacy degree by the [Higher Education Commission in 2004](#). The Doctor of Pharmacy [curriculum](#) puts a heavy emphasis on pharmacology and toxicology courses. It also includes courses in anatomy, pathology, and other basic sciences. Notably, all students must also take a course in both Islamic studies and Pakistan studies.

Dr. Hassan notes that most pharmacists in Pakistan work in hospital practice, community practice, or the pharmaceutical industry. Within the pharmaceutical industry, there are several large, international corporations that have a presence in the country — including Sanofi, Abbott, and GlaxoSmithKline — in addition to the Pakistani national companies.

According to [the University of Karachi](#), 75% of jobs that are available to pharmacists in Pakistan are in the pharmaceutical industry. These jobs include many of the [same roles](#) that are available in the U.S., in areas like sales, medical affairs, regulatory affairs, procurement, and production.

The bottom line

Pakistan's current healthcare system has been shaped by the recent establishment of provincial programs in Punjab and KPK that provide coverage to low-income individuals. And rollouts of similar programs are expected in other provinces in the future.

Pakistan's system mixes both centralized control of key regulatory functions and decentralized, provincial control of other aspects of healthcare delivery. While health outcomes lag behind those in the U.S., the country has made major improvements in the past decade, especially with its under-5 mortality rates.

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