



# The FIP Centennial

Improving health  
through responsible  
medicines use

The future of pharmacy, be part of the creation!

**3-8 OCTOBER 2012**  
AMSTERDAM, THE NETHERLANDS

[www.fip.org/amsterdam2012](http://www.fip.org/amsterdam2012)



**CENTENNIAL**  
Amsterdam  
3-8 October 2012 

## TIMELINE

**FIRST REGISTRATION DEADLINE**  
15 JUNE 2012

**SECOND REGISTRATION DEADLINE**  
1 SEPTEMBER 2012

**STAKEHOLDER ROUNDTABLES**  
2 OCTOBER 2012 *(BY INVITATION ONLY)*

**MINISTERS SUMMIT**  
3 OCTOBER 2012 *(BY INVITATION ONLY)*

**CONGRESS OPENS**  
3 OCTOBER 2012

**OPENING CEREMONY**  
*FOLLOWED BY OPENING EXHIBITION AND  
SHOWCASE*  
4 OCTOBER 2012 – 16:00

**WELCOME RECEPTION**  
5 OCTOBER 2012 – 17:00

**AMSTERDAM MUSEUM EVENING**  
6 OCTOBER 2012 – 19:00

**SECTION DINNERS**  
7 OCTOBER 2012 – 20:00

**CLOSING DINNER EVENT**  
8 OCTOBER 2012 – 19:30

# Welcome to the FIP Centennial Congress in Amsterdam!

Network and connect with pharmacists and pharmaceutical scientists from all over the world under the theme of 'Improving Health Through Responsible Medicines Use'.

The chance to meet colleagues from every corner of the globe is yours at the FIP World Congress of Pharmacy and Pharmaceutical Sciences. The FIP Congress is the leading international event offering diverse learning opportunities for those active within all areas of pharmacy.

In 2012, FIP will celebrate its 100 year anniversary and as such will host the FIP Centennial Congress, taking place 3-8 October in Amsterdam, The Netherlands – the home country of FIP since its beginning. This Congress will not only be a unique opportunity for FIP to make a significant step in the fulfilment of our Vision and Mission, as adopted by the FIP Council in 2008, but will be a turning point for the profession on a global level. All present will set the stage for the future on a foundation of 100 years of progress.

The Centennial will offer all participants an invaluable venue for enriching their career while at the same time participating in events and decisions that will steer the future of pharmacy and healthcare around the world.

Michel Buchmann  
President  
International  
Pharmaceutical Federation (FIP)



The main theme of the Centennial is Improving Health Through Responsible Medicines Use, a theme that calls on pharmacists and pharmaceutical scientists to take their place as leaders in the healthcare team and do their part to usher in a new era of healthcare on a global scale. The theme will be supported by a world-class programme of expert speakers, symposia, workshops and posters that will bring together participants from diverse areas of pharmacy practice and pharmaceutical science.

In addition to the stellar congress programme, the Dutch Ministry of Health is organising a coinciding Ministers Summit on **The benefits of responsible use of medicines - Setting policies for better and cost effective healthcare**. Supportive Stakeholder Roundtable sessions will elevate the FIP Centennial to a world-class, globally influential event.

Join your peers and colleagues at the FIP Centennial Congress – steer your future and the future of pharmacy!

Jan Smits  
President  
Royal Dutch Pharmacists' Association (KNMP)



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## FIP Centennial Congress of Pharmacy and Pharmaceutical Sciences

### YOUR HOSTS:

The International Pharmaceutical Federation (FIP) together with the Royal Dutch Pharmacists' Association (KNMP)

### RAI VISITING ADDRESS



AMSTERDAM RAI  
Europaplein 22  
1078 GZ Amsterdam  
The Netherlands

### CONGRESS INFORMATION

FIP Congresses & Conferences  
P.O. Box 84200  
2508 AE The Hague  
The Netherlands  
Tel.: (+31) (0)70 302 1982  
Fax: (+31) (0)70 302 1998  
E-mail: congress@fip.org  
Website: www.fip.org/amsterdam2012

# Your Hosts FIP and KNMP

## THE INTERNATIONAL PHARMACEUTICAL FEDERATION (FIP)

Founded in 1912, the International Pharmaceutical Federation (FIP) is the global federation of national associations of pharmacists and pharmaceutical scientists and is in official relations with the World Health Organization (WHO). Through its 126 Member Organisations FIP represents and serves more than two million practitioners and scientists around the world.

### FIP LEADERSHIP

Michel Buchmann	President
Kamal Midha	Immediate Past President
Ton Hoek	General Secretary
Henri Manasse	Professional Secretary
Henk de Jong	Scientific Secretary
Andy Gray	Chairman, Board of Pharmaceutical Practice
Mitsuru Hashida	Chairman, Board of Pharmaceutical Sciences
John Bell	Vice President
Thony Björk	Vice President
Niels Kristensen	Vice President
Carmen Peña	Vice President
Mario Rocci	Vice President
Prafull Sheth	Vice President
Philip Schneider	Vice President
Geoffrey Tucker	Vice President
Régis Vaillancourt	Vice President
Dieter Steinbach	Honorary President
Joseph Oddis	Honorary President

### FIP STAFF

Luc Besançon	Manager Scientific & Professional Affairs
Mireille van Boldrik	Event Manager
Andreia Bruno	FIPEd Project Coordinator
Paula Cohen	Secretary
Diane Gal	Project Manager
Carola van der Hoeft	Congress Director
Rachel van Kesteren	Executive Secretary
Myriah Lesko	Manager Media and Publications
Gonçalo Sousa Pinto	Liaison Officer for Latin America
Oliver van der Spek	Manager Marketing & Public Relations
Sarah Whitmarsh	FIPEd Communications Liaison

### CENTENNIAL STEERING COMMITTEE

Michel Buchmann	President FIP, Chair
Kamal Midha	Immediate past President FIP, Link to Stakeholders Round Tables Committee
Jan Smits	Link to KNMP
Douwe Breimer	Link to Programme Committee
Ton Hoek	Link to the Organizing Committee

## ROYAL DUTCH PHARMACISTS' ASSOCIATION (KNMP)

As a founding Member Organisation of FIP, KNMP is focused on assisting pharmacists in the daily practice, management and quality of their profession. The KNMP formulates a perception of the profession, strives for excellent pharmaceutical care for patients and the provision of drugs and stimulates the scientific practice of the pharmaceutical sector in The Netherlands. KNMP is thrilled to co-host this unique event.

### KNMP LEADERSHIP

Jan Smits	Chair
Léon Tinke	Co-Chair
Ruud Dessing	Member
Fons Duchateau	Member
Maayke Fluitman	Member
Paul Haarbosch	Member
Mieke van Hattum	Member
Jean Hermans	Member
Bart Smals	Member
Frans van der Vaart	Member
Remco Velasquez	Member
Marianne Verhoeven	Member

### FIP CENTENNIAL PROGRAMME COMMITTEE (CPC)

Philip Schneider	Co-Chair
Martin Schulz	Co-Chair
Luc Besançon	Member
Douwe Breimer	Member
Robert DeChristoforo	Member
Han de Gier	Member
Linda Hakes	Member
Lindsay McClure	Member
Ross McKinnon	Member
Ema Paulino	Member
Geoffrey Tucker	Member
Frans van de Vaart	Member

### ORGANISING COMMITTEE

Ton Hoek	Chair
Philip Schneider	Chair of the Programme Committee
Michel Buchmann	Chair of the Centennial Declaration Committee
Jan Smits	Chair of the Ministers Summit Committee
Léon Tinke	Chair of the Fundraising and Exhibition Committee
Remco Velazques	Chair of the Finance Committee
Marianne Verhoeven	Chair of the Social Events Committee
Oliver van der Spek	Chair Marketing and Communications Committee
Carola van der Hoeft	Congress Director
Mireille van Boldrik	Event Manager
Luc Besançon	Scientific and Professional Affairs
Myriah Lesko	Media, Communications and Publications

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## Congratulations FIP on your 100 years!

Supporting the FIP Centennial



I amsterdam.

Since its inception in 1912, FIP has endeavoured – and, more importantly, succeeded - to advance pharmaceutical sciences and pharmacy practice on a global level, in turn positively influencing the health of communities the world over.

As such, it is our pleasure to congratulate and support FIP on this remarkable achievement of their Centennial.

The Federation has shown us, its partners and fellow stakeholders, the progress that can be made in fulfilling our mutual goal by working together and contributing the best each has to offer.

**CONGRATULATIONS FIP – WE LOOK FORWARD TO 100 YEARS MORE!**



# How to Register

## REGISTRATION PROCESS



MCI Amsterdam | Eurocongress International  
 Jan van Goyenkade 11  
 1075 HP Amsterdam  
 The Netherlands  
 Tel.: (+31) (0)20 6793411  
 Fax: (+31) (0)20 6737306  
 E-mail: [fip2012@mci-group.com](mailto:fip2012@mci-group.com)  
 Website: [www.mci-group.com/thenetherlands](http://www.mci-group.com/thenetherlands)

**For more information on both individual and group registration please visit the Centennial website at [www.fip.org/amsterdam2012](http://www.fip.org/amsterdam2012)**

### Payment of registration fee

\* By credit card through a secured site, ONLY during the online registration process.

\* By bank transfer after receipt of an invoice.

The invoice (with bank account number and invoice number) will be sent to you by e-mail.

### After submitting your registration form

1. You will receive an automatically generated e-mail acknowledging submission of your registration. (within 24 hours; if you do not receive this e-mail, please send an e-mail to [fip2012@mci-group.com](mailto:fip2012@mci-group.com))

2. If you have paid online:

- you will receive a confirmation letter by e-mail within one week after submission.

If you have not paid online:

- you will receive an invoice by e-mail within one week after submission;

- you will receive a confirmation letter by email within one week after receipt of your registration fee.

3. On 15 September 2012 you will receive a final “pack-and-go” e-mail, including a link to view all submitted abstracts and biographies.

### Registration Fees

	Before 15 June 2012	15 June - 1 September 2012		
<b>FIP Individual member</b>	€ 600,00	€ 700,00		
VAT 19%	€ 114,00	€ 133,00		
Total	€ 714,00	€ 833,00		
<b>Regular fee (non-members)</b>	€ 850,00	€ 950,00		
VAT 19%	€ 161,50	€ 180,50		
Total	€ 1011,50	€ 1130,50		
<b>Student/ Recent graduate</b>	€ 225,00	€ 275,00		
VAT 19%	€ 42,75	€ 52,25		
Total	€ 267,75	€ 327,25		
<b>Accompanying person</b>	€ 150,00	€ 150,00		
VAT 19%	€ 28,50	€ 28,50		
Total	€ 178,50	€ 178,50		
<b>On site fees</b>		<i>Members and Non Members</i>	<i>Students</i>	<i>Day Cards</i>
Fee		€ 1000,00	€ 350,00	€ 300,00
VAT 19%		€ 190,00	€ 66,50	€ 57,00
Total		€ 1190,00	€ 416,50	€ 357,00
<b>Pharmacy Technicians Symposium</b>		€ 200,00		

According to the relevant Dutch tax regulations FIP must charge VAT on all fees to be paid by the delegates. The tax is stated separately on the confirmation/invoice you will receive after you have registered yourself for the congress. Delegates may claim this tax back for a refund at the end of the Congress. Please check the Centennial website periodically for more information.

# How to Register

## The registration fee for participants includes:

- \* Admission to all sessions
- \* Opening Ceremony
- \* Welcome Reception
- \* Entrance to the Exhibition
- \* Access to all submitted Abstracts and Biographies as of 15 September 2012
- \* Option to book up to 3 (three) Closing Dinner tickets
- \* Congress Bag with Final Congress Programme and List of Participants (name and country of participants registered and paid by 15 August 2012)
- \* Access to a website where you can download the (slides of the) presentations (available as of 1 December 2012).

## The registration fee for accompanying persons includes:

- \* Opening Ceremony
  - \* Welcome Reception
  - \* Entrance to the Exhibition
- Please note that the fee for accompanying persons does NOT include admission to the sessions.*

## REGISTRATION QUALIFICATIONS

### FIP Member

In order to qualify for the congress registration fee for FIP members, two conditions must be met:

- \* You must be an individual member of FIP for at least two years;
- \* Your membership fees must be fully paid up.

### Student/Recent Graduate

In order to qualify for Student/Recent Graduate fee, two conditions must be met.

- \* You must still be a student or have graduated from your last study after September 2007.
- \* You must attach to your online registration form an official document (max. 200 Kb) signed by the Head of Department of your university proving your Student/Recent graduate status.

### Council Delegate

In order to qualify for the Council Delegate registration fee you must attach to your online registration form a proof (max. 200 Kb) that you have been officially appointed to represent your organisation at the Council Meeting. Until the congress registration office has received this proof, the regular registration fee will be applicable.

Please note that per organisation ONE participant can be registered as a Council Delegate.

### Press

In order to qualify for Press registration you must have applied for and been granted an official invitation code from the FIP head office – press department. If you have not received a Press Registration invitation and you wish to qualify for one please contact the FIP Press Office at [press@fip.org](mailto:press@fip.org).

## On-site Day Cards

Day cards can only be purchased on site.

Pre-registration for a day card is not possible.

**Please note: It is not possible to exchange a pre-registration booking into a day card.**

## Terms of Cancellation

Notification of cancellation must be made in writing and sent to MCI.

- \* In case of cancellation **before or on 15 June 2012**, the registration fee less an administration fee of 10% will be refunded.
- \* In case of cancellation **between 15 June and 31 August 2012**, the registration fee less an administration fee of 50% will be refunded.
- \* **As of 1 September 2012**, the registration fee will not be refunded.
- \* The terms of cancellation are applicable in all circumstances, also if a visa is officially refused to the participant and / or accompanying person.
- \* Replacements or name changes are handled as cancellations.

## On-site Registration

If you register or pay on site, the on site fee is applicable.

On site payment of registration fees can be made:

- \* By credit card: VISA, MasterCard or American Express are accepted.
- \* Cash in Euro

## Certificate of Attendance

If you would like to receive a Certificate of Attendance please make sure to collect your certificate during the congress at the congress registration desk. Certificates will NOT be sent after the congress!

If you would like to receive a poster certificate please make sure to collect this certificate during the congress at the Poster desk. Certificates for oral presentations will be handed out at the congress registration desk. Certificates will NOT be sent after the congress!

## Accreditation

For accreditation purposes you are requested to list your pharmacist license number and licensing authority on the registration form.

## Registration Desk

The registration desk at Amsterdam RAI will be open:

\* **Wednesday 3 October 2012**

from 07:30 – 17:30

\* **Thursday 4 to Sunday 7 October 2012**

from 08:00 – 17:30

\* **Monday 8 October 2012**

from 08:30 – 14:30

Council Registration will take place at the Okura Hotel.

## Visa Requirements

Information on visa requirements to visit The Netherlands are available on the FIP website [www.fip.org/amsterdam2012](http://www.fip.org/amsterdam2012) as of 1 February 2012.

# General Events

## OPENING CEREMONY

**Thursday 4 October 2012, 16:00 – 18:30**

The Opening Ceremony will take place in the Auditorium. Please be on time as a high number of attendees are expected. The Opening Ceremony is open to all registered participants and their registered accompanying persons, but you do need to indicate on your registration form whether you will attend this ceremony.

## POSTER SESSION

**Friday 5 until Monday 8 October 2012**

Depending on the number of abstracts submitted, posters will be on display for one or more days. Presenters will be informed about this in due course.

The poster area is open to all registered participants and their registered accompanying persons.

**By invitation only:**

## COUNCIL MEETINGS

**Wednesday 3 October 2012**

**Monday 8 October 2012**

*(Simultaneous translation provided)*

Only official representatives from FIP Member Organisations and Observer Organisations can be admitted to the Council Meetings. This means that each representative will be asked to submit a written proof when registering, that he/she has been officially appointed to represent his/her organisation.

Please note that per organisation ONE participant can be registered as a Council delegate. The Council Meetings will also be attended by the FIP Bureau Members and Section representatives.

## MINISTERS SUMMIT AND STAKEHOLDER ROUNDTABLES

Each year, billions of dollars, Euros and pounds are allocated from government spending to medicines costs, accounting for a growing percentage of national budgets needed for medicines to treat patients.

To address these and other key medicines and health issues, the Dutch Government will host a Ministers Summit on Medicines at the important occasion of the FIP Centennial Congress. Global leaders and visionaries will be making this the pinnacle decision-making event steering medicines development, delivery, accessibility and cost-effectiveness. In addition, FIP will convene by-invitation-only Stakeholders Roundtables, a complementary event to the Centennial Ministers Summit where influential stakeholders from both around the world and from a cross section of sectors will convene to discuss current and relevant issues facing the development and delivery of healthcare now and in the coming era.

The key topics that will be addressed at the Roundtables are:

### Right Medicine, Right Patient

The main focus of the discussion of this roundtable will be on options / solutions to improve the use of appropriate medicines for a patient (and therefore reduce the related cost). This includes identifying treatment needs; implementing best clinical guidelines; minimizing medicines interactions; managing poly-pharmacy; optimizing selection of medicines on cost/benefit and securing the supply chain.

### Adherence

The main focus of the discussion of this roundtable will be on options/solutions to improve adherence (and therefore reduce the costs related to non-adherence). Mainly to be discussed are adherence in chronic diseases (diabetes, asthma) where higher savings are more likely to be obtained. This includes patients' inability to manage medication; their lack of motivation; poorly suited medicines and inability to afford medicines.

### Transformative Power of Shared Information

In many other sectors (outside healthcare), information technology has already shown its transformative power. Such a journey should be initiated, so that the healthcare sectors can start enjoying the benefits, considering however factors such as multiple stakeholders; decision making processes; complex information and shared information.

