

# Appendix 3 of the report on the 2011 FIP congress in Hyderabad



**Individual session reports**

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# Session: R1 - Pharmacovigilance and medicines information to enhance patient safety

From Saturday 03/09/2011, 09:00 until Saturday 03/09/2011, 17:00

Room: G05-G06 (ground floor)

Session organised by: Pharmacy Information Section

31 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 41

Attendance at the end of the session: 67

**Average attendance: 54**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Summarize the WHO Programme for International Drug Monitoring and explain how countries can join and share information
2. Highlight the importance of information services to promote the safe and effective use of medicines
3. Describe the processes involved in pharmacovigilance monitoring programs
4. Explain how adverse reaction reporting can protect patients from future exposure to hazardous medicines
5. Demonstrate strategies to minimize the risk of medication errors
6. Consider the dynamics of media reporting of adverse outcomes and its influence on pharmacovigilance and medicines use

### Programme of the session

Chairs: Graeme Vernon (Austin Health Drug Information, Australia) and Alexander Dodoo (University of Ghana Medical School, Ghana)

1. *Welcome, introduction and background of speakers and participants: Alexander Dodoo (University of Ghana Medical School, Ghana)*
2. *Importance of Pharmacovigilance for patient safety: Sten Olsson (Uppsala Monitoring Centre, Sweden)*
3. *WHO Pharmacovigilance Programme: Shanthi Narayan Pal (World Health Organization)*
4. *The pharmacist's role in adverse reaction reporting: Graeme Vernon (Austin Health Drug Information, Australia)*
5. *Sources and methods for pharmacovigilance information: Shanthi Narayan Pal (World Health Organization)*
6. *Identifying new adverse reactions: Sten Olsson (Uppsala Monitoring Centre, Sweden)*
7. *Protecting patients: Graeme Vernon (Austin Health Drug Information, Australia)*

8. *Pharmacovigilance systems in India and Asia: Paul S. Lalvani (Rapid Pharmacovigilance Implementation in Developing countries, India)*
9. *Medication errors: Graeme Vernon (Austin Health Drug Information, Australia)*
10. *Media reports of pharmacovigilance issues: Alexander Dodoo (University of Ghana Medical School, Ghana) and Shanthi Narayan Pal (World Health Organization)*
11. *Challenges for pharmacists in pharmacovigilance – Open forum: Alexander Dodoo (University of Ghana Medical School, Ghana) and Graeme Vernon (Austin Health Drug Information, Australia)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 31
Good	27 / 31
Too long	2 / 31
Blank (no answer)	1 / 31

Overall quality of the session:

Poor	0 / 31
Fair	1 / 31
Good	15 / 31
Excellent	14 / 31
Blank (no answer)	1 / 31

Learning objectives met?

Strongly Disagree	6
Disagree	1
Agree	57
Strongly Agree	75

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Welcome, introduction and background of speakers and participants: Alexander Dodoo (University of Ghana Medical School, Ghana)	3,59	3,64	3,54	3,82	28
Importance of Pharmacovigilance for patient safety: Sten Olsson (Uppsala Monitoring Centre, Sweden)	3,43	3,48	3,52	3,7	27

1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
WHO Pharmacovigilance Programme: Shanthi Narayan Pal (World Health Organization)	3,3	3,5	3,46	3,58	26
The pharmacist's role in adverse reaction reporting: Graeme Vernon (Austin Health Drug Information, Australia)	3,42	3,44	3,36	3,6	25
Sources and methods for pharmacovigilance information: Shanthi Narayan Pal (World Health Organization)	3,6	3,63	3,63	3,79	24
Identifying new adverse reactions: Sten Olsson (Uppsala Monitoring Centre, Sweden)	3,5	3,52	3,44	3,6	25
Protecting patients: Graeme Vernon (Austin Health Drug Information, Australia)	3,6	3,55	3,54	3,53	24
Pharmacovigilance systems in India and Asia: Paul S. Lalvani (Rapid Pharmacovigilance Implementation in Developing countries, India)	3,38	3,52	3,42	3,72	25
Medication errors: Graeme Vernon (Austin Health Drug Information, Australia)	3,55	3,57	3,6	3,76	22
Media reports of pharmacovigilance issues: Alexander Doodoo (University of Ghana Medical School, Ghana) and Shanthi Narayan Pal (World Health Organization)	NA	NA	NA	NA	NA
Average for all the evaluations of the session	3,48	3,54	3,5	3,68	

#### **Comments provided by the attendants**

- Should provide more practical pharmaceuticals.
- The science of pharmacovigilance and patient safety needs more in depth discussion and training of delegates, need to have at least one more day to extend the exposure and learning with speakers we have.
- Can be further improved by having a panel discussion of WHO PV members to share experiences
- We need to know how the private sector can get fully involved in PV reporting and coordinating and the obstacles including lack of government consent and how they can overcome them
- Keep presentors to time schedule
- It is vital that presenters work as a team while preparing for the workshop to avoid duplication of information. Reinforcing is important but duplication can be avoided. Speakers can use the mouse on the laptop so they face the audience and engage completely and not turn towards the screen to use laser.
- Time management
- How to analyse data? How to create signal?

- Almost all the speakers were exceptional and passionate in their delivery. Sten Olsson and Alex Doddoo (particularly) were excellent. Graeme need to improve his oral acquity audible necessities.

# Session: A1 - A primer on quality and safety

From Monday 05/09/2011, 09:00 until Monday 05/09/2011, 12:00

Room: Hall 3 (ground floor)

Session organised by: Board of Pharmaceutical Practice

88 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 152

**Average attendance: 207**

Attendance at the end of the session: 262

## Programme of the session

Sub-standard medicines and services do not only have a negative impact on patients but also have significant consequences for the wider Health Services System. In this session, we will consider the scale of the problem and the reason for change. There are many causes of sub-standard quality in pharmacy including organisational culture, understaffing, lack of resources, insufficient cooperation with other healthcare professionals, and missing or incorrect information. Understanding and identifying these barriers is the first step to making the changes needed to improve quality. Are there methods and ideas that we could learn from other high safety industries and that we could apply to our own practice? The updated Good Pharmacy Practice Guidelines, which are a reference for national pharmaceutical organisations and governments to set up their own nationally accepted standards of Good Pharmacy Practice (GPP) will be discussed.

### Learning objectives of the session

The learning objectives of this session were:

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

1. Outline the economic and social consequences of substandard medicines and practice
2. Discuss the key barriers to improving patient safety and quality in pharmacy
3. Describe some key lessons that the profession can learn from other high safety industries
4. Outline the key points from the FIP Good Pharmacy Practice Guidelines

### Programme of the session

Chair: Martin Schulz (Chairman of the FIP-BPP Programme Committee, Germany)

Co-Chair: Thengungal Kochupapy Ravi (Sri Ramakrishna Institute, India)

1. *The case for change: Why do we need to improve quality: Jamie Sinclair (Health East Care System, United States)*
2. *Barriers to safety and quality for both practice and products: Douglas Keene (Management Sciences for Health - MSH, United States)*
3. *Learning from the cockpit: What can we learn from other high safety industries: Frank Debouck (Air France, France)*



4. *FIP's work to promote standards: Good Pharmacy Practice (GPP) Guidelines: Prafull Sheth (Vice president FIP, India)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	3 / 88
Good	78 / 88
Too long	0 / 88
Blank (no answer)	7 / 88

Overall quality of the session:

Poor	0 / 88
Fair	6 / 88
Good	47 / 88
Excellent	27 / 88
Blank (no answer)	8 / 88

Learning objectives met?

Strongly Disagree	1
Disagree	3
Agree	210
Strongly Agree	90

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
The case for change: Why do we need to improve quality: Jamie Sinclair (Health East Care System, United States)	3,47	3,37	3,31	3,4	74
Barriers to safety and quality for both practice and products: Douglas Keene (Management Sciences for Health - MSH, United States)	3,33	3,29	3,46	3,44	63
Learning from the cockpit: What can we learn from other high safety industries: Frank Debouck (Air France, France)	3,4	3,57	3,56	3,57	61

1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
FIP's work to promote standards: Good Pharmacy Practice (GPP) Guidelines: Prafull Sheth (Vice president FIP, India)	3,52	3,57	3,39	3,64	56
Average for all the evaluations of the session	3,43	3,44	3,43	3,51	

#### **Comments provided by the attendants**

- Opportunities for pharmacists to practice exchange pharmacy in other countries
- Tools for measuring quality in the pharmacy (hospital and community)
- FMEA- a secret of patient safety
- Request to put more information about specifically related to industrial pharmacy (manufacturing)
- The use of root cause analysis to improve practice risk assessments and quality risk management
- Move on PBPV modelling
- Quality of safety and GPP should be surrounded to all under & developing countries
- Very interesting and relevant to my profession as a hospital pharmacist

# Session: A2 - Learning from errors and monitoring safety

From Tuesday 06/09/2011, 09:00 until Tuesday 06/09/2011, 12:00

Room: Hall 3 (ground floor)

Session organised by: Board of Pharmaceutical Practice

27 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 191

Attendance at the end of the session: 214

**Average attendance: 202**

## Programme of the session

The key to identifying actions that can be taken to improve patient safety is: understanding why adverse events occur. But will pharmacists be willing to disclose information about events that have occurred or nearly occurred (near-misses) if an effective 'no-blame' or 'patient safety culture' is not in place? How can we best learn from incidents to ensure they do not happen again? This session will study one system that has been used at the national level to improve patient safety by identifying and learning from trends in adverse medical events that occur throughout the country. Monitoring standards of practice is also important to identify areas for ongoing development and improvement, but how can this best be done? What quality indicators can be used to assess the quality of pharmacy services from a structure, process and outcomes point of view? And how can we build on feedback from patients? Can we enhance the expectations that patients should have of pharmacists?

### Learning objectives of the session

The learning objectives of this session were:

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

1. Explain why creating a patient safety culture is the key to identifying problems and improving patient safety
2. Describe one national system which uses incident reports from health professionals to drive a cycle of continuous improvements in safety
3. Discuss how quality indicators can be used to monitor and improve quality and safety in practice
4. Outline different methods of assessing the patient experience including simulated/pseudo patient studies/ mystery shopping and using patient feedback and complaints to drive quality improvements

### Programme of the session

Chair: Robert DeChristoforo (Member of the FIP-BPP Programme Committee, United States)

1. *Creating an effective patient safety culture: Diane Pinakiewicz (National Patient Safety Foundation, United States)*
2. *Reporting adverse drug events and learning from them: Marvin Gómez-Vargas (Roche, Costa Rica)*
3. *The use of quality indicators to monitor and support ongoing quality and safety improvements: Martina Teichert (Royal Dutch Association for the Advancement of Pharmacy - KNMP, Netherlands)*
4. *Involving patients as partners in assessing quality and raising expectations: Rebekah Moles (University of Sydney, Australia)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 27
Good	24 / 27
Too long	0 / 27
Blank (no answer)	2 / 27

Overall quality of the session:

Poor	0 / 27
Fair	1 / 27
Good	15 / 27
Excellent	8 / 27
Blank (no answer)	3 / 27

Learning objectives met?

Strongly Disagree	0
Disagree	0
Agree	55
Strongly Agree	49

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Creating an effective patient safety culture: Diane Pinakiewicz (National Patient Safety Foundation, United States)	3,58	3,25	3,7	3,63	24
Reporting adverse drug events and learning from them: Marvin Gómez-Vargas (Roche, Costa Rica)	3,75	3,71	3,63	3,67	24

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
The use of quality indicators to monitor and support ongoing quality and safety improvements: Martina Teichert (Royal Dutch Association for the Advancement of Pharmacy - KNMP, Netherlands)	3,7	3,7	3,82	3,77	22
Involving patients as partners in assessing quality and raising expectations: Rebekah Moles (University of Sydney, Australia)	3,7	3,5	3,4	3,5	20
Average for all the evaluations of the session	3,68	3,54	3,64	3,64	

**Comments provided by the attendants**

None

# Session: A3 - Building a safer service: Techniques and tools to improve quality and safety

From Wednesday 07/09/2011, 09:00 until Wednesday 07/09/2011, 12:00

Room: Hall 3 (ground floor)

Session organised by: Board of Pharmaceutical Practice

72 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 103

Attendance at the end of the session: 164

**Average attendance: 134**

## Programme of the session

Improving quality involves closing the gap between current and expected levels of practice as defined by standards. In practice, this can be done by using quality management tools and principles to understand and address system deficiencies, enhance strengths, and improve healthcare processes. This session will explore how different quality management frameworks and methods such as ISO, Lean, Six Sigma or Risk Evaluation and Mitigation Strategies (REMS), among others can be applied to pharmacy practice. The role of regulatory agencies and professional organisations in enforcing and assuring standards will also be considered.

### Learning objectives of the session

The learning objectives of this session were:

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

1. Compare the key techniques and tools such as ISO or Six Sigma designed to close the gap between current and expected levels of quality and safety
2. Discuss how Good Manufacturing Practices (GMP), Good Distribution Practices (GDP) and Good Pharmacy Practices (GPP) contribute to ensuring quality and safety of all medicines and healthcare provision across settings
3. Describe the role of Risk Evaluation and Mitigation Strategies (or REMS) in improving quality of care and patient safety
4. Discuss the role of professional and regulatory organisations to enforce and assure quality standards

### Programme of the session

Chair: Bente Frøkjær (Member of the FIP-BPP Programme Committee, Denmark)

Facilitator: Uma Vasireddy (India)

1. *From individual to systematic team problem solving and organisational reengineering – Which techniques and tools can help deliver quality?: Eeva Teräsalmi (FIP Community Pharmacy Section, Finland)*
2. *Applying quality principles to medicines and healthcare provision – The path from Good Manufacturing Practice (GMP) and Good Distribution Practice (GDP) to Good Pharmacy Practice (GPP): Hanne Mette Schou (Pharmakon a/s, Denmark)*
3. *Using risk Evaluation and Mitigation Strategies (or REMS) to improve quality of care and patient safety: Reema Jain (US Food and Drug Administration - FDA, United States)*
4. *Developing, enforcing and assuring quality standards – The role of national systems, regulatory agencies and professional organisations: Lotte Fonnesbæk (Danish Society for Patient Safety, Denmark)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	2 / 72
Good	69 / 72
Too long	0 / 72
Blank (no answer)	1 / 72

Overall quality of the session:

Poor	0 / 72
Fair	7 / 72
Good	49 / 72
Excellent	14 / 72
Blank (no answer)	2 / 72

Learning objectives met?

Strongly Disagree	5
Disagree	3
Agree	189
Strongly Agree	64

*Cumulative data for all the learning objectives of the sessions*

### **Evaluation of the speakers**

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
From individual to systematic team problem solving and organisational reengineering – Which techniques and tools can help deliver quality?: Eeva Teräsalmi (FIP Community Pharmacy Section, Finland)	3,44	3,21	3,43	3,49	61
Applying quality principles to medicines and healthcare provision – The path from Good Manufacturing Practice (GMP) and Good Distribution Practice (GDP) to Good Pharmacy Practice (GPP): Hanne Mette Schou (Pharmakon a/s, Denmark)	3,66	3,54	3,53	3,56	63
Using risk Evaluation and Mitigation Strategies (or REMS) to improve quality of care and patient safety: Reema Jain (US Food and Drug Administration - FDA, United States)	3,44	3,44	3,36	3,48	61
Developing, enforcing and assuring quality standards – The role of national systems, regulatory agencies and professional organisations: Lotte Fonnesbæk (Danish Society for Patient Safety, Denmark)	3,33	3,44	3,36	3,52	56
Average for all the evaluations of the session	3,47	3,41	3,42	3,51	

### **Comments provided by the attendants**

- Thank you for the inspirational lecture and for the specific figures from the talk a primer on quality and safety
- Second presentation was good but could have included more objectivity and data
- Only because several were Finnish
- Very Good
- The session is great informative
- Speech 2 & 4 remained on the very surface of the topic. Speech 1 missed the read things. If we discuss patterns and formalisms instead of contents and improving the level of our work we will not make any progress
- Comparative study with any other country and role of regulatory organisations to enforce has to be more comparative.
- Please add more details about accreditation & ISO studies on FIP website
- Good organising for time slot and time for discussion
- Good session very useful examples
- The powers given to FDA USA is great if some of them could be given to FDA INDIA would help A LOT, Accreditation is excellent



- Being able to show responsibility for what you did through documentation is a merit. But if there is a big change to overdocumentate and thus not spending time with our patients but doing all kind of administration. How far should documentation go? How find the balance between administration time and showing what you did?
- Please provide the updates with respect to quality principles to all the FIP participants through their mail ids.
- Continue to present actual best practice models something do able even with limited resouces
- ALL the slides should have been in English
- Some slides very difficult to see. Not new for me

# Session: A4 - Paying pharmacists for patient outcomes: Pay for performance?

From Wednesday 07/09/2011, 14:00 until Wednesday 07/09/2011, 17:00

Room: Hall 3 (ground floor)

Session organised by: Board of Pharmaceutical Practice

67 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 140

Attendance at the end of the session: 105

**Average attendance: 122**

## Programme of the session

Costs are incurred in improving quality standards in pharmacies but there are significant costs for health systems in managing the consequences of sub-standard products and services. How can we assess these different costs? Who will pay? And how can we ensure that the right financial incentives are in place to drive the improvement of standards? To what extent are environmental factors in pharmacy practice such as workload and stress impinging on safety and quality and what solutions can be put in place to support pharmacists in coping with the increased workload involved in improving quality? This session will discuss the economic case for investing in improving quality standards, the impact of linking payment to quality and safety outcomes, and how the increase in workload linked to improving standards can be best managed.

