

Drug ATMs:

WILL THE PHYSICIAN GO THE WAY OF THE PHARMACIST?

By Adam Frederic Dorin, MD, MBA

Two Companies Are Reshaping the World of Pharmacy

There is a revolution going on in Southern California, and it is spreading rapidly across America. Right here, in our backyard, two companies, Asteres, Inc., in Del Mar, and Distributed Delivery Networks Corp., in San Marcos, own the market (and patents) on ATM-type machines that deliver refill medications to patients. The advocates and owners of the drug-ATMs say the machines free pharmacists to spend more time with customers. Opponents argue that the devices are substituting arguable convenience for safety—distancing patients from the pharmacist.

Between the two companies, these automated drug kiosks are popping up in pilot programs in Reston, Virginia (Asteres), Penn Station in New York City (Distributed Delivery Networks), and Longs Drugs Store in Del Mar (Asteres). Negotiations with pharmacy boards in several other states, including Ohio, Connecticut, Delaware, Illinois, Minnesota, Wisconsin, and Maryland, are underway to open up new test markets.

Asteres calls its machine the ScriptCenter; Distributed Delivery Networks calls its machine the Pharmaceutical Automated Product Machine, or APM. A ScriptCenter machine will cost between \$65,000 and \$95,000. A Distributed Delivery Networks machine ranges from \$45,000 to \$60,000, and Distributed Delivery Networks is reported to be working on a smaller contraption that would cost about \$40,000. The two companies have been embroiled in litigation for months, both sides running up significant legal fees. According to one source, the legal wrangling will likely come to an anti-climatic end soon, with both sides free to carve up the national market. All indications are that both companies will become fantastically wealthy, and this new technology will spread like wildfire. Distributed's president, Bill Holmes, has been widely interviewed, including a piece on Good Morning America with Diane Sawyer and a reference on John Stewart's The Daily Show. It appears that people are taking notice of this new technology.

The Machines

The drug-ATMs have multiple levels of built-in safeguards. There are personal customer codes that are linked to personal credit card identification; there are also bar-code scanners and pass-

About the Author: Dr. Dorin is the medical director of the Sharp Grossmont Plaza Surgery Center in La Mesa and a member shareholder of the Anesthesia Services Medical Group.

words to ensure that the drugs reach the right patient. To pick up a medication item, a customer must enter a PIN number on a touch screen, then swipe a credit card to receive a labeled and bagged product that drops from a chute. The companies, through multiple media interviews and press releases, promote their products as following in the tradition of conventional mail-order pharmacies and drive-up windows. They claim the margin for error is virtually zero. In 2004, prescription drug sales by mail order accounted for 14 percent of the market—up from 10 percent in 1999. Longs Drugs in Del Mar reports that over 750 customers have already signed up at three different stores, accounting for over 10 percent of medication refills.

Pharmacists Are Alarmed

Fred Mayer, president of Pharmacists Planning Service, Inc. (PPSI), a non-profit organization in San Rafael, California, has been quoted (in multiple sources) in vehement opposition to the drug-ATM concept. PharmacyOneSource (www.pharmacyonesource.com), an industry news site, reveals that most pharmacists support Mayer's position. The site notes that nearly 68 percent of pharmacists polled were "strongly opposed" to the new technology, with another 12 percent counted as "opposed."

The pharmacists believe that customers, particularly seniors, need the input and consultation of a live human being (even for refills) and argue that the potential for robbery and muggings is gravely underestimated. Pharmacists argue that, even for the average drug consumer, significant health risks exist when a doctorate-trained professional is replaced with a machine. A commonly cited example is the acne drug Accutane (isotretinoin, Hoffman-La Roche) that can pose serious health risks to women who are or may become pregnant.

Legal Foundation Files Lawsuit Against State Board of Pharmacy

The Pharmacy Defense Fund has already filed a suit to stop the California Board of Pharmacy from issuing waivers allowing installation of the drug-ATMs. Although the lawsuit was dismissed in August

2005 on a technicality, it has been successfully refiled. In the lawsuit, the pharmacists claim that the California board did not have the authority to approve the machines because several members of the board were on the payroll of the actual (or potential) drug companies planning on using the drug-ATMs. The suit also alleges failure to follow existing regulatory procedures.

Implications for Physicians

With AMA and many of its subspecialty members fighting multiple battles on multiple fronts to prevent dentists, podiatrists, chiropractors, nurse practitioners, and nurse anesthetists from encroaching on the traditional 'scope of practice' of physicians, this seemingly unstoppable technological trend in pharmacy should be cause for alarm. Once the rank of pharmacists (and the stature, number of qualified applicants to pharmacy schools, market incentives, etc.) is thinned by robotic replacements, how many doctors of pharmacy will be available to discuss and educate the increasing number of drugs being dispensed to an ever-aging population? How should a physician feel about writing a prescription with refills that will be dispensed by a drug-ATM? Where does the process end? ■

References

- "Standards for Pharmacy Services" www.ashp.org/templibrary/A-StdsforPharmacyServicesinCAHs.pdf
- "Will ATMs Replace You?" www.drugtopics.com
- www.pharmacyonesource.com
- "Robots Replacing Human Pharmacists" www.techv.com/news/scitech/story/0,24195,3408633,00.html

