Congress Programme

FIP World Congress of Pharmacy and Pharmaceutical Sciences 2017

SEOUL 2017
FIP WORLD CONGRESS
10 - 14 September

Medicines and beyond!
The soul of pharmacy

77th International Congress of FIP

10 – 14 September 2017
Seoul, Republic of Korea

#FIPcongress



Welcome to the FIP congress in Seoul!

Dear Colleagues and Friends,

The International Pharmaceutical Federation (FIP), the Korean Pharmaceutical Association (KPA) and the Pharmaceutical Society of Korea (PSK) are excited and honoured to host you in Seoul for FIP's 77th international congress, the World Congress of Pharmacy and Pharmaceutical Sciences, from 10 to 14 September 2017, inviting an international audience of pharmacy professionals and pharmaceutical scientists to go beyond medicines and answer patients' demands for high quality help and advice.

At this year's congress, the professional symposia will explore the many new ways that pharmacy professionals can add the value expected by modern health care systems and services. Sessions will show that tradition and dedication to patients' health — the true soul of pharmacy — can be coupled with innovation in technology, education and practice to deliver care fit for the 21st century.

Please also take this opportunity to see how the Republic of Korea has developed to become the 11th largest economy in the world in just a few decades. In doing so, you will not only discover the country's rich heritage and culture, but you will also witness its first-rate pharmacy education and practice as well as the latest advances in its pharmaceutical sciences and industry.

More importantly, you will experience Korea's warm hospitality to visitors from around the world. We will assist you in every way possible to make sure that you have an unforgettable experience.

Please honour us by attending this 77th FIP world congress. We look forward to welcoming each and every one of you!



Carmen Peña
President
International Pharmaceutical Federation (FIP)



Chan-Hwi Cho
President
Korean Pharmaceutical Association (KPA)



Aree Moon
President
Pharmaceutical Society of Korea (PSK)



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YOUR HOSTS

The **International Pharmaceutical Federation (FIP)**

together with

The **Korean Pharmaceutical Association (KPA)** and

The **Pharmaceutical Society of Korea (PSK)**

VENUE

Coex Convention & Exhibition Center
513, Yeongdong-daero
Samseong-dong, Gangnam-gu
Seoul, Republic of Korea
www.coex.co.kr
(COEX Mall Station, Subway Line 2)

Your hosts

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Local Organising Committee Staff, KPA
Ki-Hyung Jeong
Local Organising Committee Staff, PSK
Jihye Na
Local Organising Committee Staff, Secretary

CONGRESS INFORMATION

FIP Congresses & Conferences
Andries Bickerweg 5
2517 JP The Hague
The Netherlands
Office opening hours: Monday to Friday 09:00 –17:00 CET
Tel.: +31 70 3021982
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E-mail: congress@fip.org
Website: www.fip.org/seoul2017

CONGRESS REGISTRATION & ABSTRACT HANDLING

MCI Amsterdam
Schipluidenlaan 4
1062 HE Amsterdam
The Netherlands
Office opening hours: Monday to Friday 09:00 – 17:00 CET
Tel: +31 20 5754220
Email: fip@mci-group.com

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FIP, KPA and PSK gratefully acknowledge the support of:

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On site registration

REGISTRATION DESK

The registration desk will be open:

- **Saturday 9 to Wednesday 13 September** 08:00 – 18:00
- **Thursday 14 September** 08:30 – 16:00

On site registration fees FIP 2017

FULL CONGRESS REGISTRATION	
FIP individual member	€ 1.050,00
Regular fee (non member)	€ 1.050,00
Student/Recent graduate	€ 1.050,00
IN ADDITION TO A FULL CONGRESS REGISTRATION (OPTIONAL)	
Pharmacy Technicians Symposium	€ 450,00
SOCIAL EVENTS	
Fun Run	€ 10,00
Young Pharmacists' Group Night	€ 35,00
Section Dinner	€ 60,00
Closing Dinner	€ 95,00
Accompanying person	€ 175,00
WITHOUT A FULL CONGRESS REGISTRATION	
Pharmacy Technicians Symposium (only)	€ 600,00
On site day card	€ 350,00

PAYMENT OF REGISTRATION FEES

Credit cards (VISA, MasterCard or American Express) or cash (in Euros or US dollars) will be accepted.

THE REGISTRATION FEE FOR PARTICIPANTS INCLUDES:

- Admission to all sessions
- Opening ceremony
- Welcome reception
- Access to the exhibition and the poster session
- Coffee/tea breaks
- Access to all submitted abstracts and biographies as of 1 September 2017
- Congress bag with final congress programme and list of participants (name and country of all participants registered and paid by 15 July 2017)
- Access to a website where you can download the presentation slides of the speakers who gave permission (available as of 1 November 2017).

Lunches are not included at this congress, but can be bought in several locations in Exhibition Hall C and around the congress centre.

THE REGISTRATION FEE FOR ACCOMPANYING PERSONS INCLUDES:

- Opening ceremony
- Welcome reception
- Access to the exhibition and the poster session
- Coffee/tea breaks

Lunches are not included at this congress, but can be bought in several locations in Exhibition Hall C and around the congress centre. Please note that the fee for accompanying persons does NOT include admission to the sessions.

TERMS OF CANCELLATION

- As of 16 August 2017 (23:59 CET), the registration fee will not be refunded.
- The terms of cancellation are applicable in all circumstances, including if a visa is officially refused to the participant and/or accompanying person. We strongly advise all participants to start their visa application as early as possible in order to avoid disappointment.
- All registrations are strictly personal: replacements or name changes are not possible. You may be asked to show an identification document (e.g. passport) when picking up your badge at the registration desk.

INSURANCE AND LIABILITY DISCLAIMER

The FIP Organising Committee, the Korean Host Committee, FIP Headquarters, MCI Amsterdam and MCI Korea (hereafter called the organisers) may be not held responsible for any loss, injury or damage to any property, whatever the cause may be. Liability of persons and enterprises providing means of transportation or other services, however, remains unaffected. It is recommended that participants obtain adequate cover for travel, health and accident insurance before they depart from their countries. The organisers cannot accept responsibility for personal injuries, or loss of, or damage to, private property belonging to the congress participants. Should, for any reason outside the organisers' control (including but not limited to acts of terrorism, extreme weather conditions and/or industrial action) the venue or speakers change, or the congress be cancelled, the organisers will endeavour to re-schedule, but shall not be held responsible for any costs, damages or expenses incurred by registrants. If for any reason the organisers decide to make changes to the congress, they are not responsible for airfares, hotels or other costs incurred by registrants. The participant takes part in the congress, all tours and trips at their own risk. Further, the organisers may not be held liable for any costs or damages incurred resulting from acts outside of their control including but not limited to force majeure, strikes and/or public manifestations.

Only written arrangements are binding. The sole legal venue is The Hague. Registration of a participant entails acceptance of these conditions.

In any disputes that may arise concerning the execution or interpretation of the present General Regulations, both parties agree that they will be subject to Dutch law and that the commercial courts of The Hague will be competent, without prejudice to the organisers' right to initiate proceedings under the laws and before the courts of the participant's registered office in the event any sums are due by the participant to FIP.

CERTIFICATE OF CONGRESS ATTENDANCE

All participants will be emailed their certificate of congress attendance as a PDF within 10 days of the close of the congress. Accompanying persons do not receive a certificate of attendance.

ABSTRACT CERTIFICATE

If you would like to receive a certificate for your poster or oral presentation, please send an email to **fip@mci-group.com** after the congress and you will receive your certificate (as a PDF) by email.

Introduction of FIP

The International Pharmaceutical Federation (FIP) is the global body representing pharmacy and pharmaceutical sciences, founded in 1912. Through our 139 national organisations, academic institutional members and individual members, we represent over four million pharmacists and pharmaceutical scientists around the world.

FIP is a non-governmental organisation that has been in official relations with the World Health Organization since 1948. Through our partnerships and our extensive global pharmacy and pharmaceutical sciences network, we work to support the development of the pharmacy profession, through practice and emerging scientific innovations, in order to meet the world's health care needs and expectations.



Introduction of KPA and PSK

KOREAN PHARMACEUTICAL ASSOCIATION (KPA)
www.kpanet.or.kr
70,000 members

The Korean Pharmaceutical Association (KPA) is a non-profit organisation established as the Korea Pharmacists Association in 1954.

Approximately 70,000 members of the KPA have contributed to public health through "good quality of medicine and right medication". With their belief and willingness to improve public health, members of the KPA are committed to building a welfare country.

The KPA tries to develop the public health service system combining public interests with pharmacists' rights and gives the best effort to complete roles of pharmacists under the slogan of "Pharmacists with pride. KPA in company with public".

Gathering:
- 16 regional divisions (5 special divisions abroad)
- 227 branches
- General Assembly of Delegates as a legislative body
- 21 standing committees as an executive organisation

PHARMACEUTICAL SOCIETY OF KOREA (PSK)
www.psk.or.kr
8,000 members

The Pharmaceutical Society of Korea (PSK) was established in 1946.

The PSK aims to improve pharmaceuticals and public health, strengthen cooperation among academia, industry and government with advancement and globalisation of the education system; reinforcing the foundation from the past 70 years, and stepping forward into the next 100 years.

Gathering:
- 3 branches
- 13 committees
- 19 subcommittees

Community pharmacy, history of pharmacy, hospital pharmacy, hygiene, industrial pharmacy, Korean academy of social & managed care pharmacy, medicinal chemistry, microbiology & immunology, natural product sciences, oriental pharmaceutical sciences, pharmaceutical analysis, pharmaceutical biochemistry, pharmaceutics, pharmacology, pharmacy education, physical pharmacy, physiology & pathophysiology, preventive pharmacy & public health, radiopharmaceutical sciences.

Accreditation for continuing education

Participants wishing to apply for continuing education credits should note the verification codes during the course of each educational session* and make a declaration of their session attendance via the specific link on the congress website **www.fip.org/seoul2017**

It is the sole responsibility of the participant to follow the instructions hereby, note the verification codes and provide the correct information via the above-mentioned link. **The deadline for submitting your accreditation request is 1 October 2017.** After this deadline it is NOT possible anymore to apply for continuing education credits.

** Each accredited session has a special field where you can fill in the code of the session for your own record:*

ACPE **Code:** _____

List of countries where the FIP Congress 2017 is accredited:

Austria

ÖSTERREICHISCHE APOTHEKERKAMMER

The congress sessions of the FIP World Congress 2017 are automatically accredited in Austria, as agreed with the ÖAK (Österreichische Apothekerkammer – Federal Chamber of Pharmacists, number F20151104). Austrian participants are advised to note the verification codes during the course of each session and declare their session attendance via the specific link at www.fip.org/seoul 2017

Germany

BAK

The congress sessions have been accredited by the Federal Chamber of Pharmacists of Germany (Bundesapothekerkammer) for pharmacists and pharmaceutical technicians, according to the CPE-guideline of the Federal Chamber of Pharmacists as follows: 1 credit point/45 minutes of attendance of the congress sessions, limited to 8 points a day in the category 2: Congress (maximum 43 points/participant). The accreditation is valid from 9 to 14 September 2017.

The credit points awarded during the event do not expire by the end of the accreditation period. German participants are advised to note the verification codes during the course of each session and declare their session attendance via the specific link at www.fip.org/seoul2017

The participants may submit the certificate of attendance to their corresponding State Chamber of Pharmacists in the following three years in order to ensure that the points will be counted for their CPE-Certificate.

Ireland

IIOP
INSTITIÚID CÓGAISÍOCHTA NA hÉIREANN
IRISH INSTITUTE OF PHARMACY

Attendance at the 77th FIP World Congress of Pharmacy and Pharmaceutical Sciences is recognised as contributing to a pharmacist's continuing professional development (CPD) by the Irish Institute of Pharmacy (IIOP), assuming that a pharmacist records the activity in their IIOP ePortfolio and provides evidence of reflection on how his or her attendance at the conference impacts on their professional practice. The IIOP was established by the Pharmaceutical Society of Ireland (PSI; the pharmacy regulator) to oversee the management of the Irish CPD system in accordance with the statutory requirements as laid out in The Pharmaceutical Society of Ireland (Continuing Professional Development) Rules, 2015 (Statutory Instrument 553 of 2015).

Japan

CPC Japan

The 2017 FIP Congress is accredited by CPC (Council on Pharmacists Credentials) in Japan. The CPC providers award one point per 90 minutes of the session, with the maximum of 3 points per day. However, please note that the specific counting policy may depend on providers in Japan and we advise the participants to contact them for precise information. Japanese participants are advised to note the verification codes during the course of each session and declare their Confirmation of Session Attendance via the specific link at www.fip.org/seoul2017

Macedonia (FYROM)

The 77th international congress of FIP is recognised as a valid form of continuing education by the Pharmaceutical Chamber of Macedonia and it has been accredited according to the chamber's legal act. Participants from Macedonia are advised to acquire a certificate of attendance.

Netherlands

KNMP

The congress sessions are accredited by the Royal Dutch Association for the Advancement of Pharmacy (KNMP) for 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 (max. 20 hours). Dutch participants are advised to note the verification codes during the course of each session and declare their Confirmation of Session Attendance via the specific link at www.fip.org/seoul2017

Norway

Norges Farmaceutiske Forening

The international congress of FIP is recognised as a valid form of continuing education by Norges Farmaceutiske Forening. Norwegian participants are advised to note the verification codes during the course of each session and make a declaration of their session attendance after the congress via the specific link at www.fip.org/seoul2017

Portugal

2,65 CDP

The FIP congress programme has been approved by the Portuguese Pharmaceutical Society (Ordem dos Farmacêuticos) as a valid activity under its continuous professional development credit system. Attendance will be allocated with a maximum of 2,65 CPD credit points. Participants under the Portuguese professional development process are advised to note the verification codes during the course of each session and declare their confirmation of session attendance via the specific link at www.fip.org/seoul 2017 under tab Programme -› Accreditation.

Sweden

FOKUS

The international FIP congress is recognised as a valid form of continuing education by the Swedish Pharmacists' Association. Participants are entitled to a maximum of 10 FOKUS points.

Switzerland

The accredited congress sessions are recognized as valid continuing education by FPH. The Swiss participants are kindly asked to follow the instructions included in the Final Congress programme in order to get the FPH points accredited to their respective FPH account. Participants sending in their Confirmation of Attendance of the FIP World Congress via email at info@fphch.org will obtain 100 FPH credits in total. Participants who would like to obtain credits for each session separately (according to the following scheme: 1 academic hour (45 min) = 6.25 FPH points) are required to note the verification codes during the course of each session and declare their Confirmation of Session Attendance via the specific link at www.fip.org/seoul2017

United Kingdom (for Scotland, England and Wales)

The 77th FIP World Congress of Pharmacy and Pharmaceutical Sciences is accredited by the Royal Pharmaceutical Society as a training event.

United States of America

FIP is an ACPE-accredited provider of continuing pharmacy education. Participants wishing to be awarded with ACPE credits should note the verification codes during the course of each session and declare their session attendance via the specific link at www.fip.org/seoul2017

After CPE units are processed by the ACPE and NABP, pharmacists will be able to login to a comprehensive electronic profile via the CPE monitor. Please note that only selected sessions are ACPE accredited; they are indicated by the ACPE logo next to the session.

The list of ACPE accredited sessions together with their UAN numbers is available on www.fip.org/seoul2017

General events

COUNCIL MEETINGS

Saturday 9 September, 14:00 – 18:00
Sunday 10 September, 09:00 – 12:00
Thursday 14 September, 14:00 – 16:00

Grand Ballroom 101 + 102
(simultaneous translation for official delegates)
Official representatives from FIP member organisations and observer organisations will be admitted to the council meetings (one delegate per organisation). Each representative has been asked to submit written proof when registering, that he or she has been officially appointed to represent his or her organisation.
The council meetings will also be attended by the FIP Bureau members and FIP section representatives.
FIP individual members are welcome to attend most of the council meetings, but only as a silent audience. They may be asked to show their FIP membership card at the entrance of the room.

OPENING CEREMONY

Sunday 10 September, 13:00 – 17:00

Jamsil Indoor Gymnasium
10 Jamsil-dong, Songpa-gu, Seoul

The opening ceremony will be open to all registered participants and their registered accompanying persons. Please be on time as a high number of attendees are expected. All participants will receive a detailed programme separately.

POSTER SESSION

Monday 11 to Wednesday 13 September, 09:00 – 18:00
Thursday 14 September, 09:00 – 14:30

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

WAIVER OF LIABILITY

All poster presenters are responsible for putting up and removing their own poster in a proper way and strictly within the indicated timeslots.
If presenters hang their poster too early or do not remove their poster in time, FIP is not responsible for any damage that might happen to the poster when it has to be removed by staff members.



Thank you abstract mentors and (co-)reviewers

Abstract Mentors and (Co-)Reviewers FIP Congress Seoul 2017		
TOPICS	**Firstname**	**Familyname**
Academic Pharmacy Section 1	Nahoko	Kurosawa
Academic Pharmacy Section 2	Dai	John
Social and Administrative Pharmacy Section	Timothy	Chen
Clinical Biology Section 1	Julien	Fonsart
Clinical Biology Section 2	Lenira	Da Silva Costa
Community Pharmacy Section 1	Martin	Astbury
Community Pharmacy Section 2	Lars-Åke	Söderlund
Community Pharmacy Section 3	Warren	Meek
Hospital Pharmacy Section 1	Josep	Guiu
Hospital Pharmacy Section 2	Rebekah	Moles
Industrial Pharmacy Section 1	Gabrielle	Wiederkehr
Industrial Pharmacy Section 2	Ulf	Janzon
Military and Emergency Pharmacy Section 1	Nita	Sood
Military and Emergency Pharmacy Section 2	Wendy	Walker
Health & Medicines Information Section 1	Marielle	Nieuwhof
Health & Medicines Information Section 2	Vivien	Tong
Working Group History of Pharmacy	Jacques	Gravé
SIG on Regulatory Sciences 1	Rodrigo	Cristofoletti
SIG on Regulatory Sciences 2	Vinod	Shah
SIG on Regulatory Sciences 3	Horst-Dieter	Friedel

FIP Congress Seoul 2017

Abstract Mentors and (Co-)Reviewers FIP Congress Seoul 2017		
TOPICS	**Firstname**	**Familyname**
SIG Drug Design and Discovery 1	Takuya	Kumamoto
SIG Drug Design and Discovery 2	Ulrike	Holzgrabe
SIG Formulation Design and Pharmaceutical Technology 1	Jayne	Lawrence
SIG Formulation Design and Pharmaceutical Technology 2	Tetsuya	Ozeki
SIG Pharmacokinetics/Pharmacodynamics & Systems Pharmacology 1	Stephan	Schmidt
SIG Pharmacokinetics/Pharmacodynamics & Systems Pharmacology 2	Masoud	Jamei
SIG Natural Products 1	Amanda	Corbett
SIG Natural Products 2	Michiho	Ito
SIG Translational Research and Individualized Medicines	Michael	Sorich
SIG Analytical Sciences and Pharmaceutical Quality 1	Daniel	Tang
SIG Analytical Sciences and Pharmaceutical Quality 2	Masaru	Kato
SIG Biotechnology 1	Michael	Ward
SIG Biotechnology 2	Hanns-Christian	Mahler
Pharmacy Technicians Symposium 1	Susan	James
Pharmacy Technicians Symposium 2	Arijana	Mestrovic
SIG on Pharmacy Practice Research 1	Martin	Schulz
SIG on Pharmacy Practice Research 2	Ross	Tsuyuki
SIG on Pharmacy Practice Research 3	Charlie	Benrimoj

A special thank you is extended to Timothy Chen and Gabriëlle Wiederkehr, for the organisation of the oral presentation sessions.

Poster session FIP Seoul 2017

The allotted timeslots for hanging up posters should be strictly observed

Saturday 9 and Sunday 10 september

Location: Foyer Room 208 A/B

	first poster	last poster	no	Instruction for Presenters
Pharmacy Technicians	POS-PHT-001	POS-PHT-005	5	**Presenters are kindly requested to:** Hang up poster on Saturday between 08:00 and 09:00 Be at poster board on Saturday between 12:00 and 14:30 Take down poster on Sunday at 12:00

Monday 11 and Tuesday 12 September

Location: Exhibition Hall C

	first poster	last poster	no	Instruction for Presenters
Community Pharmacy	POS-CPS-001	POS-CPS-112	112	**Presenters are kindly requested to:** Hang up poster on Monday between 08:00 and 09:00 Be at poster board on Monday and Tuesday between 12:00 and 14:30 Take down poster on Tuesday between 14:30 and 16:00
Drug Design and Discovery	POS-DDD-001	POS-DDD-013	13	
Hospital Pharmacy	POS-HPS-001	POS-HPS-158	158	
Military and Emergency Pharmacy	POS-MEP-001	POS-MEP-007	7	
Pharmacy Technicians	POS-PHT-001	POS-PHT-005	5	
Total			**295**	

Wednesday 13 and Thursday 14 September

Location: Exhibition Hall C

	first poster	last poster	no	Instruction for Presenters
Academic Pharmacy	POS-APS-001	POS-APS-068	68	**Presenters are kindly requested to:** Hang up poster on Wednesday between 08:00 and 09:00 Be at poster board on Wednesday and Thursday between 12:00 and 14:30 Take down poster on Thursday between 14:30 and 16:00
Analytical Sciences and Pharmaceutical Quality	POS-ASP-001	POS-ASP-010	10	
Biotechnology	POS-BIO-001	POS-BIO-006	6	
Clinical Biology	POS-CBS-001	POS-CBS-001	1	
Formulation Design and Pharmaceutical Technology	POS-FDP-001	POS-FDP-039	39	
Health and Medicines Information	POS-HMIS-001	POS-HMIS-033	33	
Industrial Pharmacy	POS-IPS-001	POS-IPS-002	2	
Natural Products	POS-NPR-001	POS-NPR-017	17	
Pharmaceutical Practice	POS-PHP-001	POS-PHP-001	1	
Pharmacokinetics/Pharmacodynamics & Systems Pharmacology	POS-PAA-001	POS-PAA-021	21	
Pharmacy Practice Research	POS-PPR-001	POS-PPR-013	13	
Regulatory Sciences	POS-RSC-001	POS-RSC-009	9	
Social and Administrative Pharmacy	POS-SAPS-001	POS-SAPS-063	63	
Translational Research and Individualised Medicines	POS-TRI-001	POS-TRI-005	5	
Total			**288**	

Exhibition

Monday 11 to Wednesday 13 September, 09:00 – 18:00
Thursday 14 September, 09:00 – 15:00

Exhibition Hall C
The exhibition is an integral part of the congress and offers a unique opportunity to explore the interests and services of global and local industry partners. The exhibition is organised by the Korean Pharmaceutical Association and the Pharmaceutical Society of Korea. The exhibition showcases local and international developments in pharmacy, and provides a central meeting point and information zone throughout the congress.