### Learning objectives of the session

The learning objectives of this session were:

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

1. Discuss the economic case for investing in improving quality standards
2. Describe the benefits and challenges of linking payment to improvements in health outcomes and patient safety
3. List the environmental factors in pharmacy practice that can compromise the institutionalization of quality and safety
4. Understand the importance of aligning economic incentives to motivate pharmacist to and hold them accountable for improved outcomes

### Programme of the session

Chair: Ema Paulino (Member of the FIP-BPP Programme Committee, Portugal)

1. *Cost of improving quality versus cost of business as usual – Which is the most expensive?: Dennis Helling (Kaiser Permanente, United States)*
2. *Managing risks, reducing costs - What is the impact on the individual pharmacist?: Raj Vaidya (Indian Pharmaceutical Association, India)*
3. *How do environmental factors such as stress affect patient safety, and how can they best be managed?: Darren Ashcroft (University of Manchester, United Kingdom)*
4. *Changing the way pharmacists are paid to create incentives to improve care?: Philip J. Schneider (University of Arizona, United States)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 67
Good	65 / 67
Too long	0 / 67
Blank (no answer)	1 / 67

Overall quality of the session:

Poor	0 / 67
Fair	4 / 67
Good	56 / 67
Excellent	5 / 67
Blank (no answer)	2 / 67

Learning objectives met?

Strongly Disagree	0
Disagree	15
Agree	196
Strongly Agree	106

*Cumulative data for all the learning objectives of the sessions*

**Evaluation of the speakers**

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Cost of improving quality versus cost of business as usual – Which is the most expensive?: Dennis Helling (Kaiser Permanente, United States)	3,44	3,43	3,34	3,4	60
Managing risks, reducing costs - What is the impact on the individual pharmacist?: Raj Vaidya (Indian Pharmaceutical Association, India)	3,3	3,53	3,34	3,42	56
How do environmental factors such as stress affect patient safety, and how can they best be managed?: Darren Ashcroft (University of Manchester, United Kingdom)	3,51	3,53	3,6	3,68	41
Changing the way pharmacists are paid to create incentives to improve care?: Philip J. Schneider (University of Arizona, United States)	3,51	3,67	3,61	3,66	32
Average for all the evaluations of the session	3,43	3,52	3,45	3,51	

**Comments provided by the attendants**

None

# Session: B1 - Environment and pharmaceuticals

From Monday 05/09/2011, 15:00 until Monday 05/09/2011, 18:00

Room: Hall 3 (ground floor)

Session organised by: Board of Pharmaceutical Practice; Board of Pharmaceutical Sciences

37 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 78

**Average attendance: 59**

Attendance at the end of the session: 40

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Summarize the environmental impact of pharmaceutical waste products
2. List activities aiming at protecting the environment from pharmaceutical waste products
3. Describe strategies applied to minimize the effect of pharmaceutical waste on the environment

### Programme of the session

Chairs: Kazuichi Hayakawa (Kanazawa University, Japan) and Prafull Sheth (Vice president FIP, India)

1. *Resource issues (energy, water and infrastructure): Kilaparti Ramakrishna (United Nations Environment Programme - UNEP, Kenya)*
2. *Environmental impacts and pharmaceutical waste management from a practitioner point of view: Firouzan (Fred) Massoomi (Nebraska Methodist Hospital, United States)*
3. *Environment related issues of pharmaceutical sectors in drug disposals: Astrid Kågedal (Sweden)*
4. *Strategies: Kazuichi Hayakawa (Kanazawa University, Japan)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 37
Good	32 / 37
Too long	4 / 37
Blank (no answer)	1 / 37

Overall quality of the session:

Poor	0 / 37
Fair	7 / 37
Good	24 / 37
Excellent	5 / 37
Blank (no answer)	1 / 37

Learning objectives met?

Strongly Disagree	0
Disagree	1
Agree	57
Strongly Agree	42

*Cumulative data for all the learning objectives of the sessions*

### **Evaluation of the speakers**

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Resource issues (energy, water and infrastructure): Kilaparti Ramakrishna (United Nations Environment Programme - UNEP, Kenya)	3,56	3,33	3,44	3,53	17
Environmental impacts and pharmaceutical waste management from a practitioner point of view: Firouzan (Fred) Massoomi (Nebraska Methodist Hospital, United States)	3,5	3,5	3,47	3,67	30
Environment related issues of pharmaceutical sectors in drug disposals: Astrid Kågedal (Sweden)	3,04	3,12	3,12	3,04	25
Strategies: Kazuichi Hayakawa (Kanazawa University, Japan)	2,8	3,07	3	3,36	14
Average for all the evaluations of the session	3,26	3,28	3,29	3,41	

### **Comments provided by the attendants**

- Method of disposal of different drugs may be addressed
- Should have taken the opportunity to get the international support to stop the severe pollution
- Elaborative
- Comparative study
- Very informative and well presented
- What are green drugs? Please implement QR codes on the slides
- Repetition

- Too many repetitions of same topic

# Session: C1 - WHO Guidelines on multisource drugs and interchangeability

From Monday 05/09/2011, 09:00 until Monday 05/09/2011, 12:00

Room: Hall 1 (ground floor)

Session organised by: Board of Pharmaceutical Sciences

28 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 54

Attendance at the end of the session: 70

**Average attendance: 62**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Summarize the major bioequivalence requirements
2. List the main challenges in conducting bioequivalence studies
3. Describe WHO's prequalification program

### Programme of the session

Chair: Sabine Kopp (World Health Organization)

1. *WHO Guidelines: Lembit Rägo (Department of Essential Medicines and Pharmaceutical Policies, World Health Organization)*
2. *Bioequivalence study, designs, protocols and issues: Venkatesh Subramaniam (Dr. Reddy's Laboratories Ltd., India)*
3. *Prequalification inspection: Deusdedit Mubangizi (World Health Organization)*
4. *Challenges from Indian regulatory perspective: Surinder Singh (India Drug Controller General Office, India)*  
**CANCELLED (NO SHOW)**



## Evaluation

### Overall evaluation

The length of the session:

Too short	2 / 28
Good	23 / 28
Too long	2 / 28
Blank (no answer)	1 / 28

Overall quality of the session:

Poor	0 / 28
Fair	6 / 28
Good	20 / 28
Excellent	1 / 28
Blank (no answer)	1 / 28

Learning objectives met?

Strongly Disagree	0
Disagree	12
Agree	67
Strongly Agree	10

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
WHO Guidelines: Lembit Rägo (Department of Essential Medicines and Pharmaceutical Policies, World Health Organization)	3,26	3,04	3,08	3,2	23
Bioequivalence study, designs, protocols and issues: Venkatesh Subramaniam (Dr. Reddy's Laboratories Ltd., India)	2,86	3,09	3,22	3,42	23
Prequalification inspection: Deusdedit Mubangizi (World Health Organization)	3,45	3,24	3,67	3,64	20
Challenges from Indian regulatory perspective: Surinder Singh (India Drug Controller General Office, India)	CANCELLED (NO SHOW)				
Average for all the evaluations of the session	3,18	3,12	3,31	3,41	

**Comments provided by the attendants**

- There was press flash photographer who was very disturbing
- The second speaker was substituted
- Good for network
- Session is good and excellent
- Speakers are very fast
- Required details on BA/BE studies

# Session: C2 - Biosimilars

From Monday 05/09/2011, 15:00 until Monday 05/09/2011, 18:00

Room: Hall 1 (ground floor)

Session organised by: Board of Pharmaceutical Sciences

30 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 110

Attendance at the end of the session: 60

**Average attendance: 85**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Explain the difference between generic and biosimilar
2. Explain why the formulation of biosimilar products is difficult
3. Summarize the issues related to immunogenicity
4. List the options beyond biosimilars in the biotherapeutics space

### Programme of the session

Chairs: Daan J.A. Crommelin (Dutch Top Pharma Institute, Netherlands) and Rayasam Prasad (Biological E Ltd., India)

1. *Formulation and stability: Daan J.A. Crommelin (Dutch Top Pharma Institute, Netherlands)*
2. *Immunogenicity: Tatsuro Irimura (University of Tokyo, Japan)*
3. *Challenges and opportunities: Krishna Ella (Bharat Biotech International Ltd., India)*
4. *Beyond biosimilars: The evolution of polymer conjugation in biotherapeutics: Deb Charych (Nektar, United States)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	2 / 30
Good	25 / 30
Too long	1 / 30
Blank (no answer)	2 / 30

Overall quality of the session:

Poor	0 / 30
Fair	1 / 30
Good	24 / 30
Excellent	1 / 30
Blank (no answer)	4 / 30

Learning objectives met?

Strongly Disagree	0
Disagree	0
Agree	87
Strongly Agree	9

*Cumulative data for all the learning objectives of the sessions*

### **Evaluation of the speakers**

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Formulation and stability: Daan J.A. Crommelin (Dutch Top Pharma Institute, Netherlands)	3,56	3,44	3,48	3,52	27
Immunogenicity: Tatsuro Irimura (University of Tokyo, Japan)	2,83	3,25	3,42	3,42	24
Challenges and opportunities: Krishna Ella (Bharat Biotech International Ltd., India)	3,55	3,5	3,55	3,75	20
Beyond biosimilars: The evolution of polymer conjugation in biotherapeutics: Deb Charych (Nektar, United States)	3,83	3,61	3,44	3,67	18
Average for all the evaluations of the session	3,42	3,44	3,47	3,57	

### **Comments provided by the attendants**

1 kept looking to slides and moved away from microphone

Excellent

Slides of presentation should be made available online within 1 month.

Should be addressed in a broad scope

Last one was excellent

Great experience but need to have some more experts

Satisfying session

## Session: C3 - Clinical research

From Tuesday 06/09/2011, 09:00 until Tuesday 06/09/2011, 12:00

Room: Hall 1 (ground floor)

Session organised by: Board of Pharmaceutical Sciences

39 session evaluation forms collected

### Attendance data

Attendance at the beginning of the session: 45

Attendance at the end of the session: 70

**Average attendance: 58**

### Programme of the session

#### Learning objectives of the session

The learning objectives of this session were:

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

1. List the most important ethical principles involved in conducting clinical studies
2. Summarize the safety issues and risks involved in conducting business globally
3. List the proper methods of handling the data collected during clinical studies, epidemiology studies, clinical trials and outcomes evaluation

#### Programme of the session

Chairs: Mario Rocci Jr. (ICON Development Solutions, United States) and S.P. Vasireddi (India)

1. *Regulatory framework: Avi Yacobi (Taro Pharmaceuticals, United States) and Vinod Shah (Scientific Secretary FIP, United States)*
2. *Ethics in clinical research: MS Latha (Dr. Reddy's Laboratories Ltd., India)*
3. *Global issues: Business, quality, safety and risks: Mario Rocci Jr. (ICON Development Solutions, United States)*
4. *Clinical practice, clinical research and public health – A continuum: Arun Nanivadekar (India)*

### Evaluation

#### Overall evaluation

The length of the session:

Too short	1 / 39
Good	34 / 39
Too long	1 / 39
Blank (no answer)	3 / 39

Overall quality of the session:

Poor	0 / 39
Fair	8 / 39
Good	26 / 39
Excellent	0 / 39
Blank (no answer)	5 / 39

Learning objectives met?

Strongly Disagree	0
Disagree	3
Agree	121
Strongly Agree	0

*Cumulative data for all the learning objectives of the sessions*

### **Evaluation of the speakers**

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Regulatory framework: Avi Yacobi (Taro Pharmaceuticals, United States) and Vinod Shah (Scientific Secretary FIP, United States)	3	2,81	2,87	2,97	31
Ethics in clinical research: MS Latha (Dr. Reddy's Laboratories Ltd., India)	3	2,97	3,06	3,31	36
Global issues: Business, quality, safety and risks: Mario Rocci Jr. (ICON Development Solutions, United States)	3,63	3,15	3,49	3,51	34
Clinical practice, clinical research and public health – A continuum: Arun Nanivadekar (India)	3,35	3	3,38	3,35	26
Average for all the evaluations of the session	3,24	2,98	3,20	3,29	

### **Comments provided by the attendants**

- Missing the point
- Where is the regulatory frame work presentation?
- Font of presentations was not clear
- Providing a hard copy would be better
- A correct picture
- Original speaker was missing
- No break time
- Differing from country to country

# Session: C4 - Paradigm shift in drug discovery and development

From Tuesday 06/09/2011, 14:00 until Tuesday 06/09/2011, 17:00

Room: Hall 1 (ground floor)

Session organised by: Board of Pharmaceutical Sciences

21 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 54

Attendance at the end of the session: 30

**Average attendance: 42**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. List the newer technology employed in drug discovery and product development
2. Describe the major applications of pharmacokinetic/ pharmacodynamic relationship, and how are they being utilized
3. Explain how safety and efficacy parameters are evaluated for new drugs

### Programme of the session

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

1. *New technologies impacting drug discovery: Mitsuru Hashida (Kyoto University, Japan)*
2. *Discovery to development: Indian perspective: Neelima Khairatkar Joshi (Glenmark Pharmaceuticals Ltd., India)*
3. *Predictive PK/PD and preclinical/clinical interface: Geoffrey Tucker (University of Sheffield, United Kingdom)*
4. *Regulatory perspective in safety and efficacy of new drug approval: Rajender Kambhoj (Lupin Limited (Research Park), India)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 21
Good	18 / 21
Too long	0 / 21
Blank (no answer)	3 / 21

Overall quality of the session:

Poor	0 / 21
Fair	4 / 21
Good	14 / 21
Excellent	0 / 21
Blank (no answer)	3 / 21

Learning objectives met?

Strongly Disagree	0
Disagree	2
Agree	68
Strongly Agree	0

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
New technologies impacting drug discovery: Mitsuru Hashida (Kyoto University, Japan)	3,24	3,65	3,59	3,65	17
Discovery to development: Indian perspective: Neelima Khairatkar Joshi (Glenmark Pharmaceuticals Ltd., India)	3,11	3,28	3	3,17	18
Predictive PK/PD and preclinical/clinical interface: Geoffrey Tucker (University of Sheffield, United Kingdom)	3,61	3,67	3,5	3,61	18
Regulatory perspective in safety and efficacy of new drug approval: Rajender Kambhoj (Lupin Limited (Research Park), India)	2,87	3,33	3,33	3,33	15
Average for all the evaluations of the session	3,22	3,49	3,35	3,44	



**Comments provided by the attendants**

None

# Session: C5 - Pharmaceutical manufacturing

From Wednesday 07/09/2011, 09:00 until Wednesday 07/09/2011, 12:00

Room: Hall 1 (ground floor)

Session organised by: Board of Pharmaceutical Sciences; Industrial Pharmacy Section

37 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 62

**Average attendance: 81**

Attendance at the end of the session: 100

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Define outsourcing
2. List potential advantages of outsourcing
3. List the issues that need to be considered during technology transfer
4. List the advantages of QbD during drug development

### Programme of the session

Chair: Tom Sam (MSD, Netherlands)

1. *Contract manufacturing – Outsourcing: R.S. Prasad (Suven Nishtaa Ltd., India)*
2. *Ensuring quality and safety in outsourcing: Subodh Priolkar (India)*
3. *Technology transfer - Global issues: Adnan Sabir (Dr. Reddy's Laboratories Ltd., India)*
4. *Quality by Design (QbD) issues: Tom Sam (MSD, Netherlands)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 37
Good	26 / 37
Too long	0 / 37
Blank (no answer)	10 / 37

Overall quality of the session:

Poor	0 / 37
Fair	2 / 37
Good	17 / 37
Excellent	5 / 37
Blank (no answer)	13 / 37

Learning objectives met?