### Post-Ministers Summit Roundtable on Innovation

While the three first roundtables will discuss short-term solutions (solutions which can be implemented rapidly), the roundtable on innovation will provide a longer-term vision on the impact of innovations, both from a technology perspective and a societal perspective, addressing key topics such as technological drivers and societal drivers/hurdles. Under this roundtable, scenario analysis for future could be discussed with input from the FIP project Pharmaceutical Sciences 2020.

As the Ministers Summit and Stakeholder Roundtables will be held in conjunction with the FIP Centennial Congress, the Centennial as a whole will amount to a once-in-a-lifetime, all-encompassing event, bringing together all manner of stakeholders within the pharmacy and healthcare arenas to consolidate their visions for the future and solidify key strategies for growth and change.

# Social Events and Exhibition

## SOCIAL EVENTS

The FIP Centennial Congress will provide participants with not only traditional FIP Congress events such as the Welcome Reception, Section Dinners and Closing Dinner, but also with once in a lifetime, unique opportunities to mark the FIP Centennial. **Please see the Centennial Social Events insert for more information!**

Event	Date	Time	Location
Opening Exhibition and Showcase	Thursday 4 October	18:30-19:30	RAI Exhibition
Welcome Reception	Friday 5 October	17:00 – departure by canal boat 21:00 - end	National Maritime Museum
FIP Fun Run	Saturday 6 October	06:30-08:30	Olympic Stadium
Amsterdam Museum Night	Saturday 6 October	19:00-21:00	Various musea in Amsterdam
Section Dinners	Sunday 7 October	20:00-22:30	Haesje Claes or De Silveren Spiegel NH Krasnapolsky (depending on Section)
Closing Dinner	Monday 8 October	19:30-23:00	Beurs van Berlage

## EXHIBITION

### Thursday 4 until Sunday 7 October 2012

The FIP/KNMP Centennial Exhibition is set to go down in history as the World Exhibition on the Future of Medicines. It will be hosted in the RAI Congress Centre in Amsterdam, with the exhibition area also providing a venue for all Posters and catering, guaranteeing an excellent through-put of conference delegates.

### Preliminary opening hours

The exhibition will be open for registered congress participants and registered accompanying persons during the following hours:

**Thursday 4 October** from 16:30 – 18:00

**Friday 5 October** from 09:00 – 18:30

**Saturday 6 October** from 09:00 – 18:30

**Sunday 7 October** from 09:00 – 18:30

### Admission

All registered participants and registered accompanying persons have free admission to the exhibition.

### Organisation

The Organising Committee of the FIP 2012 is organising the exhibition:

Jan Breeman – KNMP

Carola van der Hoeft - FIP

Email: [fip2012@knmp.nl](mailto:fip2012@knmp.nl)

Website: <http://www.fip.org/amsterdam2012>

### Exhibition Secretariat:

KNMP

Att. Mr. J. Breeman

P.O. Box 30460

2500 GL The Hague

The Netherlands

To book exhibition space - please contact [fip2012@knmp.nl](mailto:fip2012@knmp.nl) to receive an Exhibition Contract and return it to the Exhibition Organiser.

# Accreditation for Continuing Education

## ACCREDITATION

FIP endeavors to provide Congress participants with official accreditation status for sessions attended. The following countries have granted Accredited Continuing Education status to the FIP Congress Sessions.

FIP has submitted applications for accreditation to several countries; a complete list will be published on our website [www.fip.org/amsterdam2012](http://www.fip.org/amsterdam2012) and in the final programme booklet.

### Austria

The FIP Congress sessions are accredited in



Österreichische  
Apothekerkammer

Austria as agreed with the ÖAK (Österreichische Apothekerkammer – Federal Chamber of Pharmacists, number F20111207). The Austrian participants are advised to acquire a Statement of Continuing Education Credit according to the instructions that will be published in the final programme booklet.

### Germany

The Congress sessions have been accredited by the Federal



Chamber of Pharmacists of Germany (Bundesapothekerkammer) and have been approved for pharmacists and pharmaceutical technicians. The event has been assigned the accreditation-no. BAK 2012/001, category 2: Congress.

### Japan

The sessions of the 2012 FIP Centennial Congress are accredited by CPC-Japan. Japanese participants are advised to acquire a "Certificate of Attendance" which is valid to obtain CE credit from every CE provider in Japan accredited by the CPC-Japan. The instructions for the Certificate will be published on the congress website and in the final programme booklet. The available amount of credits depends on the rule of each provider.



### Netherlands

The congress sessions are accredited by the Royal Dutch Association for the Advancement of Pharmacy (KNMP) for hospital and community pharmacists. They can list their participation in PE-online on the basis of the hours of attendance. The Registration Committee will honour these continuing education hours on the basis of the certificate of attendance delivered by FIP.



### Serbia

The congress sessions are recognised as valid continuing education. The Serbian participants are advised to acquire a certificate of attendance and to have their attendance to sessions (Confirmation of Sessions Attendance) recorded according to the instructions published in the final programme booklet or to contact the Pharmaceutical Chamber of Serbia ([edukacija@farmkom.rs](mailto:edukacija@farmkom.rs)) before the beginning of the congress.



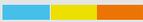
The following amount of credits will be awarded:

- up to 6 hours - 3 points
- 6-12 hours - 6 points
- more than 12 hours - 9 points

# SESSIONS OVERVIEW

See colour code for topics of interest

- Community Pharmacy
- Hospital Pharmacy
- Pharmaceutical Sciences
- Academic/Pharmacy Education
- Other Pharmacy Practice

		1 – THE HEALTHCARE TEAM OF THE FUTURE	2 – MEDICINES OF THE FUTURE	3 - SAFE MEDICINES, SAFE PATIENTS	4- ENSURING RESPONSIBLE MEDICINES USE
<b>FRIDAY</b> 5 OCT 2012	09-12	 SESSIONS 1A - 1B A: Improving patient outcomes B: Pharmacy practice research		 SESSION 3A Reporting of adverse events	
	12:15-13:45		 SESSION 2A A future of sustainable health		
	14-17	 SESSION 1B Pharmacy practice research	 SESSION 2D Diagnostics	 SESSION 3B Risk benefits management	 SESSIONS 4A - 4C A: Professional accountability C: Medicines Information
<b>SATURDAY</b> 6 OCT 2012	09-12	 SESSION 1C Future directions	 SESSION 2B New medicines in 20 years		 SESSIONS 4D - 4E D: The future of GPP E: Social networks friend or foe
	12:15-13:45		 SESSION 2E Impact of drug development		 SESSION 4D The future of good pharmacy
	14-17				 SESSION 4F Better future decisions
<b>SUNDAY</b> 7 OCT 2012	09-12		 SESSION 2F Clinical pharmacy education	 SESSION 3C Pharmacovigilance	 SESSION 4B Access to pain relief
	12:15-13:45	 SESSIONS 1D - 1E - 1F D: CPS Vision 2020 E: Multi-generational Teams F: Leaders of the future	 SESSION 2G Biowaiver monographs		 SESSION 4G Clinical guidelines
	14-17		 SESSION 2C Scientific principles		 SESSION 4H Responsible use of OTC's
<b>MONDAY</b> 8 OCT 2012	09-12		 SESSION 2H Breakthrough technologies nanomedicines		 SESSION 4I The dynamic healthcare environment
	12:15-13:45				 SESSION 4J From prescription to non
	14-17		 SESSION 2I Medicines of the future	 SESSION 3D Pharmaceuticals and water	

<b>WEDNESDAY</b> <b>3 OCT 2012</b>	09-12	 SESSION 8B.1 AIM Global Deans Forum
	14-17	 SESSION 8B.1 AIM Global Deans Forum
<b>THURSDAY</b> <b>4 OCT 2012</b>	09-12	 SESSIONS 8A - 8D.1 A: Going Dutch D.1: Scientific knowledge

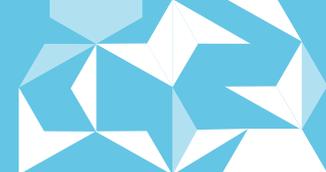
5 – THE FUTURE MEDICINES SUPPLY CHAIN	6 – FUTURE HEALTHCARE ECONOMY	7 – ADHERENCE	8 - MISCELLANEOUS
 SESSION 5C Emergency – not enough medicines	 SESSION 6C Pharmacy and competition law	 SESSION 7B Supporting adherence	 SESSION 8E – 07:30-08:45 (breakfast) Humanitarian work
			 SESSION 8C.1 Reports from your network
			 SESSION 8C.2 Forum for policy makers
 SESSION 5A Supply chain – global solutions?			
 SESSION 5B Supply chain – costs vs regulation			 SESSIONS 8C.3 -8F.1 C.3: Reports from your network F.1: SOC: Development to marketing
	 SESSION 6A Economics of healthcare	 SESSION 7A Medication adherence	 SESSIONS 8D.2 - 8J D.2: Pharmaceutical development J: Report on sciences workshops
 SESSION 5D The future emergency drug supply	 SESSION 6B Economics of pharmacy		 SESSION 8F.2 SOC: Forum for practitioners
 SESSION 5E QA of the supply chain			 SESSIONS 8B.2 - 8C.4 - 8F.2 B.2: Education technology C.4: Emergency Pharmacy F.2: SOC: Forum for practitioners
	 SESSION 6D Forum for innovators		 SESSION 8B.3 Universal Competencies
			 SESSION 8F.3 SOC: Pharmacy Information
	 SESSION 6D Forum for innovators		 SESSIONS 8B.4 - 8G B.4: The learning experience G: History of pharmacy



IMAGES OF THE FOUNDING MEETING OF FIP, THE HAGUE, 1912

# 1. The Healthcare Team of the Future

## How can we make an Impact



### TOPIC COORDINATORS: HAN DE GIER (THE NETHERLANDS) AND HENRI MANASSE (USA)

The key to providing comprehensive and ultimately successful healthcare in the future relies on many factors, not the least of which is the ability and opportunity to compile teams of uniquely knowledgeable healthcare professionals in a unified goal of patient care and positive patient outcomes. These sessions will address these issues and discuss how pharmacists may best initiate and contribute to collaborative practice efforts, instilling themselves as invaluable members of the healthcare team.

### SESSION 1A - IMPROVING PATIENT OUTCOMES THROUGH COLLABORATIVE PRACTICE

*Organised by the FIP Centennial Programme Committee*

**Friday 5 October 2012, 09:00-12:00**

#### Learning objectives

At the conclusion of the session, participants will be able to:

1. Summarise the challenge of creating multidisciplinary teams of physicians and pharmacists for improving quality and safety in medication use.
2. Describe the regulatory framework for collaborative practice models in the context of scope of practice and accountable care.
3. Discuss some examples of successful collaborative practices, including the factors that contributed to success.
4. Outline initiatives that are being undertaken to address an ideal and operational model for inter-disciplinary education in health professions.

**Chairs:** Han de Gier (FIP CPC, The Netherlands) and Henri Manasse (FIP Professional Secretary, USA)

#### Programme

##### 1) The legal and professional basis of teamwork in drug therapy management

Scope of practice issues surrounding collaboration and dealing with barriers between the health professions  
Jill Boone (University of Cincinnati, USA)

##### 2) Does collaboration with physicians improve patient care outcomes?

A review of the intuitive and empirical evidence to date and a pathway for quality and safety in medication use  
Rosa Gallego (Physician, Portugal)

##### 3) A desired future for better drug therapy management

Discussion about an ideal model for patient partnership, prescriber relationships and pharmacist accountability for drug therapy outcomes  
Martin Henman (Trinity College, Ireland)

##### 4) Models for inter-disciplinary education of health professionals

Best practices in inter-disciplinary education among pharmacists, physicians and nurses that focuses on team work, trust, competence and mutual accountability  
Joseph Ming Wah Li (Harvard Medical School, USA)

### SESSION 1B - PHARMACY PRACTICE RESEARCH - PROVING THE VALUE OF THE PHARMACIST NOW AND IN THE FUTURE

*Organised by the FIP Academic Pharmacy Section, the FIP Community Pharmacy Section, the FIP Hospital Pharmacy Section and the FIP Pharmacy Information Section in collaboration with the PRISMA Foundation*

**Friday 5 October 2012, 09:00-12:00 and 14:00-17:00**

Pharmacy Practice Research (PPR) has been instrumental in showing the effectiveness of pharmacists' interventions to improve optimal use of medicines by individual patients and patients groups in various health care settings. However, the development of PPR differs from country to country and there are several lessons to learn from examples and best practices. Therefore an overview of the development of PPR and examples of studies to show how interventions were evaluated (structure, process and outcomes) would be a source of inspiration for those who want to become involved in PPR.

#### Learning objectives

At the conclusion of this session, participants will be able to:

1. Summarize the key issues in the development of Pharmacy Practice Research.
2. Discuss the value of pharmacists' contributions to health care.
3. Outline trends in Pharmacy Practice Research based on examples of studies in various countries.
4. Describe various ways to link practitioners to researchers (within university networks) and professional organisations.

**Chairs:** Martin Schulz (ABDA, Germany) and Katja Taxis (University of Groningen, The Netherlands)

#### Programme

##### Morning

##### 1) The development of PPR

Peter Noyce (University of Manchester, United Kingdom)

##### 2) Overview of the experiences in several countries

Australia: Charlie Benrimoj (University of Sydney, Australia)  
Europe: Martin Schulz (ABDA, Germany)  
USA: Stephen Allen (ASHP, USA)

##### 3) The value of PPR for bringing actual and potential benefits to patients and pharmacists

Grace Kuo (University of San Diego, USA)

##### 4) Linking practitioners to universities and professional organizations involved in PPR

Liset van Dijk (NIVEL, The Netherlands)

##### Afternoon

Various parallel sessions in English with examples of studies (proposed, running and completed) presented by community and hospital pharmacists to give an overview of PPR achievements.

# 1. The Healthcare Team of the Future

## How can we make an Impact

### **SESSION 1C - FUTURE DIRECTIONS – INTEGRATING MULTIDISCIPLINARY EDUCATION INTO CURRICULA**

**Organised by the FIP Academic Pharmacy Section**  
**Saturday 6 October 2012, 09:00-12:00**

There is increasing recognition that multidisciplinary teams are critical to providing seamless, efficient and high quality healthcare. To meet his need, it is essential that healthcare students learn in a multidisciplinary, interprofessional environment to better prepare for practice environments and to engage in improving healthcare delivery in a collaborative patient centered approach. This session will provide insight into the value of and current state of multidisciplinary interprofessional pharmacy and healthcare education.

#### **Learning objectives**

At the conclusion of this session, participants will be able to:

1. Identify key components needed in a curriculum that enable pharmacists to be active members of multidisciplinary healthcare teams.
2. Make recommendations to stakeholders and decision makers about the value of multidisciplinary learning.
3. Develop ideas and action plans to use in your pharmacy education environment.

**Chairs:** TBA

#### **Programme**

##### **1) Evidence that multidisciplinary/interprofessional education benefits learning and practice**

Insights into evidence that supports the value of multidisciplinary interprofessional education of healthcare learners and its impact on practice

TBA

##### **2) Models of multidisciplinary/interprofessional education that work – Classroom and experiential.**

This session will present models of multidisciplinary interprofessional education that work in both the classroom/laboratory setting and in experiential learning settings

TBA

##### **3) Perspective of non-pharmacists (e.g., physicians) engaged in multidisciplinary/interprofessional education that includes pharmacy**

Multidisciplinary interprofessional education requires engagement of various health professions to be successful. In this session, non-pharmacy healthcare educators and practitioners will provide their perspectives on the value of these education models and the value pharmacy brings to the team.

TBA

##### **4) Panel Discussion**

### **SESSION 1D - PRESENTATION OF “COMMUNITY PHARMACY VISION 2020”**

**Organised by the FIP Community Pharmacy Section**  
**Sunday 7 October 2012, 12:15-13:45**

#### **Learning objectives**

At the conclusion of this session, the participants should be able to:

1. Reflect on the challenges that lay ahead for community pharmacy practice.
2. Develop and contrast future scenarios and appropriate strategies to deal with such challenges.
3. Analyse and reflect upon approaches to the strategic development of individual pharmacies and organisations, and the behaviours which underpin their successful implementation.
4. Develop an understanding of the role of National and International Pharmacy Organisations in designing the future of the Profession.
5. Develop an understanding of the role of National Pharmacy Organisations in providing individual pharmacies with specific tools that facilitate service provision and pharmacy practice in general.
6. Discuss the role of the Community Pharmacy Section of FIP as a facilitator for needed changes.

**Chairs:** Dominique Jordan (FIP CPS, Switzerland) and Ema Paulino (FIP CPS, Portugal)

#### **Programme**

##### **1) Opening**

Dominique Jordan (FIP CPS, Switzerland)

##### **2) Presentation of the Publication “Pharmacy Vision 2020”**

Ema Paulino (FIP CPS, Portugal)

##### **3) Debate**

##### **4) Conclusions and wrap-up**

# 1. The Healthcare Team of the Future

## How can we make an Impact



### SESSION 1E – TRADITIONAL PROCESS VS INNOVATIVE PRACTICE – BENEFITS OF THE MULTIGENERATIONAL TEAM IN PATIENT OUTCOMES

**Organised by the FIP Young Pharmacists' Group**

**Sunday 7 October 2012, 12:15-13:45**

Pharmacy has had a dramatic shift in the demographics of its professionals. 20 years ago the pharmacy graduate was male and the majority of pharmacist employees and owners were male. Now, the majority of graduates are female, and as such the workforce has become one primarily made up of female employees and male pharmacist owners.