The exhibition runs for three and a half days and will be accessible to registered congress participants and registered accompanying persons.



Exhibitors' list

Will follow ASAP

Social events

WELCOME RECEPTION

Sunday 10 September, 17:30 – 19:30

Exhibition Hall C
The Korean Host Committee invites all participants and accompanying persons for a warm and festive welcome reception immediately after the opening ceremony. All guests will be treated to drinks and a selection of typical Korean food in the perfect setting for catching up with old friends and making new ones.

FIRST TIMERS MEETING

For first time participants only
Monday 11 September, 07:30 – 09:00

Grand Ballroom 101 + 102
At this meeting, first timers will be able to meet not only experienced congress participants but also representatives from FIP sections and special interest groups. This is a great opportunity for new attendees to exchange ideas, meet interesting people and get involved in FIP's global network and the vast array of projects that FIP offers to all its members.

FIP FUN RUN

Tuesday 12 September, 06:45 – 08:00



Jamsil Indoor Gymnasium
10 Jamsil-dong, Songpa-gu, Seoul
For the sixth year the FIP congress will include a 5km fun run. The FIP Fun Run is an excellent event promoting a healthy lifestyle, and an alternative networking opportunity for delegates. We ask runners to register their interest in advance, as places are limited. The 10 euro fee is a donation to the FIP Foundation, which helps the development of programmes to advance the pharmacy profession. All runners will receive a small memento.

YPG (YOUNG PHARMACISTS' GROUP) EVENING

Tuesday 12 September, 19:30

A-Board
3F, 379 Apgujeong-dong, Gangnam-gu, Seoul

SECTION DINNERS

Wednesday 13 September, 20:00 – 22:30

Academic Pharmacy Section

Clinical Biology Section

Community Pharmacy Section

Health and Medicines Information Section

Hospital Pharmacy Section

Industrial Pharmacy Section

Military and Emergency Pharmacy Section

Social and Administrative Pharmacy Section

The venue and address of your Section Dinner are printed on the dinner ticket.

CLOSING DINNER

Thursday 14 September, 19:30 – 23:00

Sheraton Grande Walkerhill Hotel
177 Walkerhill-ro, Gwangjang-dong,
Gwangjin-gu, Seoul

The Closing Dinner will be an exceptional and memorable evening and will treat participants to a spectacular closure of this year's FIP congress!

DINNER TICKETS

If you have purchased a ticket for one or more of the dinners, you will have received this in your registration package upon arrival. If you would like to buy a ticket, please check at the registration desk if there are still tickets available.

Deze foto is alleen voor redactioneel gebruik (mensen herkenbaar in beeld).
Om die reden raden wij af deze te gebruiken.



Overview of sessions and meetings

	Auditorium	Grand Ballroom 101 + 102	Grand Ballroom 103	Grand Ballroom 104
SATURDAY 9 September				
Morning (09:00 - 12:00)			E2 - 8th AIM Global Deans Forum (day 1)	
Afternoon (14:30 - 17:30)		1st Council Meeting (14.00 - 18.00)	E2 - 8th AIM Global Deans Forum (day 1)	
SUNDAY 10 September				
Morning (09:00 - 12:00)		2nd Council Meeting	E2 - 8th AIM Global Deans Forum (day 2)	E14 - Pharmacy in the Republic of Korea
Afternoon ((15:00 - 17:00)	Opening ceremony			
MONDAY 11 September				
Breakfast (07:30 - 08:45)		First Timers Meeting and Showcase (07:30 - 09:00)		
Morning (09:00 - 12:00)	P1 - Plenary opening session: What is the Soul of Pharmacy?			
Lunch time (12:30 - 14:00)	E12 - Pharmacists contributing to increasing flu immunization	E15 - Host Madsen Award lecture (12:30 - 13:30)	C12 - Management tools for and clinical services	E7 - SIGN 1: FIP Member Organisations present their best cases and challenges
Afternoon (14:30 - 17:30)	A1 - Nurturing pharmacy - opportunities and challenges	C1 - Serving the patient needs: Where to start?	C3 - Improved outcomes: Better health	E11 - FIP-WHO session
(17:30 - 18:00)				
TUESDAY 12 September				
Morning (09:00 - 12:00)	D2 - Hi-tech solutions for education and practice	E16 - What's new in practice? SOP Part 1	C6 - How to deal with low health literacy	
Lunch time (12:30 - 14:00)	D3 - Telepharmacy: A new era of care		C11 - Medicine shortages: The International Toronto Summit and beyond	E8 - SIGN 2: FIP Member Organisations present their best cases and challenges
Afternoon (14:30 - 17:30)	D1 - Smart pharmacy: An introduction	E17 - What's new in practice? SOP Part 2	C8 - Substandard and Falsified medicines: Safeguarding the supply chain, protecting people	A8 - Overcoming national challenges with FIP*Ed*

FIP Congress Seoul 2017

	Grand Ballroom 105	Room 208 A/B	Auditorium Meeting Room 1	Auditorium Meeting Room 2	Room 209
SATURDAY 9 September					
		E1 - Pharmacy Technicians Symposium (day 1)			
		E1 - Pharmacy Technicians Symposium (day 1)			
SUNDAY 10 September					
		E1 - Pharmacy Technicians Symposium (day 2)			
	Opening ceremony				
MONDAY 11 September					
	Korean Session: Generic Substitution and Doctor's Prescribing				
	International Pharmacist Steering Group on Anticoagulation	B4 - Gene-based therapy 101			SIG: Analytical Sciences & Pharmaceutical Quality (14:00 -14:30)
	B2 - Putting precision pharmacotherapy into practice	A12 - Young pharmacists: Putting heart and soul into pharmacy	EMROPharm Forum Assembly (14:30 -16:30)		
			SIG: Regulatory Sciences		
TUESDAY 12 September					
	B1 - One size doesn't fit all: Dose individualisation with population pharmacology	CPS Steering Committee Meeting	WPPF General Assembly (09:00 - 12:00)		
	C7 - Medication literacy, mother and children	AcPS Business Meeting (13:00 - 14:30)	HaMIS Business Meeting (13:00 – 14:30)		
	E13 - Hot Topic Session: The refugee crisis and the role of pharmacy	African Forum Assembly (14:30 - 17:30)			

Overview of sessions and meetings

	Auditorium	Grand Ballroom 101 + 102	Grand Ballroom 103	Grand Ballroom 104
WEDNESDAY 13 September				
Breakfast (07:30 - 08:45)				
Morning (09:00 - 12:00)	A2 - How to develop people	E18 - What's new in industry & science? SOP Part 3	C4 - Healthy ageing	A7 - Transforming pharmacy education: The year after Nanjing
Lunch time (12:30 - 14:00)	A6 - New care models: Integrating physician and pharmacy workforces	C10 - Patient safety: How resilient are your services?	C9 - Antimicrobial stewardship - Looking for global solutions	E9 - SIGN 3: FIP Member Organisations present their best cases and challenges
(14:00 - 14:30)				SIG: Drug Design & Discovery
Afternoon (14:30 - 17:30)	A5 - Listen better, talk better - Skills to improve medicines taking	D5 - Antibody drug conjugates: Where have we come from? Future opportunities	C5 - Implementing services for people taking a new medicine	A3 - Advancing pharmacy education
(17:30 - 18:00)			SIG Pharmacy Practice Research	
THURSDAY 14 September				
Morning (09:00 - 12:00)		D4 - Smart learning: Dynamic integration of technology into education	C2 - A new service: Making the right choice	A11 - Ethics forum: Addressing issues in nurturing the soul of pharmacy
(12:00 - 12:30)				
Lunch time (12:30 - 14:00)	E6 - Challenges and achievements of pharmacy practice advancement		Pharmabridge	E10 - SIGN 4: FIP Member Organisations present their best cases and challenges
(17:30 - 18:00)				
Afternoon (14:30 - 17:30)	E3 - Natural products: Ensuring responsible use	3rd Council Meeting (14:00 - 16:00)	A10 - Pushing the boundaries of leadership learning	A9 - History of pharmacy: Great pharmacists, great discoveries
(17:30 - 18:00)	SIG: Natural Products			

FIP Congress Seoul 2017

Grand Ballroom 105	Room 208 A/B	Auditorium Meeting Room 1	Auditorium Meeting Room 2	Room 209
WEDNESDAY 13 September				
A4 - Finding the humanitarian face of pharmacy				
E4 - Pharmacy inspections: Standardising pharmacy practice one site at a time	Hospital Pharmacy Section Assembly (11:30 - 12:30)		Forum of the Americas Meeting	
MEPS Business Meeting		IPS Assembly		
E5 - Humanitarian pharmacists: Time to develop a competency framework			YPG Business Meeting	SEARPharm Forum Assembly (14.30 - 15:45)
THURSDAY 14 September				
B5 - Biosimilars for all: Research, regulation and responsible use		SAPS Business Meeting (10:30 - 12:00)	IPSF Business Meeting	
SIG: Biotechnology				
SIG: Translational Research & Individualized Medicines				
B3 - Individualised medicines: An ethical approach				

Sessions overview per topic FIP Seoul 2017

Medicines and beyond! The soul of pharmacy

Plenary session:

P1 What is the soul of pharmacy? 40
Monday 11 September 2017, 09:00 - 12:00

Topic A: Nurturing the soul of pharmacy

Topic coordinators:
Betty Chaar & Ralph Altiere

A1 **Nurturing pharmacy — Opportunities and challenges** 46
Monday 11 September 2017, 14:30 - 17:30
A2 **How to develop people** 70
Wednesday 13 September 2017, 09:00 - 12:00
A3 **Advancing pharmacy education** 80
Wednesday 13 September 2017, 14:30 - 17:30
A4 **Finding the humanitarian face of pharmacy** 70
Wednesday 13 September 2017, 07:15 - 08:45
A5 **Listen better, talk better — Skills to improve medicines taking** 81
Wednesday 13 September 2017, 14:30 - 17:30
A6 **New care models: Integrating physician and pharmacy workforces** 77
Wednesday 13 September 2017, 12:30 - 14:00
A7 **Transforming pharmacy education: The year after Nanjing** 72
Wednesday 13 September 2017, 09:00 - 12:00
A8 **Overcoming national challenges with FIP*Ed*** 62
Tuesday 12 September 2017, 14:30 - 17:30
A9 **History of pharmacy: Great pharmacists, great discoveries** 93
Thursday 14 September 2017, 14:30 - 17:30
A10 **Pushing the boundaries of leadership learning** 94
Thursday 14 September 2017, 14:30 - 17:30
A11 **Ethics forum: Addressing issues in nurturing the soul of pharmacy** 86
Thursday 14 September 2017, 09:00 - 12:00
A12 **Young pharmacists: Putting heart and soul into pharmacy** 47
Monday 11 September 2017, 14:30 - 17:30

Topic B: Precision pharmacotherapy

Topic coordinators:
Don Mager & Michael Ward

B1 **One size doesn't fit all: Dose individualisation with population pharmacology** 53
Tuesday 12 September 2017, 09:00 - 12:00
B2 **Putting precision pharmacotherapy into practice** 48
Monday 11 September 2017, 14:30 - 17:30
B3 **Individualised medicines: An ethical approach** 96
Thursday 14 September 2017, 14:30 - 17:30
B4 **Gene-based therapy 101** 43
Monday 11 September 2017, 12:30 - 14:00
B5 **Biosimilars for all: Research, regulation and responsible use** 87
Thursday 14 September 2017, 09:00 - 12:00

Topic C: Pharmacy services: Going beyond prescription

Topic coordinators:
Lars-Åke Söderlund & Arijana Meštrović

C1 **Serving the patient needs** 49
Monday 11 September 2017, 14:30 - 17:30
C2 **A new service: Making the right choice** 88
Thursday 14 September 2017, 09:00 - 12:00
C3 **Improved outcomes: Better health** 50
Monday 11 September 2017, 14:30 - 17:30
C4 **Healthy ageing** 73
Wednesday 13 September 2017, 09:00 - 12:00
C5 **Implementing services for people taking a new medicine** 83
Wednesday 13 September 2017, 14:30 - 17:30
C6 **How to deal with low health literacy** 54
Tuesday 12 September 2017, 09:00 - 12:00
C7 **Medication literacy, mothers and children** 58
Tuesday 12 September 2017, 12:30 - 14:00
C8 **Substandard and Falsified medicines: Safeguarding the supply chain, protecting people** 64
Tuesday 12 September 2017, 14:30 - 17:30
C9 **Antimicrobial stewardship: Looking for global solutions** 78
Wednesday 13 September 2017, 12:30 - 14:00
C10 **Patient safety: How resilient are your services?** 79
Wednesday 13 September 2017, 12:30 - 14:00
C11 **Medicine shortages: The International Toronto Summit and beyond** 60
Tuesday 12 September 2017, 12:30 - 14:00

Topic D: Smart pharmacy

Topic coordinators:
Linda Hakes and Hiroshi Suzuki

D1 **Smart pharmacy: An introduction** 65
Tuesday 12 September 2017, 14:30 - 17:30
D2 **Hi-tech solutions for education and practice** 55
Tuesday 12 September 2017, 09:00 - 12:00
D3 **Telepharmacy: A new era of care** 61
Tuesday 12 September 2017, 12:30 - 14:00
D4 **Smart learning: Dynamic integration of technology into education** 90
Thursday 14 September 2017, 09:00 - 12:00
D5 **Antibody drug conjugates: Where have we come from? Future opportunities** 84
Wednesday 13 September 2017, 14:30 - 17:30

Topic E: Targeting special interests

Topic coordinator:
Zuzana Kusynová

E1 **Pharmacy Technicians Symposium (Part I & II)** 32
Saturday 9 September 2017, 09:00 - 17:30
E1 **Pharmacy Technicians Symposium (Part III)** 35
Sunday 10 September 2017, 09:00 - 12:00
E2 **8th AIM Global Deans Forum (Day 1)** 36
Saturday 9 September 2017, 09:00 - 17:30
E2 **8th AIM Global Deans Forum (Day 2)** 37
Sunday 10 September 2017, 09:00 - 12:00
E3 **Natural products: Ensuring responsible use** 97
Thursday 14 September 2017, 14:30 - 17:30
E4 **Pharmacy inspections: Standardising pharmacy practice one site at a time** 75
Wednesday 13 September 2017, 09:00 - 12:00
E5 **Humanitarian pharmacists: Time to develop a competency framework** 85
Wednesday 13 September 2017, 14:30 - 17:30
E6 **Challenges and achievements of pharmacy practice advancement in developing countries** 92
Thursday 14 September 2017, 12:30 - 14:00
E7 **SIGN 1 Session: Sharing ideas in a global network** 45
Monday 11 September 2017, 12:30 - 14:00
E8 **SIGN 2 Session: Sharing ideas in a global network** 59
Tuesday 12 September 2017, 12:30- 14:00
E9 **SIGN 3 Session: Sharing ideas in a global network** 80
Wednesday 13 September 2017, 12:30 - 14:00
E10 **SIGN 4 Session: Sharing ideas in a global network** 93
Thursday 14 September 2017, 12:30 - 14:00
E11 **FIP-WHO session 1** 52
Monday 11 September 2017, 14:30 - 17:30
E12 **Pharmacists contributing to increasing flu immunization** 42
Monday 11 September 2017, 12:30 - 14:00
E13 **Hot Topic session: The refugee crisis and the role of pharmacy - Challenges and opportunities** 66
Tuesday 12 September 2017, 14:30 - 16:00
E14 **Pharmacy in the Republic of Korea** 38
Sunday 10 September 2017, 09:00 - 12:00
E15 **Høst-Madsen Award lecture** 45
Monday 11 September 2017, 12:30 - 13:30
E16 **What's new in practice? Short oral presentations Part 1** 56
Tuesday 12 September 2017, 09:00 - 12:00
E17 **What's new in practice? Short oral presentations Part 2** 68
Tuesday 12 September 2017, 14:30 - 17:30
E18 **What's new in industry and science? Short oral presentations Part 3** 76
Wednesday 13 September 2017, 09:00 - 12:00

Sessions Programme

Theme of the congress:

Medicines and beyond! The soul of pharmacy

All over the world the pharmacy profession is facing new challenges and changes. Pharmaceutical science and industry are focused on new, precise therapy, individualised approaches and innovations, using novel technology and engineering. Smart pharmacy in community and hospital settings offers patient-centred services, promoting responsible use of medicines, patient safety and quality of life. Patients are seeking professional help and advice, including pharmacists in their decisions, and expecting much more than just medicines.

The soul of pharmacy has to be nurtured and preserved, based on tradition, education, innovation and dedication. Education in pharmacy, therefore, has to address not only knowledge and skills, but also attitudes and values, and has to motivate pharmacists and pharmaceutical scientists to maintain quality and professionalism.
The professional symposia at this congress will show new ways to add value to the pharmacy profession, to provide more than medicines and to care for patient needs. Join us in this remarkable journey and enjoy the best practice, science and education experiences and achievements presented by global experts!

Saturday 9 & Sunday 10 September

E1 PHARMACY TECHNICIANS SYMPOSIUM

Theme for discussion: Evolution of the Pharmacy Support Workforce
Related to topic A: Nurturing the Soul of Pharmacy
Organised by FIPEd
(separate registration required)

Pharmacy technicians and other pharmacy support workers, pharmacists, educators, health administrators and others interested in the education, practice, regulation, development and promotion of the pharmacy support workforce will explore current issues and challenges about education, role development and utilization of the pharmacy support workforce within the pharmacy profession and broader healthcare system. The discussions and debate during this one and a half day forum will focus on the roles, education programs and services that have evolved and serve to define pharmacy technicians and other pharmacy support workforce cadres in a variety of contexts globally. Presentations will reflect findings from an extensive global survey and literature review on the roles and responsibilities of pharmacy technicians, which was undertaken in 2016, in preparation of a report commissioned by the FIP Board of Pharmaceutical Practice.

PART I – UNDERSTANDING THE PROFILE OF PHARMACY TECHNICIANS

Saturday 9 September
09:00 – 12:00

Room 208 A/B
Short presentations and facilitated discussion

Learning objectives
At the conclusion of this knowledge-based session, participants will be able to:
1. Identify the current and developing technology that pharmacy technicians are using in practice.
2. Determine strategies that can be used to remain competent in the face of new technologies.
3. Understand how common practice models and legal frameworks that pharmacy technicians work within impact the roles they are able to fulfil.
4. Identify new approaches to practice that may be adapted to their own practice.

Chair
Cathy Schuster (Canadian Council for Accreditation of Pharmacy Programs, Canada)

Programme

09:00 – 09:10
1) Introduction:
Pharmacy technicians and pharmacy support workforce cadres working with pharmacists: The value of FIP's Global Descriptive Study
Susan James (Ontario College of Pharmacists, Canada)

09:10 – 10:20
2) Plenary session and facilitated discussion:
The impact of technology on the role of pharmacy technicians
Christina Durinck (European Association of Pharmacy Technicians, Denmark)

10:20 – 10:40
Coffee/tea break

10:40 – 12:00
3) Short presentations
10:40 -11:00
a. Pharmacy assistants working in primary care
Lizette Monteith (Khethimpilo, South Africa)

11:00 – 11:20
b. Pharmakonomists in community practice
Camilla Lindeblad (Pharmakon, Denmark)

11:20 – 11:40
c. Pharmacy technicians in hospital practice
Samuel Nyanje (AMPATH, Kenya)

11:40 – 12:00
d. Pharmacists Beyond Borders: A role for pharmacy technicians in Sierra Leone
Signe Bødker (University of Copenhagen, Denmark)

PART II – COMPETENCY FRAMEWORKS - THE HEART OF ROLE DEFINITIONS

Saturday 9 September
14:30 – 17:30

Room 208 A/B

Educational session and discussion forum

This session will showcase competency frameworks that currently exist for pharmacy technicians and other pharmacy support workforce cadres and will include exploration of how needs based competency models can support development of education requirements and regulatory frameworks. Participants will have the opportunity to discuss and share competency frameworks from a variety of jurisdictions and begin to explore the possibility of a common framework for pharmacy technicians and other pharmacy support workers.

Learning objectives

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

1. Explain the basic principles and foundations related to defining competence for the pharmaceutical workforce.
2. Describe the different regulatory and educational tools that can be used to reinforce competency in practice.
3. Describe the challenges that occur when trying to apply a common set of competencies across geographic borders.
4. Determine the benefits of using a competency based model of education to achieve standardized practice in the workplace.

Chair

Susan James (Ontario College of Pharmacists, Canada)

Programme

14:30 – 15:50

1) Educational session

14:30 – 14:50
a. The FIP Competency Framework
Andreia Bruno (Monash University, Australia)

14:50 – 15:05
b. Defining competencies for pharmacy technicians
Tamara Köhler (Utrecht University, Netherlands)

15:05 -15:20
c. Harmonizing competencies In the European Union
Christina Durinck (European Association of Pharmacy Technicians, Denmark)

15:20 – 15:35
d. Essential competencies for entry to practice - a regulatory framework
Cathy Schuster (Canadian Council for Accreditation of Pharmacy Programs, Canada)

15:35 – 15:50
e. Structured competency training for pharmacy technicians in Khoo Teck Puat Hospital
Nithya Ganagam Manickasawami (Alexandra Health System, Singapore)

15:50 – 16:10
Coffee/tea break

16:10 – 17:15
Workshop activity

17:15 – 17:30
Wrap-up
An informal social event will be available for interested participants on Saturday evening.