Strongly Disagree	0
Disagree	0
Agree	123
Strongly Agree	0

*Cumulative data for all the learning objectives of the sessions*

### **Evaluation of the speakers**

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Contract manufacturing – Outsourcing: R.S. Prasad (Suven Nishtaa Ltd., India)	3,18	3,36	3,25	3,5	28
Ensuring quality and safety in outsourcing: Subodh Priolkar (India)	3,52	3,41	3,52	3,46	27
Technology transfer - Global issues: Adnan Sabir (Dr. Reddy's Laboratories Ltd., India)	3,61	3,64	3,61	3,67	33
Quality by Design (QbD) issues: Tom Sam (MSD, Netherlands)	3,76	3,72	3,62	3,71	28
Average for all the evaluations of the session	3,52	3,54	3,50	3,59	

### **Comments provided by the attendants**

- Cost effective pharmaceutical manufacturing

# Session: C6 - Standardization of herbal products

From Wednesday 07/09/2011, 14:00 until Wednesday 07/09/2011, 17:00

Room: Hall 1 (ground floor)

Session organised by: Board of Pharmaceutical Sciences

26 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 55

Attendance at the end of the session: 45

**Average attendance: 50**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Explain how to determine if a herbal product can be easily standardized
2. Describe how to set the standard of safety and efficacy for a herbal product
3. Describe the best approach for bringing in new traditional medicine products
4. Summarize how these products are regulated

### Programme of the session

Chairs: Michiho Ito (Kyoto University, Japan) and Ramesh Surianarayanan (The Himalaya Drug Company, India)

1. *Challenges involved in standardization of herbal drugs/ traditional medicines: Moola Joghee Nanjan (JSS College of Pharmacy, India)*
2. *Quality of herbal medicines with regards to safety: Authentication, contamination and adulteration problems: Need for sustainable management of medicinal plants: DB Anantha Narayana (Unilever Research Centre, India)*
3. *Evidence-based approach to modern drug discovery from traditional medicine: Michiho Ito (Kyoto University, Japan)*
4. *FDA and USP approaches for regulating herbal/traditional medicine products: James Griffiths (VP Food, Dietary Supplement, and Excipient Standards US Pharmacopeia - USP, United States)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 26
Good	23 / 26
Too long	1 / 26
Blank (no answer)	2 / 26

Overall quality of the session:

Poor	0 / 26
Fair	2 / 26
Good	20 / 26
Excellent	2 / 26
Blank (no answer)	2 / 26

Learning objectives met?

Strongly Disagree	0
Disagree	5
Agree	97
Strongly Agree	0

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Challenges involved in standardization of herbal drugs/ traditional medicines: Moola Joghee Nanjan (JSS College of Pharmacy, India)	3	2,95	3,41	3,27	22
Quality of herbal medicines with regards to safety: Authentication, contamination and adulteration problems: Need for sustainable management of medicinal plants: DB Anantha Narayana (Unilever Research Centre, India)	3,59	3,5	3,64	3,68	22
Evidence-based approach to modern drug discovery from traditional medicine: Michiho Ito (Kyoto University, Japan)	3,32	3,52	3,24	3,33	21

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
FDA and USP approaches for regulating herbal/traditional medicine products: James Griffiths (VP Food, Dietary Supplement, and Excipient Standards US Pharmacopeia - USP, United States)	3,62	3,62	3,29	3,14	21
Average for all the evaluations of the session	3,38	3,40	3,40	3,36	

#### **Comments provided by the attendants**

- Include specific examples
- Not to deviate from topic
- It was about characterization and not standardization
- Hard copy should be provided
- 3 and 4 deviated from topic
- Good lectures
- Break should be provided
- Polyherbal products
- Very good topics

# Session: C7 - Dissolution: The pivotal tool for developing quality drugs

From Thursday 08/09/2011, 09:00 until Thursday 08/09/2011, 12:00

Room: Hall 1 (ground floor)

Session organised by: Board of Pharmaceutical Sciences

12 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 20

Attendance at the end of the session: 20

**Average attendance: 20**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Explain how to qualify an instrument for dissolution studies
2. Explain how to set dissolution specifications
3. Explain when to use and how to choose a biorelevant in-vitro performance test
4. Describe some of the novel dosage forms

### Programme of the session

Chair: Horst-Dieter Friedel (Bayer HealthCare, Germany)

1. *Qualification of instrumentation: Cynthia K. Brown (Eli Lilly, United States)*
2. *A novel dissolution method for IVIVC for poorly soluble molecules: Bhaskara Jasti (University of Pacific, United States)*
3. *Biorelevant in-vitro-performance testing: Christos Reppas (University of Athens, Greece)*
4. *In vitro release of novel dosage forms: Horst-Dieter Friedel (Bayer HealthCare, Germany)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 12
Good	12 / 12
Too long	0 / 12
Blank (no answer)	0 / 12

Overall quality of the session:

Poor	0 / 12
Fair	0 / 12
Good	7 / 12
Excellent	5 / 12
Blank (no answer)	0 / 12

Learning objectives met?

Strongly Disagree	0
Disagree	5
Agree	36
Strongly Agree	3

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Qualification of instrumentation: Cynthia K. Brown (Eli Lilly, United States)	3,7	3,5	3,5	3,8	10
A novel dissolution method for IVIVC for poorly soluble molecules: Bhaskara Jasti (University of Pacific, United States)	3,33	3,67	3,58	3,75	12
Biorelevant in-vitro-performance testing: Christos Reppas (University of Athens, Greece)	3,1	3,5	3,6	3,4	10
In vitro release of novel dosage forms: Horst-Dieter Friedel (Bayer HealthCare, Germany)	3,57	3,71	3,71	3,86	7
Average for all the evaluations of the session	3,41	3,59	3,59	3,69	

### Comments provided by the attendants

None



# Session: D1 - Community Pharmacy business models: Business and financial aspects of implementing and integrating pharmaceutical services - Integrating professional services with the business of a pharmacy (Forum for innovators in Pharmacy Practice) (part 1/2)

From Monday 05/09/2011, 09:00 until Monday 05/09/2011, 12:00

Room: Hall 6 (ground floor)

Session organised by: Community Pharmacy Section

44 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 230

Attendance at the end of the session: 90

**Average attendance: 160**

## Programme of the session

The Forum for Innovators in Pharmacy Practice was developed with the purpose of creating a forum for sharing experience and exchanging information. The Community Pharmacy Section has a long tradition of organising education for professional leaders in com

### Learning objectives of the session

The learning objectives of this session were:

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

1. Summarise how pharmaceutical services can be costed including income, expenditure and break even points from a community pharmacy industry as well as an individual pharmacy
2. Describe financial decisions enabling the setting of fees for services reimbursed by governments and/or paid by individual patients
3. Construct income and expenditure statements associated with the implementation of services provision that support the development of these services
4. Translate this learning into programs for community pharmacists

### Programme of the session

Chair: Charlie Benrimoj (University of Sydney, Australia)

Co-Chair: Charlotte Rossing (Pharmakon a/s, Denmark)

1. *Welcome and introduction: Dominique Jordan (President FIP Community Pharmacy Section, Switzerland) and Charlotte Rossing (Pharmakon a/s, Denmark)*
2. *Costing and payment from an individual service perspective: Dennis Helling (Kaiser Permanente, United States)*
3. *Costing and payment of service from an independent pharmacy business perspective: Aranzuza Noain (Spain)*
4. *Cost of service Inquiry: Raj Patel (National Pharmacy Association, United Kingdom)*
5. *Workshop 1: Financial and business planning required for the implementation and integration of pharmaceutical service – Income and Expenditure*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 44
Good	32 / 44
Too long	7 / 44
Blank (no answer)	5 / 44

Overall quality of the session:

Poor	1 / 44
Fair	4 / 44
Good	30 / 44
Excellent	6 / 44
Blank (no answer)	3 / 44

Learning objectives met?

Strongly Disagree	7
Disagree	8
Agree	107
Strongly Agree	49

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Costing and payment from an individual service perspective: Dennis Helling (Kaiser Permanente, United States)	3,42	3,42	3,39	3,42	38

1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Costing and payment of service from an independent pharmacy business perspective: Aranzuza Noain (Spain)	3,18	3,32	3,18	3,35	34
Cost of service Inquiry: Raj Patel (National Pharmacy Association, United Kingdom)	3,24	3,21	3,18	3,39	28
Average for all the evaluations of the session	3,31	3,37	3,30	3,43	

#### **Comments provided by the attendants**

- How about providing PDFS of the presentation slides on a web page during congress
- I would have been very useful to have a pre-selected group leader, to guide the group discussions and analysis
- We need practical sessions where we can see, feel and touch issues been discussed
- Need to allow easier preparation of the session

# Session: D2 - Community Pharmacy business models: Business and financial aspects of implementing and integrating pharmaceutical services - Integrating professional services with the business of a pharmacy (Forum for innovators in Pharmacy Practice) (part 2/2)

From Monday 05/09/2011, 14:00 until Monday 05/09/2011, 17:00

Room: Hall 6 (ground floor)

Session organised by: Community Pharmacy Section

44 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 80

Attendance at the end of the session: 58

**Average attendance: 69**

## Programme of the session

The Forum for Innovators in Pharmacy Practice was developed with the purpose of creating a forum for sharing experience and exchanging information. The Community Pharmacy Section has a long tradition of organising education for professional leaders in com

### Learning objectives of the session

The learning objectives of this session were:

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

1. Summarise how pharmaceutical services can be costed including income, expenditure and break even points from a community pharmacy industry as well as an individual pharmacy
2. Describe financial decisions enabling the setting of fees for services reimbursed by governments and/or paid by individual patients
3. Construct income and expenditure statements associated with the implementation of services provision that support the development of these services
4. Translate this learning into programs for community pharmacists

### Programme of the session

Chair: Charlie Benrimoj (University of Sydney, Australia)

Co-Chair: Charlotte Rossing (Pharmakon a/s, Denmark)

1. *Costing and profit for an individual community pharmacy: Bruce Annabel (Australia)*
2. *Workshop 2: Developing and implementing costing models for group or individual pharmacies and to develop programs for national and other organisations to deliver to community pharmacies*
3. *Workshop 2: Financial and business planning required for the implementation and integration of pharmaceutical service – Services Case Study*
4. *Tasks and plenary roundtable discussion, summing up and closure*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 44
Good	32 / 44
Too long	7 / 44
Blank (no answer)	5 / 44

Overall quality of the session:

Poor	1 / 44
Fair	4 / 44
Good	30 / 44
Excellent	6 / 44
Blank (no answer)	3 / 44

Learning objectives met?

Strongly Disagree	7
Disagree	8
Agree	107
Strongly Agree	49

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Costing and profit for an individual community pharmacy: Bruce Annabel (Australia)	3,4	3,4	3,61	3,67	28
Average for all the evaluations of the session	3,31	3,37	3,30	3,43	

### **Comments provided by the attendants**

- How about providing PDFS of the presentation slides on a web page during congress
- I would have been very useful to have a pre-selected group leader, to guide the group discussions and analysis
- We need practical sessions where we can see, feel and touch issues been discussed
- Need to allow easier preparation of the session

# Session: D3 - Clinical Biology in India health care system: Organisation and contribution

From Monday 05/09/2011, 14:00 until Monday 05/09/2011, 17:00

Room: G05-G06 (ground floor)

Session organised by: Clinical Biology Section

8 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 21

Attendance at the end of the session: 16

**Average attendance: 18**

## Programme of the session

Despite the fact that Clinical Biology Pharmacists in European countries develop and strengthened their roles inside the clinical laboratories being the leaders for new technologies, in other countries this reality is an unknown fact

### Learning objectives of the session

The learning objectives of this session were:

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

1. Discuss the pharmacist role in Clinical Biology in India
2. Define the Clinical Biology Laboratory status and impact in the Indian Health-Care system
3. Explain the Laboratory Strategy for follow-up of infectious diseases therapy, using as an example the Anti-Tuberculosis Therapy
4. Investigate the value of laboratory testing for prevention of mother-to-child transmission

### Programme of the session

Chair: Alain Mazaleyra (FIP Clinical Biology Section, France)

1. *Clinical Biology in India: A.S. Kanagasabapathy (Kamineni Institute of Medical Sciences, India)*
2. *Health-care system in India and the Clinical Biology Laboratory: Jayesh R. Trivedi (India)*
3. *Laboratory in infectious diseases: Tuberculosis Therapeutics: Sónia Faria (FIP Clinical Biology Section, Portugal)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 8
Good	8 / 8
Too long	0 / 8
Blank (no answer)	0 / 8

Overall quality of the session:

Poor	0 / 8
Fair	0 / 8
Good	5 / 8
Excellent	2 / 8
Blank (no answer)	1 / 8

Learning objectives met?

Strongly Disagree	0
Disagree	0
Agree	16
Strongly Agree	8

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Clinical Biology in India: A.S. Kanagasabapathy (Kamineni Institute of Medical Sciences, India)	3,75	4	3,88	3,88	8
Health-care system in India and the Clinical Biology Laboratory: Jayesh R. Trivedi (India)	3,86	3,86	3,71	3,71	7
Laboratory in infectious diseases: Tuberculosis Therapeutics: Sónia Faria (FIP Clinical Biology Section, Portugal)	3,86	3,71	3,57	3,86	7
Average for all the evaluations of the session	3,82	3,83	3,73	3,82	

### Comments provided by the attendants

- Use of the pictures and images of patients and their disease state and the bacterial/microbes images should be employed



# Session: D4 - Current Issues Session - Vulnerable populations: What are their medicine/health information needs and how can we address these needs?

From Tuesday 06/09/2011, 09:00 until Tuesday 31/08/2010, 12:00

Room: MR 2.03-2.04 (second floor)

Session organised by: Pharmacy Information Section

22 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 48

Attendance at the end of the session: 54

**Average attendance: 51**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Identify populations who are at risk for having unmet medicine/health information needs
2. Discuss the medicine/health information needs and expectations of 'vulnerable' populations
3. Discuss how 'vulnerable' populations seek and obtain medicine / health information
4. Discuss how healthcare professionals currently provide medicine / health information to 'vulnerable' populations
5. Address the unmet medicine/health information needs of 'vulnerable' populations

### Programme of the session

Chairs: Parisa Aslani (University of Sydney, Australia) and Boyan Todorov (FIP Pharmacy Information Section, Netherlands)

1. *Communicating on medicines to adolescents: "Teens, what do you want to know?": Priya Bahri (European Medicines Agency, United Kingdom)*
2. *Patient opinions and perceptions of the inclusion of benefit information in their medicine leaflets: Kim Hamrosi (University of Sydney, Australia)*
3. *What do patients think about 'tailored' information leaflets with their medicines? A qualitative study: Kim Hamrosi (University of Sydney, Australia)*
4. *Collaborative medication review practices in Europe: Marja Airaksinen (University of Helsinki, Finland)*

5. *Indicators for patient involvement in the process of pharmaceutical care: A feasibility study: Marlies Geurts (Department of Pharmacotherapy and Pharmaceutical Care, University of Groningen, Netherlands)*
6. *Academic detailing as a source of medicine information to the primary healthcare providers: Study from a district of Nepal: Saval Khanal (Nepalgunj Medical College, Nepal)*
7. *Need for a "medicine information center network" in India: Pramila Tiwari (India)*
8. *The Macedonian pharmacovigilance system and involvement of pharmacists: Maja Kovaceva (Pharmaceutical Chamber of Macedonia, Macedonia)*
9. *Developing the electronic call logging system at the Drug and Poison information center of a tertiary care teaching hospital: Muhammad Hammad (Aga Khan University Hospital, Pakistan)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 22
Good	18 / 22
Too long	0 / 22
Blank (no answer)	4 / 22

Overall quality of the session:

Poor	0 / 22
Fair	4 / 22
Good	12 / 22
Excellent	1 / 22
Blank (no answer)	5 / 22

Learning objectives met?