With the advancements in technology, and the shift in demographics, what benefits do our patients now have, and what are the pitfalls we as a profession should be aware of. This debate will not be one of statistics and science; instead we intend it to be an interactive, but thought provoking look at the profession and the challenges we are now facing with technology, patient education and increasing international society.

#### **Learning objectives**

1. Stimulate discussion amongst pharmacists as to the future of pharmacy, and where the profession is going.
2. Draw attention to the changing face of the profession.
3. Discuss the implications of experience vs. new innovations.
4. Establish the role that both experience and new innovations can hold within pharmacy.
5. Outline how patient outcomes can be influenced by both experience and new innovations.
6. Facilitate integration of new innovations into the practice of pharmacy.

**Chair:** Luís Lourenço (YPG, Portugal)

#### **Programme**

##### **1) Impact of technology in pharmacy practice**

Focus: Technological (IT) Literacy; scientific databases access; information provision to patients.

TBA

Response: TBA

##### **2) Management and maturity**

Focus: Do management roles require an older person? Does age define who the leader is? Maturity and age – Are they mutually exclusive?

TBA

Response: TBA

##### **3) Communication issues**

Focus: Adapting communication with experience; using new technologies to communicate with patients (emails, social media networks...); innovative patient education tools.

TBA

Response: TBA

For each topic, panellists will be debating either the affirmative or negative position in teams.

### SESSION 1F – WHAT DOES A PHARMACY LEADER LOOK LIKE (AND ARE THEY BORN, DEVELOPED OR ADOPTED)?

**Organised by FIP Ed, the African Pharmaceutical Forum and the FIP/UNESCO UNITWIN programme**

**Monday 8 October 2012, 12:15-13:45**

This luncheon was organised with the support of an unrestricted grant from Phi Lambda Sigma

#### **Learning objectives**

At the conclusion of this session, participants will be able to:

1. Describe how diversity in leaders and leadership styles can have a positive influence on the efficacy of healthcare teams.
2. Identify leadership development resources available for pharmacy academic, practitioners, and scientists.
3. Compare and contrast how practice and science education models relate to distribution of pharmacy workforce and leadership.

**Chairs:** Tina Brock (University of California San Francisco, USA) and Catherine Duggan (Royal Pharmaceutical Society of Great Britain)

#### **Programme**

This interactive session will highlight the role of diversity in leadership, discuss various leadership development resources and describe the relationship between workforce planning and leadership. It will also provide an opportunity for noted pharmacy leaders to share their experiences within a variety of career development pathways.

#### **Speakers**

TBA

# 2. The Medicines of the Future And the Impact on Pharmacy Practice

## TOPIC COORDINATORS: ROSS MCKINNON (AUSTRALIA) AND DOUWE BREIMER (THE NETHERLANDS)

The medicines of tomorrow and the way we use them may be substantially different to today's practice – are pharmacists adequately preparing themselves with the knowledge needed to inform patients about the newest and up and coming treatments? Given dynamic advances in areas such as biotechnology, nanotechnology and biomarkers, pharmacists must embrace the science and technology enabling these new discoveries to be an influential player on the healthcare team and to continue to provide patients with appropriate cognitive services relevant to new therapeutic practices. This will also require educational reforms and the orientation of pharmaceutical sciences will change.

## SESSION 2A - THE FUTURE OF SUSTAINABLE HEALTH AND PHARMACY CARE

Key note speaker: Jonathan Peck (Institute for Alternative Futures, USA)

**Organised by the FIP Centennial Programme Committee**  
**Friday 5 October 2012, 12:15-13:45**

### Learning objectives

- At the conclusion of the session, participants will be able to:
1. Identify the major factors influencing the delivery of sustainable health care in 2020, both globally and in national settings.
  2. Identify opportunities for innovative pharmacy practice.

**Chair:** Douwe Breimer (FIP CPC, The Netherlands)

### Programme

#### A futuristic view on health

Presentation consisting of a broad talk which captures likely health care trends

Jonathan Peck (Institute for Alternative Futures, USA)

## SESSION 2B - THE NEW MEDICINES IN 20 YEARS TIME AND THEIR IMPACT ON PHARMACY PRACTICE

**Organised by the FIP Centennial Programme Committee**  
**Saturday 6 October 2012, 09:00-12:00**

### Learning objectives

- At the conclusion of the session, participants will be able to:
1. Identify the potential impact of key technologies on pharmacy practice in 2020, including nanotechnology, biomarker technologies and cell therapies.
  2. Identify potential barriers to the successful uptake of key technological advances into clinical practice.
  3. Identify future opportunities for the delivery of innovative pharmacy practice.
  4. Articulate likely educational reforms required to ensure optimal participation of pharmacy practitioners in future therapeutic areas.

**Chair:** Lloyd Sansom (Australia)

### Programme

#### 1) Biomarkers and individualized medicine

Munir Pirmohamed (University of Liverpool, United Kingdom)

#### 2) Cell Therapies

Christine Mummery (Leiden University Medical Center, The Netherlands)

#### 3) Gene Therapy/Nucleic Acid Therapeutics

Colin Pouton (Monash University, Australia)

#### 4) Nanotechnology

Patrick Couvreur (University of Paris Sud, France)

#### 5) Criteria for patient access of new technologies:

##### Impact on regulatory sciences

Bert Leufkens (University of Utrecht, The Netherlands)

## SESSION 2C - WHAT SCIENTIFIC PRINCIPLES WILL DRUG THERAPY BE BASED ON IN 2030?

**Organised by the FIP Centennial Programme Committee**  
**Sunday 7 October 2012, 14:00-17:00**

### Learning objectives

At the conclusion of the session, participants will be able to:

1. Explain how the major scientific principles will underpin drug therapy in 2030.
2. Identify the important efficacy and safety issues and their assessment.
3. List the new orientations of the pharmaceutical sciences with implications for curriculum development.
4. Identify key (future) paradigm shifts and their potential implications for pharmacy practice and patient counseling.

**Chair:** Ross McKinnon (FIP CPC, Australia)

### Programme

#### 1) Mechanism-based and predictive drug transport and drug metabolism

Leslie Benet (University of San Francisco, USA)

#### 2) Translational drug discovery and development including personalized therapies

Yuichi Kubo (Daiichi Sankyo, Japan)

#### 3) System therapeutics leading to multitarget drugs and rational combination therapies

Meindert Danhof (Leiden University, The Netherlands)

#### 4) Site specific drug delivery strategies

Claus-Michael Lehr (University of Saarland, Germany)

## SESSION 2D - DIAGNOSTICS – DIRECTING INDIVIDUALISED MEDICINE INTO THE FUTURE

**Organised by the FIP Clinical Biology Section and the FIP Board of Pharmaceutical Sciences**

**Friday 5 October 2012, 14:00-17:00**

**Chairs:** Majid Moridani or Hitoshi Sasaki

(SIG Individualized Medicine, USA or Japan) and

Bernard Poggi (FIP Clinical Biology Section, France)

### Programme

#### 1) Biological markers: Tools for diagnosis and monitoring diabetes mellitus

Michèle Fonfrède (Hôpital Pitié Salpêtrière, France)

#### 2) Recent advances in pharmacogenetics biomarkers

Majid Moridani (Texas Tech University Health Sciences Center, USA)

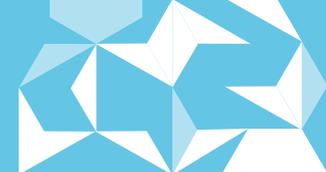
#### 3) The use of biomarkers in management of patients with lipid disorder

Khosrow Adeli (Hospital for Sick Children, Canada)

#### 4) New perspectives in biomarkers

TBA

# 2. The Medicines of the Future And the Impact on Pharmacy Practice



## SESSION 2E - PHARMACEUTICAL SCIENCES: PAST AND FUTURE IMPACT OF DRUG DEVELOPMENT ON HEALTHCARE

**Organised by the FIP Board of Pharmaceutical Sciences**

**Saturday 6 October 2012, 12.15-13.45**

The roundtable will present an update on the impact of the pharmaceutical sciences in the healthcare arena and also the outlook on pharmaceutical sciences in 2020 with different scenario analyses.

### Learning objectives

At the conclusion of this session, participants will be able to:

1. Discuss past and future influence of pharmaceutical sciences in drug discovery and drug development.
2. Discuss past and future impact of pharmaceutical sciences in drug regulations.
3. Summarize past and future impact of pharmaceutical sciences in the healthcare arena.
4. Summarize past and future impact of pharmaceutical sciences in relation to major research activities.

**Chairs:** Vinod Shah (FIP, USA) and Henk de Jong (FIP, The Netherlands)

### Programme

**Speakers:** Malcolm Rowland (University of Manchester, United Kingdom) and Daan Crommelin (University of Utrecht, The Netherlands)

## SESSION 2F - THE FUTURE OF CLINICAL PHARMACY EDUCATION - THE NEED FOR ATTENTION TO 'HOT TOPICS'

**Organised by the FIP Academic Pharmacy Section and the FIP Pharmacy Education Taskforce**

**Sunday 7 October 2012, 09:00-12:00**

Pharmacy and healthcare education must continuously strive to stay ahead of the healthcare change curve by preparing students for their future roles as healthcare practitioners. This session will provide insight into the growing global awareness of the need for clinical pharmacy education and will provide a forum for pharmacy educators to present their perspectives on hot topics in pharmacy education that address the current and future needs of their societies and communities.

### Learning objectives

At the conclusion of this session, participants will be able to:

1. Articulate the need for and value of clinical pharmacy education.
2. Identify key directions for contemporary and future pharmacy education.
3. Develop ideas and action plans for enhancing your pharmacy education programs.

**Chairs:** TBA

### Programme

**1) Clinical pharmacy education** - Contemporary and future clinical pharmacy education is becoming more important worldwide. This session will provide insights into development of contemporary and future clinical pharmacy education. TBA

### 2) Short oral presentations determined by call for abstracts on pharmacy education hot topics

Short oral presentations based on contributed abstracts will focus on critical pharmacy education topics that are required to meet the needs of societies and communities across the globe. TBA

### 3) Panel discussion

## SESSION 2G - BIOWAIVER MONOGRAPHS - INCREASING ACCESS TO THE WORLD'S AFFORDABLE, QUALITY MEDICINES

**Organised by the FIP Board of Pharmaceutical Sciences**

**Sunday 7 October 2012, 12:15-13:45**

To gain approval of a generic drug product, its bioequivalence to a comparator product must be demonstrated. Bioequivalence can be tested through pharmacokinetic studies, but in the last decade it has also been possible to show bioequivalence using laboratory-based tests (the so-called biowaiver procedure). Biowaiver-based approval reduces the cost of bringing (generic) products into the market and thus improves patient access to affordable medicines without sacrificing product quality. Over the last ten years, it has been the aim of the FIP to generate Biowaiver Monographs for individual drug substances, in which a recommendation is reached about whether or not products containing the substance should be eligible for the biowaiver procedure. This session will describe eligibility criteria, the biowaiver procedure itself and discuss the impact that the Biowaiver Monographs have had in various regions of the world.

### Learning objectives

At the conclusion of this session, participants will be able to:

1. Explain when bioequivalence of products needs to be tested.
2. Identify the different ways in which bioequivalence can be tested.
3. Explain the classification of drugs according to the BCS (Biopharmaceutics Classification Scheme).
4. List the additional factors to be considered when applying the biowaiver procedure.
5. Explain how to determine whether the bioequivalence of a given product can be tested by the biowaiver procedure.
6. Identify the benefits of the biowaiver procedure in terms of global health and patient care.

**Chairs:** Dirk Barends (RIVM, The Netherlands) and Jennifer Dressman (University of Frankfurt, Germany)

### Programme:

#### 1) The Biowaiver Project - Overview

Dirk Barends (RIVM, The Netherlands)

#### 2) Which drugs are eligible for the biowaiver

Jennifer Dressman (University of Frankfurt, Germany)

#### 3) Biowaivers in the WHO Prequalification Programme

Jan Welink (RIVM, The Netherlands)

#### 4) What does the future hold for biowaiver-based drug approval?

James Polli (University of Maryland, USA)

# 2. The Medicines of the Future And the Impact on Pharmacy Practice

## SESSION 2H - BREAKTHROUGH TECHNOLOGIES AND THE PARADIGM SHIFT IN NANOMEDICINES

*Organised by the FIP Board of Pharmaceutical Sciences*

**Monday 8 October 2012, 09:00-12:00**

### Learning objectives

At the conclusion of this session, participants will be able to:

1. Describe the paradigm shift in nanomedicine.
2. Explain the importance of breakthrough technology in Drug Delivery Systems (DDS) for nanomedicine.
3. Recognise the impact of siRNA based nanomedicine as a next generation nanotherapy.
4. Describe a new therapeutical potential based on a pDNA based nanomedicine.
5. Summarise the potential market created by breakthrough technology in nanomedicine.

**Chairs:** Horst-Dieter Friedel (Bayer Pharma, Germany) and Hideyoshi Harashima (Hokkaido University, Japan)

### Programme

#### 1)Challenges for translation of nanomedicines

Rogério Gaspar (University of Lisbon, Portugal)

#### 2)Characterization of nanomedines drug products

Scott McNeil (NCL/NCI, USA)

#### 3)Breakthrough technologies in gene delivery for nanomedicines

Hideyoshi Harashima (Hokkaido University, Japan)

#### 4)Paradigm-shift in drug discovery and development with nanomedicines

Barbara Lueckel (Roche, Switzerland)

### Programme

#### 1)Challenges in developing natural products to diagnose, treat or prevent disease conditions

Introduction for trends in use of herbal medicines. TBA

#### 2)Phytopharmaceuticals: Regulations, quality control and international Initiatives

Agricultural issues on/beyond regulatory requirements, methods for retaining confidence in test material quality. TBA

#### 3)Translating research into practice: Problems in trial design;

choosing the correct design to show the product is safe and effective measures for production of quality and safe phytomedicines involving newly developed scientific methods for evidence-based approaches. TBA

#### 4)Harmonization of scientific and educational requirements to ensure Quality, Safety, Efficacy and proper utilization of natural products

What is the role of pharmacists and what do they need to know? Interactions between herbal medicines and conventional drugs. Communication of herbal safety concerns.

Michiho Ito (FIP SIG on Natural Products, Japan)

## SESSION 2I - MEDICINES OF THE FUTURE: DEVELOPING COMPLEX THERAPEUTICS FROM NATURAL SOURCES IN THE 21ST CENTURY

*Organised by the FIP Board of Pharmaceutical Sciences*

**Monday 8 October 2012, 14:00-17:00**

This session will showcase major educational, research and implementation issues. It will provide information on current International initiatives and collaborations between health care practitioners, manufacturers, researchers and regulators.

### Learning objectives

At the conclusion of this session, participants should be able to:

1. Identify educational needs and scientific requirements to introduce complex therapeutics into pharmacy research and practice.
2. Identify research issues relevant to the evaluation of the effectiveness and safety of complex therapeutics and provide information about challenge associated with the development of drugs derived from traditional medicines.
3. Explain the complexities associated with identification, selection and development of phytomedicines.
4. Explain the significance of scientific research on product quality, product standardization, pharmacological studies and clinical evaluation of new products derived from botanical sources.
5. Highlight the role of pharmacists in providing appropriate information on safety and efficacy of herbal products/therapeutics to consumers.

**Chairs:** Michiho Ito (FIP SIG on Natural Products, Japan) and Joy van Oudtshoorn (FIP SIG on Natural Products, South Africa)

# 3. Safe Medicines, Safe Patients

## How Safe is Safe?



### TOPIC COORDINATORS: FRANS VAN DE VAART (THE NETHERLANDS) AND ROBERT DECHRISTOFORO (USA)

No other profession can reduce the risk of medicines use more than pharmacists – Are we doing our part? Ensuring safe medicines use should be an inherent part of the pharmacy profession, yet zero risk is impossible to achieve. These sessions will discuss the roles pharmacists need to take in working towards the highest possible level of safety in medicines use, from diagnostics to dispensing.

### SESSION 3A - REPORTING OF ADVERSE EVENTS AND ERRORS

*Organised by the FIP Centennial Programme Committee*

**Friday 5 October 2012, 09:00-12:00**

From ancient history until far in the 20th century, cornerstones in medical treatment were “primum non nocere” (firstly, do no harm) and “in dubio abstine” (in case of doubt, do not intervene). Current science and technology justify a less conservative approach, based on careful definition and assessment of benefits and risks. Adverse events and negative outcomes due to suboptimal treatment or errors have become more and more recognizable, not only for healthcare professionals but also for the public. Healthcare professionals including pharmacists are expected to take responsibility and give account not only for their intervention (or the lack of it) but also for the outcome, positive as well as negative.

#### Learning objectives

At the conclusion of the session, participants will be able to:

1. Explain the importance of pharmacovigilance to enhance safe medication.
2. Describe the role of pharmacists and other healthcare professionals as well as of patients in detection and reporting of adverse drug events.
3. Give some examples of the results of (inter)national data collection risk minimization.
4. Summarize definition and classification of errors.
5. Explain the benefits of blame free error reporting, and national alert systems.

**Chairs:** Frans van de Vaart (KNMP, The Netherlands) and Kees van Grootheest (Netherlands Pharmacovigilance Center, The Netherlands)

#### Programme

##### 1) Encouraging pharmacy involvement in pharmacovigilance, an international perspective

Michael Cohen (Institute for Safe Medication Practices, USA)

##### 2) Optimising resources for international safety data collection and analysis

Thorough analysis of large amounts of collected data on suspected negative outcomes of medication use can detect side effects that only occur in low frequency.