PART III –WHEN TWO SOULS MEET - AN INTEGRATION CHALLENGE

Sunday 10 September
09:00 – 12:00

Room 208 A/B

Presentation and interactive workshop

The final session will provide participants with an opportunity to discuss the integration of mid-level cadres within the pharmacy profession at the local, national and international level. Specific case examples will be discussed to explore models and partnerships that support the recognition of pharmacy technicians and other pharmacy support workers as valued members of the pharmaceutical workforce. An introduction to the Global Statements and Pharmaceutical Workforce Development Goals that were accepted at the 2016 Global Conference in Nanjing will be provided. Workshop participants will identify strategies to promote integration of the pharmacy support workforce within the Workforce Development Goals, setting the groundwork for enhanced access to pharmaceutical care services for patients.

Learning objectives

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

1. Identify the key messages of the Global Statements and Pharmaceutical Workforce Development Goals (PWDGs).
2. Understand the importance of the Global Statements and the PWDGs for the pharmacy support workforce.
3. Identify strategies that can be used to develop the pharmacy support workforce locally and internationally.

Chair

Christina Durinck (European Association of Pharmacy Technicians, Denmark)

Programme

09:00 – 09:30

1. Plenary session:
The Global Conference: Introduction to the Statements and Pharmaceutical Workforce Development Goals
Ian Bates (University College London, UK)

09:30 – 10:20

2. Case examples:
a) Striving for consensus on the role of pharmacy technicians
Everett McAllister (Pharmacy Technician Certification Board, USA)

b) Applicable, affordable, accessible: development of a pharmacy technician training manual
Shirley-Anne Boschmans (Nelson Mandela Metropolitan University, South Africa)

10:20 – 10:40
Coffee/tea break

10:40 – 11:40

3. Interactive workshop:
Pharmaceutical Workforce Development Goals - Integrating pharmacy technicians and other pharmacy support workforce cadres
Facilitator Kat Hall (University of Reading, UK)

11:40 – 12:00
Symposium wrap-up

E2 8TH AIM GLOBAL DEANS FORUM: NURTURING THE SOUL OF PHARMACY EDUCATION

Saturday 9 September,
09:00 – 17:30
Sunday 10 September,
09:00 – 12:00

Grand Ballroom 103
***Organised by FIP*Ed**
(By invitation, for Deans who are members of AIM only)

AIM members, Deans and academic leaders from around the world will discuss and debate how pharmacy and pharmaceutical sciences educational institutions are transforming their programmes towards achieving better health outcomes. The discussions and debate during this one and half day Forum will focus on areas of critical importance in the role of pharmacy educational institutions, focusing on educating the pharmacy and pharmaceutical sciences workforce of the future.

Saturday 9 September

09:00 – 09:15
Introduction for the Dean's Forum
Wayne Hindmarsh (FIPEd Chair of AIM, Canada)

09:15 – 13:00
Session I – Developing a strategic perspective for the school
Dean's Global Leadership

This session will discuss how to develop a strategic perspective for your school. A strategic perspective can facilitate the process of engagement when implementing change, this session will focus on methodologies that can be used to empower Deans to better conceptualise it. Transforming a concept into a strategic and business plan, with a clear vision, mission and strategic objectives for the school.

Chair
John Pieper (St Louis College of Pharmacy, USA)

Workshop facilitators
Ralph Altiere (University of Colorado Denver, USA)
Lilian Azzopardi (University of Malta, Malta)

Programme
1. **Planning and strategy management in schools and faculties – Challenges and opportunities**
   James Honan (Harvard Graduate School of Education, USA)
2. **Workshop I: Organisational change**

14:00 – 17:30
Session II – Strategic planning for the future

In this small session, an hour will be allocated to discuss future plans for the AIM Forum and possible projects – including the Nanjing statements and Workforce Development Goals – across the FIP Education and Boards. The objective of this session is to reflect what has worked in the past and what we would like to see addressed in the Dean's Forum.

1. **Workshop II – Strategic planning and change management**
2. **Workshop III – Aspirational gradation mapping**
3. **Nanjing Statements and closing remarks**
   Wayne Hindmarsh (University of Toronto, Canada)

17:30 - 19:00
Social event
(Invitation for Deans only)

Sunday 10 September

09:00 to 12:00
Session III – Managing change in schools
Educational Session

This session will focus on the uniqueness of managing change in the schools. It will incorporate several structured approaches to support the school and the academic staff, by making links of how to gain better support and how to improve performance. It will also provide examples of how to prepare, equip and support the academic staff to successfully adopt change in order to drive organizational success and outcomes.

Chair
Paul Gallagher (Royal College of Surgeons in Ireland, Ireland)

1. **Overview of managing curricular change process with reference to theoretical frameworks**
   Michelle Flood (Royal College of Surgeons in Ireland, Ireland)
2. **Case study – Ireland**
   Michelle Flood (Royal College of Surgeons in Ireland, Ireland)
3. **Case study – Kuwait**
   Pierre Moreau (Kuwait University, Kuwait)

Coffee/tea break

4. **Case study – India**
   Gurumurthy Parthasarathi (JSS University, India)
5. **Workshop activity**
6. **Wrap up and conclusion**
   Paul Gallagher (Royal College of Surgeons in Ireland, Ireland)

E14 PHARMACY IN THE REPUBLIC OF KOREA

Sunday 10 September,
09:00 – 12:00

Grand Ballroom 104
Organised by the Local Host Committee
Duration: 3h

Introduction
Pharmacy in Korea is going through rapid changes in all aspects ranging from education to medication safety management, pharmacy practice, and new drug development. All colleges of pharmacy in Korea have been running the 6-year entry-level Pharm.D. program since 2011. Its impacts on education quality and curricula, student recruitment, graduate study, and career choices are far-reaching. Likewise, pharmacy practice in Korea is quick to adopt a new clinically-oriented practice model that demands pharmaceutical care for improved patient safety and outcomes. To this end, community and hospital pharmacies are moving to adopt GPP (good pharmacy practice) standards. Furthermore HIRA (Health Insurance Review Agency) implemented a nationwide real-time drug utilization review network to check for inappropriate prescribing not only at physician visits but also at pharmacy dispensing. Moreover, KFDA (Korea Food and Drug Administration) introduced a spontaneous medication error reporting system. The KFDA is now leading the effort to bring to harmonization the pharmacovigilance regulations in the Asia-Pacific region. Finally, it is exciting how the Korean drug industry has transformed its business model from manufacturing to new drug discovery. As a result of making investments in research and development, the industry has now made some successes in bringing some new drugs to market such as natural products, new formulations, new structural modifications with incremental benefits, and biosimilars. The Korean session is dedicated to briefing the details experienced by respective organizations such as pharmacy education accreditation council, national health insurance agency, food and drug administration, community and hospital pharmacy, and the industry.

Chairs
Chul Soon Yong, Sun Choi, Kevin Choe (Local Host Organizing Committee, Republic of Korea)

Organisers
Sang Kook Lee, Joon Seok Bang (Local Host Organizing Committee, Republic of Korea)

Programme
09:00 - 09:05
1. **Introduction by the chairs**

09:05 – 09:30
1. **A hundred-year preparation of Korean pharmacy and pharmaceutical sciences for the improvement of global human welfare**
   Chang-Koo Shim (College of Pharmacy - Seoul National University, Republic of Korea)

09:30 - 09:55
2. **Past, present and future of pharmaceutical education in the Republic of Korea**
   Jung-Mi Oh (College of Pharmacy - Seoul National University, Republic of Korea)

09:55 - 10:20
3. **Drug utilization review program in South Korea**
   Dong-Sook Kim (Pharmaceutical Policy Research Team, Research Center, Health Insurance Review & Assessment Service, Republic of Korea)

10:20 -10:35
Coffee/tea break

10:35 - 10:55
4. **Shaping community pharmacy excellence**
   Minku Kang (College of Pharmacy, Woosuk University, Republic of Korea)

10:55 - 11:15
5. **Hospital pharmacy: issues and challenges in South Korea**
   Heeje Sung (Asan Medical Center, Republic of Korea)

11:15 - 11:35
6. **Regulatory status and internationalization of pharmaceutical safety management at the Food and Drug Administration**
   Youngju Choi (National Institute of Food and Drug Safety Evaluation, MFDS, Republic of Korea)

11:35 - 11:55
7. **Korean pharmaceutical industry: current & future**
   Jung Yun-Taek (Pharmaceutical Strategy Institute, Republic of Korea)

11:55 - 12:00
8. **Closing remarks**
   Aree Moon (The Pharmaceutical Society of Korea, Republic of Korea)



Monday 11 September

P1 - Plenary opening session: What is the soul of pharmacy?

Organised by the FIP Programme Committee
Auditorium
Duration: 3h

Monday 11 September, 09:00-12:00

Code: _____

Introduction

The "soul of pharmacy" can be described as the core purpose of pharmacy — its raison d'être. The essence of this core purpose of pharmacy as a profession is, no doubt, patient care. Incorporated in the make-up of its soul are the values of the profession and the principles underlying professional practice within the public arena. Pharmacists play an integral role in the health care system around the globe. Whether it is in their role as advisors, innovators, educators or health care service providers, pharmacists are dedicated to supporting the health and well-being of their clients and patients. This plenary session will provide an insight into the various roles and contributions that pharmacy makes to health care worldwide, and consider how these reflect the soul of pharmacy. Other sessions on this topic in the congress programme will explore how we nurture this soul of pharmacy and address contemporary issues that present both opportunities and challenges to its core elements.

Learning objectives

At the end of this knowledge-based session, participants will be able to:

1. Describe the term "soul of pharmacy" and its core purpose in health care.
2. Identify the position of pharmacy in the health system as a profession dedicated to supporting the health and well-being of its clients and patients.
3. Express the value of pharmacy and pharmaceutical sciences in advancing health care.
4. Describe the role of education and training in supporting the soul of pharmacy among students and practitioners.

Chairs

Betty Chaar (The University of Sydney, Australia) and Dai John (Cardiff University Wales, UK)

Programme

09:00 – 09:15
1. The "soul of pharmacy" and its core purpose in health care
William Zellmer (Pharmacy Foresight Consulting, USA)

09:15 – 09:40
2. Pharmacy in a world of limited resources
Leonila Ocampo (Philippine Pharmacists Association, Philippines)

09:40 – 10:05
3. Pharmaceutical science and innovation
Leslie Benet (University of California San Francisco, USA)

10:00 – 10:20
4. Pharmacy caring for patients
Warren Meek (C7 Consulting Limited, Canada)

10:20 – 10:40
Coffee/tea break

10:40 – 11:05
5. Educating pharmacists for the future
William Charman (Monash University, Australia)

11:05 – 11:40
6. Panel discussion

11:40 – 12:00
7. Q&A



E12 PHARMACISTS CONTRIBUTING TO INCREASING FLU IMMUNIZATION

Monday 11 September, 12:30 – 14:00

Organised by FIP and IFPMA
Auditorium
Duration: 1h30

Chair:
Luis Lourenço (FIP Community Pharmacy Section, Portugal)

Learning objectives
At the conclusion of this knowledge-based session, the participants will be able to:
1. List the major barriers to appropriate flu vaccine coverage at global level.
2. Explain how pharmacists can help mitigating some of these barriers.
3. Describe an immunization programme led by pharmacists.
4. Describe strategies for implementation of an immunization service in a community pharmacy.

Programme
12:30 - 12:40
1. Introduction by the chair

12:40 - 13:05
2. Global perspectives on barriers and solutions to expanding flu vaccine coverage
IFPMA representative TBA

13:05 - 13:20
3. National programme for expanding flu immunization by pharmacists
Pamela Logan (Irish Pharmacy Union, Ireland)

13:20 - 13:30
4. Experience of implementing a flu immunization service in a community pharmacy – lessons learned
Luis Lourenço (FIP Community Pharmacy Section, Portugal)

13:30 - 13:50
5. Panel discussion (with Q/A from the audience)

13:50 - 14:00
6. Conclusions by the chair

B4 GENE-BASED THERAPY 101

Monday 11 September, 12:30-14:00

Code:

Organised by the FIP Social and Administrative Pharmacy Section and the FIP Industrial Pharmacy Section
Room 208 A/B
Duration: 1h30

Introduction
Gene-based therapy and individualised medicines are considered the future of medicine. Many people have heard of individualised medicines, but most will not know what they are or how they are made. Pharmacists may not be sure of what these drugs could mean to their patients, or their practice of pharmacy. The financial implications of personalised medicine are being understood now in many countries, as the price for these drugs, which affect smaller populations, may be high. Also, a number of newer therapies require companion diagnostics to confirm genetic markers.

The clinical development path for gene-based therapies and targeted drugs differs from that of previous therapies as well. As not all patients have the same genetic make-up, not all patients will be appropriate for new, targeted therapies — a notion which brings unique challenges to drug development and patient selection. In this session, we aim to explain what gene-based therapy is by covering the drug development process, including patient selection, gene target selection and choice of delivery. The session will also focus on unique monitoring requirements and, in some cases, regulatory requirements associated with genetic-based therapy.

There are many nuances and this session will provide simple, clear and useful information for all pharmacists on individualised, gene-based therapy.

Learning objectives
At the conclusion of this application-based session, participants will be able to:
1. Express what gene-based therapy is clinically and what the benefits are for patients.
2. Differentiate how targeted therapies differ from historical treatments in the drug development and approval process.
3. Compare the different drug delivery pathways for individualised medicines, including compounding and specialty pharmacies.
4. Advocate for targeted therapies monitored by pharmacists and the implications of drug labelling.

Chair
Tara Hehir (Locum pharmacist, Australia)

Programme
12:30 – 13:00
1. What is clinically unique about gene-based therapies?
Cyril Usifoh (University of Benin, Nigeria)

13:00 – 13:30
2. From research to the patient — How are these new drugs made and provided?
Charles Jarvis (Premier DNA Health Outcomes Solutions, USA)

13:30 – 14:00
3. Targeted therapies and patient care — Monitoring inpatients and outpatients
Jae-Gook Shin (Inje University, Republic of Korea)

C12 MANAGEMENT TOOLS FOR CLINICAL SERVICES

Monday 11 September, 12:30 – 14:00

ACPE Code: _____

Organised by the FIP Health and Medicines Information Section
Grand Ballroom 103
Duration: 1h30

Introduction
To effectively deliver patient-centred pharmaceutical services, pharmacists must have the appropriate tools and resources, in particular, management tools. Management tools are also essential for the implementation of broader policies and guidelines, such as the FIP Basel Statements.

Pharmaceutical management tools allow for a structured approach to development, implementation and evaluation of service delivery, as well as ensure that services can be audited and improved.

Learning objectives
At the conclusion of this knowledge-based session, participants will be able to:
1. Describe management models and tools that can be used as a framework for implementation and delivery of pharmaceutical services.
2. Describe Porter´s Five Forces for empowering pharmacy clinical services.
3. Describe a model canvas for improving pharmacist care planning.
4. Identify problems and solutions for implementation of clinical pharmacy services without an underpinning framework.

Chair
Aldo Alvarez-Risco (Universidad de San Martin de Porres, Peru)

Programme
12:30 – 12:35
1. Introduction by the chair

12:35 – 12:55
2. Porter's Five Forces for improving outcomes in clinical services
Lawrence Brown (American Pharmacists Association, USA)

12:55 – 13:15
3. Case study — implementation of a pharmaceutical service underpinned by a management model
Seun Omobo (World Health Organization, Nigeria)

13:15 – 13:35
4. Canvas model for improving pharmacist care in a community pharmacy
Aldo Alvarez-Risco (Universidad de San Martin de Porres, Peru)

13:35 – 13:55
5. Workshop — Application of models to the implementation of pharmaceutical services

13:55 – 14:00
6. Conclusion by the chair

E7 SIGN 1: SHARING IDEAS IN A GLOBAL NETWORK: STRATEGIES FOR PHARMACY WORKFORCE DEVELOPMENT

Monday 11 September, 12:30 – 14:00

Organised by FIP
Grand Ballroom 104
Duration: 1h30

FIP Member Organisations presenting their best initiatives and challenges

Chair
Tom Menighan (FIP, USA)

Programme
12:30 – 13:00
1. Academy, professional development and systems – What progress has Great Britain made with the FIP workforce development goals?
Catherine Duggan (Royal Pharmaceutical Society, UK)

13:00 – 13:30
2. A regional project laboratory identifies competency as the critical factor to implement GPP in the Western Pacific Region
John Jackson (Western Pacific Pharmaceutical Forum, Australia)

13:30 – 14:00
3. Doctors and pharmacists working together: the Zimbabwean experience
Wilfred Gurupira (Pharmaceutical Society of Zimbabwe, Zimbabwe)

E15 HØST-MADSEN AWARD LECTURE: PROGRESS IN DRUG ADMINISTRATION TECHNOLOGY AND THE FUTURE OF MEDICINE

Monday 11 September, 12:30 – 14:00

Organised by the FIP Board of Pharmaceutical Sciences
Grand Ballroom 101 + 102
Duration: 1h

The Høst-Madsen Medal is made possible by the support of Danmarks Apotekerforening, the Association of Danish Pharmacies.

The Høst-Madsen Medal is the highest pharmaceutical sciences award of FIP and is given, every two years, to an eminent pharmaceutical scientist whose research is particularly distinguished.

Awardee 2017:
Mitsuru Hashida (University of Kyoto, Japan)

A1 NURTURING PHARMACY — OPPORTUNITIES AND CHALLENGES

Monday 11 September, 14:30 – 17:30

Code:

Organised by the FIP Programme Committee
Auditorium
Duration: 3h

Introduction

The plenary session provided insight into the soul of pharmacy. For the soul of pharmacy to be sustained and advanced, it is essential to nurture — grow, cultivate, develop and cherish — it continuously.
The building blocks of the pharmacy practitioner are first laid down with training of students and continue into professional life. Students will inevitably be instilled with the science and principles of practice — going hand in hand to provide a solid basis for the cognitive development of the student towards becoming a competent pharmacist.
Professionalisation of the pharmacy student, however, requires more than acquiring basic knowledge. A profession is defined not only by its expert body of knowledge. It is also about the recognition and upholding of professional values — in the adoption of attitudes and behaviours that shape a profession and a professional. As pharmacists, we are to maintain a standard of behaviour reflective of expectations of contemporary practice, patient-centred care and the trust placed in us by the people and communities we serve.
Developing these values and behaviours necessitates consideration of different perspectives: the student (motivation, expectations, experience and reality); the educator (competency development, professionalisation); the practitioner (role model, motivation and attitude); the patient (expectations, trust and ethical demands).
To nurture the soul of pharmacy we need to explore the role of the academic institutions, professional organisations and practitioners in shaping the core values and purpose of the profession. In doing so, we need to explore opportunities and challenges to its core elements.
This session will endeavour to explore alignment of the academic, science and practice communities around the core values of pharmacy; the role of mentoring and role modelling; individual care versus population health/public health care.

Learning objectives

At the end of this application-based session, the participants will be able to:
1. Advocate what is required of the profession to nurture its profile, its role in health care and its future.
2. Analyse the possibilities of action for nurturing our profession.
3. Endorse ways of overcoming barriers to nurturing the profession.

Chairs

Stephen Eckel (University of North Carolina, USA) and Linda Garrelts MacLean (Washington State University, USA)

Programme

14:30 – 15:10

1. Nurturing the soul of pharmacy: How?
Tom Zlatic (St. Louis College of Pharmacy, USA)

15:10 – 15:50

2. Opportunities for nurturing the soul of pharmacy: What can be done today to nurture our profession?
Andy Gray (University of KwaZulu Natal, South Arica)

15:50 – 16:10

Coffee/tea break

16:10 – 16:50

3. Challenges faced in the nurturing of pharmacy: How to overcome barriers to nurturing the profession?
Betty Chaar (The University of Sydney, Australia)

16:50 – 17:30

4. World Café — perspectives on nurturing the soul of pharmacy
The World Café will focus on how each group should or can influence nurturing the soul of pharmacy. The task of each table is to develop ideas that your group can and should use to nurture the soul of pharmacy and the impact this might have on pharmacists as providers of health care.

Table 1: Students
Table 2: Pharmacists
Table 3: Consumers
Table 4: Educators
Table 5: Scientists

A12 YOUNG PHARMACISTS: PUTTING HEART AND SOUL INTO PHARMACY

Monday 11 September, 14:30 – 17:30

Code:

Organised by the FIP Young Pharmacists' Group, the International Pharmaceutical Students' Federation and the FIP Academic Pharmacy Section
Room 208 A/B
Duration: 3h

Introduction

Young pharmacy professionals are nurturing, sustaining and developing the essence of the pharmacy profession in different parts of the world. Confronted by challenges such as shortage of pharmacists, limited access to technologies for research and development and so on, innovative ways of health promotion, professional advocacy and continuous development for and by young pharmacists and other ways of improving the impact of pharmacy in global health are discussed in this session.

Learning objectives

At the conclusion of this knowledge-based session, participants will be able to:
1. List the different challenges faced by young pharmacy professionals globally.
2. Identify the various ways of peer development, science advancement, health promotion, professional advocacy, gaining business skills and capacity building strategies for young pharmacy professionals.
3. Describe the impact of these strategies on the profession and public health.
4. Outline the possible ways of scale-up and improvement of these strategies.

Chairs

Ruth Awosika (Wal-Mart Pharmacy, USA) and Djulija Haxhibeti (Apoteka Panacea, Montenegro)

Programme

14:30 – 14:35

1. Introduction by the chair

14:35 – 15:00

2. The benefit of pharmacy practice experience
Israel Bimpe (IPSF, Rwanda)

15:00 – 15:25

3. **Putting experience into practice: Nurturing pharmacy**
   Seun Omobo (Senate Committee on Health, Nigeria)

15:25 – 15:50

4. **Practice in the future — A vision of potential directions**
   Prateek Jain (Decision Resources Group, India)

15:50 – 16:10

Coffee/tea break

16:10 – 16:30

5. **The science of pharmacy — Supporting and advancing our knowledge**
   Miranda Sertic (FIP YPG, Croatia)

16:30 – 16:50

6. **Nurturing pharmacy: A regional perspective**
   Hamzeh Dgour Hamzeh (Hikaya, Jordan)

16:50 – 17:10

7. **Practice/science meets business development: The new "pharmapreneurs"**
   Christian Taveira (YPG, Portugal)

17:10 – 17:30

8. **Closing: Panel discussion, Q&A**

B2 PUTTING PRECISION PHARMACOTHERAPY INTO PRACTICE

Monday 11 September, 14:30 – 17:30

ACPE Code: _____

Organised by the FIP Academic Pharmacy Section and the FIP Special Interest Group on Translational Research and Individualized Medicines
Grand Ballroom 105
Duration: 3h

Introduction

Pharmacists play important roles in generating knowledge and collaborating with other health care professionals to provide patient-centred and individualised patient care. This session will highlight competencies for pharmacists, strategies to educate and train future practitioners and scientists and to translate the science of precision pharmacotherapy into practice. It will also discuss the newer -omic techniques with a focus on the usefulness of genomic and metabolomics analysis for severe adverse drug reactions.