Strongly Disagree	4
Disagree	15
Agree	45
Strongly Agree	16

*Cumulative data for all the learning objectives of the sessions*

### **Evaluation of the speakers**

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Communicating on medicines to adolescents: "Teens, what do you want to know?": Priya Bahri (European Medicines Agency, United Kingdom)	3,47	3,47	3,41	3,47	17
Patient opinions and perceptions of the inclusion of benefit information in their medicine leaflets: Kim Hamrosi (University of Sydney, Australia)	3,4	3,33	3,47	3,6	15
What do patients think about 'tailored' information leaflets with their medicines? A qualitative study: Kim Hamrosi (University of Sydney, Australia)	3,18	3,12	3,47	3,65	17
Collaborative medication review practices in Europe: Marja Airaksinen (University of Helsinki, Finland)	3,35	3,29	3,41	3,35	17
Indicators for patient involvement in the process of pharmaceutical care: A feasibility study: Marlies Geurts (Department of Pharmacotherapy and Pharmaceutical Care, University of Groningen, Netherlands)	3,19	3,06	2,88	3,31	16
Academic detailing as a source of medicine information to the primary healthcare providers: Study from a district of Nepal: Saval Khanal (Nepalgunj Medical College, Nepal)	2,73	2,73	3,07	3,13	15
Need for a "medicine information center network" in India: Pramil Tiwari (India)	3,42	3,42	3,42	3,5	12
The Macedonian pharmacovigilance system and involvement of pharmacists: Maja Kovaceva (Pharmaceutical Chamber of Macedonia, Macedonia)	3	3	3,17	3,33	12
Developing the electronic call logging system at the Drug and Poison information center of a tertiary care teaching hospital: Muhammad Hammad (Aga Khan University Hospital, Pakistan)	3,33	3,56	3,44	3,44	9
Average for all the evaluations of the session	3,23	3,21	3,30	3,42	

### **Comments provided by the attendants**

- This was a great session very inspiring what people are doing to input med info
- Few presentations on vulnerable populations
- Interesting presentations but I did not learn much on vulnerable populations
- Very poor speaker use of microphone and no management of problem by chairs. Much of the material - was interesting and important but did not really serve the seminar objectives
- Good presentation
- Speakers 2 and 3 much too fast.
- Slides hardly readable. Speakers were too fast.
- Vulnerable population most of the time not able to understand health information. Can not end

# Session: D5 - Solving practical tableting problems

From Tuesday 06/09/2011, 09:00 until Tuesday 06/09/2011, 12:00

Room: G03-G04 (ground floor)

Session organised by: Industrial Pharmacy Section

32 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 62

Attendance at the end of the session: 71

**Average attendance: 66**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe the main challenges of developing robust tableting processes
2. Discuss the steps that can be taken to overcome some of the most common tableting problems, like tablet sticking to tooling and inadequate content uniformity
3. Explain the impact of advanced process analytical approaches and the possibilities of root cause analysis

### Programme of the session

Chairs: Tom Sam (MSD, Netherlands) and Mansoor A. Khan (Director of Product Quality Research US Food and Drug Administration - FDA, United States)

1. *Recent developments in excipient and drug substance technology enabling robust tableting processes: Nandu Deorkar (Avantor, United States)*
2. *Evaluation of the effects of tableting variables on drug stability: A case study with Gabapentin: Mansoor A. Khan (Director of Product Quality Research US Food and Drug Administration - FDA, United States)*
3. *Fluorescence based PAT for improved control over the blending and tableting process including PAT blending demo: Charles N. Kettler (Natoli Engineering, United States)*
4. *Tablet sticking & tooling - Report of the Industrial Pharmacy Working Group: Tom Sam (MSD, Netherlands)*
5. *Science based trouble shooting of the tableting process. Tablet defects – Root cause analysis: Nicalaas Gentis (University of Basel, Switzerland)*
6. *Tablet splitting: Implications of compositional and compressional factors on dose variability: Mansoor A. Khan (Director of Product Quality Research US Food and Drug Administration - FDA, United States)*
7. *Industrial pharmacy posters on solid dosage forms from universities and industry as presented at the FIP congress: Tom Sam (MSD, Netherlands)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 32
Good	28 / 32
Too long	0 / 32
Blank (no answer)	3 / 32

Overall quality of the session:

Poor	0 / 32
Fair	1 / 32
Good	23 / 32
Excellent	6 / 32
Blank (no answer)	2 / 32

Learning objectives met?

Strongly Disagree	3
Disagree	0
Agree	62
Strongly Agree	48

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Recent developments in excipient and drug substance technology enabling robust tableting processes: Nandu Deorkar (Avantor, United States)	3,19	3,31	3,42	3,62	26
Evaluation of the effects of tableting variables on drug stability: A case study with Gabapentin: Mansoor A. Khan (Director of Product Quality Research US Food and Drug Administration - FDA, United States)	3,61	3,71	3,68	3,71	31
Fluorescence based PAT for improved control over the blending and tableting process including PAT blending demo: Charles N. Kettler (Natoli Engineering, United States)	3,5	3,36	3,36	3,36	14

1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Tablet sticking & tooling - Report of the Industrial Pharmacy Working Group: Tom Sam (MSD, Netherlands)	3,56	3,52	3,59	3,63	27
Science based trouble shooting of the tableting process. Tablet defects – Root cause analysis: Nicalaos Gentis (University of Basel, Switzerland)	3,24	3,64	3,6	3,68	25
Tablet splitting: Implications of compositional and compressional factors on dose variability: Mansoor A. Khan (Director of Product Quality Research US Food and Drug Administration - FDA, United States)	3,61	3,71	3,68	3,71	31
Industrial pharmacy posters on solid dosage forms from universities and industry as presented at the FIP congress: Tom Sam (MSD, Netherlands)	3,56	3,52	3,59	3,63	27
Average for all the evaluations of the session	3,42	3,53	3,55	3,63	

#### **Comments provided by the attendants**

- Issues of industrial pharmaceutical chemistry as pertaining to API & Analytical methods
- Study on splitting of medicines with therapeutic narrow margin
- Very great presentation
- On badges please mention affiliation
- Too bad presentations couldn't be completed due to lack of time
- Good need more debating on hardness if breaking is low thickness related to assay

# Session: D6 - The Basel statements in Developing and Developed Countries - What are the right ingredients?

From Tuesday 06/09/2011, 09:00 until Tuesday 06/09/2011, 12:00

Room: Hall 2 (ground floor)

Session organised by: Hospital Pharmacy Section

29 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 52

Attendance at the end of the session: 64

**Average attendance: 58**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe how the Basel Statements have been used in different hospital settings
2. Identify core elements that can aid in implementing the statements
3. Outline differences and similarities between different hospitals and reflect on what elements your own hospital setting may need to improve services
4. Describe collaborative practice and how it can link in with the future direction of the hospital pharmacy profession
5. Identify how competency assessment tools can link with the Basel statements and the future direction for hospital pharmacy

### Programme of the session

Chairs: Lee Vermeulen (FIP Hospital Pharmacy Section, United States) and Jonathan Penm (University of Sydney, Australia)

1. *How the Basel Statements have been used in Uganda: Diane Lamarre (Canada)*
2. *Pharmacists Prescribing: Betty Chaar (University of Sydney, Australia)*
3. *Basel Statements Application in a Tertiary Care University Hospital of Pakistan - What is the secret ingredient?: Salwa Ahsan (Pakistan)*
4. *The factors that influence services in the Western Pacific Region: Jonathan Penm (University of Sydney, Australia)*
5. *The ingredient of collaborative practice: David Pruce (Royal Pharmaceutical Society of Great Britain - RPSGB, United Kingdom)*
6. *Is competency assessment the secret herb and spice?: Ian Coombes (Queensland Health, Australia)*



## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 29
Good	27 / 29
Too long	0 / 29
Blank (no answer)	1 / 29

Overall quality of the session:

Poor	0 / 29
Fair	0 / 29
Good	17 / 29
Excellent	11 / 29
Blank (no answer)	1 / 29

Learning objectives met?

Strongly Disagree	5
Disagree	3
Agree	70
Strongly Agree	57

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
How the Basel Statements have been used in Uganda: Diane Lamarre (Canada)	3,46	3,36	3,48	3,61	28
Pharmacists Prescribing: Betty Chaar (University of Sydney, Australia)	3,68	3,36	3,56	3,59	27
Basel Statements Application in a Tertiary Care University Hospital of Pakistan - What is the secret ingredient?: Salwa Ahsan (Pakistan)	3,68	3,36	3,56	3,59	27
The factors that influence services in the Western Pacific Region: Jonathan Penm (University of Sydney, Australia)	3,72	3,42	3,5	3,67	24

1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
The ingredient of collaborative practice: David Pruce (Royal Pharmaceutical Society of Great Britain - RPSGB, United Kingdom)	3,9	3,79	3,68	3,68	19
Is competency assessment the secret herb and spice?: Ian Coombes (Queensland Health, Australia)	3,9	3,79	3,68	3,68	19
Average for all the evaluations of the session	3,65	3,5	3,53	3,63	

**Comments provided by the attendants**

- Slides with less words
- Please include the contact e-mails of the resource persons
- The major challenge faced in these studies also add a great weightage to the slides
- Excellent
- Good session. Looking forward to get the lectures on my e-mail.

# Session: D7 - A glimpse of Community Pharmacy in 2020

From Tuesday 06/09/2011, 12:15 until Tuesday 06/09/2011, 13:45

Room: Hall 6 (ground floor)

Session organised by: Community Pharmacy Section

38 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 120

Attendance at the end of the session: 50

**Average attendance: 85**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

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

### Programme of the session

Chair: Dominique Jordan (President FIP Community Pharmacy Section, Switzerland)

1. *Community Pharmacy 2020. The Community Pharmacy Section Strategy: Ema Paulino (FIP Community Pharmacy Section, Portugal)*
2. *Response from “the devil’s advocate”: Th.F.J. (Dick) Tromp (Apotheek Flevowijk, Netherlands)*
3. *Discussion*

## Evaluation

### Overall evaluation

The length of the session:

Too short	3 / 38
Good	38 / 38
Too long	0 / 38
Blank (no answer)	5 / 38

Overall quality of the session:

Poor	0 / 38
Fair	5 / 38
Good	21 / 38
Excellent	15 / 38
Blank (no answer)	5 / 38

Learning objectives met?

Strongly Disagree	2
Disagree	15
Agree	117
Strongly Agree	44

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Community Pharmacy 2020. The Community Pharmacy Section Strategy: Ema Paulino (FIP Community Pharmacy Section, Portugal)	3,357	3,44	3,56	3,61	36
Response from “the devil’s advocate”: Th.F.J. (Dick) Tromp (Apotheek Flevowijk, Netherlands)	3,5	3,43	3,62	3,61	29
Average for all the evaluations of the session	3,54	3,37	3,61	3,59	

### Comments provided by the attendants

- GPP implementation and accreditation globally; FDA license only after accreditation
- Disappointing radical revision of advertised presentation -not the strategy but the way of developing strategy/vision outcomes promised; process delivered
- Nice interaction; enjoyed the session
- Add some more time for question and answer session

- Besides the same profession of community pharmacist, the picture is very very different in developed countries, developing countries and under-developed countries. Unique universal uniform policy to be imposed.
- Some of the topics should take into cognizance differences in practice systems in different countries.
- National associations should be updated with the information from the CPS
- Standards adopted in community pharmacy
- Discussion should be for developing countries and under-developed countries because pharmacists are underestimated in knowledge and dialogues should be with medical council
- The visions are there for a long time, FIP should provide more sessions about the concrete implementation of points that belong to the vision of future pharmacy practice
- Not as expected
- Glimpse of community pharmacy in 2020 must have been to make the concept more clear

# Session: D9 - Medication safety and risk management

From Tuesday 06/09/2011, 14:00 until Tuesday 06/09/2011, 17:00

Room: Hall 6 (ground floor)

Session organised by: Social and Administrative Pharmacy Section

46 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 70

Attendance at the end of the session: 90

**Average attendance: 80**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe the principles of medication safety and risk management as they apply to pharmacy and the broader health care system
2. Summarize the implications and challenges for the implementation of medication safety and risk management initiatives in the practice of pharmacy
3. Explain how pharmacists and other stakeholders may contribute to safer use of medicines using a variety of methods ranging from individual patient care through to pharmacoepidemiological studies and medication safety policy
4. Design a plan for the implementation of a variety of medication safety and risk management initiatives in clinical practice

### Programme of the session

Chair: Albert Wertheimer (Temple University, United States)

Co-Chair: Marina Altagracia-Martinez (Universidad Autonoma Metropolitana Xochimilco - UAM-X, Mexico)

1. *Perspectives on Contemporary Pharmacovigilance and Risk Management: Vaiyapuri Subramaniam (Department of Veterans Affairs, United States)*
2. *Formulary management supporting the safe use of medicines: Ola G. Al Adhab (Drug Registration and Control Dept, United Arab Emirates)*
3. *Medication Safety and risk management for the elderly: Debra Devereaux (Gorman Health Group, United States)*
4. *The Netherlands: Central Medication Incidents Registration (CMR): Alphons Duchateau (Royal Dutch Association for the Advancement of Pharmacy - KNMP, Netherlands)*
5. *Panel discussion*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 46
Good	37 / 46
Too long	6 / 46
Blank (no answer)	2 / 46

Overall quality of the session:

Poor	2 / 46
Fair	7 / 46
Good	28 / 46
Excellent	8 / 46
Blank (no answer)	1 / 46

Learning objectives met?

Strongly Disagree	0
Disagree	12
Agree	110
Strongly Agree	72

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Perspectives on Contemporary Pharmacovigilance and Risk Management: Vaiyapuri Subramaniam (Department of Veterans Affairs, United States)	3,15	3,23	3,08	3,36	39
Formulary management supporting the safe use of medicines: Ola G. Al Adhab (Drug Registration and Control Dept, United Arab Emirates)	3,35	3,37	3,5	3,62	42
Medication Safety and risk management for the elderly: Debra Devereaux (Gorman Health Group, United States)	3,41	3,38	3,32	3,51	37

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
The Netherlands: Central Medication Incidents Registration (CMR): Alphons Duchateau (Royal Dutch Association for the Advancement of Pharmacy - KNMP, Netherlands)	3,42	3,53	3,41	3,62	29
Average for all the evaluations of the session	3,33	3,37	3,33	3,53	

**Comments provided by the attendants**

- Handout material should be provided in front of the hall entrance



# Session: D10 - Recent advances and challenges in the safe preparation of cytotoxic agents

From Tuesday 06/09/2011, 14:00 until Tuesday 06/09/2011, 17:00

Room: G05-G06 (ground floor)

Session organised by: Hospital Pharmacy Section

14 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 37

Attendance at the end of the session: 38

**Average attendance: 38**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Summarize the risk of unsafe preparation of cytotoxic chemotherapy
2. Describe the intersection of the ISOPP standards and the Basel statements
3. Identify the personnel and facilities that are needed for preparation
4. List the key points of the protective procedures and devices used in the safe handling of chemotherapy
5. Describe the guiding principles in assessing institutional compliance with safe handling procedures
6. List the key steps in developing a plan for improving safe handling of cytotoxic chemotherapy

### Programme of the session

Chairs: Lee Vermeulen (FIP Hospital Pharmacy Section, United States) and Johan Vandenbroucke (Belgium)

1. *Consequences of occupational exposure to cytotoxic chemotherapy: Jill Kolesar (United States)*
2. *Basel Statements and the ISOPP Standards: Intersections and actions: Lee Vermeulen (FIP Hospital Pharmacy Section, United States) and Johan Vandenbroucke (Belgium)*
3. *The ISOPP Standards for safe handling of chemotherapy: Recommendations for implementation: Robert McLauchlan (Australia)*
4. *The ISOPP Standards: Practical suggestions for implementation: Syed Shamim Raza (Aga Khan University Hospital, Pakistan)*
5. *The ISOPP Standards: Practical suggestions for implementation: Harbrans Dhillon (Malaysia)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 14
Good	10 / 14
Too long	2 / 14
Blank (no answer)	2 / 14

Overall quality of the session:

Poor	1 / 14
Fair	0 / 14
Good	9 / 14
Excellent	2 / 14
Blank (no answer)	2 / 14

Learning objectives met?