Marie Lindquist (WHO Collaborating Centre for International Drug Monitoring, Sweden)

##### 3) Classification and reporting of error

Diagnostic error, prescription errors, dispensing errors and administration errors: How do you handle it?

Should you report it? Learning from most common medication errors... and what are the sources of these most common errors?

Suzette Woodward (National Patient Safety Agency, United Kingdom)

##### 4) Centralized registration of medication errors

How to let all healthcare professionals benefit from errors that have a high probability to reoccur and have high clinical impact? Results from a national medication error reporting system.

Ka-Chun Cheung (KNMP, The Netherlands)

### SESSION 3B – RISK BENEFITS MANAGEMENT IN PRACTICE

*Organised by the FIP Centennial Programme Committee*

**Friday 5 October 2012, 14:00-17:00**

Adverse drug events should as much as possible be prevented by timely recognition of potential risks. Although final decisions will always be up to the healthcare professional, computer aided medication surveillance is important as supporting tool. Classical systems are based on “one size fits all” algorithms. The use of individual clinical data in such systems is currently explored to increase effectiveness and efficiency. The availability of all relevant patient data registered and stored in ambulatory and institutional settings is an important precondition.

#### Learning objectives

At the conclusion of the session, participants will be able to:

1. Explain general strategies to recognize potential risks during medication therapy.
2. Discuss the benefits and limitations of current computer aided medication surveillance.
3. Outline the opportunities to improve such systems by the use of individual clinical data.
4. Summarize the practical implications of developing country wide exchange of patient data or access to patient records.

**Chairs:** Robert DeChristoforo (FIP CPC, USA) and Rian Lelie-van der Zande (KNMP, The Netherlands)

#### Programme

##### 1) Definition, classification and detection of risks related to medication

The alertness of healthcare professionals for the occurrence of negative outcomes of drug therapy is particularly relevant in the treatment of high risk patients, e.g. elderly patients using multiple drugs. Also drugs with a small therapeutic window require special attention, as well as situations that are prone to potential errors, e.g. when patients are admitted to or discharged from hospital.

Ragnar Lofsted (Kings College, United Kingdom)

##### 2) Computer-aided medication surveillance

The real-time detection of risks from drug therapy can be very complex, especially when patients are treated by more than one doctor and use multiple medications. Is computer aided medication surveillance necessary to identify all potential dangers? Often the number of computer alerts are very high - how do we deal with alert fatigue?

# 3. Safe Medicines, Safe Patients

## How Safe is Safe?

Daniel Malone (University of Arizona, USA)

### 3) The use of individual clinical data in medication surveillance

Current computer aided medication surveillance is “one size fits all”. What if individual patient characteristics and clinical data are taken into consideration: Does that improve patient safety? Peter de Smet (WINAP, The Netherlands)

### 4) Availability of relevant patient data in all areas of the healthcare chain

Many adverse drug events could have been prevented if all health care professionals had access to all relevant patient data, independent from where they are stored. Which elements in patient records are essential for safe medication? Is it possible to organize the exchange of data on a national level? Does that indeed improve patient safety? Isabelle Adenot (Conseil National de l'Ordre des Pharmaciens, France)

### SESSION 3C - PHARMACISTS – CREATING A FUTURE OF BETTER PHARMACOVIGILANCE

*Organised by the FIP Pharmacy Information Section*

**Sunday 7 October 2012, 09:00-12:00**

In recent years there has been much focus on the safety of drugs. It all begun with the withdrawal of rofecoxib and continued with the rosiglitazone controversy and most recently the possible association between the pandemic influenza vaccines (Pandemrix) and narcolepsy. When looking back at the identified risks of drugs during the last few years, one might have the feeling that drugs are more unsafe, because we identify more harm with drugs than before. The above might be true, but it can also be that pharmacovigilance, which according to the WHO is ‘The science and activities relating to the detection, assessment, understanding and prevention of adverse effects or any other drug-related problem’ has become better at doing its job, namely detecting possible risks of drugs.

#### Learning objectives

At the conclusion of this session, participants will be able to:

1. Explain the role that the pharmacist can play in pharmacovigilance.
2. Discuss and describe how pharmacists' involvement in pharmacovigilance can be strengthened.
3. Explain the role of patients in the reporting of adverse drug effects.

**Chairs:** Kees van Grootheest (Netherlands Pharmacovigilance Centre, The Netherlands) and Alexander Doodoo (WHO Collaborating Centre for Advocacy and Training in Pharmacovigilance, Ghana)

#### Programme

**1) The role of community pharmacists in pharmacovigilance**  
Kees van Grootheest (University of Groningen, The Netherlands)

**2) The role of the pharmacist in pharmacovigilance in resource limited settings**  
Shanthi Pal (Quality Assurance and Safety of Medicine, WHO)

**3) Lareb Intensive Monitoring, pharmacy based intensive monitoring**

Linda Härmark (Netherlands Pharmacovigilance Centre Lareb, The Netherlands)

**4) Encouraging pharmacy involvement in pharmacovigilance, an international perspective** Sten Olsson (WHO Collaborating Centre for International Drug Monitoring, Sweden)

### SESSION 3D - PHARMACEUTICALS AND WATER

*Organised by the FIP Industrial Pharmacy Section*

**Monday 8 October 2012, 14:00 – 17:00**

Water is one of the world's scarcest critical natural resources and only about one percent of the world's water is freshwater available for use. At a number of FIP Congresses, most recently in Hyderabad, Pharmaceuticals in the Environment has been discussed including several reports on active substances detected in high concentrations in freshwater. There is a broad consensus that we must strive to achieve sustainable water management globally in pharmaceutical production, of course including effective waste water handling. We should not forget that the majority of water used in pharmaceutical production is for heating and cooling in manufacturing processes and for the production of pure water and sustainable water management should therefore take all activities that include water into consideration. This session will take a broad perspective on pharmaceuticals and water, and will focus on positive developments and initiatives.

**Chair:** Ulf Janzon (FIP IPS, Sweden)

#### Programme

##### 1) Water, the environment and economics

A session about the criticality of water to provide food and energy to the world's 7 billion people, as well as sanitation and health. How can we guide towards a better environment? TBA

##### 2) UN initiatives on water including the CEO Water Mandate

To emphasize the importance of water and the role the United Nations can play, and plays, at the global level. TBA

##### 3) Pharmaceuticals and water – The European agenda

To highlight initiatives and actions taken by the European Commission and member states at the European level to improve the management of water, both within the EU and globally. TBA

##### 4) What can we expect from water management in pharmaceutical production in the future?

To give examples on the progress made in water management in state of the art manufacturing facilities and an example on how to limits can be set on concentration of pharmaceuticals in the water outside the manufacturing facility. TBA

##### 5) Moving forward – Discussion on how to promote environmental improvements in pharmaceutical manufacturing

Today's debate is dominated by media news and positive initiatives and improvements are rarely mentioned. In other areas it is common to promote best practice, best innovation, best transferable technology, etc. Is this a useful tool also in this area? TBA

# 4. The Core of Pharmacy Now and in the Future

## Ensuring Responsible Medicines Use

### TOPIC COORDINATORS: ANDY GRAY (SOUTH AFRICA) AND LINDSAY MCCLURE (UNITED KINGDOM)

Ensuring the responsible use of medicines is at the core of pharmacy practice – no other healthcare professional is better equipped to advise medicines developers, prescribers, monitors and consumers on the best methods of medicines use. How will pharmacists play this role in the future, and, more importantly, what will motivate them to do so? These sessions will present key areas of attention for pharmacists in ensuring responsible medicines use.

### SESSION 4A – INCREASED LEGAL, SOCIAL AND PROFESSIONAL ACCOUNTABILITY – IS THE PROFESSION READY?

**Organised by the FIP Centennial Programme Committee**

**Friday 5 October 2012, 14:00 – 15:30**

The pharmacy professional landscape is changing. Pharmacists are increasingly taking on new roles and providing service such as prescribing and diagnostic testing that have traditionally been the realm of other healthcare professionals. This session will consider why changes in accountability go hand in hand with changes in scope of practice. It will also consider whether pharmacists are ready to accept legal and professional accountability for the care they provide to individual patients as well as social accountability for ensuring the health of the populations they serve.

#### Learning objectives

At the conclusion of this session, the participants should be able to:

1. Understand what is meant by professional, legal and social accountability.
2. Discuss why changes in scope of practice are linked to changes in accountability.
3. Discuss possible methods of preparing the profession for increased accountability.

**Chairs:** TBA

#### Programme

##### 1) What is accountability and why does it matter?

TBA

##### 2) Is the profession ready for increased accountability?

William Zellmer (American Society of Health-System Pharmacists, USA)

##### 3) Panel discussion

### SESSION 4B - ACCESS TO APPROPRIATE PAIN RELIEF - A GLOBAL CHALLENGE

**Organised by the FIP Centennial Programme Committee**

**Sunday 7 October 2012, 09:00-12:00**

The management of pain often includes the use of medicines. Problems with adequate management of pain are well documented. Pharmacists have an opportunity to help to resolve these problems. There is a need to identify what national pharmacy organisations need to do in their own countries to advance access to appropriate pain relief. There is also a need to improve access to pain relief for children, and to address the challenges of designing policies in this data-scarce environment.

#### Learning objectives

At the conclusion of the session, participants will be able to:

1. Describe the gaps that exist in managing pain and the opportunities for improvement.
2. List best practices in pain management.
3. Summarize how pharmacists can improve pain management.
4. Explain the unique problems of pain management in children.

**Chairs:** Andy Gray (South Africa) and Régis Vaillancourt (Canada)

#### Programme

##### 1) Global differences in access to controlled medicines, including opioids

The WHO provides technical expertise to the United Nations on the subject of drugs of abuse under the United Nations Single Convention on Narcotic Drugs (1961) and the United Nations Convention on Psychotropic Substances (1971). The Access to Controlled Medicines programme has identified the wide differences in access to such medicines. The reasons vary from legal restrictions to prescriber behaviour, but many are amendable to intervention from pharmacists involved in regulatory work, guideline development, education and clinical practice. Willem Scholten (WHO, Switzerland)

##### 2) Managing persistent pain in children - Developing global guidelines

The WHO guidelines are expected to be issued in early 2012. John Collins (University of Sydney, Australia)

##### 3) Appropriate pain medicines for children – New considerations

In addition to considering the evidence base for choosing appropriate pain medicines in children, the reasons for removing codeine from the list of appropriate pain medicines for children will be summarized.

Stuart MacLeod (University of British Columbia, Canada)

##### 4) Panel discussion

A reactor panel drawn from the 6 WHO regions will reflect on (1) legal barriers to access in their regions; (2) availability of appropriate pain medicines for children and guidelines for their use; and (3) the role of pharmacists in ensuring appropriate access and advice. The panel will seek to identify a list of actions for national pharmacy organisations, in order to advance access to appropriate pain relief.

# 4. The Core of Pharmacy Now and in the Future Ensuring Responsible Medicines Use

## **SESSION 4C - MEDICINES INFORMATION FOR CONSUMERS - PARTNERING WITH PATIENTS TO MAXIMISE BENEFITS**

**Organised by the FIP Pharmacy Information Section and the  
FIP Industrial Pharmacy Section**

**Friday 5 October 2012, 14:00-17:00**

### **Learning objectives**

At the end of the session, participants should be able to:

1. Describe good practice in partnering with patients to produce high quality medicines information.
2. Describe the research evidence on developing good medicines information provision with patient input.
3. Identify the ways in which industry harnesses patient expertise in producing medicines information.
4. Describe the work of the European Medicines Agency Patients' and Consumers Organisations' Working Party.
5. Develop effective practice in combining spoken and written information for patients in the pharmacy setting.

**Chairs:** Theo Raynor (FIP PIS, United Kingdom) and Claudia Rijcken (FIP IPS, The Netherlands)

### **Programme**

#### **1) Which information is key for patients and how should it get to them?**

Joanna Groves (IAPO - International Association of Patient Organisations, United Kingdom)

#### **2) "People who suffer should help write leaflets" - What the research evidence tells us**

Theo Raynor (University of Leeds and Luto Research, United Kingdom)

#### **3) Making high quality information available to the patient - The industry perspective**

TBA

#### **4) Experience from the European Medicines Agency's "Patients' and Consumers' Organisations Working Party"**

Isabelle Moulon (Medical Information and Patients' and Consumer Organisations' Working Party, United Kingdom)

#### **5) Helping the message across.....The daily adventures of a community pharmacist** TBA

## **SESSION 4D - THE FUTURE OF GOOD PHARMACY PRACTICE IN COMMUNITY PHARMACY - BE PART OF THE CREATION**

**Organised by the FIP Community Pharmacy Section**

**Saturday 6 October 2012, 09:00-12:00 and 14:00-17:00**

### **Learning objectives**

At the conclusion of this session, the participants should be able to:

1. Reflect on what has been achieved since the first Statement on Good Pharmacy Practice has been adopted by FIP.
2. Develop an understanding of the role of National and International Pharmacy Organisations in the implementation of GPP at a local, national and/or pan-regional level.
3. Analyse and reflect upon approaches that facilitate the adoption of the new Statement on Good Pharmacy Practice.
4. Debate ways in which the Community Pharmacy Section can be involved and promote the dissemination of Good Pharmacy Practice guidelines.

**Chairs:** Eeva Terasalmi (FIP CPS, Finland) and Samira Goussous (FIP CPS, Jordan)

### **Programme**

#### **1) Opening and welcome Eeva Terasalmi** (FIP CPS, Finland)

#### **2) Experiences from the first GPP-program - From program to implementation**

Dick Tromp (The Netherlands)

#### **3) Country examples: Thailand - Uruguay**

TBA

#### **4) New GPP-program - How did we get there and what should happen now?**

Eeva Terasalmi (FIP CPS, Finland)

#### **5) Panel discussion**

#### **Lunch break**

#### **6) Country examples: Macedonia - Jordan**

TBA

#### **7) Roundtables: How to make GPP reality in my country?**

Proposed discussion topics:

- How does Pharmacy Practice differ from Good Pharmacy Practice?
  - Is regulation supporting Good Pharmacy Practice?
  - How to create quality and measure it - Quality indicators.
- The discussions will be facilitated by the speakers giving a short introduction to the discussion topic.

#### **8) Conclusions and wrap-up**

# 4. The Core of Pharmacy Now and in the Future

## Ensuring Responsible Medicines Use

### SESSION 4E - SOCIAL NETWORKS – FRIEND OR FOE IN MEDICINES INFORMATION?

**Organised by the FIP Social and Administrative Pharmacy Section and the FIP Pharmacy Information Section**

**Saturday 6 October 2012, 09:00-12:00**

Over the past decade, there has been a rapid uptake of social networking through the use of a variety of information technologies which are now for many part of their daily life. Web 2.0 und Health 2.0 are frequently used terms to describe the new dimension of communication.

The reach of social networking platforms via the internet and other technologies goes beyond traditional geographical boundaries. This alone has significant implications for healthcare and health care delivery, as individuals (patients, carers and healthcare professionals) are able to share and receive information in real time. The implications on whether this helps inform or not will be addressed in this session.

#### **Learning objectives**

At the conclusion of this session, participants will be able to:

1. Summarize the nature and organizational structures of social networks.
2. Evaluate data and information presented and gathered via social networks.
3. Formulate research questions which can be elaborated using this kind of data.
4. Determine the current level of interest from patients using social networks.
5. Draw conclusions for pharmacy practice in the age of an informed consumer.

**Chairs:** Timothy Chen (University of Sydney, Australia) and Rian Lelie-van der Zande (KNMP, The Netherlands)

#### **Programme**

##### **1) The role of social media for healthcare**

Hans Ossebaard (National Institute for Public Health and the Environment - RIVM, The Netherlands)

##### **2) Social networks as source of information about medicines**

Marion Schaefer (Charité – Universitätsmedizin Berlin, Germany)

##### **3) Social networking in pharmacy practice – Evidence from a systematic review**

Khanal Saval (Sunsari Technical College, Nepal)

##### **4) Social networking: The role of pharmacists and the expectations of patients**

Cody Midlam (Duquesne University, USA)

##### **5) Social media and the pharmacist – Good practices**

Rian Lelie-van der Zande (KNMP, The Netherlands)

### SESSION 4F - STEERING BETTER FUTURE DECISIONS – COMPARATIVE EFFECTIVENESS RESEARCH

**Organised by the FIP Social and Administrative Pharmacy Section**

**Saturday 6 October 2012, 14:00-17:00**

Several new technologies are now available to evaluate alternative treatments for given disease states. It is possible to compare surgery to drugs to watchful waiting. The speakers in this session will describe several of the most promising technologies and explain their positive advantages and shortcomings.

#### **Learning objectives**

At the conclusion of this session, participants will be able to:

1. Summarize the research methods and challenges that comparative effectiveness research has to face, in order to provide evidence on the effectiveness, benefits, and harms of different, alternative treatment options for pharmacists and other stakeholders.
2. Read more easily articles about Health Technology Assessment (HTA) which is to support the process of decisionmaking in healthcare at a policy level by providing reliable information.
3. Explain the difference between efficacy, effectiveness and efficiency and the “New Gold Standard”.
4. Summarize the process of conducting economic evaluations.
5. Explain how to build and use the drug formulary system as an ongoing process whereby a healthcare organisation through its physicians, pharmacists and other care professionals establishes policies on the use of medicines products and therapies to best serve the health interests of a given patient population.