Learning objectives

At the conclusion of this knowledge-based session, participants will be able to:
1. Describe competencies and educational models to incorporate precision pharmacotherapy in pharmacy curricula.
2. Define approaches to the implementation of pharmacogenetics into clinical practice.
3. Describe newer -omics techniques and genetic biomarkers associated with severe adverse drug reactions.

Chair

Wafa Dahdal (American College of Clinical Pharmacy, USA)

Programme

14.30 – 14:40

1. **Introduction**

14:40 – 15:15

2. **Teaching towards competencies in precision pharmacotherapy: The US perspective**
   Christina Aquilante (University of Colorado, USA)

15:15 – 15:50

3. **Implementing pharmacogenetics into clinical practice: European perspective**
   Balram Chowbay (National Cancer Centre Singapore, Singapore)

15.50 – 16:10

Coffee/tea break

16:10 – 16:45

4. **Newer -omics techniques: Focus on the usefulness of microbiome**
   Masahiro Tohkin (Graduate School of Pharmaceutical Sciences Nagoya City, Japan)

16:45 – 17:20

5. **Meet the expert (table discussions)**

17:20 – 17:30

6. **Panel discussion**

C1 SERVING THE PATIENT NEEDS: WHERE TO START?

Monday 11 September, 14:30 – 17:30

ACPE Code: _____

Organised by the FIP Programme Committee
Grand Ballroom 101 + 102
Duration: 3h

Introduction

Pharmaceutical care or medicines optimisation is provided for the direct benefit of the patient, and the pharmacist is responsible directly to the patient for the quality of that care. The fundamental goals, processes, and relationships of pharmaceutical care exist regardless of practice setting, and aims for the safe and best available therapy for the patient. It is the professional activity in which the pharmacist, using his or her skills, knowledge and experience, revealing patients' needs, sets priorities in the treatment process and takes responsibility for a positive outcome of medicine therapy. That responsibility is shared with the doctor who determined the diagnosis and prescribed therapy, and with patients, leading them to the compliance, follow up and counselling about responsible treatment. Today, many countries are trying to introduce new services in community and hospital pharmacies to incorporate value-added pharmacy services in health systems. Although such attempts are of interest to national and international pharmacy organisations, many challenges often appear in the implementation of this new pharmacy model. Some of the difficulties may include: attitudes and opinions of other health professionals, culture, lack of cooperation and inadequate communication between them, reimbursement issues, an insufficient number of pharmacists, space or equipment for the provision of pharmaceutical care, including the structure and organisation of health care.

Learning objectives

At the end of this knowledge-based session, participants will be able to:
1. List different kind of services provided in community and hospital pharmacy all over the world.
2. Describe what tools are needed in implementation of services and how they have to be used.

3. Identify various financial models for successful services implementation.
4. Define educational needs and competencies required to provide services in pharmacy — now and in the future.

Chairs

Lars-Åke Söderlund (Apoteket AB, Sweden) and Arijana Meštrović (Pharma Expert, Croatia)

Programme

09:00 – 09:10

1. Introduction by the chairs

09:10 – 09:45

2. Overview of services (what exists: community, hospital, clinical setting)
Ash Soni (Royal Pharmaceutical Society, UK)

09:45 – 10:20

3. Toolbox to implement the services (where to start, time, resources management; reimbursement, stakeholders, indicators)
Per Kristian Faksvåg (Norwegian Pharmacy Association, Norway)

10:20 – 10:40

Coffee/tea break

10:40 – 11:10

4. Best financial models for sustainable patient care
Charlie Benrimoj (University of Technology Sydney, Australia)

11:10 – 11:40

5. Educating pharmacists for person-centred care (undergraduate, CE, CPD requirements)
Fei-Lin Lin Wu (National Taiwan University, China Taiwan)

11:40 – 12:00

6. Panel discussion and take home messages

C3 IMPROVED OUTCOMES: BETTER HEALTH

Monday 11 September, 14:30 – 17:30

ACPE Code: _____

Organised by the FIP Community Pharmacy Section, the FIP Health and Medicines Information Section, the FIP Social and Administrative Pharmacy Section and the FIP Industrial Pharmacy Section
Grand Ballroom 103
Duration: 3h

Introduction

Adherence means taking the correct dose of your medicines every time, exactly as prescribed by your health care provider or recommended by your pharmacist. Adherence can also be defined as "The extent to which a person's behaviour — taking medicine, following a diet, or making healthy lifestyle changes — corresponds with agreed-upon recommendations from a health care provider" (World Health Organization, 2003)
Chronic conditions currently account for three of every four dollars spent on health care, a factor of their prevalence and the spiralling cost of specialty drugs to treat them. And the burden of chronic diseases is a global and growing problem. Since medicines play a significant role in the management of chronic diseases, with patients usually having to visit their community pharmacy regularly to collect their medicines, pharmacists are ideally positioned to provide additional chronic disease management services. Because barriers to medication adherence are complex and varied, solutions to improve adherence must be multifactorial. Improving adherence is crucial to the future sustainability of our health systems, where community and hospital pharmacy have vital roles to play. The cost of non-adherence can be calculated both in terms of generating additional costs for health care systems due to misuse or non-use of medicines leading to further treatment or even hospitalisation, and by simply wasting resources through the non-use of prescribed medicines funded by health care systems. Suboptimal health literacy and lack of involvement in the treatment decision-making process will also affect adherence and outcome of the therapy.

Learning objectives

At the conclusion of this knowledge-based session, participants will be able to:
1. Identify effective targeted interventions to address the barriers to adherence.
2. Describe the range of chronic conditions where pharmacists can play a significant role in supporting adherence to therapy.
3. Identify non-adherence through the use of medication management systems, and deliver targeted interventions for a range of chronic conditions.
4. Identify the lack of health literacy as a risk factor in adherence.

Chairs

Manjiri Gharat (Indian Pharmaceutical Association, India) and Parisa Aslani (The University of Sydney, Australia)

Programme

14:30 – 14:35

1. Introduction by the chair

14:35 – 15:00

2. What patients need
Gi-Jong An (Korean Alliance of Patient Organizations, Republic of Korea)

15:00 – 15:25

3. Adherence and medicines management for chronic diseases
Victoria Garcia Cardenas (University of Technology Sydney, Australia)

15:25 – 15:50

4. The value of health literacy among patients for improved adherence
Parisa Aslani (The University of Sydney, Australia)

15:50 – 16:10

Coffee/tea break

16:10 – 16:35

5. Adherence 3.0 (innovative approaches to increase adherence and outcomes)
John Shaske (Ascent Health Care Consultants, Canada)

16:35 – 17:00

6. Specific examples of how the pharmaceutical industry cooperates with pharmacy in optimising therapy and outcomes
Ulf Janzon (Merck Sharp & Dohme, Sweden)

17:00 – 17:30

7. Discussion and take home messages

E11 FIP-WHO SESSION: SCHOOLS OF INTERNATIONAL NONPROPRIETARY NAMES (INN) – SHARED CHALLENGES AND SUCCESSES

Monday 11 September, 14:30 – 17:30

Organised by the FIP Programme Committee
Grand Ballroom 104
Duration: 3h

Introduction
This session will present the work of WHO around the International Nonproprietary Names (INN). In particular, it will highlight the launch of the new WHO project "Schools of INN." The healthcare professionals are in general aware of the INN and what it stands for, but do they really use it? What is the gap in education and how can it be closed? These provocative questions will be addressed at this session. It will provide an overview of the usage of INN in practice and education. Most universities' educational programmes use INN in teaching but the industry and healthcare sectors often the use of brand names. There is a gap in the education of healthcare professionals and even though INN is used in teaching, students are often not familiar with the stem system. A greater understanding of the construct of the INN by the students will help them better appreciate the learning of pharmacology and therapeutics. The FIP Academic Institutional Membership (AIM), is a Membership that allows Faculties and Schools of Pharmacy and Pharmaceutical Sciences to become inter-connected on a global platform of discussion, leadership and shared challenges and successes. The session will highlight best practices within AIM Schools showcasing successful examples and ways of collaboration between AIM and WHO towards the better use of INN in practice and education.

Chair
Sabine Kopp (World Health Organization, Switzerland)

Learning objectives
At the conclusion of this knowledge-based session, participants will be able to:
1. Define the importance of International Nonproprietary Names (INN) use in practice.
2. Identify the gaps of INN use in education.
3. Outline the implementation of the "Schools of INN" project.

Programme
1. **WHO School of INN Project**
   Raffaella Balocco Mattavelli (International Nonproprietary Names Programme WHO, Switzerland)

2. **Use of INN in European Schools – Best Practices & Challenges**
   Lilian Azzopardi (European Association of Faculties of Pharmacy, Malta)

3. **AIM Member School**

Tuesday 12 September

B1 ONE SIZE DOESN'T FIT ALL: DOSE INDIVIDUALISATION WITH POPULATION PHARMACOLOGY

Tuesday 12 September, 09:00 – 12:00

ACPE Code: _____

Organised by the FIP Programme Committee and the FIP Special Interest Group on PK/PD & Systems Pharmacology
Grand Ballroom 105
Duration: 3h

Introduction
Most medicines have been developed for an "average" patient, with little to no concern for medicine responses in specific patient subpopulations or individuals. This "one-size-fits-all" approach often results in good performance in some patients but less than successful treatment outcomes in many others, including poor efficacy and/or adverse medicine reactions. This session directly addresses the critical unmet medical need of individualised pharmacotherapy. Population pharmacology enables personalised medicine therapy through the effective integration of individual patient characteristics, pharmacokinetic and pharmacodynamic principles, and computational algorithms capable of handling big data and mathematical models of medicine action.

Learning objectives
At the end of this knowledge-based session, the participants will be able to:
1. Describe basic population-based pharmacokinetic-pharmacodynamic principles that underlie dosing regimen individualisation in specific diseases and special populations.
2. Describe approaches for integrating pharmacogenomic data in population-based analyses for identifying sources of variability in medicine action.
3. Specify the utility of population pharmacology and feedback measurements obtained from patients for individualising warfarin and antibiotic dose individualisation.

Chairs
Don Mager (University at Buffalo, USA) and Michael Ward (University of South Australia, Australia)

Programme
09:00 – 09:40
1. **Basic principles of applied pharmacometrics**
   Stephan Schmidt (University of Florida, USA)

09:40 – 10:20
2. **Development of a model-based dose-individualisation approach with an application to routine clinical data**
   Jinju Guk (Yonsei University College of Medicine, Republic of Korea)

10:20 – 10:40
Coffee/tea break

10:40 – 11:20
3. **Dose-individualisation of anticoagulants**
   Speaker TBA

11:20 -12:00
4. **Optimising antimicrobial dosing regimens in clinical practice**
   Markus Zeitlinger (Medical University of Vienna, Austria)

C6 HOW TO DEAL WITH LOW HEALTH LITERACY

Tuesday 12 September, 09:00 – 12:00

ACPE Code: _____

Organised by the FIP Health and Medicines Information Section
Grand Ballroom 103
Duration: 3h

Introduction

Health literacy within the broader context of health care can be regarded as a patient/consumer risk factor as well as an asset. As a risk factor, low health literacy can impact on a person's health and medicine-related information seeking behaviour, ability to understand and act on information, self-management and self-care, and adherence to therapy. Health care professionals should be aware of this and ensure that all services delivered follow a "Health Literacy Universal Precautions" approach. As an asset, health care professionals can improve a person's health literacy through improvements in knowledge and capacity. Therefore, having an understanding of health literacy, specifically in populations who are more vulnerable and who visit the pharmacy more frequently, will equip pharmacists with the knowledge needed to support these groups more effectively and deliver services that are targeted and tailored to their needs.

Learning objectives

At the conclusion of this application-based session, participants will be able to:
1. Analyse health literacy as a risk and an asset.
2. Evaluate the impact of low health literacy levels on clinical, humanistic and economic outcomes.
3. Differentiate the specific needs of women in health care and the impact of low health literacy on their use of health care services.
4. Advocate for interventions that pharmacists can deliver to increase women's knowledge and capabilities, and therefore health literacy.
5. Advocate for interventions that pharmacists can deliver which are underpinned by the Health Literacy Universal Precautions.

Chairs

Greg Duncan (Monash University, Australia) and Parisa Aslani (The University of Sydney, Australia)

Programme

09:00 – 09:20
1. Health literacy and its impacts
Greg Duncan (Monash University, Australia)

09:20 – 09:40
2. Women's health and the impact of low health literacy
Safeera Hussainy (Monash University, Australia)

09:40 – 10:00
3. Complementary and alternative medicine information seeking behaviour of women and the impact of health literacy
Speaker TBA

10:00 – 10:20
4. Interventions to assist women with low health literacy to find appropriate and relevant information
Parisa Aslani (The University of Sydney, Australia)

10:20 – 10:40
Coffee/tea break

10:40 – 11:05
5. Interventions to assist women with low health literacy to use appropriate health care — Case example from the Republic of Korea
Euni Lee (Seoul National University College of Pharmacy, Republic of Korea)

11:05 – 11:30
6. Interventions to assist women with low health literacy to use appropriate health care — Case example from the Netherlands
Marcel Bouvy (Utrecht University, Netherlands)

11:30 – 12:00
7. Workshop on developing interventions which can be delivered in the pharmacy for women to assist with information seeking behaviour, decision-making and informed consent

D2 HI-TECH SOLUTIONS FOR EDUCATION AND PRACTICE

Tuesday 12 September, 09:00 – 12:00

ACPE Code: _____

Organised by the FIP Academic Pharmacy Section and the International Pharmaceutical Students' Federation
Auditorium
Duration: 3h

Introduction

Several technologies have been used in delivering pharmacy education and practice worldwide. This session will cover a spectrum of topics, including technologies used in pharmacy education, practice and resource-limited regions. The session will also cover some of the technologies used to engage patients in their own care. An open forum will engage the participants in discussing challenges and opportunities for employing various technologies in their daily activities. The focus of the discussion will be on education and practice, summarising approaches to overcome challenges to effective deployment.

Learning objectives

At the conclusion of this knowledge-based session, participants will be able to:
1. Describe best practices for integrating technology in pharmacy education.
2. Identify advantages of employing telemedicine to advance pharmacists' reach to the underserved.
3. Identify opportunities to use technology effectively in resource-limited regions.
4. Outline types of technologies that may be used by the patient to monitor and manage their own health.
5. List types of technologies used by the international audience and discuss advantages and disadvantages of each.

Chairs

Wafa Dahdal (American College of Clinical Pharmacy, USA) and Amber Liu (ttopstart BV, Netherlands)

Programme

09:00 – 09:10
1. Introduction

09:10 – 09:50
2. Best practices for integrating technology in pharmacy education: A national perspective
Peter Vlasses (Accreditation Council for Pharmacy Education, USA)

09:50 – 10:20

3. **Expanding pharmacist services to the underserved: Employing telemedicine in pharmacist services**
   Speaker TBA

10:20 – 10:40

Coffee/tea break

10:40 - 11:00

4. **Employing technologies in resource limited countries**
   Suphat Subongkot (Khon Kaen University, Thailand)

11:00 – 11:20

5. **Using technologies that engage patients in their own care**
   Kevin Yap (National University of Singapore, Singapore)

11:20 – 11:50

6. **Open forum: Challenges and opportunities to integrating technology into pharmacy education and practice – The international experience**

11:50 – 12:00

7. **Panel discussion**

E16 WHAT'S NEW IN PRACTICE? SHORT ORAL PRESENTATIONS PART 1

Tuesday 12 September, 09:00 – 12:00

Organised by the FIP Boards of Pharmaceutical Sciences and Pharmaceutical Practice
Grand Ballroom 101 + 102
Duration: 3h

Chair

Timothy Chen (The University of Sydney, Australia)

Programme

09:00 – 09:10

1. **Introduction by the chair**

09:10 – 09:20

2. **Vertical integrated master's - A new approach to pharmacy education**
   Andreia Bruno (Australia)

09:20 – 09:30

3. **Tobacco-related education in Schools of Pharmacy in the Middle East: A multinational cross-sectional study**
   Noora Al Hamad (Qatar)

09:30 – 09:40

4. **Call for action - Global Conference on Pharmacy and Pharmaceutical Sciences Education outcomes**
   Andreia Bruno (Australia)

09:40 – 09:50

5. **Overcoming barriers to interprofessional practice and education through legislative reform: A Colorado case study**
   Kari Franson (USA)

09:50 – 10:00

6. **Pharmacy technicians: A multi-faceted approach to developing a new cadre of pharmacy support personnel in South Africa**
   Stephanie Lukas (USA)

10:00 – 10:10

7. **Impact of undergraduate use of an online professional decision-making tool on pre-registration and early careers practice**
   Maria Allinson (UK)

10:10 – 10:20

8. **Progress testing in pharmacy post-registration foundation training**
   Helen Chang (UK)

10:20 – 10:40

Coffee/tea break

10:40 – 10:50

9. **Appropriateness of dispensing practices of medicines to inmates in elderly care homes – evidence from a cohort of Sri Lanka**
   Lelwala Guruge Thushani Shanika (Sri Lanka)

10:50 – 11:00

10. **Determining the clinical effectiveness and patient satisfaction of a pharmacist-managed travel medicine clinic under an expanded scope of practice**
    Sherilyn Houle (Canada)

11:00 – 11:10

11. **Hypercholesterolemia in parents as predictor of hypercholesterolemia in children**
    Jorge Robledo (Argentina)

11:10 – 11:20

12. **The value of pharmacists in Know Your Pulse awareness campaign across 5 countries**
    Sotiris Antoniou (UK)

11:20 – 11:30

13. **High levels of time in therapeutic range (TTR) demonstrated by community pharmacy anticoagulation service (CPAMS)**
    Dale Griffiths (New Zealand)

11:30 – 11:40

14. **The shared pharmaceutical record in Belgium: An indispensable instrument for every pharmacist**
    Manon Buyl (Belgium)

11:40 – 11:50

15. **Gaps in methodology and theory of medicines information research - Findings from Finland**
    Niina Mononen (Finland)

11:50 – 12:00

16. **Clinical information needs and access for healthcare providers in NHS Highland Scotland**
    Khalfan Almazroui (Oman)

C7 MEDICATION LITERACY, MOTHERS AND CHILDREN

Tuesday 12 September, 12:30 – 14:00

ACPE Code: _____

Organised by the FIP Pictogram Project
Grand Ballroom 105
Duration: 1h30

Introduction
Pharmacist and patient communication is crucial for a successful relationship and effective exchange of information, especially when serving patients with low education, low medication literacy or other communication barriers. Health literacy plays a crucial role in the comprehension of health and drug-related instructions. Prescription drug labels that are not clearly stated can be misunderstood due to limited literacy or impaired reading ability. The misinterpretation of medication instructions can result in under-treatment and possible harm. Ultimately, low health literacy may lead to adverse health outcomes. These consequences of low health literacy are particularly severe for maternal, new born and child health with findings showing a strong association between mother's literacy level and infant mortality. The purpose of this session is to provide an overview of the concept of medication literacy and present medication literacy tools that pharmacists around the world can use to improve maternal, new born and child health. The session will also focus on helping participants enrich their understanding of the factors influencing medication literacy levels in the population and how to identify patients at higher risk.

Learning objectives
At the conclusion of this knowledge-based presentation and application-based session, participants will be able to:
1. Analyse medication literacy and understand the importance of the concept for pharmacist working in maternal, new born and child care.
2. Evaluate factors influencing medication literacy and how to identify patients most at risk for medication literacy.
3. Adjust their interventions to the needs of their patients with low medication literacy by using medication literacy tools.
4. Advocate for or educate other health care providers about the use of enhanced communication strategies that support medication literacy and maternal, new born and child health.

Chair
Régis Vaillancourt (Children's Hospital of Eastern Ontario, Canada)

Programme
12:30 – 13:00
1. **Medication literacy and maternal, child and new born health: What can pharmacists do?**
   Régis Vaillancourt (Children's Hospital of Eastern Ontario, Canada)

13:00 – 13:30
2. **Medicines use in children, and the pharmacy curriculum**
   Rebekah Moles (The University of Sydney, Australia)

13:30 – 14:00
3. **Rethinking discharge pharmacy services at a paediatric hospital: Identifying patients at risk for low medication literacy and using the right tools to deliver medication instructions**
   Annie Pouliot (Children's Hospital of Eastern Ontario, Canada)

E8 SIGN 2: SHARING IDEAS IN A GLOBAL NETWORK: IMPROVING THE USE OF MEDICINES – THE IRREPLACEABLE ROLE OF PHARMACISTS

Tuesday 12 September, 12:30 – 14:00

Organised by FIP
Grand Ballroom 104
Duration: 1h30

FIP Member Organisations presenting their best initiatives and challenges, including the presentations of the winning projects of the FIP Health Promotion Campaign Award and the FIP Pharmacy Practice Improvement Programme Award

Chair
Eeva Teräsalmi (FIP, Finland)

Programme
12:30 – 13:00
1. **Presentation of the winning project of the 2017 Pharmacy Practice Improvement Programme Award**

13:00 – 13:30
2. **Presentation of a winning project of the 2017 Health Promotion Campaign Award**

13:30 – 14:00
3. **The future framework for pharmacy regulation in the EU: Impact of recent ECJ cases and the new Proportionality Directive**
   Jens Gobrecht (Federal Union of German Associations of Pharmacists, Germany)



C11 MEDICINE SHORTAGES: THE INTERNATIONAL TORONTO SUMMIT AND BEYOND

Tuesday 12 September, 12:30 – 14:00

Code: _____

Organised by the FIP Social and Administrative Pharmacy Section and the FIP Industrial Pharmacy Section
Grand Ballroom 103
Duration: 1h30

Introduction

Medicine shortages continue to be a significant problem for health systems, pharmacists and health care providers worldwide. Shortages of effective medicines generally have negative clinical, economic and emotional outcomes that impact on individuals and public health institutions, posing challenges to health care systems. Also, as a result of medicine shortages and in the absence of commercially available therapeutic alternatives or substitutes, health care practitioners, especially pharmacists, are sometimes obliged to find "work arounds". For example, pharmacists may need to compound customised dosage forms of medicines in short supply to meet patient clinical care needs and, in doing so, must ensure compliance with sterile and non-sterile compounding guidelines that meet compendial and regulatory standards. There are many challenges that may be associated with work arounds in relation to medicine shortages. This session will discuss current global trends, the clinical, humanistic and economic impact of medicine shortages, and strategies to manage the problem. This session will also describe the importance of active communication and collaboration among stakeholders in managing medicine shortages and identify pharmacists' roles within the medication use cycle in managing shortages, the medicine supply chain and compounding to meet individual patient needs.