Strongly Disagree	0
Disagree	5
Agree	35
Strongly Agree	24

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Consequences of occupational exposure to cytotoxic chemotherapy: Jill Kolesar (United States)	3,54	3,15	3,15	3,54	12
Basel Statements and the ISOPP Standards: Intersections and actions: Lee Vermeulen (FIP Hospital Pharmacy Section, United States) and Johan Vandenbroucke (Belgium)	3,5	2,92	3,08	3,17	11
The ISOPP Standards for safe handling of chemotherapy: Recommendations for implementation: Robert McLauchlan (Australia)	3,4	3,2	3,2	3,5	9
The ISOPP Standards: Practical suggestions for implementation: Syed Shamim Raza (Aga Khan University Hospital, Pakistan)	3,1	3	3,5	3,5	9

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
The ISOPP Standards: Practical suggestions for implementation: Harbrans Dhillon (Malaysia)	3,4	3,4	3,4	3,6	4
Average for all the evaluations of the session	3,4	3,1	3,24	3,44	

**Comments provided by the attendants**

The title was "recent advances..." - all data were very old and basic.

# Session: D11 - The practitioners' day – Practical solutions to health problems and service provision (part 1/2)

From Wednesday 07/09/2011, 09:00 until Wednesday 07/09/2011, 12:00

Room: MR 2.03-2.04 (second floor)

Session organised by: Community Pharmacy Section

18 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 88

Attendance at the end of the session: 88

**Average attendance: 88**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe different solutions that have been put in place by pharmacists and pharmacies to support their daily activities
2. List a number of primary healthcare initiatives undertaken by individual pharmacists and/or pharmacy organisations
3. Compare and contrast different solutions to quality issues such as counterfeit medicines
4. Identify a number of organisations or individual pharmacies which have implemented Good Pharmacy Practice guidelines
5. Describe the benefits of implementing GPP guidelines at the community pharmacy level
6. Portray models of collaborative care involving pharmacists and other healthcare professionals
7. Ascertain the clinical and economic impact of establishing working relations with other pharmacists or healthcare professionals

### Programme of the session

Chairs: Samira Goussous (FIP Community Pharmacy Section, Jordan) and Paul Sinclair (FIP Community Pharmacy Section, Australia)

1. *Evaluation for adequacy of information on the labels of over the counter (OTC) drugs: Aluria Rama Krishna Chaitanya (Manipal College of Pharmaceutical Sciences, India)*
2. *Prevalence and nature of hospital prescription errors and deficiencies: Tina Hoby Andersen (Danish Association of Pharmacies, Denmark)*
3. *Dose administration aids: pharmacists' role in improving patient care: Beverley Glass (James Cook University, Australia)*
4. *Coding and verification of pharmaceutical products to avoid falsified medicines in 25 pharmacies in Sweden: Lars Ronnback (Apoteket AB, Sweden)*
5. *Undernourishment of older people: Rosa Hassan (Svalen Pharmacy, Denmark)*
6. *Implementation of good pharmacy practices in my pharmacy-sharing of experience by an Indian community pharmacist: Sagar Kulkarni (Yashashri Medicals, India)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 18
Good	17 / 18
Too long	0 / 18
Blank (no answer)	0 / 18

Overall quality of the session:

Poor	0 / 18
Fair	4 / 18
Good	10 / 18
Excellent	3 / 18
Blank (no answer)	1 / 18

Learning objectives met?

Strongly Disagree	0
Disagree	1
Agree	43
Strongly Agree	32

*Cumulative data for all the learning objectives of the sessions*

### **Evaluation of the speakers**

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Evaluation for adequacy of information on the labels of over the counter (OTC) drugs: Aluria Rama Krishna Chaitanya (Manipal College of Pharmaceutical Sciences, India)	2,75	2,75	3,13	2,94	16
Prevalence and nature of hospital prescription errors and deficiencies: Tina Hoby Andersen (Danish Association of Pharmacies, Denmark)	3,35	3,29	3,59	3,71	17
Dose administration aids: pharmacists' role in improving patient care: Beverley Glass (James Cook University, Australia)	3,33	2,8	3,33	3,2	15
Coding and verification of pharmaceutical products to avoid falsified medicines in 25 pharmacies in Sweden: Lars Ronnback (Apoteket AB, Sweden)	3,2	3,77	3,69	3,38	13
Undernourishment of older people: Rosa Hassan (Svalen Pharmacy, Denmark)	3,45	3,09	3,09	2,82	11
Implementation of good pharmacy practices in my pharmacy-sharing of experience by an Indian community pharmacist: Sagar Kulkarni (Yashashri Medicals, India)	2,89	3,11	3	3,33	9
Average for all the evaluations of the session	3,24	3,13	3,25	3,24	

### **Comments provided by the attendants**

- I miss the names of speakers in the program. Danish presentation was the most relevant and interesting
- Problems with sound. Difficult to hear the speech and from the board. Microphone at head would be preferable. Difficult to see the whole slide.
- I would like to get a schedule or a timetable before hand where are told subjects and name of lecture.

# Session: D12 - The practitioners' day – Practical solutions to health problems and service provision (part 2/2)

From Wednesday 07/09/2011, 14:00 until Wednesday 07/09/2011, 17:00

Room: MR 2.03-2.04 (second floor)

Session organised by: Community Pharmacy Section

13 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 44

Attendance at the end of the session: 44

**Average attendance: 44**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe different solutions that have been put in place by pharmacists and pharmacies to support their daily activities
2. List a number of primary healthcare initiatives undertaken by individual pharmacists and/or pharmacy organisations
3. Compare and contrast different solutions to quality issues such as counterfeit medicines
4. Identify a number of organisations or individual pharmacies which have implemented Good Pharmacy Practice guidelines
5. Describe the benefits of implementing GPP guidelines at the community pharmacy level
6. Portray models of collaborative care involving pharmacists and other healthcare professionals
7. Ascertain the clinical and economic impact of establishing working relations with other pharmacists or healthcare professionals

### Programme of the session

Chairs: Eugene Lutz (FIP Community Pharmacy Section, United States) and Eeva Teräsalmi (FIP Community Pharmacy Section, Finland)

1. *The role of pharmacy-based health promotion programs in combating hypertension; the experience of a large community based pharmacy in Greece: Emmanouil Papadakis (Greece)*
2. *Are patients obey advice and recommendation about using medicines given by pharmacists?: Snezana Zivanovic (Pharmacy Uzice, Serbia)*
3. *Pharmacist interventions to improve clinical outcomes in persons with diabetes: Kathleen Johnson (University of Southern California, United States)*
4. *The role of pharmacist on adherence to osteoporosis therapy: Predrag Vukomanovic (Pharmacy Lekovita, Serbia)*
5. *Know your heart values: a health campaign in Portuguese pharmacies: Cristina Santos (Associação Nacional das Farmácias - ANF, Portugal)*
6. *Loyalty to a pharmacy improves quality of oral antidiabetes drug use: Jean-Pierre Grégoire (Canada)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 13
Good	10 / 13
Too long	0 / 13
Blank (no answer)	3 / 13

Overall quality of the session:

Poor	0 / 13
Fair	1 / 13
Good	6 / 13
Excellent	4 / 13
Blank (no answer)	2 / 13

Learning objectives met?

Strongly Disagree	1
Disagree	1
Agree	38
Strongly Agree	10

*Cumulative data for all the learning objectives of the sessions*



**Evaluation of the speakers**

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
The role of pharmacy-based health promotion programs in combating hypertension; the experience of a large community based pharmacy in Greece: Emmanouil Papadakis (Greece)	2,5	3,33	2,92	3,25	12
Are patients obey advice and recommendation about using medicines given by pharmacists?: Snezana Zivanovic (Pharmacy Uzice, Serbia)	3,17	3,33	3,33	3,33	12
Pharmacist interventions to improve clinical outcomes in persons with diabetes: Kathleen Johnson (University of Southern California, United States)	3,78	3	3,44	3,44	9
The role of pharmacist on adherence to osteoporosis therapy: Predrag Vukomanovic (Pharmacy Lekovita, Serbia)	3,57	2,86	3	2,86	7
Know your heart values: a health campaign in Portuguese pharmacies: Cristina Santos (Associação Nacional das Farmácias - ANF, Portugal)	3,8	3,8	3	3,2	5
Loyalty to a pharmacy improves quality of oral antidiabetes drug use: Jean-Pierre Grégoire (Canada)	NA	NA	NA	NA	NA
Average for all the evaluations of the session	3,24	3,24	3,16	3,24	

**Comments provided by the attendants**

- Oral skills- rating is not fair because speakers with English as language will always be earlier to understand
- Title of the presentation should be in the program
- It is unacceptable that there is not a list in the program listing the speakers and the topics. It gives more possibility to know/decide whether I want to spend my time at the session. Other sections have their speakers listed in the program.

# Session: D13 - Innovations to improve teaching and learning

From Wednesday 07/09/2011, 14:00 until Wednesday 07/09/2011, 17:00

Room: G03-G04 (ground floor)

Session organised by: Academic Pharmacy Section; UNITWIN network

13 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 70

Attendance at the end of the session: 70

**Average attendance: 70**

## Programme of the session

This session will present a number of educational innovations developed by academics to improve teaching efficiency and effectiveness and will describe how these innovative approaches improve student learning.

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe a number of innovations that have been developed to support teaching and learning
2. Describe how innovations are able to improve teaching and learning
3. Determine how innovations could be used in a number of other educational settings

### Programme of the session

Chair: Jennifer Marriott (Monash University, Australia)

1. *Pedagogy driving the use of technology: Tina Brock (University of California, San Francisco, United States)*
2. *Pedagogy driving the use of technology: Jennifer Marriott (Monash University, Australia)*
3. *Does Innovative teaching affect students' ability to learn?: Ian Larson (Monash University, Australia)*
4. *Can technology be useful in developing countries to improve teaching and learning?: Thengungal Kochupapy Ravi (Sri Ramakrishna Institute, India)*
5. *Can technology be useful in developing countries to improve teaching and learning?: Tim Rennie (University of Namibia, Namibia)*
6. *Can technology be useful in developing countries to improve teaching and learning?: Archana Mudgal (Pharmacy Council of India, India)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 13
Good	13 / 13
Too long	0 / 13
Blank (no answer)	0 / 13

Overall quality of the session:

Poor	0 / 13
Fair	1 / 13
Good	7 / 13
Excellent	10 / 13
Blank (no answer)	0 / 13

Learning objectives met?

Strongly Disagree	5
Disagree	1
Agree	30
Strongly Agree	32

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Pedagogy driving the use of technology: Tina Brock (University of California, San Francisco, United States)	3,5	3,21	3,21	3,85	13
Pedagogy driving the use of technology: Jennifer Marriott (Monash University, Australia)	3,42	3,25	3,33	3,58	12
Does Innovative teaching affect students' ability to learn?: Ian Larson (Monash University, Australia)	3,7	3,4	3,5	3,5	10
Can technology be useful in developing countries to improve teaching and learning?: Thengungal Kochupapy Ravi (Sri Ramakrishna Institute, India)	3,13	3,25	3	3,25	8

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Can technology be useful in developing countries to improve teaching and learning?: Tim Rennie (University of Namibia, Namibia)	3,57	3,57	3,57	3,57	11
Can technology be useful in developing countries to improve teaching and learning?: Archana Mudgal (Pharmacy Council of India, India)	3,4	3,2	3,4	3,6	5
Average for all the evaluations of the session	3,42	3,25	3,26	3,48	

**Comments provided by the attendants**

- Could provide a tool box or repository of existing new technologies in that format or for newly to be developed content for and a toolbox/repository
- More innovative ideas both/as the FIP, YPG, IPSF & all students towards improvement in teaching
- Adherence to medications/solutions to non-adherence

# Session: D14 - Quality and safety in Pharmacologistics

From Wednesday 07/09/2011, 14:00 until Wednesday 07/09/2011, 17:00

Room: G05-G06 (ground floor)

Session organised by: Military and Emergency Pharmacy Section

13 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 34

**Average attendance: 33**

Attendance at the end of the session: 32

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. List the major difficulties posed in emergency relief situations caused by imprecise terminology when describing emergency kits
2. Describe some of the latest developments in the transportation of pharmaceuticals
3. Summarize the development of an automatic injection system which is of simple structure, low cost, portable and waterproof.

### Programme of the session

Chairs: Richard Wosolsobe (FIP Military and Emergency Pharmacy Section, Austria) and Cansel Kose Ozkan (Turkey)

1. *What's in your bag of tricks? Attempting to standardise Emergency Kits: Alex Kosyak (USAID, United States)*
2. *Transportation of pharmaceuticals: Latest advances: Thomas Zimmerman (FIP Military and Emergency Pharmacy Section, Germany) and Richard Wosolsobe (FIP Military and Emergency Pharmacy Section, Austria)*
3. *Study on the development of pre-filled auto-injection emergency medicine system: Li-Ze Xiong (FIP Military and Emergency Pharmacy Section, China)*
4. *Responding to a crisis in Haiti: Yossi Lomnicki (FIP Military and Emergency Pharmacy Section, Israel)*  
**CANCELLED**

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 13
Good	10 / 13
Too long	0 / 13
Blank (no answer)	2 / 13

Overall quality of the session:

Poor	1 / 13
Fair	3 / 13
Good	5 / 13
Excellent	3 / 13
Blank (no answer)	1 / 13

Learning objectives met?

Strongly Disagree	0
Disagree	11
Agree	16
Strongly Agree	10

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
What's in your bag of tricks? Attempting to standardise Emergency Kits: Alex Kosyak (USAID, United States)	3,85	3,69	3,62	3,54	13
Transportation of pharmaceuticals: Latest advances: Thomas Zimmerman (FIP Military and Emergency Pharmacy Section, Germany) and Richard Wosolsobe (FIP Military and Emergency Pharmacy Section, Austria)	3,25	2,92	3	3,33	12
Study on the development of pre-filled auto-injection emergency medicine system: Li-Ze Xiong (FIP Military and Emergency Pharmacy Section, China)	3,33	3,67	3,56	3,33	9
Responding to a crisis in Haiti: Yossi Lomnicki (FIP Military and Emergency Pharmacy Section, Israel)	CANCELLED				

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Average for all the evaluations of the session	3,51	3,43	3,4	3,43	

**Comments provided by the attendants**

- I don't know whether FIP deals with the opportunities for the young pharmacists to join the defense forces. If not yet, then lots of youth are waiting for joining the same, only they require the motivation.

# Session: D15 - Pharmacists and mass communication – A job that needs to be done continuously

From Thursday 08/09/2011, 09:00 until Thursday 02/09/2010, 12:00

Room: G05-G06 (ground floor)

Session organised by: Pharmacy Information Section

40 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 70

Attendance at the end of the session: 76

**Average attendance: 73**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Summarize the current nature of the mass media
2. Describe basic skills in communicating with the public using the mass media
3. Appreciate experiences across the world of pharmacists using the mass media

### Programme of the session

Chairs: Alexander Dodoo (University of Ghana Medical School, Ghana) and Aldo Alvarez (South American Network of Pharmaceutical Care, Peru)

1. *The mass media in the 21st Century – The changing face of mass communication: John Bell (Vice President FIP, Australia)*
2. *What skills do pharmacists need for mass communication: Bruce Hugman (Thailand)*
3. *Can you face the camera? Real-life demonstration of on the spot interviews with participants: Aldo Alvarez (South American Network of Pharmaceutical Care, Peru)*
4. *Listen to the radio – “Live” radio interviews with participants*
5. *Are we ready to face the media? General discussion with participants*



## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 40
Good	39 / 40
Too long	0 / 40
Blank (no answer)	0 / 40

Overall quality of the session:

Poor	0 / 40
Fair	4 / 40
Good	15 / 40
Excellent	21 / 40
Blank (no answer)	0 / 40

Learning objectives met?

Strongly Disagree	3
Disagree	1
Agree	45
Strongly Agree	90

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
The mass media in the 21st Century – The changing face of mass communication: John Bell (Vice President FIP, Australia)	3,84	3,87	3,84	3,89	37
What skills do pharmacists need for mass communication: Bruce Hugman (Thailand)	3,92	3,95	3,87	3,92	38
Can you face the camera? Real-life demonstration of on the spot interviews with participants: Aldo Alvarez (South American Network of Pharmaceutical Care, Peru)	3,42	3,44	3,47	3,57	35
Average for all the evaluations of the session	3,72	3,77	3,75	3,80	

### Comments provided by the attendants

- Commitment and plan and work of plan to start an FIP television channel in lines of BBC, discovery channel, national geographical etc. so that this session is alive throughout beyond time

- All the speakers were amazing. I think this session should be repeated at next year FIP .Relevant updates, highly stimulatory sessions.
- Really live session
- Excellent session
- Very good session
- Social media were mentioned but we like to review about it in depth.
- Fantastic chairperson from Ghana
- Try to communicate the "outcome" of all sessions in electronic documentary in all countries.
- Very interactive session
- Very good. This session should be repeated next year and every year.
- Very encouraging and energizing session! This provides the zeal inspiration - we need more of this for the mind set we need to get the message across!
- Excellent session!! One of the best sessions of the conference!!
- If arranged in 2012, more about how to communicate/ make the information interesting for journalists so that they find it interesting enough to publish.

