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Correspondence: Taha Nazir PhD,
Researcher, Worker, and Journalist.
Thomson Reuters - ID N-5730-2015 |
ORCID ID - orcid.org/0000-0002-5308-6798 | <https://tahanazir.com>

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Editorial Article

CRISIS IN PHARMACEUTICAL EDUCATION AND HEALTHCARE STANDARDS IN PAKISTAN: A COMPREHENSIVE REVIEW OF SYSTEMIC CORRUPTION AND PROFESSIONAL MISREPRESENTATION

Taha Nazir

1. Editor-in-Chief, Pharmaceutical Review. ISSN 2220-5187
| <http://pharmaceuticalsreview.ca> |
<https://pharmaceuticalsreview.com>
2. Ex-President - Pharmacist Federation (Pakistan).
<http://pharmacistfed.wordpress.com>

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Education, Healthcare Standards, Professional
Misrepresentation.

Note: AI tools, data banks, information repository and modern
apps used for this manuscript.

Abstract

The healthcare and pharmaceutical education sectors in Pakistan are plagued by deep-rooted structural corruption, professional misrepresentation, and administrative failures. This review article compiles evidence-based insights from several scholarly and investigative reports, exposing the systematic degradation of pharmacy teaching standards, regulatory oversights, and the dismal representation of qualified pharmacists in national health policymaking. It also underscores the urgent need for reforms within academic institutions, particularly within the University of Sargodha and University of the Punjab.

1. Introduction

The pharmaceutical and healthcare education system in developing countries, particularly Pakistan, is undergoing a silent crisis. While patients continue to suffer due to substandard healthcare delivery, the teaching and training of future pharmacists are riddled with corruption, unqualified leadership, and unethical affiliations. Reports highlight the worsening quality of pharmacy education, political appointments, ghost faculties, and unmerited affiliations given to fraudulent institutions (Nazir, 2021a).

2. Systemic Corruption in Academic Institutions

2.1 University of Sargodha Case Study

A significant number of reports detail gross administrative and academic corruption within the **University of Sargodha's Faculty of Pharmacy**. Evidence has revealed:

- Manipulation of hiring practices.
- Unauthorized admissions and grading malpractices.
- Financial embezzlement and misuse of institutional funds.
- Appointments of unqualified individuals at key leadership roles.

(Nazir, 2018; Nazir, 2021a)

3. The Role of the Pharmacy Council of Pakistan

The **Pharmacy Council of Pakistan (PCP)** has repeatedly failed to maintain discipline and quality assurance in the pharmaceutical profession. Its regulatory role is largely ineffective, contributing to:

- Inadequate monitoring of teaching institutions.
- Weak licensure systems and inspections.
- Toleration of illegal affiliations and unregistered practitioners.

(Nazir, 2021b)

4. Affiliation Scandals and Their Consequences

Recent revelations regarding **fraudulent college affiliations** have raised alarms about the credibility of pharmacy education:

- **Lord College of Pharmacy**, led by an individual previously involved in illegal activities, was affiliated by **University of the Punjab**, despite known criminal complaints.
- This compromises educational standards and risks licensing unqualified graduates.

(Nazir, 2020)

5. Decline in Professional Representation

A consistent theme in these studies is the **lack of effective representation of qualified pharmacists**:

- Senior positions in health institutions are often held by non-pharmacists.
- Regulatory and policy-making bodies ignore pharmacist inputs.
- Resulting professional stagnation deters competent individuals from joining the field.

(Nazir, 2014a; Nazir, 2014b; Nazir, 2015; Nazir, 2016a; Nazir, 2016b; Nazir, 2017a; Nazir, 2017b)

6. Human Tributes and Historical Legacy

Amid these revelations, tribute is paid to **Dr. Riffat-ul-Zaman** and **Muhammad Iqbal (Late)** — pioneers in Pakistan's pharmaceutical field — whose efforts to uplift the pharmacy profession are remembered fondly in multiple reports.

(Nazir, 2019a; Nazir, 2019b; Nazir, 2020a; Nazir, 2020b)

7. Reform Recommendations

- **Immediate audits** of all pharmacy institutions for academic and financial transparency.
- Strengthening the **Pharmacy Council of Pakistan** to enforce stricter regulations.
- **Depoliticization** of affiliations and appointments.
- Implementation of **transparent hiring and licensure systems**.
- Institutionalization of **qualified pharmacists' voices** in policymaking bodies.

8. Conclusion

This collective body of evidence reflects a critical need to overhaul the pharmaceutical education and healthcare governance in Pakistan. Without rectifying these foundational flaws, the dream of accessible, professional, and ethical healthcare remains unattainable.

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