**Chairs:** Marina Altagracia-Martínez (UAM-X, Mexico), Albert Wertheimer (Temple University USA) and Dechun Jiang (China)

#### **Programme**

##### **1) Comparative Effectiveness Research (CER)**

Bert Leufkens (University of Utrecht, The Netherlands)

##### **2) Health Technology Assessment**

Jeff Poston (Canadian Pharmacists' Association, Canada)

##### **3) Efficiency: The New Gold Standard**

Albert Wertheimer (Temple University, USA)

##### **4) The Ideal Formulary and the case of Mexico**

Jaime Kravzov-Jinich (UAM-X, Mexico)

# 4. The Core of Pharmacy Now and in the Future Ensuring Responsible Medicines Use

## SESSION 4G- CLINICAL GUIDELINES – RAISING THE BAR OR CREATING ROADBLOCKS?

**Organised by the FIP Hospital Pharmacy Section**

**Sunday 7 October 2012, 12:15-13:45**

### Learning objectives

At the conclusion of this session, participants will be able to:

1. Describe the role of the Basel statements and how they may be perceived in practice
2. Understand the principles behind why guidelines are needed
3. Recognise when a “one-size-fits-all” approach is inappropriate

**Chair:** Rebekah Moles (Australia)

### Programme

#### 1) The Importance of Guidelines on a Global Scale –

**The Basel Statements** Jonathan Penm (Australia)

#### 2) Difficulties encountered when guidelines are scarce

Lucy Yun-Ju Pan (China Taiwan)

#### 3) Guidelines stop you thinking

 David Maxwell (United Kingdom)

## SESSION 4H - IMPROVING RESPONSIBLE USE OF OTC MEDICINES FROM LABELLING TO COUNSELLING

**Organised by the FIP Pharmacy Information Section**

**Sunday 7 October 2012, 14:00-17:00**

### Learning objectives

At the end of this session participants will be able to:

1. Describe the standards to which OTC labelling should conform.
2. Identify the key points that contribute to successful and effective counselling of patients planning to use OTC medicines.
3. Discuss the challenges associated with labelling medicines for patients with special needs.
4. Discuss the media influence on patients' decisions and how pharmacists can use it to promote the correct and responsible use of OTC medicines.
5. Review the labelling and counselling options to promote safe use of OTC medicines by patients with special needs.

**Chairs:** Igor Linhares de Castro (FIP Industrial Pharmacy Section, Brazil) and Aldo Alvarez-Risco (FIP Pharmacy Information Section, Peru)

### Programme

#### 1) Information standards for OTC drugs labelling: Providing quality information for patients on self-medication treatment regimen

 Hubertus Cranz (World Self-Medication Industry, Belgium)

#### 2) Improving counselling capabilities: How to ensure the responsible use of non-prescription medicines

##### 2.1) Part 1: Improving counselling capabilities of community pharmacists – An international task force project

John Chave (Pharmaceutical Group of the European Union, Belgium)

##### 2.2) Part 2: Ensuring the responsible use of OTC medicines in developing countries: The influence of social media –

**Where does the pharmacist intervene and what are the capabilities involved?** José Juárez-Eyzaguirre (Peruvian Academy of Pharmacy, Peru)

#### 3) Labelling information for patients with special needs:

**Industrial solutions and counselling challenges for pharmacists to guarantee equal rights for patients who use non-prescription drugs** Igor Linhares de Castro (FIP Industrial Pharmacy Section, Brazil)

## SESSION 4I - THE DYNAMIC HEALTHCARE ENVIRONMENT – ITS IMPACT ON THE FUTURE

**Organised by the FIP Social and Administrative Pharmacy Section**

**Monday 8 October 2012, 09:00-12:00**

### Learning objectives

At the conclusion of this session, participants will be able to:

1. Explain the dynamic healthcare environment and its impact on professional practice and behaviour.
2. Summarize future developments like pharmacist prescribing, legislative changes and also how different employment models may impact on pharmacists' autonomy.
3. Explain the impact of changing attitudes and values on professional relationships patients/clients, healthcare workers and with pharmacists and employers.
4. Discuss the impact of these changes and their influence on ethical codes.

**Chairs:** Ann Lewis (University of London, United Kingdom) and Malcolm Broussard (Louisiana Board of Pharmacy, USA)

### Programme

#### 1) Pharmacy, science and the social scene

An overview of developments in science, technology, and trends in social policy and their impact on professional practice.

Ambrose McLoughlin (Pharmaceutical Society of Ireland)

#### 2) Is pharmacy becoming more risky?

An exploration of new roles e.g. prescribing, clinical intervention (specialisms), and the potential conflicts arising from professional autonomy vs. accountability in practice settings – sole practitioner, teams, corporate environments.

Paul Bennett (Boots UK Ltd., United Kingdom)

#### 3) Relationships - A new paradigm?

Changing attitudes and values - with patients/clients - paternalism or facilitation - with healthcare workers - turf wars or symbiosis and with pharmacists and employers - is autonomy compromised?

Tommy Westerlund (University of Gothenburg, Sweden)

#### 4) Ethics on the move

Developing ethical issues in a changing world: More controversial issues and increasing need for professional judgment are the changes making practice more challenging.

Diane Ginsburg (University of Texas, USA)

#### 5) Panel discussion

# 4. The Core of Pharmacy Now and in the Future

## Ensuring Responsible Medicines Use

### **SESSION 4J - SWITCHING FROM PRESCRIPTION TO NON-PRESCRIPTION STATUS - CHALLENGES AND OPPORTUNITIES**

**Organised by the FIP Community Pharmacy Section**

**Monday 8 October 2012, 12:15 – 13:45**

‘Switching’ medicines from prescription only to non prescription (or ‘Over-the-Counter, OTC) status has been a recent focus of interest for many governments interested in saving costs and encouraging people to undertake better ‘self-care’. Newly switched medicines are used most effectively if all stakeholders play their part – patients and consumers, pharmacies and pharmacists, regulators and the pharmaceutical industry. But along with the opportunities come challenges.

#### **Learning objectives**

At the conclusion of this session, the participants should be able to:

1. List the reasons for medicines switching.
2. List the products involved.
3. Describe the benefits and risks.
4. Explain how regulations should be organised to achieve the best results.

**Chair:** Eeva Terasalmi (FIP CPS, Finland)

#### **Programme**

##### **1) Opening remarks by the chair**

##### **2) Global trends in medicines switching**

David Webber (World Self-Medication Industry, France)

##### **3) Enlarging the OTC-market - Challenges and opportunities for community pharmacists** Harri Ovaskainen (Finland)

##### **4) The role of regulation – What does European centralized switching mean and what are the experiences?**

Jurate Svarcaite (Pharmaceutical Group of the European Union, Belgium)

##### **5) Discussion and wrap up by the chair**



# 5. The Future Medicines Supply Chain Strengthening the Weakest Link



## **TOPIC COORDINATORS: LINDSAY MCCLURE (UNITED KINGDOM) AND LINDA HAKES (GERMANY)**

The provision of high quality medicines to patients depends on a supply chain that stretches from the manufacturer (including the suppliers of all the ingredients) through the distribution system to the pharmacy and ultimately the patient. Due to the globalisation of the pharmaceutical market, this can mean that a medicine travels many thousands of miles before reaching the patient. In the sessions associated with this topic in the Congress we will consider and discuss many of the factors that can influence the quality of the medicines that pass along the supply chain – today and in the future.

One of the factors that is of increasing concern within the pharmaceutical industry is the increasing burden of legislation. Whilst everyone agrees that legislation plays an important role in securing the quality of medicines, there are some who feel that the focus of this legislation is increasingly misplaced and is not improving quality or security in spite of increasing costs and complexity. In the debate “The regulation of pharmaceuticals has significantly increased costs without addressing the key weaknesses in the supply chain”, two leaders from the pharmaceutical industry (Georges France, Pfizer, and Thomas Zimmer, Boehringer Ingelheim) will debate the value, purpose and focus of the legislation controlling the pharmaceutical industry. The debate will be chaired by Trevor Jones who has had a long and distinguished career within the pharmaceutical industry and at the ABPI.

In a second session, we will consider the global factors that affect the integrity of the supply chain and the equitable distribution of medicines to all who need them. The supply chain for both generic and branded medicines is becoming increasingly global with the supply of medicines to individual countries being increasingly impacted by the supply arrangements in other parts of the world or by decisions taken at a global level by multinational companies. Whilst the globalisation of the supply chain creates benefits such as economies of scale and efficiencies, it is also creating a range of new challenges that need to be addressed. For example, where price differentials exist between countries, without controls, there is scope for the international trade in medicines, often resulting in supply shortages. Medicines aren't ordinary articles of commerce so is this trade in the interest of society? Should there be a fixed global price for in-patent medicines or are there other solutions to this problem? Differential pricing can also mean differential profits for pharmaceutical companies, so in the future could we see more examples of priority being given to one market over another for financial reasons and is there anything that countries can do to safeguard supply to their population?

A global supply chain can also make it more challenging for pharmacists to confirm the authenticity of products; we will take a timely look at measures such as fingerprinting of products and product tracking that could offer long term solutions. Finally, a key challenge for pharmacists has always been ensuring the integrity of distribution, particularly of cold chain products; are longer supply chains compounding this problem and what advances could offer support?

## **SESSION 5A - ARE THERE GLOBAL SOLUTIONS TO ENSURE THE INTEGRITY OF THE GLOBAL SUPPLY CHAIN?**

**Organised by the FIP Centennial Programme Committee  
Saturday 6 October 2012, 09:00-12:00**

The supply chain for both generic and branded medicines is becoming increasingly global with the supply of medicines to individual countries being increasingly affected by the supply arrangements in other parts of the world or by decisions taken at a global level by multinational companies. Whilst the globalisation of the supply chain creates benefits such as economies of scale and efficiencies, it is also creating a range of new challenges that need to be addressed. For example, where price differentials exist between countries, without controls, there is scope for the international trade in medicines, often resulting in supply shortages. Medicines are not ordinary articles of commerce so is this trade in the interests of society? Should there be a fixed global price for in-patent medicines or are there other solutions to this problem? Differential pricing can also mean differential profits for pharmaceutical companies, so in the future could we see more examples of priority being given to one market over another for financial reasons and is there anything that countries can do at the national level to safeguard supply to their population? A global supply chain can also make it more challenging for pharmacists to confirm the authenticity of products; we will take a timely look at measures such as fingerprinting of products and product tracking that could offer long term solutions. Finally, a key challenge for pharmacists has always been ensuring the integrity of distribution, particularly of cold chain products; are longer supply chains compounding this problem and what advances could offer support?

### **Learning objectives**

At the conclusion of the session, participants will be able to:

1. Outline the supply problems that can be created through the differential pricing of medicines in different countries and discuss possible solutions that could be implemented to protect supply.
2. Describe the risks involved in ensuring the equitable world wide distribution of products by global suppliers.
3. Discuss possible methods of confirming the authenticity of products to combat counterfeits in a global supply chain.
4. Describe the challenge of ensuring the integrity of products from manufacturer to pharmacy in a worldwide supply chain with a particular focus on cold chain products in developing countries.

**Chairs:** Linda Hakes (FIP CPC, Germany) and  
Lindsay McClure (FIP CPC, United Kingdom)

# 5. The Future Medicines Supply Chain

## Strengthening the Weakest Link

### Programme

#### 1) Pricing, profits and patients: The impact of pricing on supply chain management

Per Troein (IMS Health, United Kingdom)

#### 2) In a global market, how can we ensure equitable worldwide distribution of medicines?

Lembit Rägo (WHO, Switzerland)

#### 3) How can the authenticity of supply be confirmed, regardless of the source country or supplier?

Ziad Nassour (Ordre des Pharmaciens du Liban, Lebanon)

#### 4) In a worldwide supply chain, how can we ensure the quality of distribution?

Ornella Barra (Alliance Boots, United Kingdom)

### SESSION 5B - THE REGULATION OF PHARMACEUTICALS HAS SIGNIFICANTLY INCREASED COSTS WITHOUT ADDRESSING THE KEY WEAKNESSES IN THE SUPPLY CHAIN

*Organised by the FIP Centennial Programme Committee*

**Saturday 6 October 2012, 12:15-13:45**

The medicines supply chain is becoming increasing global and governments around the world are debating new initiatives linked to the regulation of the development, manufacture and distribution of medicines. This debate will give timely consideration to whether the cost-benefit balance of existing regulation is right. Are medicines over-regulated in some areas while leaving weak links in the supply chain? Should regulations be reviewed in order to provide a more uniform global approach with a focus on areas of weakness?

#### Learning objectives

At the conclusion of the session, participants will be able to:

1. Describe some examples of increased regulation around the world that may not be proportionate to the cost of implementation.
2. Summarise the challenge of regulating a global supply chain.
3. Outline some initiatives that are being undertaken or could be undertaken to address the challenge of the global supply chain and ensure that regulation is targeted where there is most risk.

**Chair:** Trevor Jones (Association of British Pharmaceutical Industry, United Kingdom)

### Programme

#### 1) The case for too much regulation

Georges France (Pfizer, United Kingdom)

#### 2) The case for gaps in regulation

Thomas Zimmer (Boehringer Ingelheim, Germany)

#### 3) Panel discussion

### SESSION 5C - EMERGENCY - NOT ENOUGH MEDICINES: BEST CASE SOLUTIONS IN DEALING WITH DRUG SHORTAGES

*Organised by the FIP Hospital Pharmacy Section, the FIP Community Pharmacy Section and the FIP Industrial Pharmacy Section*

**Friday 5 October 2012, 09:00-12:00**

Supply chain problems, clinical consequence, and policy issues  
Drug shortages are becoming a serious threat to health care by limiting the possibilities to provide optimal pharmacotherapeutic treatments.

This session will discuss the various aspects involved in drug shortages. First an ethical framework will be presented, followed by real life problems and (possible) solutions (from hospital pharmacy in general, specifically on the impact of drug shortages in oncology, and from a community pharmacy perspective).

Root causes and possible ways to counteract these will be presented. The session will end with the role of drug information in dealing with shortages.

#### Learning objectives

At the conclusion of this session, participants will be able to:

1. Summarize the ethical aspects surrounding drug shortages.
2. Describe the scale of drug shortages.
3. List national professional and political aspects of drug shortages.
4. Explain the impact of drug shortages on QOL and survival in cancer patients.
5. Recognise the root causes of drug shortages worldwide.
6. Explain how to communicate on drug shortages to patients and fellow healthcare providers.
7. Describe how to provide professional care despite the short age of drugs.

**Chairs:** TBA

### Programme

#### 1) Ethical challenges in the supply of medicines around the world

Betty Chaar (University of Sydney, Australia)

#### 2) Tackling drug shortages in hospitals

TBA

#### 3) Drug shortages in oncology: Are we delivering substandard care?

TBA

#### 4) The impact of drug shortages in community pharmacy

TBA

### SESSION 5D - THE FUTURE EMERGENCY DRUG SUPPLY CHAIN

*Organised by the FIP Military and Emergency Pharmacy Section*

**Sunday 7 October 2012, 09:00-12:00**

#### Learning objectives

At the conclusion of this session, participants will be able to:

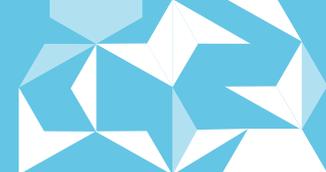
1. Describe the role of emergency kits in disaster response operations.
2. Explain how the packaging affects pharmaceuticals during transportation.
3. Explain how pharmacists need to be specifically educated to be pharmacologists.

**Chairs:** Jane Dawson (FIP MEPS, New Zealand) and Richard Wosolsobe (FIP MEPS, Austria)

### Programme

#### 1) Pharmacists and emergency kits - A strong partnership for humanitarian assistance

The role of emergency kits in disaster response operations; why emergency kits are a good idea; criteria for evaluating an emergency kit; consideration of the contents of an emergency kit; template for creating a contents / packing list; various emergency kits used throughout the world; roll-out of a source-book of emergency kits  
Alexandr Kosyak (Public Health Service, USA)



## **2) Latest advances in Good Military Transportation Practice – A scientific approach - How to improve the quality of pharmaceuticals in missions**

Stages of development and validation of transportation packaging systems, results of on-site packaging experiments  
Thomas Zimmermann (Central Institute of the Bundeswehr Medical Service Munich, Germany)

## **3) Military Pharmaceutical Education of CPLA: Challenge and change**

Explaining the move from traditional pharmacy education focused on pharmaceutical science to more emphasis on military operation medical supply, non-conflict mission medical support, especially the skill training of pharmaceutical supply and resupply requirements. In the future, the Chinese military pharmaceutical education will be devoted to non-traditional education programs which will promote the rational drug use in military medical basic units.  
Chai Yi-Feng (Second Military Medical University of CPLA, China)

## **4) TBA**

Selma Bernardi (Red Cross, Switzerland)

## **SESSION 5E - CURRENT DEVELOPMENTS IN QUALITY ASSURANCE OF THE SUPPLY CHAIN**

*Organised by the FIP Laboratories and Medicines Control  
Section and the FIP Industrial Pharmacy Section*

**Sunday 7 October 2012, 14:00-17:00**

**Chairs:** Frans van de Vaart (FIP LMCS, The Netherlands) and  
Tom Sam (FIP IPS, The Netherlands)

### **Programme**

#### **1) Global outsourcing - Current challenges and future directions - An inspector's view**

Complexities of the supply chains in the 21st century.  
TBA

#### **2) Improving the medical supply chain in developing countries**

Solutions to relieve pressure on healthcare budgets in developing countries, while lowering the cost of medicines and improving key elements of the drug supply chain.  
TBA

#### **3) Applying technology to secure the supply chain to patients**

Learning technologies for securing the supply chain.  
TBA

#### **4) The smarter supply chain of the future**

Life Science companies are selling therapeutic offerings that target increasingly smaller patient segments. The supply chain of the future therefore needs to become instrumented, interconnected and intelligent.