# Session: D16 - Aspects of medication and patient safety

## - Social and Administrative Pharmacy Section

### Contributed Papers [Short Oral Communications]

From Thursday 08/09/2011, 09:00 until Thursday 08/09/2011, 12:00

Room: G03-G04 (ground floor)

Session organised by: Social and Administrative Pharmacy Section

13 session evaluation forms collected

#### Attendance data

Attendance at the beginning of the session: 49

Attendance at the end of the session: 30

**Average attendance: 40**

#### Programme of the session

##### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe a variety of current research projects, research methods, new data and emerging trends with respect to social and administrative pharmacy projects from around the globe.
2. Discuss different scientific approaches in different countries with regard to improve medication and patient safety.
3. Design a plan for the implementation of a variety of medication safety and risk management initiatives in clinical practice

##### Programme of the session

Chair: Timothy Chen (University of Sydney, Australia)

1. *Frequency of preventable adverse drug reactions in outpatients and inpatients and their preventability - A meta-analysis: Katja Hakkarainen (Nordic School of Public Health, Finland)*
2. *A review of medication safety awareness regarding hormone replacement therapy among postmenopausal patients in Taiwan: Shin Hsien Shen (Chang Gung Memorial Hospital, China Taiwan)*
3. *Benzodiazepines and mortality: A 9-year retrospective population-based cohort study of community-dwelling older people in Finland: Natasa Gisev (University of Sydney, Australia)*
4. *Why pharmacists should be integrated within the national tuberculosis programme?: Claire Anderson (University of Nottingham, United Kingdom)*
5. *Drug safety: A perspective of Latin American countries: Marina Altagracia-Martinez (Universidad Autonoma Metropolitana Xochimilco - UAM-X, Mexico)*

6. *A study of a medication service level based on regulation of nonprescription medicines retail channels: Dae-Jin Kim (Korea Institute for Pharmaceutical Policy Affairs, South Korea)*
7. *Regulatory approval pathway of biosimilar products, an update: Ibrahim Aljuffali (King Saud University, Saudi Arabia)*
8. *Implementation of integrative and complementary practices in public health services from state of Sao Paulo - Brazil: Margarete Akemi Kishi (Conselho Regional de Farmácia do Estado de São Paulo, Brazil)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 13
Good	12 / 13
Too long	0 / 13
Blank (no answer)	1 / 13

Overall quality of the session:

Poor	0 / 13
Fair	0 / 13
Good	12 / 13
Excellent	0 / 13
Blank (no answer)	1 / 13

Learning objectives met?

Strongly Disagree	0
Disagree	3
Agree	40
Strongly Agree	12

*Cumulative data for all the learning objectives of the sessions*

### **Evaluation of the speakers**

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Frequency of preventable adverse drug reactions in outpatients and inpatients and their preventability - A meta-analysis: Katja Hakkarainen (Nordic School of Public Health, Finland)	3,71	3,71	3,29	3,57	7
A review of medication safety awareness regarding hormone replacement therapy among postmenopausal patients in Taiwan: Shin Hsien Shen (Chang Gung Memorial Hospital, China Taiwan)	3,63	3,63	3,25	3,38	8
Benzodiazepines and mortality: A 9-year retrospective population-based cohort study of community-dwelling older people in Finland: Natasa Gisev (University of Sydney, Australia)	3,8	3,6	3,4	3,7	10
Why pharmacists should be integrated within the national tuberculosis programme?: Claire Anderson (University of Nottingham, United Kingdom)	3,22	3,56	3,56	3,78	9
Drug safety: A perspective of Latin American countries: Marina Altagracia-Martinez (Universidad Autonoma Metropolitana Xochimilco - UAM-X, Mexico)	2,88	3,63	3,75	3,5	8
A study of a medication service level based on regulation of nonprescription medicines retail channels: Dae-Jin Kim (Korea Institute for Pharmaceutical Policy Affairs, South Korea)	3,25	3,5	3,5	3,38	8
Regulatory approval pathway of biosimilar products, an update: Ibrahim Aljuffali (King Saud University, Saudi Arabia)	3,56	3,44	3,67	3,56	9
Implementation of integrative and complementary practices in public health services from state of Sao Paulo - Brazil: Margarete Akemi Kishi (Conselho Regional de Farmácia do Estado de São Paulo, Brazil)	1,89	3	3	3,11	9

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Average for all the evaluations of the session	3,24	3,5	3,41	3,51	

**Comments provided by the attendants**

- More work to be done in Africa
- There will be need for interpreters in case speaker doesn't speak English clearly
- Only attended part of session. The wording of objective 3 was not appropriate, range of subjects covered would not support planning process

# Session: D17 - Good Manufacturing Practices - Expectations for the coming decade (part 1/2)

From Thursday 08/09/2011, 09:00 until Thursday 08/09/2011, 12:00

Room: Hall 6 (ground floor)

Session organised by: Industrial Pharmacy Section

24 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 45

Attendance at the end of the session: 60

**Average attendance: 52**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. List the major regulatory inspection agency GMP expectations in the coming decade
2. Describe the major US and European GMP requirements for drugs exported from India
3. Explain India's role in the global pharmaceutical and API industries

### Programme of the session

Chairs: Michael H. Anisfield (Globepharm Consulting, United States) and Kaushik Desai (Indian Pharmaceutical Association, India)

1. *GMP expectations for the coming decade - where the GMP world is heading for 2020: Michael H. Anisfield (Globepharm Consulting, United States)*
2. *Future developments in ICH – “Development and manufacture of drug substances”: Thennati Rajamannar (Sun Pharma Advanced Research Centre Ltd., India)*
3. *Drug legislation and GMP inspections in India: Surinder Singh (India Drug Controller General Office, India)*
4. *FDA expectations and experiences when inspecting Indian drug and API manufacturers: Bruce Ross (US FDA's GMP Inspection Office, India)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 24
Good	19 / 24
Too long	1 / 24
Blank (no answer)	3 / 24

Overall quality of the session:

Poor	0 / 24
Fair	1 / 24
Good	13 / 24
Excellent	6 / 24
Blank (no answer)	4 / 24

Learning objectives met?

Strongly Disagree	1
Disagree	2
Agree	45
Strongly Agree	25

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
GMP expectations for the coming decade - where the GMP world is heading for 2020: Michael H. Anisfield (Globepharm Consulting, United States)	3,71	3,67	3,71	3,71	22
Future developments in ICH – “Development and manufacture of drug substances”: Thennati Rajamannar (Sun Pharma Advanced Research Centre Ltd., India)	3,4	3,67	3,5	3,57	21
Drug legislation and GMP inspections in India: Surinder Singh (India Drug Controller General Office, India)	3,13	3,38	3,27	3,27	14
FDA expectations and experiences when inspecting Indian drug and API manufacturers: Bruce Ross (US FDA’s GMP Inspection Office, India)	2,91	2,8	2,82	2,82	12



1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Average for all the evaluations of the session	3,35	3,52	3,4	3,42	

**Comments provided by the attendants**

None

# Session: D18 - Good Manufacturing Practices - Expectations for the coming decade (part 2/2)

From Thursday 08/09/2011, 14:00 until Thursday 08/09/2011, 17:00

Room: Hall 6 (ground floor)

Session organised by: Industrial Pharmacy Section

27 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 20

Attendance at the end of the session: 48

**Average attendance: 34**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. List the major regulatory inspection agency GMP expectations in the coming decade
2. Describe the major US and European GMP requirements for drugs exported from India
3. Explain India's role in the global pharmaceutical and API industries

### Programme of the session

Chair: Michael H. Anisfield (Globepharm Consulting, United States)

1. *Indian Pharmaceutical Development: The challenges of the coming decade: B. Parthasarath Reddy (Hetero Drugs, India)*
2. *Quality by Design - Implications for Drug Development and Manufacture: Tom Sam (MSD, Netherlands)*
3. *The need for education in Pharmaceutical Technology in the coming decade: the Industry perspective: Kaushik Desai (Indian Pharmaceutical Association, India)*
4. *The need for education in Pharmaceutical Technology in the coming decade: the Academic perspective: T.V. Narayana (Indian Pharmaceutical Association, India)*
5. *Questions and answers*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 27
Good	22 / 27
Too long	4 / 27
Blank (no answer)	1 / 27

Overall quality of the session:

Poor	0 / 27
Fair	3 / 27
Good	17 / 27
Excellent	1 / 27
Blank (no answer)	6 / 27

Learning objectives met?

Strongly Disagree	0
Disagree	2
Agree	59
Strongly Agree	29

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Indian Pharmaceutical Development: The challenges of the coming decade: B. Parthasarath Reddy (Hetero Drugs, India)	2,92	3,15	3,19	3,38	26
Quality by Design - Implications for Drug Development and Manufacture: Tom Sam (MSD, Netherlands)	3,64	3,4	3,24	3,4	25
The need for education in Pharmaceutical Technology in the coming decade: the Industry perspective: Kaushik Desai (Indian Pharmaceutical Association, India)	3,25	3,31	3,38	3,5	16
The need for education in Pharmaceutical Technology in the coming decade: the Academic perspective: T.V. Narayana (Indian Pharmaceutical Association, India)	2,88	3,25	3,38	3,25	8
Average for all the evaluations of the session	3,23	3,28	3,27	3,40	

**Comments provided by the attendants**

- Learning objectives of the session were not relevant.

# Session: D19 - Ask your pharmacist Day (part 1/2) – Immunizations in community pharmacy – Ask your pharmacist!

From Thursday 08/09/2011, 09:00 until Thursday 08/09/2011, 12:00

Room: MR 2.03-2.04 (second floor)

Session organised by: Community Pharmacy Section

29 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 57

Attendance at the end of the session: 93

**Average attendance: 75**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe the primary-care available vaccines and their recommended use
2. Discuss vaccines' efficacy and safety
3. Consider the actual and potential role of the community pharmacist in promoting and administering immunisations to patients
4. List countries where pharmacist immunisation is possible
5. Describe the tools and education modules used by Pharmacy Organisations to effectively disseminate and implement pharmacy-based immunisations

### Programme of the session

Chair: Eugene Lutz (FIP Community Pharmacy Section, United States)

Co-Chair: Prafull Sheth (Vice president FIP, India)

1. *Presentation on new developments in vaccination technologies: Nagendra R. Hegde (Ella Foundation, India)*
2. *The Role of Pharmacists in Vaccinations: Betty Chaar (University of Sydney, Australia)*
3. *Country case-studies - Role of the pharmacist in vaccinations (USA): Tom Menighan (CEO American Pharmacists Association - APhA, United States)*
4. *Role of pharmacists in immunization. Country Study: Portugal: Cristina Santos (Associação Nacional das Farmácias - ANF, Portugal)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 29
Good	28 / 29
Too long	1 / 29
Blank (no answer)	0 / 29

Overall quality of the session:

Poor	0 / 29
Fair	1 / 29
Good	19 / 29
Excellent	9 / 29
Blank (no answer)	0 / 29

Learning objectives met?

Strongly Disagree	10
Disagree	3
Agree	62
Strongly Agree	56

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Presentation on new developments in vaccination technologies: Nagendra R. Hegde (Ella Foundation, India)	3,58	3,63	3,58	3,58	24
The Role of Pharmacists in Vaccinations: Betty Chaar (University of Sydney, Australia)	3,8	3,56	3,6	3,76	25
Country case-studies - Role of the pharmacist in vaccinations (USA): Tom Menighan (CEO American Pharmacists Association - APhA, United States)	3,77	3,62	3,62	3,69	26
Role of pharmacists in immunization. Country Study: Portugal: Cristina Santos (Associação Nacional das Farmácias - ANF, Portugal)	3,52	3,62	3,57	3,76	21

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Average for all the evaluations of the session	3,65	3,57	3,56	3,65	

**Comments provided by the attendants**

- Try to work on immunization in India by pharmacist
- More of such relevant session on evolving roles of pharmacy should be included in FIP program
- It was really good to hear experiences to hear experiences from USA, Australia and Europe (Portugal)
- Consider hosting an immunization training program
- Immunization conditions in developing countries like India & role of pharmacist should be included

# Session: D20 - Ask your pharmacist Day (part 2) – Healthy travelling? – Ask your pharmacist!

From Thursday 08/09/2011, 14:00 until Thursday 08/09/2011, 17:00

Room: MR 2.03-2.04 (second floor)

Session organised by: Community Pharmacy Section

24 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 68

Attendance at the end of the session: 44

**Average attendance: 56**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. List the subject areas that contribute to the discipline of Travel Medicine
2. Describe examples how Travel Medicine is practiced by community pharmacists
3. Explain the principles and use of malaria chemoprophylaxis for travelers
4. List the types and describe the correct use of mosquito bite avoidance products commonly supplied through community pharmacies
5. List the necessary vaccinations for safe traveling

### Programme of the session

Chair: Karin Graf (FIP Community Pharmacy Section, Germany)

Co-Chair: Larry Goodyer (Leicester School of Pharmacy, United Kingdom)

1. *Travel Medicine and pharmacy - Current and future trends: Larry Goodyer (Leicester School of Pharmacy, United Kingdom)*
2. *Travel medicine service in a community pharmacy: Johannes Jaenicke (Adler Pharmacy Rhaunen, Germany)*
3. *Malaria prevention: Jeffery Goad (University of Southern California, United States)*
4. *Vaccinations when traveling – Case studies: Claudine Leuthold (pharmaSuisse, Switzerland)*



## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 24
Good	22 / 24
Too long	1 / 24
Blank (no answer)	1 / 24

Overall quality of the session:

Poor	0 / 24
Fair	0 / 24
Good	11 / 24
Excellent	12 / 24
Blank (no answer)	1 / 24

Learning objectives met?

Strongly Disagree	0
Disagree	0
Agree	43
Strongly Agree	61

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Travel Medicine and pharmacy - Current and future trends: Larry Goodyer (Leicester School of Pharmacy, United Kingdom)	3,61	3,35	3,61	3,83	23
Travel medicine service in a community pharmacy: Johannes Jaenicke (Adler Pharmacy Rhaunen, Germany)	3,91	3,87	3,96	3,83	23
Malaria prevention: Jeffery Goad (University of Southern California, United States)	3,9	3,52	3,95	3,9	21
Vaccinations when traveling – Case studies: Claudine Leuthold (pharmaSuisse, Switzerland)	3,24	3,18	3,65	3,65	17
Average for all the evaluations of the session	3,67	3,51	3,8	3,8	

### **Comments provided by the attendants**

- The best presentation I met in this conference. Really practical information for community pharmacists counseling travel medicine to customers. THAT'S WE NEED MUCH MORE IN FIP.
- Please share the powerpoint slides with all ... Very useful important information

# Session: D21 - Contributed papers -Short Oral Presentations of the Academic Section

From Thursday 08/09/2011, 14:00 until Thursday 08/09/2011, 17:00

Room: G03-G04 (ground floor)

Session organised by: Academic Pharmacy Section

6 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 29

Attendance at the end of the session: 29

**Average attendance: 29**

## Programme of the session

This session will consist of between six and eight short oral communications chosen from abstracts submitted to the FIP Academic Pharmacy Section. Those selected will reflect a range of education issues or innovations from around the world.