Learning objectives

At the conclusion of this knowledge-based session, participants will be able to:
1. List the key recommendations on tackling medicine shortages globally, issued at the International Summit Toronto in June 2013 hosted by FIP.
2. Describe strategies, resources and options for the management of medicine shortages.
3. Explain the role of active communication strategies with stakeholders in managing medicine shortages.
4. Outline the role of the pharmacist in general in managing individual medicine shortages and assurance of safe compounding practices.

Chair

Ola Ghaleb Al Ahdab (Ministry of Health, United Arab Emirates)

Programme

12:30 – 12:35
1. Introduction by the chair

12:35 – 13:00
2. Where are we today since the Toronto Summit?
Dawn Tan (International Medical Clinic for Expatriates, Singapore)

13:00 – 13:25
3. Pharmaceutical compounding as a viable option in medicine shortages
Vaiyapuri Subramaniam (Veterans Health Administration, USA)

13:25 – 13:50
4. Novel strategies can reduce the impact of medicine shortage: Industry perspective
Tiia Metiäinen (European Federation of Pharmaceutical Industries and Associations, Belgium)

13:50 – 14:00
5. Conclusion by the chair

D3 TELEPHARMACY: A NEW ERA OF CARE

Tuesday 12 September, 12:30 – 14:00

Code: _____

Organised by the FIP Community Pharmacy Section and the FIP Military and Emergency Pharmacy Section
Auditorium
Duration: 1h30

Introduction

Telepharmacy is the delivery of pharmaceutical care via telecommunications to patients in locations where they may not have direct contact with a pharmacist. It is an instance of the wider phenomenon of telemedicine, as implemented in the field of pharmacy.
New patient care opportunities and many potential benefits of telemedicine can be envisaged, including: improved access to information; provision of care not previously deliverable; improved access to services and increasing care delivery, especially in underserved and rural areas; improved professional education; quality control of screening programmes; and reduced health-care costs. Although telemedicine clearly has a wide range of potential benefits, it also has some disadvantages such as: a potential breakdown in the relationship between health professional and patient; a potential breakdown in the relationship between health professionals; increased workload; issues concerning the quality of health information; and organisational and bureaucratic difficulties.

Already, telepharmacy has had a significant impact and its influence is beginning to show promise in underserved populations and rural communities, and as technology evolves to provide a better user experience with safer and more convenient tools, a greater number of patients will be supported remotely by a pharmacist.

Learning objectives

At the conclusion of this knowledge-based session, participants will be able to:
1. Describe the process and singularities of telepharmacy versus traditional care.
2. Identify the advantages and disadvantages of telepharmacy, and outcome metrics for results measurement.
3. Specify the potential of telepharmacy, and future evolution and trends.
4. Define different technological requirements and how they may affect practice.

Chairs

Jaime Acosta Gómez (Farmacia Acosta, Spain) and Sylvain Grenier (Canadian Forces, Canada)

Programme

12:30 – 13:00
1. Reaching four continents: The US Navy experience
Angelica Klinski (US Navy, USA)

13:00 – 13:30
2. Telepharmacy from community pharmacies: A practical experience
Lawrence Brown (American Pharmacists' Association, USA)

13:30 – 14:00
3. Telepharmacy service in Denmark: Results so far
Helle Jacobsgaard (Association of Danish Pharmacies, Denmark)

A8 OVERCOMING NATIONAL CHALLENGES WITH FIP*ED*

Tuesday 12 September, 14:30 – 17:30

ACPE Code: _____

Organised by FIP*Ed*
Grand Ballroom 104
Duration: 3h

Introduction

This session will address the global impact of the FIP*Ed* resources. Having the right evidence and information is vital to develop policy, monitor trends and evaluate progress. The current status of FIP*Ed* projects will be presented. Participants will be invited to engage with the vision and strategic plans of FIP*Ed*, through presentation of examples of the impact of FIP*Ed* tools and evidence to help solve national challenges in education. They will join in a debate on how educational leadership can be translated into local visions for developing the profession. An important part of this session will be the congress launch of the 2017 Education Development Team Technical Report; past FIP*Ed* technical reports have become important guidance and policy direction publications for members, member associations and a wider audience. All our reports and publications are available on the FIP website and are widely cited. This session will provide the opportunity for members and member organisations to see the results and impact of EDT work, to comment on them and provide ideas for further areas of interest. This session will be a mix of leading-edge presentations and participant engagement activities.

Learning objectives

At the conclusion of this knowledge-based session, participants will be able to:
1. Describe the importance/impact of the FIP*Ed* resources.
2. Identify the content and key messages of the 2017 FIP*Ed* Technical Report.
3. Outline practical ways in which FIP*Ed* resources and tools can be applied locally or transnationally.
4. Define the relevance and importance of the issues described in the technical reports and other EDT tools to the ongoing development of the pharmacy profession.

Chair

Ian Bates (University College London, UK) and Susan James (Ontario College of Pharmacists, Canada)

Programme

14:30 – 14:40
1. Introduction
Susan James (Ontario College of Pharmacists, Canada)

14:40 – 15:00
2. Launch of 2017 Technical Report
Ian Bates (University College London, UK)

15:00 – 15:20
3. Global impact of collaborative education
a. Jill Boone (University of Cincinnati, USA)
b. Ian Larson (Monash University, Australia)
c. Claire Anderson (University of Nottingham, UK)

15:20 – 15:50
4. Workshop activity
Facilitated by EDT's Education Leads

15:50 – 16:10
Coffee/tea break

16:10 – 16:25
5. Global impact of pharmaceutical workforces development
a. Kirstie Galbraith (Monash University, Australia)
b. Christopher John (Royal Pharmaceutical Society, UK)
c. Toyin Tofade (Howard University, USA)

16:25 – 16:40
6. Global impact of innovative education (pre- and postgraduation)
a. Mike Rouse (Accreditation Council for Pharmacy Education, USA)
b. Timothy Rennie (University of Namibia, Namibia)
c. Tina Brock (Monash University, Australia)

16:40 – 17:20
7. Workshop activity
Facilitated by EDT's Education Leads

17:20 – 17:30
8. Wrap up and closing
Ian Bates (University College London, UK)



C8 SUBSTANDARD AND FALSIFIED (SF) MEDICAL PRODUCTS: SAFEGUARDING THE SUPPLY CHAIN, PROTECTING PEOPLE

Tuesday 12 September, 14:30 – 17:30

ACPE Code: _____

Organised by the FIP Hospital Pharmacy Section, the FIP Military and Emergency Pharmacy Section and the FIP Industrial Pharmacy Section
Grand Ballroom 103
Duration: 3h

Introduction
Substandard and Falsified (SF) medical products are a global challenge to the pharmaceutical supply chain. SF medicines compromise the distribution of high quality medicines, putting patient safety at risk. This session will clarify what constitutes "counterfeit" medicines, show the global scope of the problem and potential effects on patient outcomes. Measures to forensically combat existing and potential counterfeit products, as coordinated by the WHO, will be presented. A global overview of legislative measures to prevent counterfeit drugs will be presented and the underlying approaches will be discussed.

Learning objectives
At the conclusion of this application-based session, participants will be able to:
1. Differentiate Substandard and Falsified (SF) medical products
2. Advocate the WHO Global Surveillance and Monitoring System
3. Evaluate various legislative measures securing the pharmaceutical supply chain
4. Detect weaknesses in the supply chain of their own practice.

Chairs
Nkechi Christiana Anyanwu (Federal Medical Centre, Nigeria) and K.H. Chung (Sungkyunkwan University, Republic of Korea)

Programme
14:30 – 14:40
1. Introduction by the chairs

14:40 – 15:15
2. The loopholes in SF medical products because of the scale of production
Michael Anisfeld (Globepharm, USA)

15:15 – 15:50
3. WHO Global Surveillance and Monitoring
Diana Lee (World Health Organization, Switzerland)

15:50 – 16:10
Coffee/tea break

16:10 – 16:45
4. A world tour of measures to stop SF medical products at governmental level
Robert Moss (European Association of Hospital Pharmacists, Netherlands)

16:45 – 17:20
5. Experience on the practical aspects of identifying counterfeit medicines in the field
Trudi Hilton (WHO / University of London, UK)

17:20 – 17:30
6. Conclusion by the chairs

D1 SMART PHARMACY: AN INTRODUCTION

Tuesday 12 September, 14:30 – 17:30

ACPE Code: _____

Organised by the FIP Programme Committee
Auditorium
Duration: 3h

Introduction
This session aims to introduce the concept of "smart pharmacy" by considering the various ways in which pharmacy is extending beyond the traditional role of supplying medicines and health care advice. Pharmacists today are confronted by both opportunities and challenges in the form of new technologies in health care. Introduction of web-based technologies has been particularly rapid and the full potential of these in pharmaceutical science and practice is probably not yet fully appreciated. During this session we will consider a few of the new developments and the ways in which pharmacists can learn to use them effectively.

Learning objectives
At the end of this knowledge-based session, participants will be able to:
1. Identify some of the new technologies that have impacted on pharmacy and health care in recent years.
2. Describe the contribution that some of these technologies have made to health care.
3. Explain the challenges that new technologies can pose to pharmacists and other health care professionals.
4. Describe opportunities for staying up to date in their field of practice.

Chairs
Linda Hakes (Royal Pharmaceutical Society, UK) and Hiroshi Suzuki (University of Tokyo, Japan)

Programme
14:30 – 14:40
1. Introduction by the chairs

14:40 – 15:15
2. Novel approaches to diagnostics
Oliver Yoa-Pu Hu (National Defence Medical Centre, China Taiwan)

15:15 – 15:50
3. Improving healthcare with connected health technologies
Alain Breckler (Pharmacie Paris V, France)

15:50 – 16:10
Coffee/tea break

16:10 – 16:40
4. Novel therapeutic interventions
Ross McKinnon (Flinders University, Australia)

16:40 – 17:10
5. Keeping up to date
Gilles Aulagner (Lyon University, France)

17:10 – 17:25
6. Panel discussion

17:25 – 17:30
7. Conclusion by the chairs

E13 HOT TOPIC SESSION: THE REFUGEE CRISIS AND THE ROLE OF PHARMACY – CHALLENGES AND OPPORTUNITIES

Tuesday 12 September, 14:30 – 16:00

ACPE Code: _____

Organised by the FIP Programme Committee
Grand Ballroom 105
Duration: 3h

Introduction

The world has witnessed over recent years an unprecedented movement of human beings across borders at sea and over land, seeking refuge from the horrors experienced in war torn countries. It has been called a "refugee crisis". These refugees are displaced, disoriented, in dire need of shelter and healthcare. And they present challenges to even the best of developed governments, communities and healthcare systems they arrive at. Some countries they appeal for help from are already themselves burdened with the weight of past civil or political unrest. According to the United Nations, in 2014, an astounding 86 percent of refugees lived in developing countries. Refugees also increasingly live in host communities rather than refugee camps, with 60 percent living in urban settings. According to the United Nations High Commissioner for Refugees, in 2015, 1 in every 113 people worldwide was forced to flee their home—either as a refugee, internally displaced person or asylum seeker. Today, more than 65 million people are currently displaced globally. Children make up 50 percent of the refugee population, and almost 50 percent are women or girls. With the refugees, global need has outpaced the international community's ability to respond, logistically and financially, despite great generosity. Violence and instability around the globe, especially in Syria, Afghanistan and Somalia, have led to millions of individuals fleeing for their lives.

Humanitarian response, including to the displaced, is generally designed to be lifesaving, and short-term. Yet not only are there more people displaced today, but they are displaced for longer, with the average duration of protracted refugee situations estimated at the end of 2016 to be about 25 years. Millions of refugees and others forcibly displaced, can live an entire generation in their community of refuge.

Provision of basic necessities—food, water, shelter, sanitation and necessary medicines — are at the forefront of humanitarian response. The health problems of refugees and migrants are similar to those of the rest of the population, although some groups may have a higher prevalence. The most frequent health problems of newly arrived refugees and migrants include accidental injuries, hypothermia, burns, gastrointestinal illnesses, cardiovascular events, pregnancy- and delivery-related complications, diabetes and hypertension. Female refugees and migrants frequently face specific challenges, particularly in maternal, newborn and child health, sexual and reproductive health, and violence. The exposure of refugees and migrants to the risks associated with population movements – psychosocial disorders, reproductive health problems, higher newborn mortality, drug abuse, nutrition disorders, alcoholism and exposure to violence – increase their vulnerability to non-communicable diseases.

This refugee crisis has presented both challenges and opportunities for many societies and their healthcare systems, including pharmacy. This session is dedicated to pharmacists sharing with us their lived experiences helping refugees in various settings and circumstances.

Learning objectives

At the conclusion of this knowledge-based session, participants will be able to
1. Explain the challenges and risks facing pharmacy when working in a refugee camp
2. Distinguish a deeper, empathetic understanding of the crisis and its impact on the refugee as a human entity, society and pharmacy as a healthcare profession
3. List the opportunities in a refugee crisis and how pharmacy can help refugees to live a new life in good health
4. Tell a greater appreciation for the complexity of a refugee crisis.

Chairs

Betty Chaar (The University of Sydney, Australia) and Lars-Åke Söderlund (Apoteket, Sweden)

Programme

14:30 – 14:35
1. **Introduction by the chairs**

14:35 – 14:55
2. **The refugee crisis, a Lebanese perspective**
   Mohammad Hendaus (Lebanese International University, Lebanon)

14:55 – 15:15
3. **Looking into post-traumatic stress disorder among Syrian refugees living in Jordan, a perspective from pharmacists in Jordan**
   Iman Basheti (Applied Science University, Jordan)

15:15 – 15:35
4. **The opportunities for society and pharmacy, a Swedish perspective**
   Annika Tengvall (Swedish Academy of Pharmaceutical Sciences, Sweden)

15:35 – 16:00
5. **Debate**
   Speakers and Jane Dawson (FIP Military Pharmacy Section, New Zealand)

What can pharmacy do to help? How can pharmacy help? Important issues to consider? Which help is the best help? Supplying medicines to a refugee camp – a logistic nightmare? How to facilitate integration?



E17 WHAT'S NEW IN PRACTICE? SHORT ORAL PRESENTATIONS PART 2

Tuesday 12 September, 14:30 – 17:30

Organised by the FIP Boards of Pharmaceutical Sciences and Pharmaceutical Practice
Grand Ballroom 101 + 102
Duration: 3h

Chair
Timothy Chen (The University of Sydney, Australia)

Programme

14:30 – 14:40
1. **The clinical relevance of medication safety advices for drugs in liver cirrhosis and implementation in clinical decision support in pharmacy practice**
   Sander Borgsteede (Netherlands)

14:40 – 14:50
2. **Review of economic evidence on the impact of substandard and falsified medicines in low and middle-income countries**
   Tatenda Yemeke (USA)

14:50 – 15:00
3. **Perspectives of the Australian public on non-promotional, opt-out healthcare communication from health care professionals**
   Vivien Tong (Australia)

15:00 – 15:10
4. **Identification of patient concerns on thyroid hormone replacement therapy from patient reviews of levothyroxine**
   Sohyun Park (Republic of Korea)

15:10 – 15:20
5. **Does clinical pharmacy service improves quality use of medicines in patients with chronic non communicable diseases? Evidence from a controlled trial in Sri Lanka**
   Lelwala Guruge Thushani Shanika (Sri Lanka)

15:20 – 15:30
6. **Improving the uptake of anticoagulation in atrial fibrillation**
   Helen Williams (UK)

15:30 – 15:40
7. **Pharmacological treatments for alleviating agitation in dementia: A systematic review and network meta-analysis**
   Khachen Kongpakwattana (Malaysia)

15:40 – 15:50
8. **Biosimilar infliximab: sSort-term efficacy and safety following switch from originato**r
   Ayodeji Matuluko (Nigeria)

15:50 – 16:10
Coffee/tea break

16:10 – 16:20
9. **An evaluation of a targeted approach to blood pressure control in poorly controlled hypertensive patients in an inner London borough**
   Helen Williams (UK)

16:20 – 16:30
10. **An analysis of hospital pharmacy practice in six Sub-Saharan African countries based on the International Pharmaceutical Federation Basel Statements**
    Miranda Law (USA)

16:20 – 16:30
11. **Socioeconomic differences in self-medication among middle-aged and older people: Data from the China Health and Retirement Longitudinal Study**
    Jie Chang (China)

16:30 – 16:40
12. **Incidence of drug-induced Parkinsonism: A nationwide claims data analysis in Korea**
    Sola Han (Republic of Korea)

16:40 – 16:50
13. **Perceptions of medication use and expected pharmacist roles and willingness to accept pharmacist services in the United States**
    Yookyung Choi (USA)

16:50 – 17:00
14. **Inventory of collaborative medicines optimization procedures for the aged in Finland**
    Annika Kiiski (Finland)

17:00 – 17:20
15. **Questions and answers**

17:20 – 17:30
16. **Conclusions by the chair**

Wednesday 13 September

A4 FINDING THE HUMANITARIAN FACE OF PHARMACY

Wednesday 13 September, 07:15 – 08:45

ACPE Code: _____

Organised by the FIP Community Pharmacy Section and the FIP Military & Emergency Pharmacy Section
Grand Ballroom 105
Duration: 1h30

Introduction
The role of pharmacists in humanitarian work and natural disasters is continuing to evolve as organisers and policy makers understand the value that pharmacists bring to these situations. In some cases pharmacists volunteer from a purely selfless internal motive to help; in other cases there is an organised political requirement for pharmacy to be included in the medical team assigned to provide relief and support. This session showcases how pharmacists have gone beyond their daily activities to offer humanitarian support.

Learning objectives
At the conclusion of this knowledge-based session, participants will be able to:
1. Describe and develop the role of the pharmacist in emergency situations.
2. Identify the requirement for unique policies and procedures in these situations.
3. Identify the planning framework required for pharmacist involvement and collaboration in a humanitarian effort.
4. Describe how pharmacists may become involved in humanitarian projects.
5. Prepare plans for the required collaboration in any given humanitarian mission.

Chair
Warren Meek (C7 Consulting Limited, Canada)

Programme
07:15 – 07:40
Light breakfast

07:40 – 08:10
1. **Emergency medicine team pharmacist in the field — Experiences and learning**
   Melanie Morrow (National Critical Care & Trauma Response Centre/AusMAT, Australia)

08:10 – 08:45
2. **Pharmaciens Sans Frontières Sweden — Role of pharmacists in AIDS/HIV in Uganda**
   Lars Rönnbäck (Pharmacists Without Borders, Sweden)

A2 HOW TO DEVELOP PEOPLE

Wednesday 13 September, 09:00 – 12:00

ACPE Code: _____

Organised by the FIP Academic Pharmacy Section, the International Pharmaceutical Students' Federation and FIP*Ed*
Auditorium
Duration: 3h

Introduction
Mentoring, coaching and peer support are terms that we hear not just in pharmacy, but also in life. Pharmacists are increasingly expected to support colleagues and even patients using such approaches. This session explores what these terms mean and provides real-life examples of how such approaches can be used within pharmacy. There will be the opportunity to interact and ask questions in our panel discussion and Q&A session, and we will establish our own peer support group on Twitter under #FIPeersupport! Come and be part of a global peer support network! For those of you who aren't familiar with the concept of Tweeting, join us during the coffee break to learn about Twitter and (WiFi permitting) send your first Tweet. There will be a prize for the Tweet that gets the most likes by the end of the session.

Learning objectives
At the conclusion of this knowledge- and application-based session, participants will be able to:
1. Distinguish between mentoring, coaching and peer support.
2. Identify the different ways in which these approaches can be used within pharmacy.
3. Describe an application of each approach within pharmacy.
4. Specify how they will participate in an FIP virtual global peer support network.

Chairs
Tina Brock (Monash University, Australia) and Jennifer Marriott (Monash University, Australia)

Programme
09:00 – 09:30
1. **Introduction by chairs to include overview of terms and applicability in pharmacy; and establishing #FIPeersupport**

09:30 – 10:00
2. **The mentoring relationship**
   A mentor and mentee from the YPG Mentorship Programme (begun August 2016) will present their experience over the past year.

10:00 – 10:20
3. **Developing a national peer support network**
   Catriona Bradley (Irish Institute of Pharmacy, Ireland)

10:20 – 10:40
Coffee/tea break

10:40 – 10:50
4. **Review of Twitter feed so far in the session**
   Top three contenders in the #FIPeerSupport competition

10:50 – 11:15
5. **Coaching pharmacists on supporting a change initiative within pharmacy**
   Alison Roberts (Pharmaceutical Society of Australia, Australia)

11:15 – 11:45
6. **Panel discussion and Q&A**

11:45 – 11:50
7. **Identify the most liked tweet including #FIPeerSupport**

11:50 – 12:00
8. **Closing comments**

A7 TRANSFORMING PHARMACY EDUCATION: THE YEAR AFTER NANJING

Wednesday 13 September, 09:00 – 12:00

ACPE Code: _____

Organised by FIP*Ed* and Planning Committee
Grand Ballroom 104
Duration: 3h

Introduction
The term "education" is taken to mean career-long education (the development of a registered practitioner from pre-service to novice to advanced) and applies to workforce development which meets pharmaceutical public health needs, and which has a core of continuous education and training. It is also taken to encompass all the workforces we have in the profession, including pharmaceutical scientists and technicians. As a result of the Global Conference on Pharmacy and Pharmaceutical Sciences Education a set of statements and a set of global Pharmaceutical Workforce Development Goals (PWDGs) will form the basis of forward action planning for FIP, FIP*Ed*, FIP member organisations and partners in order to support the development of the workforce from pre-service to advanced practice.
The purpose is to set about activating progress towards achieving FIP's Centennial Declaration and millennium statements on responsible use of medicines, of which many are workforce dependent. An educated workforce leads to better use of medicines. Participants will be invited to engage with the vision and strategic plans of FIP*Ed*.
This session will provide the opportunity for members and member organisations to engage with the WDGs set and follow up on the statements, to comment and provide ideas, and to commit their support for local action plans.