TBA

#### **5) Panel discussion**

# 6. The Future of Healthcare Economy

## Will We Shape It or Will It Shape Us?

### TOPIC COORDINATORS: EMA PAULINO (FIP CPC, PORTUGAL) AND PHILIP SCHNEIDER (FIP CPC, USA)

The issue of how, why and for what pharmacists are paid, has been a long standing issue. The advent of pharmaceutical care some 20 years ago shifted the focus from product to patient, yet most pharmacists continue to be reimbursed – and, therefore valued – based on dispensing numbers.

This predicament will only serve to increase in the future - with increased numbers of medicines with increasing complexity pharmacists must devote more time to relaying knowledge, rather than products to patients. How will future healthcare business models support this?

### SESSION 6A - ECONOMICS OF HEALTHCARE: HOW WILL WE AFFORD HEALTH SERVICES?

**Organised by the FIP Centennial Programme Committee**  
**Saturday 6 October 2012, 14:00-17:00**

The cost of healthcare continues to increase with new technologies and discoveries that have the potential to improve health. With these advances, concerns about the cost of healthcare and affordability have been raised. The world economic downturn has focused even more attention on these concerns. How much should we pay for healthcare? How much CAN we pay for healthcare? How do we measure the overall cost of healthcare – or the lack of healthcare? These are all critical questions as governments, healthcare providers and consumers debate healthcare policy and make decisions about healthcare services. This symposium will explore these questions and offer the opportunity to discuss possible answers.

#### Learning objectives

At the conclusion of the session, participants will be able to:

1. Compare and contrast arguments that costs and quality vary among different countries in the world.
2. Describe what should be considered in determining the overall cost of healthcare.
3. Describe where resources are wasted in healthcare.
4. List strategies for improving quality and reducing costs by improving the use of medicines.

**Chairs:** Philip Schneider (FIP CPC, USA) and Jan Smits (KNMP, The Netherlands)

#### Programme

##### 1) Comparative effectiveness: Why do cost and quality of health systems vary so much in different countries?

Mukesh Chawla (World Bank, USA)

##### 2) The cost of healthcare: What are we paying for?

Lyle Bootman (University of Arizona, USA)

##### 3) Waste in healthcare: What should we NOT be paying for?

Rainer Hess (Federal Joint Committee on Health Insurance, Germany)

##### 4) Strategies for improving quality at lower costs: Can pharmacists contribute as well as survive?

Panel discussion

Moderator: Philip Schneider (FIP CPC/University of Arizona, USA)

Speakers from the first three presentations with topics and

questions prepared in advance for them to answer and with questions from the audience. Some example topics and questions include: The cost of pharmaceuticals within a healthcare budget. Is it really a cost? Can it be considered an investment? What are the overall healthcare gains we can achieve with pharmaceuticals and with the pharmacists' cognitive services? Can pharmacists really do something about the costs for medication errors/drug related problems Bootman et al. described in their study?

### SESSION 6B - ECONOMICS OF PHARMACY: HOW WILL PHARMACISTS BE PAID?

**Organised by the FIP Centennial Programme Committee**  
**Sunday 7 October 2012, 09:00-12:00**

Sub-optimal use of medicines and associated healthcare costs have paved the way for pharmacy professional services which have the potential to improve patient safety and maximize treatment outcomes. In addition, the industrialization of pharmaceutical manufacturing and the expansion of new dispensing technologies are challenging the added value of pharmacists in repackaging and distributing drugs. However, most remuneration models still rely predominantly on margins based on the dispensing activity, and few have successfully incorporated cognitive services. Will the traditional model of practice continue to be financially viable? Does pharmacy need a reordering of its business model conducive to guarantee its future? Which strategies should be in place for the development of remunerated professional services? And who will be willing to pay for them? This symposium will provide an overview of key issues in this debate and offer the opportunity to consider them in a broader context of interested stakeholders.

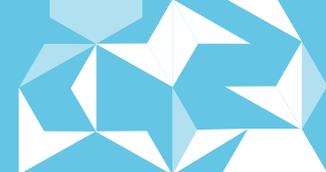
#### Learning objectives

At the conclusion of the session, participants will be able to:

1. Describe the impact of economic liberalization on the traditional model of pharmacy.
2. Recognize the cyclic nature of business and professions.
3. Draw conclusions from other industries' examples on how to reorder the pharmacy business model to suit contemporary needs of patients and societies.
4. Outline strategies used by professional organizations when negotiating for new pharmacy cognitive services.
5. Compare and contrast alternate remuneration models for pharmacists.

**Chairs:** Ema Paulino (FIP CPC, Portugal) and Ruud Dessing (KNMP, The Netherlands)

# 6. The Future of Healthcare Economy Will We Shape It or Will It Shape Us?



## Programme

### 1) Economic liberalization and the impact on pharmacy: What is the future of traditional pharmacies?

John Chave (Pharmaceutical Group of the European Union, Belgium)

### 2) The cycle of business and professions: Should pharmacy re-invent their business model to survive?

Philip Schneider (CPC/University of Arizona, USA)

### 3) How to get appropriate remuneration for pharmacists' professional services?

Alison Roberts (Pharmacy Guild of Australia, Australia)

### 4) Alternate compensation models for pharmacists: What are the different ways to pay for pharmacy services and will pharmacists change their practice? Panel discussion

Moderator: Ema Paulino (FIP CPC, Portugal)

## SESSION 6C - PHARMACY LAW AND COMPETITION LAW: FEUDING LAWS OR WORKING IN PARTNERSHIP?

*Organised by the International Pharmaceutical Students' Federation (IPSF) and FIP*

**Friday 5 October 2012, 09:00-12:00**

The community pharmacy sector has a history of rather strict regulations concerning most areas of the profession ranging from education, registration, ownership, establishment, business form, operation rules, services and products, pricing and salary.

However, in recent years, several provisions in pharmacy law have been challenged at the national or international level based on competition regulations. The principles governing competition assume that deregulation will increase competition and thus succeed in cost containment without detriment to accessibility and even improve quality of services by the opening of new pharmacies. This competition model - however clean and economically precise it may be in theory - does not account for the actual challenging cases such as patient access to pharmacies in rural or economically unattractive areas nor the intangible cognitive and counseling skills of pharmacists opposed to the easy to measure dispensing rates used as a sloppy estimate of efficiency. The debate continues as studies supporting a model of deregulation have sought to provide evidence supporting liberalization. However, these claims have not provided an answer to the significant concern of equity and quality. How can pharmacy strike a balance between enhancing consumer welfare and high quality care? What are the current global trends in regulation? How can harmonization come into play? What is the rationalization underpinning the current regulation in the community pharmacy Sector?

This session will dive deeply into both sides of the debate and offer an international context from the viewpoint of both, law students and pharmacy students.

### Learning objectives

At the conclusion of the session, participants will be able to:

1. Compare and contrast the most up to date pharmacy regulations and rules across many countries.

2. Describe the advantages and disadvantages of varying degrees of regulation from both a market theory and public health perspective.

3. Draw conclusions from underlying trends that justify or oppose regulation.

4. Outline strategies for pharmacies to adapt to a modern and evolving competitive market.

**Chairs:** Marwa Beltagy (IPSF, Egypt), Oksana Pyzik (IPSF-ELSA joint project, Canada)

## Programme

TBA

## SESSION 6D - FORUM FOR INNOVATORS: INTEGRATING THE PROFESSIONAL AND BUSINESS DEMANDS OF A SUCCESSFUL PHARMACY

*Organised by the FIP Community Pharmacy Section*

**Monday 8 October 2012, 09:00-12:00 and 14:00-17:00**

The Forum for Innovators in Pharmacy Practice was developed with the purpose of creating a forum for sharing experience and exchanging information. The Community Pharmacy Section has a long tradition of organizing education for professional leaders in community pharmacy. The theme for the period 2010 -2012 is "Integrating professional services with the business of a pharmacy". Managing change to implement professional services as well as high quality core activities that meet social needs is extremely important. In addition more recent research has shown that the implementation and incorporation of services into the professional and business practice of the community pharmacy is optimized if the services are part of the strategic decision for the pharmacy business with financial planning, and staff management, and marketing, communication internally and externally to customers and other healthcare professions. It is critical to make the services professionally and financially viable and sustainable. The expertise and capacity of pharmacists in this area need further development thus professional organisations should develop their own capability to provide national programs. This three year program will address these issues. The first year of the program was delivered in Lisbon 2010 covering the ability of pharmacists to make strategic decision making and provide examples of community pharmacy business models emerging from these strategic decisions. The second year was delivered in Hyderabad 2011 and covered the financial and business planning required for implementing and integrating pharmaceutical services in a cost effective manner from a global community pharmacy perspective.

### Year 3 will cover

- Systems and models used to set individual pharmaceutical service fees.
- Evidence - Where is it and how can it be used for service development, marketing and advocacy?
- What is the role of National Pharmacy Associations in service provision and development?

# 6. The Future of Healthcare Economy Will We Shape It or Will It Shape Us?

## **Target audience**

Employees in member organisations and/or educators dealing with pharmacy practice development, implementation and costing of pharmacy based services. Member organisations will be invited to send employees to attend the meeting. This third year would be of additional interest to community pharmacy owners, managers of community pharmacies and persons involved in ensuring the service delivery is cost effective from an organizational and individual pharmacy perspective.

## **Learning objectives**

At the conclusion of this session, the participants should be able to:

1. Describe systems and models used to set individual pharmaceutical service fees.
2. Retrieve evidence that can be used for service development, marketing and advocacy.
3. Explain how evidence can be used for service development, marketing and advocacy.
4. Describe the role of National Pharmacy Associations in service provision and development.

**Chairs:** Charlie Benrimoj (School of Pharmacy, University of Technology, Australia) and Charlotte Rossing (Pharmakon, Denmark)

## **Programme**

TBA

# 7. Adherence

## Helping Patients Take Their Medicines Properly

**TOPIC COORDINATORS: MARTIN SCHULZ (FIP CPC, GERMANY)  
AND GEOFFREY TUCKER (FIP CPC, UNITED KINGDOM)**

The prescription of medicine is the most common intervention in healthcare. In this context, one important issue to be addressed is non-adherence: If you don't take the medicines they won't work! The World Health Organization (WHO) referred to non-adherence as "a worldwide problem of striking magnitude", and improving adherence to medication has become a priority for pharmacy practitioners, pharmaceutical scientists as well as the pharmaceutical industry and policy makers. Estimates indicate that only about 50 % of patients with chronic diseases take their medication as prescribed. Adherence is a prime factor in the outcome of medicines use and therefore essential in achieving positive patient outcomes. The cost of non-adherence to patients is a missed chance for treatment gain and a possible decline in patients' quality of life. Against this background a Cochrane review ("Interventions for enhancing medication adherence") concludes that improving medicines taking may have a greater impact on clinical outcomes than any other improvement in specific medical treatments.

Studies focusing on the factors that cause medication non-adherence have shown that it is a complex human behavior with multiple determinants. It is, therefore, not surprising that almost all interventions that improved adherence and treatment outcomes involve complex strategies. Although it is possible to develop programs to improve medication adherence, questions about the types of programs most likely to be effective in various settings remain unanswered.

Non-adherence should not be seen as the patient's problem. Both patients and healthcare providers share the responsibility for non-adherence. Pharmacists, as an integral part of the healthcare system, are well positioned to address non-adherence as part of their overall patient care activities. So far, pharmacists as well as other health professionals are often unaware of how patients take their medicines. But to address this issue the pharmacist has, as a first step, to detect medication non-adherence.

To be effective in detecting, monitoring, and promoting adherence and persistence to therapy, pharmacists need to have the appropriate skills and knowledge, and be supported by the healthcare system at a policy and practice level.

**The symposia related to Adherence at FIP's Centennial 2012 in Amsterdam, The Netherlands, will address the following issues:**

1. The extent of medication non-adherence and its consequences for patient outcomes
2. Pharmacokinetic and pharmacodynamic principles underlying adherence
3. Behavioural aspects of non-adherence and the importance of communication with patients and doctors
4. The available evidence of pharmacy-based interventions to improve adherence
5. National and local policies related to community pharmacist interventions to improve medication adherence
6. Education in medication adherence
7. Community pharmacists' involvement in adherence programs
8. Recent technologies to identify non-persistence/-adherence
9. Skills and knowledge that are required to deliver adherence programs, e.g. communication skills and motivational interviewing
10. The impact of dose dispensing services on adherence.

# 7. Adherence

## Helping Patients Take Their Medicines Properly

### **SESSION 7A - MEDICATION ADHERENCE: IF YOU DON'T TAKE THE MEDICINES THEY WON'T WORK!**

**Organised by the FIP Centennial Programme Committee**

**Saturday 6 October 2012, 14:00-17:00**

#### **Learning objectives**

At the conclusion of the session, participants will be able to:

1. Describe the extent of medication non-adherence and its consequences for patient outcomes.
2. Describe pharmacokinetic and pharmacodynamic principles underlying adherence.
3. Explain behavioural aspects of non-adherence and the importance of communication with patients and doctors.
4. Compare and contrast the available evidence of pharmacy-based interventions to improve adherence.

**Chairs:** Geoffrey Tucker (FIP CPC, United Kingdom) and Martin Schulz (FIP CPC, Germany)

#### **Programme**

##### **1) How extensive is medication non-adherence and is it important?**

Ulrich Laufs (University Clinic Hamburg/Saar, Germany)

##### **2) Understanding "forgiveness" – A pharmacokinetic/ pharmacodynamic perspective**

John Urquhart (Pharmaco-Epidemiology Maastricht University, The Netherlands)

##### **3) Behavioural aspects of non-adherence**

Rob Horne (University of London, United Kingdom)

##### **4) Pharmacy-based intervention to improve adherence – Is it worthwhile?**

Martin Schulz (FIP CPC/ABDA, Germany)

### **SESSION 7B - SUPPORTING ADHERENCE IN COMMUNITY PHARMACIES**

**Organised by the FIP Community Pharmacy Section, the FIP Pharmacy Information Section and the FIP Social and Administrative Pharmacy Section**

**Friday 5 October 2012, 09:00-12:00**

Non-adherence to chronic therapy has become a large burden on the healthcare system of many countries. It is a complex human behaviour and a major risk factor in chronic conditions. Community pharmacists are well positioned to address non-adherence as part of their overall patient care activities. However, to be effective in monitoring and promoting adherence to therapy, pharmacists need to have appropriate skills and knowledge, and they must be supported at both policy and practice levels.

#### **Learning objectives**

At the conclusion of this session, the participants should be able to:

1. Describe national and local policies related to community pharmacist interventions to improve medication adherence.
2. Discuss contents and gaps in pre- and post-graduate education in medication adherence.
3. Describe community pharmacists' involvement in adherence programs.
4. Discuss recent technologies to identify non-persistence/ adherence.

5. Describe skills and knowledge that are required to deliver adherence programs.

6. Discuss the impact of dose dispensing services on adherence.

**Chairs:** Karin Graf (FIP CPS, Germany) and Nina Griese (ABDA, Germany)

#### **Programme**

##### **1) Introduction by the Chair**

##### **2) Introduction to the adherence problem**

A short overview of national or local policies related to community pharmacist interventions to improve medication adherence, outlining the status quo in pre- and postgraduate education in medication adherence.

Parisa Aslani (University of Sydney, Australia)

##### **3) The ABDA/KBV model**

An example of national policies related to community pharmacist interventions to improve medication adherence.

Nina Griese (ABDA, Germany)

##### **4) Community pharmacy adherence program - One example of best practice** TBA

##### **5) Technologies to monitor and improve adherence in community pharmacy**

Foppe van Mil (Escura Nederland B.V., The Netherlands)

##### **6) What aspects in consultation style increase medication adherence?** TBA

##### **7) New Medicines Service**

Martin Astbury (Royal Pharmaceutical Society of Great Britain, United Kingdom)

##### **8) Have dose dispensing services an impact on adherence?**

Kurt Hersberger (University of Basel, Switzerland)

##### **9) The ABDA/KBV model**

An example of national policies related to community pharmacist interventions to improve medication adherence.

Nina Griese (ABDA, Germany)

##### **10) Debate, conclusion and wrap-up by the Chair**

# 8. Back to the Future Miscellaneous Sessions



## SESSION 8A - GOING DUTCH - PHARMACY PRACTICE IN THE NETHERLANDS

**Organised by KNMP**

**Thursday 4 October 2012, 09:00-12:00**

### Learning objectives

At the conclusion of this session, participants will be able to:

1. Describe the key elements of current practice and developments in pharmaceutical care in community and hospital pharmacy settings in The Netherlands.
2. Explain the system of primary and post graduate education to guarantee adequate competence of pharmacists, including the role of specialization.
3. Describe how guidelines and indicators make the quality of pharmaceutical care transparent to patients and society.
4. Portray the remuneration system in The Netherlands in relation to the quality level of the provided care.
5. Describe the models of collaboration of pharmacists with physicians and other care givers in primary and secondary healthcare.
6. Give an overview of the achievements of the innovative pharmaceutical industries in The Netherlands.

**Chairs:** Dominique Jordan (FIP CPS, Switzerland), Jan Smits (KNMP, The Netherlands) and Fons Duchateau (The Netherlands)

### Programme

**An exciting combination of audiovisual presentations with explanations and comments by well experienced speakers from community, hospital and industrial pharmacy as well as from the academy will give an interesting view on the characteristics of pharmaceutical science, practice and education in The Netherlands.**

Like in many other countries, Dutch community and hospital pharmacists have changed their focus from product to patient. Their position in primary care is not questioned anymore, their efforts and achievements in the safe use of medicines are recognized by patients and other healthcare professionals. The Pharmacy in The Netherlands program will show all the details on how pharmaceutical care is organized, how quality is built in through education and ICT, and monitored using quality indicators. Also, the "first year's experience" with the newly introduced remuneration system based on pharmaceutical care performances rather than on dispensing medicines can be shared.