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe a number of current issues in pharmacy education
2. Compare educational initiatives undertaken in a number of countries

### Programme of the session

Chairs: Wafa Dahdal (American College of Clinical Pharmacy, United States) and Ronnie Hansson (Uppsala University, Sweden)

1. *Harmonizing pharmacy clinical competency for students and professionals: Jennifer Archer (Jennifer Archer Consulting Ltd, United Kingdom)*
2. *A survey on students' perceptions of pharmacy profession in Japan: Yamamura Shigeo (Josai International University, Japan)*
3. *Practice and thinking of curriculum design for clinical pharmacy program: Zhaozhigang Zhaozhigang (Beijing Tiantan Hospital, China) [CANCELLED]*
4. *Practicing hospital pharmacists mentoring pharmacy students in clinical pharmacy: An experience from Dow University of Health Sciences (DUHS) Pakistan: Syed Shaukat Ali Muttaqi Shah (Dow University Hospital, Pakistan) [CANCELLED]*
5. *Pharmacist prescribers continuing professional development needs: Karen Louise Hodson (University of Cardiff Wales, United Kingdom)*
6. *Regulation for quality assurance in pharmacy education in India- Initiatives of Pharmacy Council of India: PP Sharma (India)*

7. *Position training: a effective method to improve the competence of Beijing community pharmacists: Shen Qian (Xuanwu Hospital Beijing, China)*
8. *Distance education for hospital pharmacists: connecting universities and hospitals by developing learning communities: Alan Lyles (University of Baltimore, United States)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 6
Good	6 / 6
Too long	0 / 6
Blank (no answer)	0 / 6

Overall quality of the session:

Poor	0 / 6
Fair	2 / 6
Good	4 / 6
Excellent	0 / 6
Blank (no answer)	0 / 6

Learning objectives met?

Strongly Disagree	0
Disagree	0
Agree	15
Strongly Agree	3

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Harmonizing pharmacy clinical competency for students and professionals: Jennifer Archer (Jennifer Archer Consulting Ltd, United Kingdom)	3,33	3,33	3,5	3,5	6
A survey on students' perceptions of pharmacy profession in Japan: Yamamura Shigeo (Josai International University, Japan)	2,67	3,33	3	3,33	6

1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Practice and thinking of curriculum design for clinical pharmacy program: Zhaozhigang Zhaozhigang (Beijing Tiantan Hospital, China)	CANCELLED (NO SHOW)				
Practicing hospital pharmacists mentoring pharmacy students in clinical pharmacy: An experience from Dow University of Health Sciences (DUHS) Pakistan: Syed Shaukat Ali Muttaqi Shah (Dow University Hospital, Pakistan)	CANCELLED (NO SHOW)				
Pharmacist prescribers continuing professional development needs: Karen Louise Hodson (University of Cardiff Wales, United Kingdom)	3,25	3,25	3	3,25	4
Regulation for quality assurance in pharmacy education in India- Initiatives of Pharmacy Council of India: PP Sharma (India)	2	2,67	2,67	4	3
Position training: a effective method to improve the competence of Beijing community pharmacists: Shen Qian (Xuanwu Hospital Beijing, China)	3	2,75	3	3	4
Distance education for hospital pharmacists: connecting universities and hospitals by developing learning communities: Alan Lyles (University of Baltimore, United States)	2,75	2,50	3,25	3,67	4
Average for all the evaluations of the session	2,89	3,04	3,11	3,44	

#### **Comments provided by the attendants**

- Papers with global applications, novelty & success stories be included
- FIP need not print but should make available in one document all abstracts. For all sessions - only possible to access individually on website. Academic section presentations have been at extremely low level descriptive without synthesis analysis.

# Session: D23 - Communication and control in an operational setting

From Wednesday 07/09/2011, 09:00 until Wednesday 07/09/2011, 12:00

Room: G05-G06 (ground floor)

Session organised by: Academic Pharmacy Section; Military and Emergency Pharmacy Section

12 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 24

Attendance at the end of the session: 21

**Average attendance: 22**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Explain how the MEPS pictogram program is applied in practice
2. Describe the process for communicating with patients through the use of pictograms
3. List some of the major problems encountered and solved in a humanitarian aid setting
4. Explain the potential role of telepharmacy in an operational setting.

### Programme of the session

Chairs: Jane Dawson (FIP Military and Emergency Pharmacy Section, New Zealand) and Zheng-Yu Chen (Chinese People's Liberation Army, China)

1. *Workshop: pictogram program: know, understand and apply: Luc Besançon (FIP, Netherlands)*
2. *OP Pakistan Assist II: On a Humanitarian Aid operation: Josie Jarad (FIP Military and Emergency Pharmacy Section, Australia)*
3. *Telepharmacy: guidelines for operational use: Susan Groves (FIP Military and Emergency Pharmacy Section, Canada)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 12
Good	12 / 12
Too long	0 / 12
Blank (no answer)	0 / 12

Overall quality of the session:

Poor	0 / 12
Fair	1 / 12
Good	7 / 12
Excellent	4 / 12
Blank (no answer)	0 / 12

Learning objectives met?

Strongly Disagree	0
Disagree	0
Agree	23
Strongly Agree	31

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Workshop: pictogram program: know, understand and apply: Luc Besançon (FIP, Netherlands)	3,82	3,82	3,91	3,82	11
OP Pakistan Assist II: On a Humanitarian Aid operation: Josie Jarad (FIP Military and Emergency Pharmacy Section, Australia)	3,55	3,18	3,64	3,45	11
Telepharmacy: guidelines for operational use: Susan Groves (FIP Military and Emergency Pharmacy Section, Canada)	4	4	3,83	3,67	6
Average for all the evaluations of the session	3,74	3,53	3,72	3,66	

### Comments provided by the attendants

- Great session!

- 'Regulatory aspects of telepharmacy' is an issue to be dealt with, For the "pictogram project", I volunteer to contribute to translate to Indian language, to encourage and promote its use in India and also partially fund the project in India from Delhi pharmaceutical trust..Pl. contact me at [dptrust@gmail.com](mailto:dptrust@gmail.com)
- Video quality was very poor
- It is essential to all pharma companies worldwide to add pictograms on labels, to take medicines easily, to administer doses and adherence to public/illiterate people/children.
- Pictogram topic was excellent. It is very useful to patients and there is no barrier of language.



# Session: F1 - Careers and leadership in pharmacy and education

From Monday 05/09/2011, 12:15 until Monday 05/09/2011, 13:45

Room: MR 2.03-2.04 (second floor)

Session organised by: African Pharmaceutical Forum; FIP Pharmacy Education Taskforce

55 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 118

Attendance at the end of the session: 94

**Average attendance: 106**

## Programme of the session

The session will begin with a brief scene-setting outlining the role of women in leadership positions in pharmacy with a focus on career development, new opportunities for gender equality in the health professions, and the influence of social-economic factors

### Learning objectives of the session

The learning objectives of this session were:

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

1. Explore leadership issues faced by women in science, academic and professional organisations
2. Present and share experiences of leadership in career development
3. Provide examples and role model experiences of mentorship in the context of gender equality globally
4. Compare and contrast career development models for a workforce in a profession that is proportionally a majority female pre-service training population

### Programme of the session

Chairs: Catherine Duggan (Royal Pharmaceutical Society of Great Britain - RPSGB, United Kingdom), Tina Brock (University of California, San Francisco, United States) and Natasha Bevan (UK National Commission for UNESCO, United Kingdom)

1. *Careers and leadership in pharmacy and education: Patricia Acuña-Johnson (Universidad de Valparaíso, Chile)*
2. *Career and leadership in pharmacy and education- sharing my personal journey: Sunitha C. Srinivas (Rhodes University, South Africa)*
3. *Leadership and the RPS: Helen Gordon (Royal Pharmaceutical Society of Great Britain - RPSGB, United Kingdom)*
4. *Perspectives on Leadership in Regulatory Bodies: Archana Mudgal (Pharmacy Council of India, India)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	7 / 55
Good	48 / 55
Too long	0 / 55
Blank (no answer)	0 / 55

Overall quality of the session:

Poor	0 / 55
Fair	9 / 55
Good	31 / 55
Excellent	14 / 55
Blank (no answer)	1 / 55

Learning objectives met?

Strongly Disagree	0
Disagree	9
Agree	134
Strongly Agree	89

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Careers and leadership in pharmacy and education: Patricia Acuña-Johnson (Universidad de Valparaíso, Chile)	3,19	3,21	3,19	3,22	46
Career and leadership in pharmacy and education- sharing my personal journey: Sunitha C. Srinivas (Rhodes University, South Africa)	3,54	3,37	3,33	3,41	44
Leadership and the RPS: Helen Gordon (Royal Pharmaceutical Society of Great Britain - RPSGB, United Kingdom)	3,36	3,22	3,33	3,41	45
Perspectives on Leadership in Regulatory Bodies: Archana Mudgal (Pharmacy Council of India, India)	3,43	3,53	3,5	3,5	40
Average for all the evaluations of the session	3,37	3,33	3,32	3,41	

### **Comments provided by the attendants**

- Absolutely fantastic .needs a longer time.
- Really need to implement more practically
- Session was solely organized by females, relating the female perspective. That's good.
- Celebrate our diversity in the professional harness our differences. More time please. I am challenged.
- Some slides had black text on dark background-difficult to read.
- It would have been gladdening/appropriate to have a speaker from African continent on challenges/leadership issues faced by women. Time was too short because of the interest generated by these speakers. A longer time for round table discussion would be wonderful.
- We need paper on the lectures
- I recommend the content of presentation be evaluated
- What other qualification would be necessary as a female leader? Is it different from a male leader?
- To explore the socio cultural factors that limit women in career development and how to address them
- Excellent session lively and relevant. Time slot-too short.

# Session: F2 - Generics and the patient experience: The pharmacist's role in ensuring safe and effective medicines use

From Monday 05/09/2011, 14:00 until Monday 05/09/2011, 17:00

Room: G03-G04 (ground floor)

Session organised by: Young Pharmacists' Group

17 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 89

Attendance at the end of the session: 64

**Average attendance: 76**

## Programme of the session

This session will include discussions of the impact of generic medicines on the patient experience from the community pharmacist, hospital pharmacist, and a physician's perspectives. The role of patient counseling and screening for duplicate generic medic

### Learning objectives of the session

The learning objectives of this session were:

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

1. Identify issues with generic medicines that may negatively impact the patient experience
2. Summarize how generic medicines can influence drug availability/shortages
3. Explain key counseling messages that should be given to all patients on generic medicines
4. List benefits of generic medicines use
5. List opportunities for the pharmacist to positively impact patient safety and quality associated with generic medicines use

### Programme of the session

Chair: Ryan A. Forrey (YPG, United States)

1. *Critical elements of patient counseling with generic medicines: Tara Hehir (FIP Young Pharmacists Group, Australia)*
2. *Essentials of therapeutic equivalence of generic medicines - regulatory and policy perspectives: Mohamed Abdelhakim (EMRO Office, World Health Organization)*
3. *The role of generics in treatment, a physician's perspective: Dechun Jiang (Xuanwu Hospital Beijing, China)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 17
Good	17 / 17
Too long	0 / 17
Blank (no answer)	0 / 17

Overall quality of the session:

Poor	0 / 17
Fair	1 / 17
Good	13 / 17
Excellent	3 / 17
Blank (no answer)	0 / 17

Learning objectives met?

Strongly Disagree	0
Disagree	0
Agree	35
Strongly Agree	35

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Critical elements of patient counseling with generic medicines: Tara Hehir (FIP Young Pharmacists Group, Australia)	3,08	3,29	3,36	3,43	13
Essentials of therapeutic equivalence of generic medicines - regulatory and policy perspectives: Mohamed Abdelhakim (EMRO Office, World Health Organization)	3,57	3,6	3,73	3,53	11
The role of generics in treatment, a physician's perspective: Dechun Jiang (Xuanwu Hospital Beijing, China)	3,36	3,5	3,42	3,42	11
Average for all the evaluations of the session	3,34	3,46	3,51	3,46	

### **Comments provided by the attendants**

- Presentation nothing new, too theoretical, less practical information. What is the strategy convincing patients being keen on using original products?
- Some of the speakers are not explaining well. They were just simply reading the slides. Not all speakers. But finally session is good.

# Session: F3 - FIP/WHO Symposium on engaging pharmacists in tuberculosis care and control

From Tuesday 06/09/2011, 09:00 until Tuesday 06/09/2011, 12:00

Room: G05-G06 (ground floor)

Session organised by: FIP - International Pharmaceutical Federation; WHO - World Health Organisation

26 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 76

Attendance at the end of the session: 85

**Average attendance: 80**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Summarize the global TB situation
2. Explain WHO's Stop TB Strategy especially with regards to "engaging all care providers in TB care and control" through Public-Private Mix (PPM) approaches.
3. Describe the extent of use of anti-TB medicines in the private sector and its implications to the role of pharmacists in promoting rational use of anti-TB medicines.
4. List some country experiences on engaging pharmacists in TB care and control
5. Explain how drug regulatory authorities may facilitate effective engagement of pharmacists in TB care and control

### Programme of the session

Chairs: Prafull Sheth (Vice president FIP, India) and Mukund Uplekar (Stop TB Department, World Health Organization)

1. *WHO's Stop TB Strategy and engaging all care providers in TB care and control through public-private mix approaches: Mukund Uplekar (Stop TB Department, World Health Organization)*
2. *WHO's Essential Medicines Programme, Rational Drug Use and the Global Drug Facility: Krisantha Weerasuriya (World Health Organization)*
3. *Private market of anti-TB medicines and implications for engaging pharmacists: William Wells (Global Alliance for TB Drug Development, United States)*
4. *Engaging pharmacists in the India's National TB Programme: Ashok Kumar (Revised National Tuberculosis Control Programme, India)*
5. *The role of drug regulatory authorities in engaging pharmacists to ensure rational use of anti-TB medicines: Surinder Singh (India Drug Controller General Office, India)*

6. *Country experiences on engaging pharmacists in TB care: D'Arcy Richardson (TB Team, PATH, United States)*
7. *FIP Challenge on TB Round 1: overview of project: Xuanhao Chan (FIP, Netherlands)*
8. *Discussion and Q/A*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 26
Good	24 / 26
Too long	0 / 26
Blank (no answer)	1 / 26

Overall quality of the session:

Poor	0 / 26
Fair	5 / 26
Good	15 / 26
Excellent	5 / 26
Blank (no answer)	1 / 26

Learning objectives met?

Strongly Disagree	0
Disagree	0
Agree	70
Strongly Agree	39

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
WHO's Stop TB Strategy and engaging all care providers in TB care and control through public-private mix approaches: Mukund Uplekar (Stop TB Department, World Health Organization)	3,29	3,25	3,27	3,55	22
WHO's Essential Medicines Programme, Rational Drug Use and the Global Drug Facility: Krisantha Weerasuriya (World Health Organization)	3,63	3,33	3,45	3,55	22



1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Private market of anti-TB medicines and implications for engaging pharmacists: William Wells (Global Alliance for TB Drug Development, United States)	3,42	3,38	3,23	3,26	22
Engaging pharmacists in the India's National TB Programme: Ashok Kumar (Revised National Tuberculosis Control Programme, India)	2,94	3,06	3,11	3,06	18
The role of drug regulatory authorities in engaging pharmacists to ensure rational use of anti-TB medicines: Surinder Singh (India Drug Controller General Office, India)	2,87	2,71	2,77	3	14
Country experiences on engaging pharmacists in TB care: D'Arcy Richardson (TB Team, PATH, United States)	3,56	3,67	3,67	3,56	9
FIP Challenge on TB Round 1: overview of project: Xuanhao Chan (FIP, Netherlands)	3,4	3,6	3,6	3,4	5
Average for all the evaluations of the session	3,31	3,27	3,25	3,35	

### **Comments provided by the attendants**

- Issue of availability of irrational combinations and its remedy
- The WHO should instruct the university of health in each developing country to fully involve the pharmacist in my country Nigeria. The nurses are not following the DOTS because the drugs were given to all patients at once for one month and compliance is mentioned by the quantity of medicine left with the matron.
- WHO should take a position on the role of the pharmacists (hospital) in TB care and control with the recent signing of the agreement with FIP- through the ministries of health especially in the developing countries. Pharmacists should be engaged in drug dispensing and counseling which is a major factor in adherence/compliance in TB control.
- Motivating the mass of pharmacist by socio-professional recognition or make it mandatory in rules and regulation to get TB training or act as DOTS provider.
- In our hospitals pharmacists are not utilized in the dispensing and counseling patients and as such we all like a situation where the role of pharmacists should be properly defined
- Session : improve for TB you have to encourage pharmacist or call pharmacists to share their view and experience.
- Presentation no:4 was not mentioned on the schedule book. Only presenter no: 5 , Mr.Satish talked relevant to subject of symposium.
- Rationales and benefits for having pharmacists as prescribers.
- Paramathma Chilukuri. I learned more knowledge about TB
- Real effort by the government is required and stigma may be removed by Tv and papers...WHO & FIP - congrats!!