Learning objectives
At the conclusion of this knowledge-based session, participants will be able to:
1. Describe the importance of the Global Conference on Pharmacy and Pharmaceutical Science Education and its outcomes (statements and workforce development goals).
2. Identify the key messages of the WDGs and statements and how they relate to local activities.
3. Define how the WDGs and the statements can be applied locally or transnationally.
4. Describe strategies on how to address barriers to changing the current state of education to ensure the recommendations of the conference are implemented.

Chairs
Ema Paulino (Portuguese Pharmaceutical Society, Portugal) and Giovanni Pauletti (University of Cincinnati, USA)

Programme
09:00 – 09:10
1. Introduction
Ema Paulino (Portuguese Pharmaceutical Society, Portugal)

09:10 – 09:40
2. Global statements and pharmaceutical workforce development goals: Action planning
Ian Bates (University College London, UK)

09:40 – 10:20
3. Perspectives from FIP stakeholders and partners about the global statements and WDGs
a. Tana Wuliji (World Health Organization)
b. Dan Kibuule (University of Namibia, Namibia)
c. Jaekyu Shin (University of California San Francisco, USA)
d. Rula Darwish (University of Jordan, Jordan)

10:20 – 10:40
Coffee/tea break

10:40 – 11:10
4. Workshop activity
Roundtable discussions about how to achieve WDGs targets and support FIP members to reach them.

11:10 – 11:50
5. National/local commitment to the statements and WDGs | Country/university dashboards
a. Samuel Nyanje (AMPATH, Kenya)
b. Silvana Leite (Federal University of Sainte Catherine, Brazil)
c. Ephrem Engidawork (Addis Ababa University, Ethiopia)

11:50 – 12:00
6. Wrap up and closing
Giovanni Pauletti (University of Cincinnati, USA)

C4 HEALTHY AGEING

Wednesday 13 September, 09:00 – 12:00

ACPE Code: _____

Organised by the FIP Community Pharmacy Section, the FIP Health and Medicines Information Section and the FIP Social and Administrative Pharmacy Section
Grand Ballroom 103
Duration: 3h

Introduction
Today, for the first time in history, most people can expect to live into their 60s and beyond. When combined with marked falls in fertility rates, these increases in life expectancy are leading to the rapid ageing of populations around the world. Pharmacy can contribute to a healthy life as people age. During the past 100 years life expectancy has increased by 40 years, but our brains have remained the weak link. At the age of 90, 61% of patients suffer from cognitive failure, 40% suffer from dementia and at least 10% suffer from depression. After the age of 50, the brain shrinks by 5% each year. Factors that negatively impact the brain are obesity, diabetes, smoking habits, lack of vitamin B12, depression and stress.

The protective factors are education, exercise, mental and social activity, and healthy eating, meaning that a change in lifestyle can delay the ageing process of the brain.

Global concepts of healthy ageing thus have to be built around the new concept of functional ability. This will require a transformation of health systems away from disease based curative models and towards the provision of older-person-centred and integrated care. It will need to draw on better ways of measuring and monitoring health. Nutrition, exercise, cognitive stimulation and socialisation are the factors recommended by experts which help to promote healthy ageing. This clearly highlights a significant role for the pharmacist, not only in the broader role of public health and consumer education, but also in disease prevention and healthy living. The pharmacist can be regarded as the future accessible, experienced and knowledgeable health provider.
Pharmacists in some countries are already offering services to the elderly but a systematic approach is needed to face the health challenges created by the global "grey tsunami".

Learning objectives
At the conclusion of this knowledge-based session, participants will be able to:
1. Identify key areas for pharmacy to contribute in a systematic way to healthy and active ageing.
2. Describe how to develop personalised care for elderly consumers at the pharmacy.

3. Outline case examples of various types of services provided in community pharmacy for geriatric patients from different countries.
4. Specify educational needs and competencies required for the pharmacists to provide services for the elderly in pharmacy — now and in the future.

Chairs

Manjiri Gharat (Indian Pharmaceutical Association, India) and Vivien Tong (The University of Sydney, Australia)

Programme

09:00 – 09:10

1. Introduction by the chairs

09:10 – 09:45

2. Population ageing in Korea and new vision of healthy ageing
Heung-Bong Cha (Korea National Council on Social Welfare and International Association of Gerontology and Geriatrics, Republic of Korea)

09:45 – 10:20

3. Healthy ageing
Agathe Wehrli (Pharmabridge, Switzerland)

10:20 – 10:40

Coffee/tea break

10:40 – 11:05

4. Appropriate polypharmacy and adherence to medical plans for older people in Europe: Pharmacy's role for healthy ageing
Alpana Mair (Healthcare Quality and Strategy Directorate Scottish Government, UK)

11:05 – 11:30

5. Overview of specialty services provided to the elderly and competence development for pharmacists
Timothy Chen (The University of Sydney, Australia)

11:30 – 11:55

6. Panel discussion: Assessing needs of the situation, and discussion about the strategy to promote healthy ageing
Moderator: Agathe Wehrli (Pharmabridge, Switzerland)

11:55 – 12:00

7. Take home messages

E4 PHARMACY INSPECTIONS: STANDARDISING PHARMACY PRACTICE ONE SITE AT A TIME

Wednesday 13 September, 09:00 – 12:00

ACPE Code:

Organised by the FIP Military and Emergency Pharmacy Section
Grand Ballroom 105
Duration: 3h

Introduction

Most organisations will establish policies and standards in order to offer high quality and safe pharmacy services. In military and emergency organisations, pharmacies are often spread over great distances, which can span many countries. Ensuring that policies and standards are adhered to by all members of the pharmacy team requires a concerted effort. Pharmacy inspections and visits, standard operating procedures, training and other strategies are just some examples of how policies and standards can be implemented and monitored across regions, states and countries.

Learning objectives

At the conclusion of this knowledge-based session, participants will be able to:
1. Describe measures put in place to assist pharmacists and other members of the pharmacy team to apply organisational policies and standards.
2. Identify tools used to improve communication and feedback between the organisation's decision makers and the frontline professionals.
3. List strategies to empower frontline professionals to adapt and adjust organisational policies and standards to their local needs, while still meeting organisational vision.
4. Identify key elements included in the development of a professional inspection model.

Chairs

Ann Smeeton (New Zealand Defence Force, New Zealand) and Richard Wosolsobe (Austrian Armed Force, Austria)

Programme

09:00 – 09:05

1. Introduction by the chairs

09:05 – 09:30

2. Inspection processes in the German military
Matthias Meyer (Bundeswehr, Germany)

09:30 – 09:55

3. Performing effective pharmaceutical manufacturer GMP inspections in lesser developed countries
Michael Anisfield (Globepharm, USA)

09:55 – 10:20

4. Professional pharmacy inspection in Canada
Greg Eberhart (Alberta College of Pharmacists, Canada)

10:20 – 10:40

Coffee/tea break

10:40 – 12:00

5. FIP MEPS discussion panel: Professional pharmacy inspections and visits
a. WHO conducts professional inspections in your pharmacy and under whose authority?
b. WHAT pharmacy activities are being audited?
c. HOW are the results of the inspection/visit being communicated and addressed?
Sylvain Grenier (Canadian Forces, Canada)

E18 WHAT'S NEW IN INDUSTRY & SCIENCE? SHORT ORAL PRESENTATIONS PART 3

Wednesday 13 September, 09:00 – 12:00

Organised by the FIP Boards of Pharmaceutical Sciences and Pharmaceutical Practice
Grand Ballroom 101 + 102
Duration: 3h

Chair
Gabrielle Wiederkehr (Access Consulting, Switzerland)

Programme
09:00 – 09:05
1. **Introduction by the chair**

09:05 – 09:30
2. **Acceptability of pregnant women towards group b streptococcus vaccine in China: a health belief model approach**
   Wenjing Ji (China)

09:30 – 09:55
3. **Epigallocatechin-3-gallate prevents acute gout by suppressing nlrp3 inflammasome activation**
   Hye Eun Lee (Republic of Korea)

09:55 – 10:20
4. **Alteration of serum glutamate level in male adults with drug resistant epilepsy**
   Wei Wang (China)

10:20 – 10:40
Coffee/tea break

10:40 – 11:05
5. **Association between abcc8 rs757110 (ser1369ala) gene polymorphism and sulphonylurea response in malaysian type 2 diabetes patients**
   Navin Kumar Loganadan (Malaysia)

11:05 – 11:30
6. **Evaluation of immune response to dncb and house dust mite antigen(hdm)-induced atopic dermatitis**
   Boyoon Chang (Republic of Korea)

11:30 – 11:55
7. **Implementing pharmacogenomics in Europe: Design and implementation strategy of the ubiquitous pharmacogenomics consortium**
   Inge Holsappel (Netherlands)

11:55 – 12:00
8. **Conclusion by the chair**

A6 NEW CARE MODELS: INTEGRATING PHYSICIAN AND PHARMACY WORKFORCES

Wednesday 13 September, 12.30 – 14.00

ACPE Code: _____

Organised by the FIP Community Pharmacy Section and the FIP Hospital Pharmacy Section
Auditorium
Duration: 1h30

Introduction
Pharmacists have particular skills and expertise about medicines and their use that they bring to multidisciplinary teams and to patients.
Collaboration between health care professionals is at the heart (and soul) of pharmacy and clinical practice. With emerging health trends, for example ageing and complex diseases, an increased demand on general practice and hospital services have contributed to unsustainable pressures on physicians.
Pharmacists with the appropriate skills and experience can work in collaboration with physicians to relieve service pressure and increase capacity to deliver improved patient care and make a difference to patients. There are many examples of collaborative care in hospital practice and now in GP practices, where pharmacists are able to contribute to the clinical work related to medicines.
Primary care activities that pharmacists with the proper training can perform include advanced clinical services, prescription management, audit and education, and medicines management.
Effective clinical supervision and mentorship will be essential for pharmacists new to collaborative practice; in particular, training to become independent prescribers may be considered a necessity in some countries.
This collaborative role of pharmacists increases interprofessional recognition for the value of pharmacists' skills and expertise.

Learning objectives
At the conclusion of this knowledge-based session, participants will be able to:
1. Describe the role of pharmacists in collaborative practice settings with physicians, in hospital and primary care settings.
2. Specify the training needed, from preregistration (grassroots), to junior pharmacists (foundation practice), to senior pharmacists.
3. State opportunities for cooperation between pharmacists in different settings (community pharmacies, GP surgeries and hospitals).
4. Identify the potential and evolution of this practice.

Chairs
Jaime Acosta Gómez (Farmacia Acosta, Spain) and Rebekah Moles (The University of Sydney, Australia)

Programme
12:30 – 13:00
1. **The future role of clinical pharmacy in primary care: The UK experience**
   Ravi Sharma (Primary Care Integration and GP Practice Partner, UK)

13:00 – 13:30
2. **Pharmacotherapy related collaboration between pharmacists and physicians in a tertiary care hospital**
   Yuh Lih Chang (Taipei Veterans General Hospital, China Taiwan)

13:30 – 14:00
3. **Education approaches for developing integrated physician-pharmacist care models**
   Wes Nuffer (University of Colorado, USA)
   Benjamin Chavez (University of Colorado, USA)

C9 ANTIMICROBIAL STEWARDSHIP: LOOKING FOR GLOBAL SOLUTIONS

Wednesday 13 September, 12:30 – 14:00

ACPE Code: _____

Organised by the FIP Hospital Pharmacy Section, the FIP Industrial Pharmacy Section and the FIP Clinical Biology Section
Grand Ballroom 103
Duration: 1h30

Introduction

The WHO's 2014 report on global surveillance of antimicrobial resistance revealed that antibiotic resistance is no longer a prediction for the future; it is happening right now across the world and is putting at risk the ability to treat common infections. Without urgent, coordinated action, the world is heading towards a post-antibiotic era, in which common infections and minor injuries, which have been treatable for decades, can once again kill. With both developed and developing countries being affected by antimicrobial resistance, pharmacists around the world have become leaders on the responsible use of antimicrobials through antimicrobial stewardship programmes.

Learning objectives

At the conclusion of this knowledge-based session, participants will be able to:
1. Describe common mechanisms of antimicrobial resistance and its current impact on patient outcomes.
2. Explain competing interests that have impacted on antimicrobial resistance and how to encourage the development of new antimicrobials.
3. Describe core antimicrobial stewardship elements and compare and contrast them based upon their advantages and disadvantages.
4. Prepare a proposal on implementing a stewardship intervention and how it will be assessed and evaluated.

Chairs

Jonathan Penm (University of Cincinnati, USA) and Ulf Janzon (Merck Sharp & Dohme, Sweden)

Programme

12:30 – 12:35
1. Introduction by the chairs

12:35 – 12:55
2. Antimicrobial stewardship: Key ingredients and innovative practices
Sabiha Essack (University of KwaZulu-Natal, South Africa)

12:55 – 13:15
3. Policy impact on antimicrobial resistance and the development of new antimicrobials
Silas Holland (Merck, USA)

13:15 – 13:25
4. Q&A

13:25 – 13:55
5. Group discussions
on the current state of resistance in participants' countries and initiatives that are occurring

13:55 – 14:00
6. Conclusions

C10 PATIENT SAFETY: HOW RESILIENT ARE YOUR SERVICES?

Wednesday 13 September, 12:30 – 14:00

ACPE Code: _____

Organised by the FIP Social and Administrative Pharmacy Section, the FIP Community Pharmacy Section and the FIP Hospital Pharmacy Section
Grand Ballroom 101 + 102
Duration: 1h30

Introduction

Pharmacy services commonly aim at improving patient safety. In any high risk industries, such as aviation or health care, research in safety sciences shall be recognised when initiatives for improving safety are developed and implemented. In the past, initiatives to improve patient and medication safety have focused on analysing and preventing negative outcomes, such as errors and adverse events. In recent years, a new way of thinking about safety has been introduced in safety sciences: resilience. Resilience has been described as the ability of a system to adjust its functioning before, during and following changes to sustain operations under expected and unexpected conditions. While negative outcomes have been the focus of past approaches to safety, resilience in contrast focuses on the positive aspects. Safety is achieved through resilience, by strengthening the ability of organisations, groups and individuals to succeed and make appropriate adjustments under varying circumstances. Although resilience is not yet established in health care, and concepts, principles and methods are being developed, the pharmacy profession should be informed about this new development in safety sciences. During this session, the concept of resilience will be introduced and its use in developing pharmacy services for improving safety will be discussed.

Learning objectives

At the conclusion of this application-based session, participants will be able to:
1. Compare current medication safety services in pharmacy practice.
2. Adopt the concept of resilience.
3. Challenge the past thinking of safety improvement through prevention of negative outcomes.
4. Demonstrate improved safety on the use of resilience in developing pharmacy services.

Chair

Latif Sheikh (Aga Khan University Hospital, Pakistan)

Programme

12:30 – 12:35
1. Introduction by the chair

12:35 – 12:50
2. Overview of medication safety services in pharmacy practice in primary care
Timothy Chen (The University of Sydney, Australia)

12:50 – 13:05
3. Overview of medication safety services in hospital pharmacy practice
Latif Sheikh (Aga Khan University Hospital, Pakistan)

13:05 – 13:35
4. Resilience — Concepts and use to improve safety
Ramesh Walpola (The University of Sydney, Australia)

13:35 – 13:55
5. Panel discussion: How to use resilience in practice in developing and implementing pharmacy services?

13:55 – 14:00
6. Conclusion by the chair

E9 SIGN 3: SHARING IDEAS IN A GLOBAL NETWORK: PRIMARY CARE AND HEALTH PROMOTION – HARNESSING THE POTENTIAL OF COMMUNITY PHARMACIES

Wednesday 13 September, 12:30 – 14:00

Organised by FIP
Grand Ballroom 104
Duration: 1h30

FIP Member Organisations presenting their best initiatives and challenges

Chair
Linda Hakes (FIP, UK)

Programme
12:30 - 13:00
1. **Presentation of a winning project of the 2017 Health Promotion Campaign Award**

13:00 – 13:30
2. **Integrating pharmacies in the primary care network: an evidence-based policy approach**
   Pedro Ferreira (National Association of Pharmacies, Portugal)

13:30 – 14:00
3. **Fundamental reform in community pharmacy policy in Belgium**
   Jan Depoorter (Belgian Pharmaceutical Association, Belgium)

A3 ADVANCING PHARMACY EDUCATION

Wednesday 13 September, 14:30 – 17:30

Code: _____

Organised by the FIP Academic Pharmacy Section
Grand Ballroom 104
Duration: 3h

Introduction
The FIP Academic Pharmacy Section (AcPS) includes members from all regions of the world who have valuable contributions to make in advancing pharmacy education to meet societal needs and who add to the global transformation of pharmacy education in accordance with FIP and FIPEd strategic goals. This session seeks to inform attendees of the aspirations and of pharmacy educators in countries facing unique issues, concerns and obstacles to advancing pharmacy education. The session also provides an opportunity for networking among members to establish relationships to promote development of pharmacy education programmes worldwide.

Learning objectives
At the conclusion of this knowledge-based session, participants will be able to:
1. Identify pharmacy education aspirations in various countries.
2. Identify obstacles to development of pharmacy education.
3. Describe networking opportunities for advancing pharmacy education.
4. Identify opportunities for implementing others' contributions into their own academic context.

Chair
Mariet Eksteen (Pharmaceutical Society of South Africa, South Africa) and Dalia Bajis (The University of Sydney, Australia)

Programme
14:30 – 14:45
1. **Introduction by the chairs**

14:45 – 15:50
2. **Presentations by speakers**
   Abdullah Dayo (University of Sindh, Pakistan)
   Dalia Bajis (The University of Sydney, Australia)
   Nettie Dzabala (University of Malawi, Malawi)
   Nguyen Van Hung (Haiphong University of Medicine and Pharmacy, Ministry of Health, Vietnam)
   Zully Vera (Faculdad de Ciencias Quimicas – UNA, Paraguay)

15:50 – 16:10
Coffee/tea break

16:10 – 17:10
3. **World Café**
   Each speaker leads concurrent table discussions

17:10 – 17:30
4. **Panel discussion, Q&A and wrap up**

A5 LISTEN BETTER, TALK BETTER — SKILLS TO IMPROVE MEDICINES TAKING

Wednesday 13 September, 14:30 – 17:30

Code: _____

Organised by the FIP Community Pharmacy Section, the FIP Health and Medicines Information Section and the FIP Social and Administrative Pharmacy Section
Auditorium
Duration: 3h

Introduction
What do we mean by patient-centred consultation?
What behaviours would a pharmacist demonstrate in a patient-centred consultation?
What skills does a pharmacist need to be able to communicate with a patient?
Addressing problems with treatment adherence requires the involvement of the entire multidisciplinary patient care team, where the contribution pharmacists can make is key to achieving positive results.
A growing number of studies has found that intervention programmes which involve community-based pharmacists and include coordination and consultations with other health care providers have a beneficial effect on clinical outcomes and treatment adherence. Patient-centred drug therapy based on partnerships in medicine taking has become a gold standard in health care. This is a challenge to community pharmacists because they need to reconfigure their service provision to meet the requirement of concordance and patient autonomy. But what does patient-centred practice mean for community pharmacies?

Learning objectives
At the conclusion of this knowledge-based session, participants will be able to:
1. Distinguish the important features of effective communication from a theoretical perspective.

2. Describe effective communication skills.
3. Distinguish the concepts of compliance, adherence and concordance.
4. Describe the concept of patient-centred care.

Chairs
Lars-Åke Söderlund (Apoteket AB, Sweden) and Marion Schaefer (Charité Medical University of Berlin, Germany)

Programme
14:30 – 14:40
1. Introduction by chairs

14:40 – 15:15
2. Communication and its influence on medicine taking
Parisa Aslani (The University of Sydney, Australia)

15:15 – 15:50
3. Communication skills for improved outcomes
Ash Soni (Royal Pharmaceutical Society, UK)

15:50 – 16:10
Coffee/tea break

16:10 – 16:50
4. Patients' knowledge and perception of safety and risk information
Marion Schaefer (Charité Medical University of Berlin, Germany)

16:50 – 17:30
5. Discussion, wrap up and take home messages



C5 IMPLEMENTING SERVICES FOR PEOPLE TAKING A NEW MEDICINE

Wednesday 13 September, 14:30 – 17:30

ACPE Code: _____

Organised by the FIP Community Pharmacy Section and the FIP Special Interest Group on Pharmacy Practice Research
Grand Ballroom 103
Duration: 3h

Introduction
Various services have been designed and implemented in pharmacy practice over the past 20 years, based on pharmaceutical care research in the early nineties. Today several countries have experiences in designing, developing, negotiating and implementing services. In this session, a specific service, "New Medicines Service", will be investigated from different perspectives allowing an insight into the different steps of the pharmacy practice service implementation.

Learning objectives
At the conclusion of this application-based session, participants will be able to:
1. Lay out an innovative and systematic research methodological approach, involving a model from design, impact and implementation to sustainability of services.
2. Produce the evidence necessary to get a pharmacy service remunerated.
3. Demonstrate how to move from research to practice, designing the tools necessary for delivery of services.
4. Perform the implementation of services, after remuneration.