Innovation is not only happening in patient care. A unique private – public partnership supported by the government has been established in the Top Institute Pharma. The program will give the audience an interesting view on the highlights of the results.

Finally, congress delegates will be offered opportunities to get an even closer look on pharmaceutical practice in The Netherlands at the exhibition and by joining in visits to community and hospital pharmacies as well as industry and academia.

## 8B PHARMACY EDUCATION

### SESSION 8.B.1 - 3RD AIM GLOBAL DEANS FORUM - THE NEXT FIP CENTURY – ACHIEVING EXCELLENCE IN GLOBAL PHARMACY EDUCATION TO MEET THE NEEDS OF SOCIETY

**(By invitation, for Deans only)**

**Organised by FIP Ed**

**Wednesday 3 October 2012, 09:00 – 12:00 and 14:00 – 17:00**

**Thursday 4 October 2012, 09:00 – 12:00**

Join AIM members, Deans and academic leaders from around the world to discuss, debate and develop an affirmation/ declaration of how pharmacy education institutions will meet the needs of society in the next 100 years.

The presentations, discussions and debate during this one and half day Forum will focus on areas of critical importance in the role of pharmacy education institutions, focussing on educating the pharmacy workforce of the future.

### Programme

#### Wednesday morning:

#### Competencies and the curriculum

- Graduate and Academic workforce competencies. including issues related to recruitment practices, retraining/ updating of staff, performance evaluation of students and of staff.
- If there are core competencies then is there a need for a core curriculum?  
Including issues such as balancing practice and science, clinical and personal 'soft' skills.

#### Wednesday afternoon:

#### Interprofessional education

- Breaking down the silos: How might interprofessional education (IPE) enhance the skill sets of our graduates?

#### Success in pharmacy education and social accountability

- How is the success of pharmacy education evaluated in different regions of the world?
- Is social accountability an important indicator of success for pharmacy education?
- Sharing our successes – examples of how pharmacy institutions share their successes with their stakeholders (reports, events, etc)

#### Thursday morning:

#### Re-aligning Professional Pharmacy Education: Formulating a global strategic policy direction

- Summary of issues facing professional pharmacy education and innovative solutions/examples of transformation in pharmacy education
- Panel of high-level speakers representing Ministries of Education/UNESCO, Ministries of Health/WHO, professional and regulatory organisations, practitioner and science perspectives.

The discussions will be summarised and composed into a formal statement to guide the future actions and strategy of the FIP Education Initiatives.

Take this opportunity to be a part of the global movement of leaders who are transforming and achieving excellence in pharmacy education worldwide!

# 8. Back to the Future

## Miscellaneous Sessions

### **SESSION 8B.2 - INNOVATIONS IN EDUCATION TECHNOLOGY FOR PHARMACY AND HEALTHCARE LEARNERS**

*Organised by the FIP Academic Pharmacy Section*

**Sunday 7 October 2012, 14:00-17:00**

Technology is playing an increasingly important role in healthcare and pharmacy education. This session will explore the value of education technologies in use today and innovations in education technology emerging from pharmacy education programs around the world.

#### **Learning objectives**

At the conclusion of this session, participants will be able to:

1. Assess the value of education technology to enhance learning in healthcare education programs.
2. Identify current education technology initiatives being used successfully in pharmacy education programs.
3. Develop ideas and action plans for enhancing technology at their institution.

**Chairs:** TBA

#### **Programme**

##### **1) Education technology - Its use and value in healthcare education**

What is known today about various technologies in use for healthcare education and what value they bring to learners.  
TBA

##### **2) Models of education technology innovation**

Speakers from across the world will present models of education technology innovations they have in use in their pharmacy education programs and other models they may have in various stages of development.

- a) Model 1 TBA
- b) Model 2 TBA
- c) Model 3 TBA

### **SESSION 8B.3 - UNIVERSAL COMPETENCIES: WHAT IS COMPETENCE AND HOW DO WE MEASURE IT?**

*Organised by FIPED*

**Monday 8 October 2012, 09:00-12:00**

#### **Learning objectives**

At the conclusion of this session, participants will be able to:

1. Define competence and competency frameworks.
2. Compare and contrast international perspectives from practitioners to regulators.
3. Describe the development of a global competency framework.
4. Consider how to apply a global competency framework to their environment as a practitioner, academic, regulator, researcher – From self-assessment to the evaluation of educational outcomes of an institution.

**Chairs:** Ian Bates (FIPED, United Kingdom) and TBA

#### **Programme**

##### **1) Introduction**

Ian Bates (FIPED, United Kingdom)

##### **2) International perspectives on measuring competence and performance for better healthcare. Evidence from around the world including a focus on**

- a) Practitioner development: The differing roles of continuing professional education and professional regulation TBA
- b) Advancing practice through professional recognition: Is competence measurable in advanced practice? TBA
- c) Transnational approaches in the Americas TBA

##### **3) A global framework for a competent workforce: Evidence from FIPED**

Andreia Bruno (FIPED, United Kingdom) and Andrew Brown (University of Canberra, Australia)

##### **4) Designing better professional education from cradle to grave: Are competency-based approaches working?**

Graham Davies (King's College, United Kingdom)

### **SESSION 8B.4- THE LEARNING EXPERIENCE: ASSURING QUALITY, SATISFACTION AND BETTER OUTCOMES IN GLOBAL PHARMACY EDUCATION PROVISION**

*Organised by FIP Ed*

**Monday 8 October 2012, 14:00-17:00**

#### **Learning objectives**

At the conclusion of this session, participants will be able to:

1. Describe ways to enhance the learning experiences for students.
2. Describe transnational approaches to quality assurance and improving the learning experience.
3. Explore QA for new technologies and how they might enhance the learning experience.
4. Explore Global standards for online/IT education programmes.

**Chairs:** Mike Rouse (Accreditation Council for Pharmacy Education, USA) and Billy Futter (PET Strategic Lead, South Africa)

#### **Programme**

##### **1) Introduction**

Mike Rouse (Accreditation Council for Pharmacy Education, USA)

##### **2) Short presentations about the results from the FIP-WHO Global Survey of Pharmacy Schools, IPSF learning experience database and approaches to quality assurance**

- a. Global Survey of Pharmacy Schools: Claire Anderson (University of Nottingham, United Kingdom)
- b. IPSF Learning Experience Database: TBA
- c. Pharmine Initiative: TBA
- d. Transnational and global approaches: TBA

##### **3) Round table discussions on quality and learning experiences**

- e. QA for new technologies in learning (simulation and distance education) and global standards: TBA
- f. QA approaches in Africa: TBA
- g. QA approaches in Latin America: TBA
- h. QA approaches in Asia: TBA

##### **4) Panel discussion and closing remarks**

Please see also Sessions:

- 1C – Future Directions – Integrating multidisciplinary education into curricula
- 2F - The Future of Clinical Pharmacy Education – The need for attention to “Hot Topics”

# 8. Back to the Future Miscellaneous Sessions



## 8C POLICY AND REGULATION

### SESSION 8C.1: REPORTS FROM YOUR GLOBAL NETWORK: FIP MEMBER ORGANISATIONS PRESENT THEIR BEST CASES AND CHALLENGES

*Organised by the FIP Bureau*

**Friday 5 October 2012, 12:15-13:45**

Gain an international view on current challenges and solutions developed by FIP member organisations:

Our member organisations from the following countries (Ireland, Japan, Lebanon, South Korea, Switzerland and United Kingdom; to be confirmed) will present their strategic vision for pharmacy and pharmaceutical sciences together with key programmes and activities on topics such as immunization, professional development, falsified medicines and many more.

### SESSION 8C.2 - FORUM FOR POLICY MAKERS - TRENDS IN COMMUNITY PHARMACY: DEBATING THE FUTURE OF THE PROFESSION

*Organised by the FIP Community Pharmacy Section, the FIP Social and Administrative Pharmacy Section, the FIP Young Pharmacists' Group and the International Pharmaceutical Students' Federation*

**Friday 5 October 2012, 14:00-17:00**

#### Learning objectives

At the conclusion of this session, the participants should be able to:

1. Express the rationale behind the establishment of pharmaceutical care indicators.
2. Describe the opportunities for community pharmacy presented by collaborative care.
3. Debate the suitability of a payment-for-performance model in community pharmacy.
4. Critically discuss the future economic and financial challenges presented to community pharmacists and pharmacies.

**Chairs:** Ema Paulino (FIP CPS, Portugal) and Timothy Chen (FIP SAPS, Australia)

#### Programme

##### 1) Pharmaceutical care indicators – Are they useful?

TBA

Responses: TBA

##### 3) Innovative collaborative practices and payment for performance

Olivier Bugnon (University of Lausanne, Switzerland)

Responses: TBA

### SESSION 8C.3 - REPORTS FROM YOUR GLOBAL NETWORK: FIP MEMBER ORGANISATIONS PRESENT THEIR BEST CASES AND CHALLENGES

*Organised by the FIP Bureau*

**Saturday 6 October 2012, 12:15-13:45**

Gain an international view on current challenges and solutions developed by FIP member organisations:

Our member organisations from the following countries (Ireland, Japan, Lebanon, South Korea, Switzerland and

United Kingdom; to be confirmed) will present their strategic vision for pharmacy and pharmaceutical sciences together with key programmes and activities on topics such as immunization, professional development, falsified medicines and many more.

**Chairs:** TBA

**Programme** TBA

### 8C.4 - FOOD FOR THOUGHT – LESSONS LEARNT FROM THE FOOD INDUSTRY

*Organised by the FIP Industrial Pharmacy Section and the FIP SIG on Natural Products*

**Saturday 6 October 2012, 14:00-17:00**

**Chairs:** Alan Chalmers (FIP IPS, Switzerland) and Michiho Ito (FIP SIG Natural Products, Japan)

#### Programme

##### 1) Foods with a medicated component: An opportunity for patients to self-medicate?

Overview of the current situation in the food industry including regulatory aspects relating to medicated foods in particular. Compare and contrast to pharmaceuticals where relevant.

##### 2) Pharmaceuticals with wider applications: Regulation and pharmaceutical developments

What should be the regulators approach and how pharmacists must act to ensure patients' responsible use of medicines as self-medication trends to expand around the globe in different social and economic scenarios.

##### 3) The view from the food industry

Introduction to the current issues and trends in the food industry particularly regulatory aspects and the interfaces with medicinal products.

##### 4) Labelling - The regulator's view of challenges and opportunities

Viewpoint of a major Food and Drug Regulatory Authority. The challenges met in controlling the safety and efficacy of requirements for foods and drugs should be compared and contrasted. Are there needs/ opportunities for further harmonisation?

# 8. Back to the Future Miscellaneous Sessions

## **SESSION 8C.5- THE FUTURE OF EMERGENCY PHARMACY PRACTICE AND POLICY**

**Organised by the FIP Military and Emergency Pharmacy Section**

**Sunday 7 October 2012, 14:00-17:00**

### **Learning objectives**

At the conclusion of this session, participants will be able to:

- 1.Explain the need for international guidelines on disaster preparedness.
- 2.Describe the role of the Emergency Pharmacist in disaster response.
- 3.List the future development of the Emergency Pharmacist role.

**Chairs:** Chen Zheng-Yu (FIP MEPS, China) and Wendy Walker (FIP MEPS, Australia)

### **Programme**

#### **1)TBA**

Joachim Gardemann (Emergency Response Unit German Red Cross, Germany)

#### **2)Development of Guidelines on Emergency Preparedness**

Describe recent disasters, Development of New Zealand National Pharmacy Emergency Response Plan, Establishment of MEPS Working Group on international guidelines. Jane Dawson (New Zealand Defence Force, New Zealand)

#### **3)Protecting, promoting and advancing health and safety: Public Health Service Pharmacists' role in emergency preparedness and response**

Describe the United States Federal Emergency Response System; Overview of Public Health Service Multi-Tiered Response System; Overview of Rapid Deployment Force (RDF) Team; Describe Pharmacist's role on a RDF Team; Provide Pharmacist Response Scenarios.

Nita Sood (Public Health Service, USA)

#### **4)Emergency Response Pharmacist: The role and future development**

Describe the role of the Emergency Pharmacist; Describe the skills required to perform this role; Propose the future development and recognition of this role.

Eiko Kobayashi (Japanese Red Cross, Japan)

#### **5)Development and application of Standard Therapeutic Guideline for Common Emergencies**

Develop a therapeutic standard for common diseases encountered in emergencies; Describe the 'Drug Rational Usage Guidance System' program; Propose the future development and recognition of this role.

Wen Aidong (Fourth Military Medical University of the CPLA, China)

## **8D SCIENCE MEETS PRACTICE**

### **SESSION 8D.1 – EXPLOITING SCIENTIFIC KNOWLEDGE OF BIOLOGICAL TRANSPORTERS FOR PRACTICAL THERAPEUTIC BENEFIT**

**Organised by the FIP Board of Pharmaceutical Sciences**

**Thursday 4 October 2012, 09:00-12:00**

### **Learning objectives**

At the conclusion of the session, attendees will be able to:

- 1.Appreciate, from a clinical pharmacy perspective, the diversity of transporters and their impact on drug absorption, disposition, efficacy and toxicity.
- 2.Describe the impact of transporters and associated drug-drug and excipient-drug interactions on oral bioavailability and improved therapeutic outcome.
- 3.Explain how knowledge of transporters can improve the safety and efficacy of drugs used for the treatment of cancer and diseases of the central nervous system.

**Chair:** Geoffrey Tucker (University of Sheffield, United Kingdom)

### **Programme**

#### **1)What the clinical pharmacist should know about drug transporters** Andy Gray (University of KwaZulu-Natal, South Africa)

#### **2)Understanding the clinically relevant effects of active transport on oral drug absorption**

Les Benet (University of California at San Francisco, USA)

#### **3)Optimising the impact of uptake and efflux transporters in cancer chemotherapy**

Jan Schellens (The Netherlands Cancer Institute, The Netherlands)

#### **4)Getting past the blood-brain barrier to improve the treatment of diseases of the central nervous system**

Margareta Hammarlund-Udenaes (Uppsala University, Sweden)

### **SESSION 8D.2 – LOOKING INTO THE FUTURE IN PHARMACEUTICAL DEVELOPMENT, WHAT IS COMING DOWN THE PIPELINE?**

Report on three closed BPS workshops

**Organised by the FIP Board of Pharmaceutical Sciences**

**Saturday 6 October 2012, 14:00-17:00**

This symposium is aimed at looking at the emerging business models for the pharmaceutical industry, at outlining the challenges for determining the generic version of non-biological complex drug substances/products. The symposium will also discuss the new "smart" drug delivery concept with examples in therapeutic breakthrough.

### **Learning objectives**

At the conclusion of this session, participants will be able to:

- 1.Discuss emerging business models for Pharma.
- 2.Summarize criteria and rationale for Generics of Non-Biological Complex Drug (NBCD) products.
3. Describe the new, so called "smart" drug delivery systems and their application in targeted drug delivery.

**Chairs:** Henk de Jong (FIP, The Netherlands) and Geoffrey Tucker (University of Sheffield, United Kingdom)

**Speakers:** Daan Crommelin (University of Utrecht, The Netherlands), Vinod Shah (FIP, USA) and Mitsuru Hashida (University of Kyoto, Japan)

# 8. Back to the Future Miscellaneous Sessions



## **SESSION 8E - BREAKFAST SESSION: PHARMACISTS IN HUMANITARIAN WORK**

**Organised by the FIP Community Pharmacy Section and the FIP Military and Emergency Pharmacy Section**

**Friday 5 October 2012, 07:30 – 08:45**

This breakfast session was organised with the support of an unrestricted educational grant from Procter & Gamble

### **Learning objectives**

At the conclusion of the session, the participants will be able to:

1. Describe and develop the role of the pharmacist in emergency situations.
2. Make plans for continuous medical care during pandemics and after natural disasters.
3. Describe how pharmacists may become involved in humanitarian projects.

**Chairs:** TBA

### **Programme**

**1) The pharmacist as an actor in emergency programs and long term development projects – Challenges and chances**

Ulrich Brunner (Pharmacists without Borders, Germany)

**2) The role of the disaster response pharmacist**

Eiko Kobayashi (Japan Red Cross, Japan)

**3) Discussion and closing of the meeting**

## **8F SHORT ORAL COMMUNICATIONS**

### **SESSION 8F.1 - FROM DEVELOPMENT TO MARKETING – SHORT ORAL COMMUNICATIONS**

**Organised by the FIP Industrial Pharmacy Section**

**Saturday 6 October 2012, 12:15-13:45**

The presenters will take part in the competition for the “Industrial Pharmacy Award for the best Oral Presentation”.

The winner will be announced at the IPS Business Meeting held later during the Congress.

### **Learning objectives**

At the conclusion of this session, the participants should be able to:

1. Describe several original industrial pharmacy contributions from young pharmacists or young pharmaceutical scientists, with the focus “from development to marketing”.

**Chair:** Sini Eskola (FIP IPS, Finland)

### **Programme**

**TBA based on submitted abstracts, date of birth of the presenter (presenter to be no more than 29 years of age at 31st of March 2012) and registration for the Congress.**

### **SESSION 8F.2- FORUM FOR PRACTITIONERS - ORAL COMMUNICATIONS: 100 COMMUNITY PHARMACISTS TALK: MY DAILY ACTIVITIES**

**Organised by the FIP Community Pharmacy Section**

**Sunday 7 October 2012, 09:00-12:00 and 14:00-17:00**

### **Learning objectives**

At the conclusion of this session, the attendants should be able to:

1. Describe different solutions that have been put in place by pharmacists and pharmacies to support their daily activities.

