LETTERS

Comparison of Growth Rates in the Enrollments and Numbers of Graduates for US Medical and Pharmacy Schools

To the Editor. The statement by Brown and the follow-up statement by Knapp and Schommer in a recent issue of the Journal are informative and thought-provoking for the academy, as well as for the profession of pharmacy as a whole.1,2 Brown opines that the growth in the number of pharmacy graduates since the beginning of the 21st century will result in “looming joblessness” for pharmacy graduates. Knapp and Schommer acknowledge that “pharmacy education expansion is a key issue,” and that the academy “likely overshot the ideal balance” between demand and supply with reference to pharmacy graduates since the start of the 21st century. With these concerns in mind, it is enlightening to consider the growth in medical school enrollments over a comparable period of time as reported in a recent article in the New England Journal of Medicine.³

Data summarized in the New England Journal of Medicine report that the 10-year growth rate in first-year enrollments in US medical schools (both allopathic and osteopathic) between 2002 and 2012 was 30%. The projected 15-year first-year enrollment growth rate between 2002 and 2017 is 44%. These percentages can be viewed as reasonably consistent with the recommendation in 2006 by the Association of American Medical Colleges for a 30% increase in medical school enrollments over a 10-year period.³

Data reported by Brown are in terms of the number of pharmacy graduates rather than first-year enrollments.¹ However, since the attrition rates in US medical schools are historically below 10%, first-year medical school enrollment data can serve as a reasonable surrogate for number of graduates.⁴

Data reported in Brown’s article indicate that the 10-year growth rate in the number of US pharmacy graduates between 2001 and 2011 was 71%. The projected 15-year growth rate between 2001 and 2016 is 105%. These comparisons make it clear that the growth rates in enrollments and graduation numbers in US pharmacy colleges and schools during the first 2 decades of the 21st century have been more than double the comparable rates of growth in US medical schools. This seems to provide further credence to the points made by Brown, and by Knapp and Schommer in their articles.

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REFERENCES