Chairs
Charlotte Rossing (Pharmakon, Denmark) and Charlie Benrimoj (University of Technology Sydney, Australia)

Programme
14:30 – 14:40
1. Introduction by the chairs

14:40 – 15:15
2. From design to sustainability of services: Research methodology
Charlie Benrimoj (University of Technology Sydney, Australia)

15:15 – 15:50
3. Designing a study on "New medicines service" — case from Norway
Per Kristian Faksvåg (Apotekforeningen, Norway)

15:50 – 16:10
Coffee/tea break

16:10 – 16:45
4. Negotiating a new service — case from UK on new medicine service
Rajesh Patel (Hollowood Chemists Limited, UK)

16:45 – 17:20
5. Moving from research to practice, what tools and competencies are needed?
Alison Roberts (Pharmaceutical Society of Australia, Australia)

17:20 – 17:30
6. Conclusion by the chairs

D5 ANTIBODY DRUG CONJUGATES: WHERE HAVE WE COME FROM? FUTURE OPPORTUNITIES

Wednesday 13 September, 14:30 – 17:30

ACPE Code: _____

Organised by the FIP Programme Committee and the FIP Special Interest Group on PK/PD & Systems Pharmacology
Grand Ballroom 101 + 102
Duration: 3h

Introduction
The recent approval of two antibody-drug conjugates (ADCs) has reinvigorated the approach of safely delivering small molecule cytotoxic agents using targeted monoclonal antibodies in the treatment of cancer. The pharmaceutical industry is rapidly developing and evaluating ADCs that include novel antibody targets, cytotoxic payloads and molecular linkers. Pharmacists and pharmaceutical scientists must become familiar with the potential of and challenges to developing and utilising anticancer ADCs. This session will introduce and review ADCs and highlight the current challenges to bringing these complex medicines to patients needing more effective and less toxic agents for treating cancer.

Learning objectives
At the end of this knowledge-based session, participants will be able to:
1. Describe important clinical considerations for treating cancer patients with ADCs.
2. Describe the challenges and potential solutions to managing the complex supply chain for the manufacture and delivery of ADCs.
3. Describe the biophysical properties that regulate the pharmacokinetics and pharmacodynamics of ADCs.
4. Identify important factors to consider for developing combinatorial cancer treatments with ADCs.

Chair
Don Mager (University at Buffalo, USA)

Programme
14:30 – 15:10
1. Clinical insights into treating patients with ADCs
Joanne Mortimer (City of Hope Hospital, USA)

15:10 – 15:50
2. Managing the ADC supply chain
Speaker TBA

15:50 – 16:10
Coffee/tea break

16:10 – 16:50
3. PK/PD and bioanalytical considerations for ADCs
Peter Lloyd (KinDyn Consulting Ltd, UK)

16:50 – 17:30
4. Rationale and approach to ADC combination therapy
Speaker TBA

E5 HUMANITARIAN PHARMACISTS: TIME TO DEVELOP A COMPETENCY FRAMEWORK

Wednesday 13 September, 14:30 – 17:30

ACPE Code: _____

Organised by the FIP Military and Emergency Pharmacy Section
Grand Ballroom 105
Duration: 3h

Introduction
Pharmacists are professionally responsible for the safe and effective use of medicines. They traditionally work in various environments, such as community, hospital, industry and academia. However, there are also a number of pharmacists working in a humanitarian environment where the infrastructure, supply chain and patient needs are quite different from what other pharmacists encounter. We will call them the humanitarian pharmacists. The skills required to accomplish the tasks and responsibilities of a humanitarian pharmacist, although based on the competency framework of the pharmacist, include an extra set of competencies. These competencies are usually acquired with time and experience and few programmes exist to train pharmacists for this humanitarian role. Current training opportunities for humanitarian pharmacists are limited and often organisation-specific. In other words, in most cases, pharmacists can only access training programmes once they have been hired by an organisation. This limits the number of pharmacists who have received training to become humanitarian pharmacists and leads to an inconsistent skill set throughout the profession.
With the growing recognition and demand for humanitarian pharmacists, there is also a growing need to develop an internationally recognised competency framework for them.

Learning objectives
At the conclusion of this knowledge-based session, participants will be able to:
1. Identify areas where a humanitarian pharmacist would be working.
2. Describe the role of a pharmacist during emergency situations.
3. Identify resources available to pharmacists to prepare for emergencies.
4. Identify current limitations and gaps in the training available for pharmacists when it comes to emergency preparedness and response.

Chairs
Wendy Walker (FIP MEPS, Australia) and Stephen Shaddock (Australian Defence Force, Australia)

Programme
14:30 – 15:05
1. Humanitarian pharmacists' competency framework: Fact or fiction?
Sylvain Grenier (Canadian Forces, Canada)

15:05 – 15:50
2. Workshop/World Café part 1

15:50 – 16:10
Coffee/tea break

16:10 – 16:45
3. Workshop/World Café part 2

16:45 – 17:20
4. Workshop/World Café part 3

17:20 – 17:30
5. Conclusion by the chair

Thursday 14 September

A11 ETHICS FORUM: ADDRESSING ISSUES IN NURTURING THE SOUL OF PHARMACY

Thursday 14 September, 09:00 – 12:00

Code:

Organised by the FIP Expert Group on Ethics
Grand Ballroom 104
Duration: 3h

Introduction

At its core, the "soul of pharmacy" comprises the beliefs, perspectives, motivations, decisions, and behaviour (i.e. the ethics) of individual pharmacists and pharmaceutical scientists; and the moral/ethical dynamics of pharmacy practice. An important way to nurture the soul of pharmacy is to (a) identify and analyse major ethical issues faced by pharmacists and pharmaceutical scientists around the world and (b) explore options and justify decisions on how to address those challenges.
This session aims to address both steps (a) and (b) through a process that stimulates reflection and engagement. Participation will be a rewarding professional experience for pharmacists and pharmaceutical scientists on their journey toward nurturing the soul of pharmacy.

Learning objectives

At the conclusion of this application-based session, participants will be able to:
1. Analyse important contemporary ethical issues facing pharmacists and pharmaceutical scientists around the world.
2. Formulate a range of perspectives on how to address specific ethical challenges facing pharmacists and pharmaceutical scientists.
3. Analyse the advantages and disadvantages of alternative approaches to addressing specific ethical challenges.
4. Compare methods and resources that should be considered for development to aid pharmacists and pharmaceutical scientists in addressing ethical challenges.

Chairs

Betty Chaar (The University of Sydney, Australia) and William Zellmer (Pharmacy Foresight Consulting, USA)

Programme

09:00 – 09:05
1. Introduction by the chairs

09:05 – 09:30
2. The case of pharmacy in Asia: Conflicts in health care delivery
Fei-Lin Wu (National Taiwan University, China Taiwan)

09:30 – 09:55
3. Ethical issues related to intellectual property and personalised therapy
Wilma Göttgens (Apotheek Blanckenburgh, Netherlands)

09:55 – 10:20
4. Emergency contraception and the lingering ethical tensions stemming from conscientious objection by the pharmacist
Arijana Meštrović (Pharma Expert, Croatia)

10:20 – 10:40
Coffee/tea break

10:40 – 11:05
5. Ethical dimensions of pharmacogenetics and personalised therapy
Farshad Shirazi (Pharmaceutical Sciences Research Center, Iran)

11:05 – 11:55
6. Ethical forum
Chair/facilitator: Wilma Göttgens (Apotheek Blanckenburgh, Netherlands)

(11:05 – 11:30)
Four simultaneous breakout discussion groups (one related to each lecture), led by the lecturers with assistance from the session co-chairs. Key question for each group: What advice can be offered for those who are dealing with the type of ethical issue discussed in the lecture?

(11:30 – 11:55)
Reconvening of the whole group; summary reports from each small group discussion

11:55
7. Concluding comments by the chairs

B5 BIOSIMILARS FOR ALL: RESEARCH, REGULATION AND RESPONSIBLE USE

Thursday 14 September, 09:00-12:00

Code:

Organised by the FIP Hospital Pharmacy Section, the FIP Special Interest Group on Regulatory Sciences, the FIP Health and Medicines Information Section, the FIP Special Interest Group on Analytical Sciences and Pharmaceutical Quality and the FIP Special Interest Group on Biotechnology
Grand Ballroom 105
Duration: 3h

Introduction

This session has been planned to meet the needs of pharmaceutical scientists and pharmacists in all practice settings with an interest in drug development, regulatory processes, new medicines, health care policy, law, medicines safety, pharmacovigilance and leadership.
With regard to the regulatory processes for biosimilars, several countries have developed their own guidelines for approval, including extrapolation of clinical data. There is a global challenge to adopt standard regulatory processes in order to provide needed access to these medicines across the world. This session will address the analytical characterisation, bioanalytical assay development for pharmacokinetic and immunogenicity assays and the regulatory perspectives on the advancement of biosimilar products. With the expansion of the use of biologics and the development of biosimilars, pharmacists must address the operational challenges and opportunities related to introducing biosimilars into the medicines use process.
The presenters in this session will discuss challenges in the regulatory process, the experience with biosimilars in the European Union and other regions, and key formulary, legal, policy, and operational factors to consider when integrating biosimilars into the medicines use process, including issues regarding interchangeability with reference products. Practical issues related to naming, pharmacovigilance and transitions of care will also be discussed.

Learning objectives

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

1. Describe the process for regulatory approval of biosimilars in various regions of the world and issues related to the approval process.
2. Explain the experience in the EU with biosimilars, including safety and management of issues such as indication extrapolation, uptake and pharmacovigilance.
3. State the key factors and decisions that must be considered in the formulary consideration of biosimilars.
4. Define factors that must be addressed in order to safely integrate biosimilars into the medicines use process, including those around naming and pharmacovigilance.

Chairs

James Stevenson (University of Michigan, USA) and Michael Ward (University of South Australia, Australia)

Programme

09:00 – 09:10

1. Introduction by the chairs

09:10 – 09:45

2. Challenges and lessons learnt in the regulatory approval process for biosimilars
Vinod Shah (Pharmaceutical Consultant, USA)

09:45 – 10:20

3. Challenges in the development of bioanalytical methods for addressing comparability of the biosimilar products
Todd Lester (BioAgilytix Labs, USA)

10:20 – 10:40

Coffee/tea break

10:40 – 11:10

4. Formulary, interchange and substitution considerations with biosimilars
Arnold Vulto (Erasmus University Medical Center, Netherlands)

11:10 – 11:40

5. Pharmacoeconomic impact of biosimilars
Anurag Rathore (Indian Institute of Technology, India)

11:40 – 11:55

6. Panel Q&A session

11:55 – 12:00

7. Conclusion by the chairs

C2

A NEW SERVICE: MAKING THE RIGHT CHOICE

Thursday 14 September, 09:00 – 12:00

ACPE Code: _____

Organised by the FIP Academic Pharmacy Section, the FIP Community Pharmacy Section and the FIP Hospital Pharmacy Section
Grand Ballroom 103
Duration: 3h

Introduction

Pharmacists are increasingly involved in the delivery of new services in both primary and secondary care. These include screening initiatives, health promotion campaigns, medicines optimisation and chronic disease management, to name but a few. How can pharmacists ensure that they are ready to rise to the opportunity of new pharmacy services? The answer is that it depends! It depends on the service, the environment and existing levels of competence. But surely there must be some common themes? In this interactive session we will explore two real-life case studies which are drawn from different practice areas in different parts of the world: a hospital pharmacy in Ireland, and ambulatory care clinics in the US. Each case will describe a new service and you'll get the chance to decide what you think was needed to get pharmacists ready to deliver these services. Then you'll hear what actually happened in real life from the pharmacists who led these initiatives. We'll also hear about Tanzanian pharmacy, where the evolution of core pharmacy services requires upskilling initiatives. Participants will also have the opportunity to discuss their own plans for potential new services during the session. Come ready for lively discussion and debate!

Learning objectives

At the conclusion of this application-based session, participants will be able to:
1. Conduct an analysis of the knowledge, skills and behaviours required to support the roll out of two "sample" services.
2. Compare the result of their analysis with the reality experienced by three pharmacy leaders.
3. Analyse how the local environment (including legislative, practice, health system, education and cultural issues) impacts on the support required for pharmacists who are delivering new services.
4. Plan the educational approach required to support a new service, having had the opportunity to discuss their ideas and reflect on the lessons learnt in the workshop.

Chairs

Mahama Duwiejua (Faculty of Pharmacy and Pharmaceutical Sciences — KNUST, Ghana) and
Lisa Nissen (Queensland University of Technology, Australia)

Programme

09:00 – 09:15

1. Introduction by the chairs

09:15 – 10:05

2 Case study 1
Tim Delaney (Hospital Pharmacy, Ireland)

10:05 – 10:20

3. Case presentation
Elizabeth Shekalaghe (Pharmacy Council of Tanzania, Tanzania)

10:20 – 10:40

Coffee/tea break

10:40 – 11:25

4. Case study 2
Kari Franson (University of Colorado, USA)

11:25 – 11:40

5. Small group debrief

11:40 – 12:00

6. Summing up and conclusion
Mahama Duwiejua (Faculty of Pharmacy and Pharmaceutical Sciences — KNUST, Ghana)

D4 SMART LEARNING: DYNAMIC INTEGRATION OF TECHNOLOGY INTO EDUCATION

Thursday 14 September, 09:00 – 12:00

Code:

Organised by the International Pharmaceutical Students' Federation, the FIP Academic Pharmacy Section and FIP*Ed*
Grand Ballroom 101 + 102
Duration: 3h

Introduction

The rapid acceleration of technology has catalysed innovations and advancements in all sectors of industry, creating disruptions and necessitating a re-evaluation of traditional processes and approaches to healthcare. Innovation in practice is necessary for practitioners to provide optimal care to patients - and pharmacists must face the challenge of embracing these developments. By adopting an innovator's mindset, practitioners will be primed for the world of empowered patients and rapid improvements in health care delivery.

This session envisions a future where pharmacists are technologists: as a collective, they acknowledge and actively identify opportunities to embrace innovations disrupting the healthcare landscape. Through an overview of emerging trends, we will explore disruptive health technology and its impact on traditional solutions and standards of care. Mobile and digital health will serve to highlight specific opportunities where pharmacists as technologists can lead, in designing and co-developing the future together.

Ultimately, however, education is paramount to build the foundations for nurturing and inspiring the next generation of pharmacy innovators. Bring it all together, the session will examine the transformative potential of pharmacy education and training. Education has the power to transform our future generations through intelligently adapting to technology, and re-imaging traditional processes and educational outcomes. This will serve as our compass, as we navigate beyond the digital era.

Learning objectives

At the conclusion of this application-based session, participants will be able to:
1. Identify emerging opportunities for pharmacists as technologist.
2. Apply an innovative mindset to explore novel approaches to traditional health care solutions.
3. Describe an operational overview of some of the disruptive technologies and trends on the horizon.
4. Distinguish the need to re-evaluate education processes and outcomes considering the accelerated pace of technology innovations.

Chairs

Whitley Yi (University of Colorado, USA) and Amber Liu (ttopstart BV, Netherlands)

Programme

09:00 - 9:05
1. Introduction by the chairs

09:05 - 09:25
2. Pharmacist as technologist
Darrin Baines (Bournemouth University, UK)

09:25 - 09:45
3. Developments in disruptive health technology - future trends
Ryan Olohan (Google Healthcare, USA)

09:45 - 10:20
4. Workshop 1 - Disruptive technology and its impact on traditional solutions and processes

10:20 - 10:40
Coffee/tea break

10:40 - 11:00
5. Mobile, connected, digital health
Navin Joshi (GlaxoSmithKline, UK)

11:00 - 11:20
6. The next generation of innovators: transforming education
Ruth Nemire (American Association of Colleges of Pharmacy, USA)

11:20 -11:50
7. Workshop 2 - Health technologies and pharmacy education

11:50 - 12:00
8. Closing remarks: Impact of technology on pharmacy and healthcare
Sandra Carey (McCann Health, USA)

Deze foto is alleen voor redactioneel gebruik (merken en mensen herkenbaar in beeld). Om die reden raden wij af deze te gebruiken.



E6 CHALLENGES AND ACHIEVEMENTS OF PHARMACY PRACTICE ADVANCEMENT IN DEVELOPING COUNTRIES

Thursday 14 September, 12:30 – 13:30

ACPE Code: _____

Organised by the FIP Programme Committee
Auditorium
Duration: 1h30

Introduction
Pharmacy practice varies from country to country, but there is a consistent and growing need and interest in progress and improvement in all sectors of the pharmacy profession. Pharmacy education is changing and new services are emerging, but sometimes the resources can be limited. This session will provide a global overview of successful initiatives and innovations from developing countries in advancing the profession in spite of the fact that conditions are not encouraging. Good collaboration among health care sectors, national institutions and regulation will be highlighted in the best examples from different parts of the world. This session aims to promote partnership, encouragements and motivation to advance the profession in any conditions, beyond limits and borders.

Learning objectives
At the conclusion of this knowledge-based session, participants will be able to:
1. Describe the role of pharmacists in developing countries, in different settings.
2. State opportunities for collaboration and sharing best practices in pharmacy worldwide.
3. Describe and apply best practice examples from countries with limited resources.
4. Identify the potential and startup points to advance pharmacy practice in their own countries.

Chair
Arijana Meštrović (Pharma Expert, Croatia)

Programme
12:30 – 12:50
1. **Background and statistics — What do we need to know about challenges and achievements in pharmacy practice in developing countries? Global overview**
   Ahmed Ibrahim Fathelrahman Elhassan (Qassim University, Saudi Arabia)

12:50 – 13:10
2. **How to be successful in overcoming limited resources in pharmacy practice advancements? The African experience**
   Mahama Duwiejua (Faculty of Pharmacy and Pharmaceutical Sciences — KNUST, Ghana)

13:10 – 13:30
3. **Promoting excellence in the pharmacy profession through innovation — The South America experience**
   Cairo Toledano (Facultad de Farmacia UAEM, Mexico)

13:30 – 14:00
4. **We are the pharmacy world! — The way forward**
   Panel discussion with experts from different countries

E10 SIGN 4: SHARING IDEAS IN A GLOBAL NETWORK: PHARMACISTS' PARTICIPATION IN HARM REDUCTION

Thursday 14 September, 12:30 – 14:00

Organised by FIP
Grand Ballroom 104
Duration: 1h30

FIP Member Organisations presenting their best initiatives and challenges

Chair
Andy Gray (FIP, South Africa)

Programme
12:30 – 13:00
1. **First steps in harm reduction: the Lebanese pharmacists' experience**
   Marwan Akel (Lebanese International University / Order of Pharmacists of Lebanon, Lebanon)

13:00 – 13:30
2. **Regulation of marijuana: the Uruguayan model**
   Carlos Lacava (Uruguayan Association of Chemistry and Pharmacy, Uruguay)

13:30 – 14:00
3. **Pharmacy needle exchange scheme in Ireland**
   Daragh Connolly (Irish Pharmacy Union, Ireland)

A9 HISTORY OF PHARMACY: GREAT PHARMACISTS, GREAT DISCOVERIES

Thursday 14 September, 14:30 – 17:30

ACPE Code: _____

Organised by the FIP Working Group on the History of Pharmacy, the International Society for the History of Pharmacy (ISHP) and Sauvegarde du Patrimoine Pharmaceutique – France (SPP)
Grand Ballroom 104
Duration: 3h

Introduction
The heritage of a profession underpins its future.
Today pharmacists benefit from the profession having a rich and fascinating history.
Their heritage is full of scientific discoveries and people dedicated to the welfare of humanity.
Pharmacists (scientists and inventors) have among their predecessors people who are part of the great saga of world history. They left their names in the fields of chemistry and botany but also distinguished themselves in politics, industry, food and agriculture.

Learning objectives
At the conclusion of this knowledge-based session, participants will be able to:
1. Identify drug discoveries made by pharmacists.
2. List the many pharmacists who work for the welfare of humanity.
3. Explain errors of the profession in its history and avoid them in the future.
4. Describe how the soul of pharmacy must be nurtured and preserved in the historical tradition.

Chairs

Jacques Gravé (Sauvegarde du Patrimoine Pharmaceutique – International Society for History of Pharmacy, France) and Uros Cakar (University of Belgrade, Serbia)

Programme

14:30 – 14:40

1. Introduction by the chair

14:40 – 15:15

2. From China: The impact of pharmacists' discoveries on pharmacy development
Dechun Jiang (Department of Pharmacy Xuanwu Hospital of Capital Medical University, China)

15:15 – 15:50

3. From Canada: Pharmacy practice — Past, present and future
Sherif Guorgui (United Pharma Group, Canada)

15:50 – 16:10

Coffee/tea break

16:10 – 16:45

4. From the United States: Historical choices that strengthened the soul of hospital pharmacy
William Zellmer (Pharmacy Foresight Consulting and American Institute of the History of Pharmacy, USA)

16:45 – 17:30

5. From France: Pharmacists yes, but not only . . .
Serge Caillier (European Association of Employed Community Pharmacists and French Order of Employed Community Pharmacists, France) and
Great pharmacists: Famous and not so famous
Alain Delgutte (French Order of Community Pharmacists, France)

A10 PUSHING THE BOUNDARIES OF LEADERSHIP LEARNING

Thursday 14 September, 14:30 – 17:30

ACPE Code:

Organised by the International Pharmaceutical Students' Federation, FIP*Ed* and the FIP Academic Pharmacy Section
Grand Ballroom 103
Duration: 3h

Introduction

Leadership is vital within all pharmacy settings, with leaders driving innovation and professional expansion. However leadership skills, behaviours and attitudes are largely developed through experience and practice, the opportunities for which are often lacking in formal pharmacy education and even post-graduation. How can the dynamic mindset of leadership thinking be taught? In this session, participants and presenters will work together to identify the skills, attitudes and behaviours that they associate with leadership. The panel of pharmacy leaders will share how they developed these skills, behaviours and attitudes during their own leadership journeys. This will lead to small-group-facilitated brainstorming sessions to generate new ideas about how these experiences could be simulated in an educational setting. By the end of the session we will have produced an initial discussion document, from which further work can evolve to inform curricula design and student-organised extracurricular activities in the interests of cultivating future leaders.

Learning objectives

At the conclusion of this application-based session, participants will be able to:
1. Analyse the range of attitudes, skills and behaviours required for leadership.
2. Analyse the developmental journey of some pharmacy leaders, and explore how these could be emulated in the pharmacy education experience.
3. Challenge conventional approaches to fostering leadership in education.
4. Advocate how they can accelerate their leadership journey.