2. List a number of primary healthcare initiatives undertaken by individual pharmacists and/or pharmacy organisations.
3. Compare and contrast different national status of dispensing activities, counselling activities, initiatives to support adherence and other pharmacy-based services.
4. Identify a number of organisations or individual pharmacies which have implemented Good Pharmacy Practice guidelines.
5. Describe the benefits of implementing GPP guidelines at the community pharmacy level.

**Chair:** Warren Meek (FIP Community Pharmacy Section, Canada)

### **Themes**

- 1) Dispensing activities (processes)
- 2) Counselling activities and supporting adherence
- 3) Pharmacy services
- 4) GPP
- 5) Compounding

### **SESSION 8F.3 - SHORT ORAL COMMUNICATIONS OF THE PHARMACY INFORMATION SECTION**

**Organised by the FIP Pharmacy Information Section**

**Monday 8 October 2012, 12:15-13:45**

**Chairs:** Parisa Aslani (University of Sydney, Australia) and Françoise Pradel (University of Maryland, USA)

### **Programme**

**The programme of this session will be based on the abstracts submitted.**

### **SESSION 8F.4- CLINICAL PEARLS – INSPIRATION TO IMPROVE YOUR FUTURE HOSPITAL PRACTICE**

**Organised by the FIP Hospital Pharmacy Section**

**Monday 8 October 2012, 12:15-13:45**

This session will consist of brief, current clinical practice challenges and best practices in hospital pharmacy services aiming at sharing different practice approaches to issues which are common to hospital pharmacy practitioners.

### **Learning objectives**

At the conclusion of the session, participants will be able to:

1. Identify direct patient care services related to pharmacists' responsibilities in assuring optimal outcomes from medication use.
2. Compare different approaches to pharmacists' involvement with the use of medical devices in the clinical setting.

# 8. Back to the Future

## Miscellaneous Sessions

### SESSION 8G – HISTORY OF PHARMACY

**Organised by the FIP Working Group on the History of Pharmacy**

**Monday 8 October 2012, 14:00-17:00**

#### Learning objectives

At the conclusion of this session, participants will be able to:

1. Integrate a few examples of pharmacy practice changes and environment in the past in their vision of the future of pharmacy.

**Chairs:** Annette Bierman (Cercle Benelux d'Histoire de la Pharmacie, The Netherlands) and Jacques Gravé (Sauvegarde du Patrimoine Pharmaceutique, France)

#### Programme

##### 1) Presentation of David Taylor's publication for the FIP

Centennial David Taylor (United Kingdom)

##### 2) History of FIP

TBA

##### 3) Short oral presentations:

##### a) Why are pharmacists investing in clinical biology in Southern Europe and not in the North? What explains this difference throughout history? What have pharmacists done to that discipline and what will it bring in the future?

Bernard Poggi (FIP Clinical Biology Section, France)

##### b) Status of the hospital pharmacist. How was this profession born, how did it grow, what did it bring to the Health Sciences, what is its future in relation to other professions of pharmacy?

Jacqueline Surugue (FIP Hospital Pharmacy Section, France)

##### c) History and role of pharmacist licensing bodies and their evolution in the future

Yves Gariépy (Retired Pharmacist, Canada)

##### d) Traditional plant remedies and industrial production of phytotherapeutics. The example: Passionflower

Sabine Anagnostou (Philipps University, Germany)

##### e) Reliable information about drugs? Historical aspects of pictograms

Christiane Staiger (Merck Selbstmedikation GmbH, Germany)

##### f) The establishment of the Czech pharmaceutical associations and their economic and social activities in the years 1835 – 1948

Vilma Vranova (University of Veterinary and Pharmaceutical Sciences, Czech Republic)

##### g) Tag-labels - Cultural history from Finland

Marcus Olli (Alajärvi Pharmacy, Finland)

##### h) Drugs and druggists from antiquity to the 19th century: The pharmacist as producer, author and collector

Scott Burges (University of Pavia, Italy)



# Additional Programme Items

## SECTION MEETINGS

### General Assembly of the African Pharmaceutical Forum

**Monday 8 October 2012, 09:00 – 12:00**

Organised by the African Pharmaceutical Forum

### FIP Young Pharmacists Group (YPG) Business Meeting

**Saturday 6 October 2012, 14:00 – 17:00**

### Clinical Biology Section General Assembly

Date/Time TBA

### Clinical laboratory medicine visit

Date/Time TBA

### Hospital Pharmacy Section Members Reception

Date/Time TBA

### HPS Assembly and Business Meeting

Date/Time TBA

(open to all interested participants)

### HPS Section Officers' Meeting

Date/Time TBA

### Industrial Pharmacy Section Business Meeting

**Sunday 7 October 2012, 12:00 – 14:00**

### Laboratories and Medicines Control Section Business Meeting

Date/Time TBA

### Military and Emergency Pharmacy Section visit to Host Country

Date/Time TBA

### Pharmacy Information Section Business Meeting

Date/Time TBA

## PHARMABRIDGE

**Sunday 7 October 2012, 12:15 – 13:45**

### Organised by Pharmabridge

Pharmabridge aims at strengthening pharmaceutical services in developing (DC) and transitional countries through coordinated support from the pharmacy establishment and individual pharmacists in developed countries. The project even goes beyond this: It also aims at creating links amongst pharmacists worldwide and is supported by the International Pharmaceutical Federation (FIP), its Board of Pharmaceutical Practice (BPP) and the Commonwealth Pharmaceutical Association (CPA).

All those interested in the project, be it from developing or developed countries, wanting to establish contacts with colleagues from other countries (or even a specific country) are invited to attend this meeting.

People having books, DVD's etc. to offer can bring them to the meeting and hand them over to colleagues from less affluent countries.

## PHARMACOPOEIA MEETING

**Sunday 7 and Monday 8 October 2012**

The WHO organises at its headquarters in Geneva an international meeting of World Pharmacopoeias (Feb 29-March 2). This meeting (on invitation only for pharmacopoeial officials) is intended to be a policy and strategic meeting. The outcome and recommendations will be presented to the WHO Expert Committee on Specifications for Pharmaceutical Preparations, which advises the Director General and WHO's Member States on future perspectives and strategic approaches in relation to pharmacopoeias. Furthermore the outcome will be used as a basis for the Centennial World Congress of Pharmacy and Pharmaceutical Sciences of FIP, in **an open joint session** WHO/FIP with participation of all other interested parties, especially users from control laboratories, industry and the regulatory area.

## FIP ACADEMIC INSTITUTIONAL MEMBERSHIP GLOBAL DEANS FORUM

**Wednesday 3 and Thursday 4 October, 2012**

**Registration open to Deans of Schools/Faculties of Pharmacy**

FIP and AIM are very pleased to announce the second AIM Deans Forum, to take place 3-8 October 2012 at the FIP Centennial Congress in Amsterdam. An outstanding programme has been developed, highlighting current and relevant issues in pharmacy education and welcoming renowned speakers from all over the globe.

Topics this year include new schools and programmes (with international examples), strategic planning, developing inter-professional interaction within your faculty and creating a global voice for pharmacy education. Please visit the FIP AIM website here for more details:

**[http://academic\\_institutional\\_membership.fip.org/about/aim-at-fip-congress-2011/](http://academic_institutional_membership.fip.org/about/aim-at-fip-congress-2011/)**

Join your fellow Deans from all over the world to share in leadership challenges and successes – see you at the AIM Deans Forum in Amsterdam!

# Additional Programme Items

## **FIP SYMPOSIUM FOR PHARMACY TECHNICIANS AND PHARMACY SUPPORT WORKFORCE**

**Wednesday 3 and Thursday 4 October, 2012**

Recognising the invaluable role of technicians in the pharmacy and healthcare team, FIP is pleased to offer for the first time, a special symposium for pharmacy technicians. Please visit the FIP website periodically for updates to the programme.

### **Session 1 - The Role of the Pharmacy Technician**

The role of the pharmacy technicians is very different in the various countries. What can pharmacy technicians learn from each other? How does national legislation both help and hinder their role?

### **Session 2 - Education for Pharmacy Technicians/Support Staff**

Across the world pharmacy support workforce training varies from certificate programs to diploma. How does the level/diversity of education impact responsibilities of pharmacy technicians in the pharmacy? What are the in-place quality assurance measures?

### **Session 3 - Patient Safety**

Pharmacy technicians are involved in many tasks within the pharmacy including dispensing and OTC counseling. How can pharmacy technicians decrease medication errors and improve patient safety in these areas?

### **Session 4 - Short Oral presentations**

Short Oral Poster Presentations by Pharmacy Technicians on projects from a variety of countries – any topic. Posters outside of Session 1-3 topics are especially encouraged.

### **Programme Committee Members for the Pharmacy Technicians/Support Workforce Symposium**

Margo Briejer, General Secretary Optima Farma, Association for Pharmacy Technicians (The Netherlands)

Andrew Brown, Assistant Professor, Domain Lead Pharmacy Support Workforce, Faculty of Health, University of Canberra (Australia)

Susanne Engstrøm: Vice President of the European Association for Pharmacy Technicians (EAPT), (Denmark)

Ema Paulino, Representative from the FIP Board of Pharmaceutical Practice (Portugal)

Megan Sheahan, Director of Professional Affairs, Pharmacy Technician Certification Board (USA)

Tove Ytterbø, President of the Norwegian Association of Pharmacists (Norway)

**Scan the QR code into your Smartphone**

(or any phone with the QR scanner application) and get instant FIP Centennial Programme updates!



# General Information

## TRAVEL, HOUSING AND TOURS

FIP is pleased to announce that KLM-Air France is the official air carrier for the FIP Centennial Congress. Please visit the Congress website for more information on how to save on your flight to Amsterdam when booking with KLM-Air France-Delta.

Centennial congress participants are invited to use the convenient online booking tool to find hotels during their stay in Amsterdam for the FIP Centennial. In addition, services such as airport transfers, car rentals and tours are conveniently booked through the FIP Centennial website.

Please visit the website here

[http://www.fip.org/amsterdam2012/Amsterdam/2034/Travel,\\_Hotels\\_&\\_Visa/](http://www.fip.org/amsterdam2012/Amsterdam/2034/Travel,_Hotels_&_Visa/) for more information on flights, hotels and tours or browse through the Programme Insert on Visiting Amsterdam and Congress Social Events.

## BADGES

Participants will be handed their name badges at the registration desk. Due to tight security regulations all participants and accompanying persons must wear their badges throughout the Congress.

Participants with white badges will be admitted to the sessions. Accompanying persons (badges in a different color) may attend the Opening Ceremony, social events and tours but will not be allowed to attend sessions. Please note that your badge will be scanned at the entrance and exit of sessions, for accreditation and evaluation purposes.

## BREAKS

The coffee breaks during the sessions will be between 10:00 to 11:00 in the morning and between 15:00 to 16:00 in the afternoon. Between the sessions there will be a lunch break from 12:00 to 14:00.

## DRESS

Informal dress is acceptable for all sessions but business attire is recommended for the Opening Ceremony.

## FILMING, RECORDING AND PHOTOGRAPHY POLICY

Copyright of the FIP Congress is owned by FIP – the International Pharmaceutical Federation. FIP reserves the rights to all recordings, reproductions or presentations at this Congress. As a result, any photographing, filming, taping, recording or reproduction in any medium including the use of tripod-based equipment of any of the programmes, exhibits and/or posters presented at the FIP Congress without the express written consent of FIP is strictly forbidden. FIP reserves the right to prohibit any photographing, filming, recording at its own discretion.

## INSURANCE

The FIP Centennial Organising Committee accepts no liability for personal injuries, or for loss of or damage to property belonging to Congress participants and/or accompanying persons, incurred either during or as a result of the Congress. We recommend that each participant acquires personal insurance.

## NO SMOKING

Please note that all FIP Congresses are tobacco-free: Smoking is NOT allowed anywhere, not in the session rooms, not in the exhibition area, not in the poster sessions and not in the registration area.

## TECHNICAL EQUIPMENT IN SESSION ROOMS

All session rooms will have LCD projectors and laptops. There will be a technician available in every session room. Speakers will receive detailed instructions with regard to their presentation prior to the Congress.

## ABSTRACT HANDLING WILL BE CARRIED OUT BY:

MCI Amsterdam | Eurocongress International  
Jan van Goyenkade 11  
NL-1075 HP Amsterdam  
The Netherlands  
Tel.: (+31) (0)20 6793411  
Fax: (+31) (0)20 6737306  
E-mail: [fip2012@mci-group.com](mailto:fip2012@mci-group.com)  
Website: [www.mci-group.com/thenetherlands](http://www.mci-group.com/thenetherlands)

All abstracts must be submitted online. Within the online form presenters may submit abstracts for review, abstracts for invited presentations and biographies of invited speakers and chairs. The on-line abstract form is available on [www.fip.org/amsterdam2012](http://www.fip.org/amsterdam2012)

## BY INVITATION

If you wish to submit an abstract but have not been invited by a session organiser, please follow A in the schedule below. If you have been invited, please follow B.

## ABSTRACT SUBMISSION AND DEADLINE

Abstracts for review need to be submitted before 1 May 2012. Please visit our website: [www.fip.org/amsterdam2012](http://www.fip.org/amsterdam2012)

## 100 COMMUNITY PHARMACISTS TALKING:

In honour of the Centennial Celebration of FIP, the Community Pharmacy Section is preparing a video, and invites submissions from community pharmacists internationally. 100 community pharmacists will be documented in the video through submitted photos and responses in an online form.

This project is in addition to your submission of abstract and poster presentation.

Please visit link: [www.fip.org/100talking](http://www.fip.org/100talking) for further instructions on how you can be part of the FIP Community Pharmacy Section 100 Pharmacists Talking video.

## WAIVER OF LIABILITY

All poster presenters are responsible for putting up and removing their own poster in an appropriate and timely manner. If presenters do not remove their poster in time, FIP is not responsible for any damage that may occur when it has to be removed by staff members.

## TOPICS

Abstracts can only be submitted on one of following topics:

### Pharmaceutical Practice

Academic Pharmacy

Subtopics:

- Hot topics in Clinical Pharmacy
- Competency and pharmacy education
- Quality assurance and the student learning experience
- Other

### Screening Officer

Wafa Dahdal

Clinical Biology

Community Pharmacy

Subtopic: 100 Community Pharmacists talking: My daily activities\*

Bernard Poggi

Warren Meek

Hospital Pharmacy

Industrial Pharmacy

Laboratories and Medicines Control

Military & Emergency Pharmacy

Pharmacy Information

Social and Administrative Pharmacy

History of Pharmacy

Ryan Forrey

Sini Eskola

Frans van de Vaart

Jane Dawson

Françoise Pradel

Timothy Chen

Jacques Gravé

Please note that the following Sections are organizing short oral presentation sessions, so if you submit an abstract please indicate a preference for oral or poster presentation:

Academic Pharmacy Section

Community Pharmacy Section\*

Industrial Pharmacy Section\*

Hospital Pharmacy Section\*

Pharmacy Information Section

\*These Sections are issuing Best Poster Awards.

### Special Interest Groups

Drug Design and Discovery

Natural Products

Formulation Design and

Pharmaceutical Technology

Pharmacokinetics,

Pharmacodynamics, Absorption,

Distribution, Metabolism and

Excretion

Translational Research and

Individualized Medicines

Biotechnology

Analytical Sciences and

Pharmaceutical Quality

Regulatory Sciences

### Screening Officer

Takuya Kumamoto

Michiho Ito

Giovanni Pauletti

Don Mager

Hitoshi Sasaki

Andrew Vick

Daniel Tang

Vinod Shah

## **CREATE THE FUTURE OF PHARMACY AT THE FIP CENTENNIAL – SUBMIT YOUR ABSTRACT AND POSTER!**

The FIP Congress – especially the FIP Centennial – is the ultimate venue to showcase your work and research to an international audience of health care leaders. The FIP Centennial 2012 will gather thousands of participants, Ministers of Health, top-notch researchers, thought-leaders and influential stakeholders in Amsterdam from 3-8 October 2012. Don't miss your chance to profile your work in this stellar international arena – submit an abstract to the FIP Centennial Congress!

The FIP Centennial Congress Abstract Screening committee is accepting abstracts within the following topics:

### **Pharmacy Practice**

- Academic Pharmacy:
  - Hot topics in Clinical Pharmacy Education
  - Competency and pharmacy education
  - Quality assurance and the student learning experience
- Clinical Biology
- Community Pharmacy including
- 100 Pharmacists Talking
- Hospital Pharmacy
- Industrial Pharmacy
- Laboratories and Medicines Control
- Military and Emergency Pharmacy
- Pharmacy Information
- Social and Administrative Pharmacy
- History of Pharmacy
- Pharmacy Technicians

### **Pharmaceutical Sciences**

- Drug Design and Discovery
- Natural Products
- Formulation and Pharmaceutical Technology
- Pharmacokinetics, Pharmacodynamics, Absorption, Distribution, Metabolism and Excretion
- Translational Research and Individualized Medicines
- Biotechnology
- Analytical Sciences and Pharmaceutical Quality
- Regulatory Sciences

Please flip the page and see the inside back cover for more information on writing/submitting abstracts and posters or visit the FIP Centennial website at [www.fip.org/amsterdam2012](http://www.fip.org/amsterdam2012)

### **ABSTRACT SUBMISSION AND DEADLINE**

**Abstracts for review need to be submitted before 1 May 2012**