Chairs

Catriona Bradley (Irish Institute of Pharmacy, Ireland) and Whitley Yi (University of Colorado, USA)

Programme

14:30 – 14:35

1. Introduction to the session

14:35 – 15:05

2. Leadership journey, a perspective from:
- **a. An academic**
  Jaekyu Shin (University of California San Francisco, USA)
- **b. A hospital pharmacist**
  Ian Coombes (SHPA or Royal Brisbane and Women's Hospital, Australia)
- **c. A pharmaceutical scientist in pharmacy systems**
  Lloyd Matowe (Pharmaceutical Systems Africa, Liberia)

15:05 – 15:50

3. Workshop Activity

15:50 – 16:10

Coffee/tea break

16:10 – 16:40

4. Leadership journey, a perspective from:
- **a. A primary care pharmacist**
  Ravi Sharma (NHS England, UK)
- **b. A young practitioner**
  Radoslaw Mitura (Novartis, Poland)

16:40 – 17:20

5. Workshop activity

17:20 – 17:30

6. Closing remarks

B3 INDIVIDUALISED MEDICINES: AN ETHICAL APPROACH

Thursday 14 September, 14:30 – 17:30

ACPE Code: _____

Organised by the FIP Social and Administrative Pharmacy Section, the FIP Industrial Pharmacy Section and the FIP Expert Group on Ethics
Grand Ballroom 105
Duration: 3h

Introduction

With the rapidly evolving pharmaceutical sector in individualised medicines, the overall impact/benefit to all populations must be considered. This form of medicine is much specialised, may be highly effective and is often extremely expensive. Considering this, can we be sure that these individualised medicines are regulated appropriately, compared with the other medicines on the market? How can we ensure that those who need access to these medicines will not be detrimentally affected by location, wealth, obscurity of disease and how the drugs are provided? As these medicines are created based on an individual's genetic make-up, is there a risk that other diseases coded for in the genome will not be recorded against a person's insurance, thus making this a pre-existing condition for any future claims? Are there other ethical dimensions in individualised medicine? And are there implications for big data to assist in finding genetic patterns in populations, highlighting those with either higher risk of disease or better expected outcomes based on their genome?

Balancing therapeutic prospects introduced by scientific and technological advances with regulation to address emerging socio-ethical concerns is the ultimate challenge in dealing with application of such advances in health care. This presentation will highlight the many challenges that pharmacogenetics pose to ethicists, government bodies and practitioners alike. These challenges include such issues as reliability of personalised medicines; availability, affordability and equitable access to medicines, among many others.

Learning objectives

At the conclusion of this knowledge-based session, participants will be able to:
1. Identify regulatory resources and systems for pharmacists to guide the right patient to the correct individualised medicine.
2. Identify current challenges for regulators and payers globally to fund this practice change.
3. Outline the ethical dimensions of pharmacogenetics and individualised medicine.
4. Describe use of big data to study and benefit from individualised medicines.

Chairs

Cody Midlam (MedImpact Healthcare Systems Inc., USA) and Gabrielle Wiederkehr (ACCESS Regulatory Consulting GmbH, Switzerland)

Programme

14:30 – 14:40
1. Introduction by the chairs

14:40 – 15:15
2. Implementing personalised healthcare — Examples around the world
Junghee Suh (Roche Products Limited, Republic of Korea)

15:15 – 15:50
3. Payment models for individualised medicines
Hae Mi Choe (University of Michigan, USA)

15:50 – 16:10
Coffee/tea break

16:10 – 16:45
4. Ethical dimensions of pharmacogenetics and individualised medicine
Betty Chaar (The University of Sydney, Australia)

16:45 – 17:20
5. How to use big data to maximise benefit from individualised medicines
Michael Sorich (Flinders University, Australia)

17:20 – 17:30
6. Conclusion by the chairs

E3 NATURAL PRODUCTS: ENSURING RESPONSIBLE USE

Thursday 14 September, 14:30 – 17:30

ACPE Code: _____

Organised by the FIP Special Interest Group on Natural Products, the FIP Hospital Pharmacy Section, the FIP Special Interest Group on Translational Research and Individualized Medicines and the FIP Expert Group on Ethics
Auditorium
Duration: 3h

Introduction

Natural products (including natural medicines and dietary supplements) sometimes have pharmacological or biological activity that can be of therapeutic benefit in treating diseases. However, many products are marketed and used without rigorous trials proving their safety and effectiveness. They are categorised differently to conventional medicines because of their complex nature and constituents. For many combining natural medicines (or dietary supplements) and conventional medicines can often result in good outcomes for symptom control of chronic conditions, however most pharmacists feel they need more evidenced-based information to support patients using these products, and furthermore more evidence is needed if they are to be recommended by pharmacists. This session will cover issues surrounding these products' quality and regulation, evidence of efficacy, prevalence of use and how to provide appropriate services to patients taking natural products as well as case studies that can describe individual patient experiences.

Learning objectives

At the conclusion of this knowledge-based session, participants will be able to:
1. Describe the widespread use of natural medicines and dietary supplements and how they are categorised.
2. Explain how these products are checked for quality and regulated.
3. Specify the current evidence available to support the use of natural medicines and dietary supplements and apply knowledge to help support patients that take them (including ethical principles).
4. Outline the pros and cons of these medicines when used for personalised care.
5. Prepare a course of study to improve pharmacists' skills in selecting natural medicines and dietary supplements for patients.

Chairs

Michiho Ito (Kyoto University, Japan), Rebekah Moles (The University of Sydney, Australia) and Maria Allinson (Keele University, UK)

Programme

14:30 – 14:35
1. Introduction by the chairs

14:35 – 15:00

2. **What are natural products, how are they defined and categorised around the world?**
   Michiho Ito (Kyoto University, Japan)

15:00 – 15:25

3. **Quality and regulation of natural products in USA**
   Borut Strukelj (University of Ljubljana, Slovenia)

15:25 – 15:50

4. **Regulation of the quality of dietary supplements, a type of natural products**
   Marianne Ivey (University of Cincinnati, USA)

15:50 – 16:10

Coffee/tea break

16:10 – 16:35

5. **Clinical evaluation of crude drug products using bioactive peptides in human body fluid**
   Yuhki Sato (Oita University Hospital, Japan)

16:35 – 17:00

6. **Korean traditional medicines combined with conventional medicines — Lessons on how it can be done properly**
   Dal-Seok Oh (Korea Institute of Oriental Medicines, Republic of Korea)

17:00 – 17:25

7. **Discussion on a way forward to educate pharmacists on natural products, when and when not to use them**

17:25 – 17:30

8. **Conclusion by the chairs**



Additional programme items

FIP REGIONAL PHARMACEUTICAL FORUM MEETINGS

Eastern Mediterranean Pharmaceutical Forum
Auditorium Meeting Room 1
General Assembly
By invitation only

Monday 11 September, 14:30 – 16:30

Western Pacific Pharmaceutical Forum
Auditorium Meeting Room 1
General Assembly
By invitation only

Tuesday 12 September, 09:00 – 12:00

African Pharmaceutical Forum
Room 208 A/B
General Assembly
By invitation only

Tuesday 12 September, 14:30 – 17:30

Pharmaceutical Forum of The Americas
Auditorium Meeting Room 2
General Assembly
By invitation only

Wednesday 13 September, 09:00 – 12:00

South East Asian Regional Pharmaceutical Forum
Room 209
General Assembly
By invitation only

Wednesday 13 September, 14:30 – 15:45



FIP SPEAKERS' CORNER

Wednesday 13 September, 10:00 – 15:00

Organised by the FIP Community Pharmacy Section, the International Pharmaceutical Students' Federation and the FIP Young Pharmacists' Group
Foyer Auditorium
Duration: 5h



As we all work in a fast moving and challenging environment, the "Speakers' Corner" is an easy, fast and innovative way of sharing experiences and insights with other participants at the FIP congress. Pharmacists can talk about questions and issues that are of high importance to them in a facilitated discussion that gives practitioners the opportunity to learn from peers and advance the dialogue on critical issues.

Topics can be linked to the overall theme of the congress, "Medicines and beyond! The soul of pharmacy", or otherwise. Each participant will have the opportunity to talk for 10 to 15 minutes. Chairs will encourage passers-by to participate, but will also have prepared some back-up topics.

No booking of timeslots is required. You can just show up at the Speakers' Corner!

Learning objectives

At the conclusion this application-based session, participants will be able to:
1. Analyse the overall scope of relevant issues from pharmacists' daily practice.
2. Advocate development of specific areas when returning from the congress.
3. Acquire new contacts, making the pharmacy world smaller.
4. Demonstrate the importance of being a member of FIP and being active via FIP's and the CPS's social media.

PHARMABRIDGE

Thursday 14 September, 12:30 – 14:00

Organised by Pharmabridge
Grand Ballroom 103
Duration: 1h30

Pharmabridge aims to strengthen pharmaceutical services in developing and transitional countries through coordinated support from the pharmacy establishment and individual pharmacists in developed countries. This is done by linking people for book donations, visits of pharmacists from developing countries for practice exposure in countries with more advanced pharmacy education and practices, and the organisation of lectures and workshops in developing countries. The project is supported by FIP, its Board of Pharmaceutical Practice and the Commonwealth Pharmaceutical Association. This session will include an update on Pharmabridge, reports and results of Pharmabridge practice exposures, and discussion. All those interested in the project, from developing or developed countries, or wanting to establish contacts with colleagues from other countries (or even a specific country) are invited to attend this meeting. People with books, DVDs, etc, to offer are encouraged to bring them to the meeting and give them to colleagues from less affluent countries.

WANT TO KNOW MORE ABOUT AND BECOME INVOLVED IN THE WORK OF THE FIP SECTIONS?

FIP Academic Pharmacy Section (APS)
Business meeting
Room 208 A/B
Tuesday 12 September, 13:00 – 14:30

Health and Medicines Information Section (HaMIS)
Business meeting
Auditorium Meeting Room 1
Tuesday 12 September, 13:00 – 14:30

Hospital Pharmacy Section (HPS)
Section assembly
Room 208 A/B
Wednesday 13 September, 11:30 – 12:30

Military and Emergency Pharmacy Section (MEPS)
Business meeting
Grand Ballroom 105
Wednesday 13 September, 12:30 – 14:00

Social and Administrative Pharmacy Section (SAPS)
Business meeting
Auditorium Meeting Room 1
Thursday 14 September, 10:30 – 12:00

Community Pharmacy Section (CPS)
Steering Committee meeting
Room 208 A/B
Tuesday 12 September, 09:00 – 12:00

Industrial Pharmacy Section (IPS)
Plant Tour
Visit Handok Pharma, Seoul, Korea
Tuesday 12 September, 07:30 – 13:00

Buses leave the COEX North Gate at 07:30, and return at 13:00. Tour includes visit to state-of-the-art GMP facility, Korean Pharmacy Museum and lunch. Tour is limited to 80 people on a first-registered-first-confirmed basis. People interested in participation should register at: fipseoulplanttour@gmail.com

Section assembly
Auditorium Meeting Room 1
Wednesday 13 September, 12:30 – 14:00

Young Pharmacists' Group (YPG)
Business meeting
Auditorium Meeting Room 1
Wednesday 13 September, 14:30 – 17:30

International Pharmaceutical Students' Federation (IPSF)
Business meeting
Auditorium Meeting Room 1
Thursday 14 September, 09:00 – 12:00



FIND OUT MORE ABOUT THE FIP SPECIAL INTEREST GROUPS

Regulatory Sciences (+ 4 FGs)
Chair: Jennifer Dressman
Room: Auditorium 1

Monday 11 September, 17.30 – 18.00

Analytical Sciences & Pharmaceutical Quality
Chairs: Daniel Tang/Masaru Kato
Room: 209

Monday 11 September, 14.00 – 14.30

Pharmacy Practice Research
Chair: Charlie Benrimoj
Room: Grand Ballroom 103

Wednesday 13 September, 17.30 – 18.00

Biotechnology
Chair: Binodh DeSilva
Room: Grand Ballroom 105

Thursday 14 September, 12.00 – 12.30

PK/PD & Systems Pharmacology
Chair: Stephan Schmidt
Room: TBA
The date and time of this meeting were not known at the time of printing this booklet. Please check www.fip.org/seoul2017 or the FIP 2017 congress app.

TBA

Drug Design & Discovery
Chair: Takuya Kumamoto
Room: Grand Ballroom 104

Wednesday 13 September, 14.00 – 14.30

Translational Research & Individualized Medicines
Chair: Michael Sorich
Room: Grand Ballroom 105

Thursday 14 September, 14.00 – 14.30

Natural Products
Chair: Michiho Ito
Room: Auditorium

Thursday 14 September, 17.30 – 18.00

LOCAL ORGANIZING COMMITTEE:

GENERIC SUBSTITUTION AND INTERNATIONAL NON-PROPRIETARY PRESCRIPTION (INN)

Monday 11 September | 09:00 – 12:00 | Grand Ballroom 104

Moderator
Seok-goo Chang (Local Organizing Committee, Republic of Korea)

09:00 - 09:10
WELCOME AND PRESIDENTIAL ADDRESS
Chan-Hwi Cho (Korean Pharmacists Association, Republic of Korea)

09:10 - 09:35
GENERIC SUBSTITUTION AND INN PRESCRIPTION: WHO'S POLICY
Raffaella Balocco Mattavelli (International Nonproprietary Names programme WHO, Switzerland)

09:35 - 10:00
GENERIC SUBSTITUTION AND INN PRESCRIPTION: TRENDS AMONG FIP MEMBER COUNTRIES
Gonçalo Sousa Pinto (FIP, Spain)

10:00 - 10:20
GENERIC SUBSTITUTION AND INN PRESCRIPTION: THE CURRENT SITUATION IN FRANCE
To be announced

10:20 - 10:40
Coffee/tea break

10:40 - 11:00
GENERIC SUBSTITUTION: THE CURRENT SITUATION IN JAPAN
Shigeo Yamamura (Josai International University, Japan)

11:00 - 11:20
GENERIC SUBSTITUTION: THE CURRENT SITUATION IN THE US
To be announced

11:20 - 11:50
PANEL DISCUSSION

Moderator
Dong-Churl Suh (Chung-Ang University, Republic of Korea)

Representative organization panel members
- Korea Ministry of Health and Welfare
- Korea Pharmacist Association
- NGOs
- College of Pharmacy

11:50 - 12:00
CLOSING REMARKS





Global Pharmacy

MSc, PGDip, PGCert
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- Topics include social determinants of health, global burden and management of disease, access to medicines, and pharmacy and global health
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- Dynamic and interactive teaching, helping students critically explore global health and global pharmacy issues and potential solutions
- Two terms of teaching on our Falmer campus, surrounded by the beautiful South Downs, near the vibrant seaside city of Brighton, UK
- One term focusing on a research-based MSc dissertation

For further information contact: Dr Sarah Marshall MRPharmS
• globalhealthteaching@bsms.ac.uk • bsms.ac.uk/postgraduate/global-pharmacy

brighton and sussex medical school

General information

Badges
Participants will be given their name badges at the registration desk. Due to security regulations, all participants and accompanying persons must wear their badges throughout the congress. Only participants with white badges will be admitted to the sessions. Accompanying persons (different badges) may attend the Opening Ceremony and social events but will not be allowed to attend sessions.

Breaks
The coffee breaks during the sessions will be from 10:20 to 10:40 in the morning and from 15:50 to 16:10 in the afternoon. Between the sessions there will be a lunch break from 12:00 to 14:30. Please note that there are also some sessions between 12:30 and 14:00. Lunches are not included at this congress, but can be bought in several locations in and around the congress centre.

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

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The congress media room will offer a number of services, strictly limited to official press representatives and professional journalists. Press accreditation and press registration are required for access to the media room.

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Free WiFi will be available to all congress participants:
Network (SSID): **SK wifi zone**
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Password: **fip 2017**

Ribbons
Participants can have a ribbon or a special text in colour on their badge:

Red:	FIP Executive Committee, FIP Chairs of the Boards, FIP Past and Honorary Presidents, FIP Vice Presidents, Host Committee
Brown:	1st Timers
Orange:	FIP Foundation Supporters
Yellow:	FIP Council Members
Light yellow:	FIP Council Observers
Olive green:	FIP Foundation Directors
Fuchsia:	Press
Royal blue:	Speakers and Chairs
Yellow:	FIP Head Office
Lime:	Deans Forum
Light blue:	Pharmacists in Politics
Royal blue:	Satellite Symposium: Pharmacy Technicians
Purple:	Section ExCo members and Special Interest Group Chairs
Soft pink:	Poster presenters

GOLD: Loyal GOLD congress participants who have attended more than 10 FIP Congresses

PLATINUM: Loyal PLATINUM congress participants who have attended more than 20 FIP Congresses

Thank you and congratulations!



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Transforming anticoagulation management through an international pharmaceutical care guideline, an iPACT symposium

as part of the 77th FIP World Congress (Seoul)

When: 11th September 2017, start at 12:30
Lunch provided
Location: Grand Ballroom 105
Chair: Sotiris Antoniou (chair iPACT)

PROGRAM

12:15	Grand Ballroom 105, lunch provided	
12:30	iPACT, a unique network of pharmacists motivated to improve patient care. *Who are we and what initiatives do we take?*	Sotiris Antoniou, *UK – chair iPACT*
12:40	Understanding the needs of pharmacists in managing anticoagulation. *Does the continent you work in mean your needs are different?*	John Papastergiou *(Canada)*
12:55	Supporting the needs of pharmacists to improve pharmaceutical outcomes. *Presentation of iPACT guideline through case based discussion.*	Bart Van den Bemt *(the Netherlands)*
13:10	Warfarin management in community pharmacy. *Application of iPACT guideline*	Dale Griffiths *(New Zealand)*
13:25	The integral role of pharmacies in early detection of atrial fibrillation. *What can you do?*	Filipa Alves da Costa *(Portugal)*
13.40	Panel discussion	*All faculty*
14:00	End of symposium	

iPACT is a global expert network, that aims to improve patient care & adherence in patients receiving oral anticoagulant therapy and raise awareness and support the early detection of undiagnosed atrial fibrillation.
Visit our website! www.ipact.org

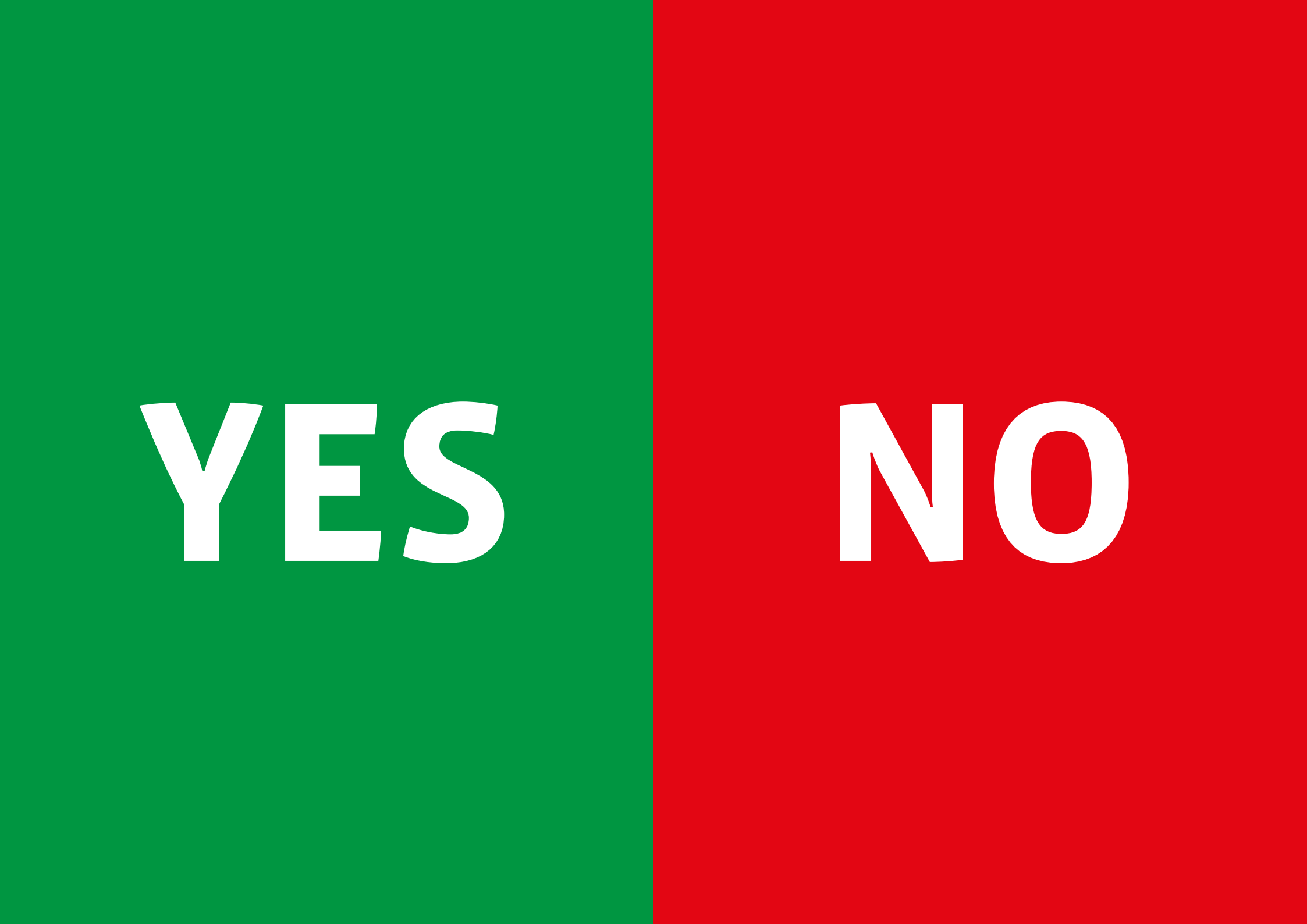
iPACT International Pharmacists for Anticoagulation Care Taskforce

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Development of universal guidelines was supported by an unrestricted grant received from Davie Ratnoff McFarlane Foundation (DRM-F) which governs the work of iPACT. The DRM-F is supported financially by Bayer AG.

List of **participants**

(separate file to be delivered after 15 July 2017)


YES
NO

Floorplan **FIP World Congress** Seoul 2017

Coex **map**



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Coex **floor guide**