- Speakers speak too fast and I don't understand them!

# Session: F4 - Report of the FIP Working Group on optimising the role of pharmacists in improving maternal, newborn, and child health

From Tuesday 06/09/2011, 14:00 until Tuesday 06/09/2011, 17:00

Room: Hall 2 (ground floor)

Session organised by: FIP - International Pharmaceutical Federation

16 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 40

Attendance at the end of the session: 43

**Average attendance: 42**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. List the top 5 causes of MNCH mortality and summarize the United National Millennium Development Goals related to MNCH
2. Give examples on how pharmacists have contributed to decreasing the burden of TB and HIV/AIDS in mothers and children, in a variety of practice settings
3. Describe how pharmacists from Quebec (Canada) support maternal health using their scope of practice and collective prescriptions
4. List the most common errors that caregivers make when treating children and how we can improve the counseling provided in community pharmacies
5. Describe how to ensure concordance and adherence to MNCH treatment protocols through improved awareness and policy formulation

### Programme of the session

Chair: Prafull Sheth (Vice president FIP, India)

1. *Maternal, newborn and child health: Global challenges and opportunities: Prafull Sheth (Vice president FIP, India)*
2. *Pharmacists fighting TB and HIV/AIDS in mothers and children – How have we contributed?: Avanthi Govender Bester (Becton Dickinson, South Africa)*
3. *How can pharmacists support maternal health? Examples from Québec, Canada: Diane Lamarre (Canada)*

4. *The role of the pharmacist in managing common childhood ailments - An Australian perspective: Rebekah Moles (University of Sydney, Australia)*
5. *Health promotion and programmes on MNCH run by FIP member organisations: Luc Besançon (FIP, Netherlands)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 16
Good	15 / 16
Too long	1 / 16
Blank (no answer)	0 / 16

Overall quality of the session:

Poor	0 / 16
Fair	2 / 16
Good	11 / 16
Excellent	3 / 16
Blank (no answer)	0 / 16

Learning objectives met?

Strongly Disagree	0
Disagree	2
Agree	31
Strongly Agree	37

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Maternal, newborn and child health: Global challenges and opportunities: Prafull Sheth (Vice president FIP, India)	3,38	3,19	3,44	3,69	16
Pharmacists fighting TB and HIV/AIDS in mothers and children – How have we contributed?: Avanthi Govender Bester (Becton Dickinson, South Africa)	3,38	3,31	3,06	3,44	16

1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
How can pharmacists support maternal health? Examples from Québec, Canada: Diane Lamarre (Canada)	3,21	3,14	3,14	3,21	14
The role of the pharmacist in managing common childhood ailments - An Australian perspective: Rebekah Moles (University of Sydney, Australia)	3,75	3,67	3,5	3,67	12
Health promotion and programmes on MNCH run by FIP member organisations: Luc Besançon (FIP, Netherlands)	3,67	3,44	3,22	3,44	9
Average for all the evaluations of the session	3,38	3,19	3,44	3,69	

#### **Comments provided by the attendants**

- LUC presentation was very informative
- Slides were good, but the depth was not quite sufficient to carry along the audience
- When u get late please shorten the introduction, too much written on slides
- Presentations of speaker 1 and 4 are to be promoted among the world for adoption by pharmacist
- More evidence was expected, more mature presentation was expected
- How to ensure that these interventions are recognised and adequately rewarded

# Session: F5 - Presentation of the outcomes of the Pharmacy Education Taskforce and how to use them

From Tuesday 06/09/2011, 14:00 until Tuesday 06/09/2011, 17:00

Room: MR 2.03-2.04 (second floor)

Session organised by: FIP Pharmacy Education Taskforce

9 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 62

Attendance at the end of the session: 93

**Average attendance: 78**

## Programme of the session

This session will be followed by the Global Pharmacy Education Domain Work Meetings where individuals interested in taking an active role in the various domains can learn more on how to be involved.

### Learning objectives of the session

The learning objectives of this session were:

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

1. Explain the work undertaken by the Global Pharmacy Taskforce and be in a position to advocate for outcomes
2. Describe and share experiences about how implementation of the outcomes could be progressed by FIP in the area of Pharmacy Education
3. Advocate for the roles delegates can undertake in advancing pharmacy education locally, regionally and/or globally

### Programme of the session

Chairs: Ian Bates (FIP Pharmacy Education Taskforce, United Kingdom) and Jennifer Marriott (Monash University, Australia)

1. *Competency-driven education outcomes: Where next?: Ian Bates (University of London, United Kingdom)*
2. *Global solutions to QA: A foundation for progressive practice in professional education: Mike Rouse (Accreditation Council for Pharmacy Education - ACPE, United States)*
3. *Capacity solutions: Outcomes and strategic directions for meaningful capacity building projects: Claire Anderson (University of Nottingham, United Kingdom)*
4. *Strategic issues: How can we sustain projects and policies at the global level?: William (Billy) Futter (Project Lead, Strategy, FIP Pharmacy Education Taskforce, South Africa)*
5. *Pharmacy Support Workforce: Innovative education to support MDGs: Andrew Brown (University of Canberra, Australia)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 9
Good	9 / 9
Too long	0 / 9
Blank (no answer)	0 / 9

Overall quality of the session:

Poor	0 / 9
Fair	1 / 9
Good	7 / 9
Excellent	1 / 9
Blank (no answer)	0 / 9

Learning objectives met?

Strongly Disagree	0
Disagree	0
Agree	22
Strongly Agree	18

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Competency-driven education outcomes: Where next?: Ian Bates (University of London, United Kingdom)	3,83	3,5	3,83	4	6
Global solutions to QA: A foundation for progressive practice in professional education: Mike Rouse (Accreditation Council for Pharmacy Education - ACPE, United States)	4	3,83	3,67	4	6
Capacity solutions: Outcomes and strategic directions for meaningful capacity building projects: Claire Anderson (University of Nottingham, United Kingdom)	4	3,83	3,83	4	6

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Strategic issues: How can we sustain projects and policies at the global level?: William (Billy) Futter (Project Lead, Strategy, FIP Pharmacy Education Taskforce, South Africa)	3,8	3,4	3,8	3,8	5
Pharmacy Support Workforce: Innovative education to support MDGs: Andrew Brown (University of Canberra, Australia)	3,5	3,25	3,5	3,75	4
Average for all the evaluations of the session	3,86	3,61	3,75	3,93	

**Comments provided by the attendants**

- Excellent session should continue to mesh on with projects and report progress at FIP meetings.
- As at 2009, 4year b.pharm for Nigeria is not universal among nine schools. Pharmacy support workforce should be stream-lined and specific so as to know their limitations.



# Session: F6 - Mapping a new vision - Translating ideas into practice

From Wednesday 07/09/2011, 09:00 until Wednesday 07/09/2011, 12:00

Room: G03-G04 (ground floor)

Session organised by: IPSF - International Pharmaceutical Student's Federation

18 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 60

Attendance at the end of the session: 64

**Average attendance: 62**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Explain what the vision for the pharmacy profession is
2. Describe where the profession is actually moving
3. List the steps to be taken by the profession, professional organizations, governments to achieve this vision
4. Summarize the role individual pharmacists can play in translating these ideas into practice
5. Explain how pharmacy students and young pharmacists can design and plan their career in light of reality, new ideas and vision the profession is trying to achieve

### Programme of the session

Chairs: Dimple Modi (IPSF, India) and Jan Röder (IPSF, Czech Republic)

1. *Introduction of the topic "Mapping a new vision - Translating ideas into practice": Bhojraj P. Suresh (Indian Pharmaceutical Association, India)*
2. *Industrial pharmacy - Translating ideas into practice: Geoffrey Tucker (University of Sheffield, United Kingdom)*
3. *Community pharmacy - Translating ideas into practice: Henri Manasse Jr. (Professional Secretary FIP, United States)*
4. *Hospital pharmacy - Translating ideas into practice: Jacqueline Surugue (FIP Hospital Pharmacy Section, France)*
5. *Pharmacy Education - Translating ideas into practice: Ian Bates (FIP Pharmacy Education Taskforce, United Kingdom)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 18
Good	16 / 18
Too long	1 / 18
Blank (no answer)	1 / 18

Overall quality of the session:

Poor	0 / 18
Fair	1 / 18
Good	9 / 18
Excellent	8 / 18
Blank (no answer)	0 / 18

Learning objectives met?

Strongly Disagree	0
Disagree	4
Agree	54
Strongly Agree	26

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Introduction of the topic "Mapping a new vision - Translating ideas into practice": Bhojraj P. Suresh (Indian Pharmaceutical Association, India)	3,69	3,38	3,63	3,81	16
Industrial pharmacy - Translating ideas into practice: Geoffrey Tucker (University of Sheffield, United Kingdom)	3,53	3,4	3,2	3,2	15
Community pharmacy - Translating ideas into practice: Henri Manasse Jr. (Professional Secretary FIP, United States)	3,94	3,53	3,53	3,65	17
Hospital pharmacy - Translating ideas into practice: Jacqueline Surugue (FIP Hospital Pharmacy Section, France)	3,6	3,67	3,6	3,73	15
Pharmacy Education - Translating ideas into practice: Ian Bates (FIP Pharmacy Education Taskforce, United Kingdom)	3,92	3,75	3,67	3,92	12

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Average for all the evaluations of the session	3,73	3,53	3,52	3,65	

**Comments provided by the attendants**

- Stronger chairing would have been needed
- Splendid stuff!! Poor time leaping. I left at 11:50 after 3 presentations and coffee
- Excellent discussion but timing not well engaged and the last session was started at finish time
- Carry on with newer ideas regarding hospital pharmacists' development
- More problems were mentioned but less solution

# Session: F7 - Symposium on the History of Pharmacy (part 1/2)

From Thursday 08/09/2011, 09:00 until Thursday 08/09/2011, 12:00

Room: MR 1.04 (first floor)

Session organised by: WG for the History of Pharmacy

4 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 9

Attendance at the end of the session: 9

**Average attendance: 9**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe some highlights of the history of pharmacy in different countries
2. Refer to Pharmacy heritage and past to build a vision of building pharmacy future

### Programme of the session

Chair: Jacques Gravé (President of the Sauvegarde du Patrimoine Pharmaceutique, France)

1. *Can a pharmacist be super branded in this millenium in developing countries?: Jayapal Reddy (St Peters Institute of Pharmaceutical Sciences, India)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	3 / 4
Good	1 / 4
Too long	0 / 4
Blank (no answer)	0 / 4

Overall quality of the session:

Poor	0 / 4
Fair	1 / 4
Good	3 / 4
Excellent	0 / 4
Blank (no answer)	0 / 4

Learning objectives met?

Strongly Disagree	1
Disagree	1
Agree	3
Strongly Agree	1

*Cumulative data for all the learning objectives of the sessions*

### **Evaluation of the speakers**

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Can a pharmacist be super branded in this millenium in developing countries?: Jayapal Reddy (St Peters Institute of Pharmaceutical Sciences, India)	3	2	3,67	3	3
Average for all the evaluations of the session	3	2	3,67	3	

### **Comments provided by the attendants**

- It was just one speaker, I think we should have some contingency plan in case and apologizing. I am speaker
- How did developed world get a separation or dispensing role between doctors and pharmacists
- The computer in the room was broken

# Session: F9 - FIP Member organisations presenting national updates (part 1)

From Monday 05/09/2011, 12:15 until Monday 05/09/2011, 13:45

Room: Hall 2 (ground floor)

Session organised by: FIP - International Pharmaceutical Federation

14 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 83

Attendance at the end of the session: 107

**Average attendance: 95**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Explain the added value of a shared electronic record between pharmacies
2. Summarize how the French record works in the broad lines and its development process
3. Describe the situation and the advantages of individual compound medicinal products in Austrian pharmacies
4. Describe the different ways in which professional pharmacy services are funded in Australia
5. Explain the implications of these developments for pharmacy work flows and staffing patterns
6. Explain the importance of a quality assurance program in setting the benchmark for the provision of professional pharmacy services to specified standards
7. Recognise the importance of building a collaborative relationship with Government to facilitate the continued expansion of pharmacists' professional role in Australia's health system

### Programme of the session

Chair: Niels Kristensen (Vice President of FIP, Denmark)

1. *Introduction by the Chair: Niels Kristensen (Vice President of FIP, Denmark)*
2. *Pharmaceutical record in France: Isabelle Adenot (Ordre national des pharmaciens, France)*
3. *Improving pharmacy services in the Philippines: Leonila Ocampo (President Philippine Pharmacists Association, Philippines)*
4. *Individual compound medicinal products in Austrian pharmacies: Ilona-Elisabeth Leitner (Vice-President Association of Austrian Pharmacists, Austria)*
5. *Payment for professional pharmacy services in Australia: a Brave New World: Paul Sinclair (Pharmacy Guild of Australia, Australia)*
6. *Questions and answers*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 14
Good	8 / 14
Too long	2 / 14
Blank (no answer)	3 / 14

Overall quality of the session:

Poor	0 / 14
Fair	4 / 14
Good	7 / 14
Excellent	0 / 14
Blank (no answer)	3 / 14

Learning objectives met?

Strongly Disagree	0
Disagree	0
Agree	44
Strongly Agree	1

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Pharmaceutical record in France: Isabelle Adenot (Ordre national des pharmaciens, France)	3,09	3,09	3,27	3,45	11
Improving pharmacy services in the Philippines: Leonila Ocampo (President Philippine Pharmacists Association, Philippines)	3,36	3,36	3,36	3,27	11
Individual compound medicinal products in Austrian pharmacies: Ilona-Elisabeth Leitner (Vice-President Association of Austrian Pharmacists, Austria)	2,82	2,64	2,82	3,09	11

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Payment for professional pharmacy services in Australia: a Brave New World: Paul Sinclair (Pharmacy Guild of Australia, Australia)	3,3	3,1	3,2	3,2	10
Average for all the evaluations of the session	3,14	3,05	3,16	3,26	

**Comments provided by the attendants**

- Print out and distribute the slides as people enter for the session
- The speakers may include the authority/source of statistics covered in the slides
- Comparative study and examples weren't given
- Room was very cold



# Session: F10 - FIP Member organisations presenting national updates (part 2)

From Tuesday 06/09/2011, 12:15 until Tuesday 06/09/2011, 13:45

Room: Hall 2 (ground floor)

Session organised by: FIP - International Pharmaceutical Federation

37 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 65

Attendance at the end of the session: 66

**Average attendance: 66**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe the purpose of the Pharmacy Model Initiative
2. List the major consensus recommendation that were concluded further to the Pharmacy Practice Model Initiative
3. Summarize the key findings of the 2010 Pan-European survey on Hospital Pharmacy

### Programme of the session

Chair: Jacqueline Surugue (FIP Hospital Pharmacy Section, France)

1. *Introduction by the Chair: Jacqueline Surugue (FIP Hospital Pharmacy Section, France)*
2. *Pharmacy Practice Model Initiative: Stanley Kent (American Society of Health-system Pharmacists - ASHP, United States)*
3. *Pan-European survey on Hospital Pharmacy: Roberto Frontini (President of the European Association of Hospital Pharmacists, Germany)*
4. *Territorial cooperation : how to work together ? Yes we can! Hospital pharmacy: Philippe Arnaud (President, SNPHPU, France)*
5. *Questions and answers*

## Evaluation

### Overall evaluation

The length of the session:

Too short	2 / 37
Good	32 / 37
Too long	1 / 37
Blank (no answer)	2 / 37

Overall quality of the session:

Poor	0 / 37
Fair	3 / 37
Good	22 / 37
Excellent	10 / 37
Blank (no answer)	2 / 37

Learning objectives met?

Strongly Disagree	0
Disagree	0
Agree	59
Strongly Agree	72

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Pharmacy Practice Model Initiative: Stanley Kent (American Society of Health-system Pharmacists - ASHP, United States)	3,89	3,74	3,74	3,86	34
Pan-European survey on Hospital Pharmacy: Roberto Frontini (President of the European Association of Hospital Pharmacists, Germany)	3,54	3,69	3,62	3,71	34
Territorial cooperation : how to work together ? Yes we can! Hospital pharmacy: Philippe Arnaud (President, SNPHPU, France)	2,64	3,23	3,1	3,33	30
Average for all the evaluations of the session	3,37	3,56	3,50	3,65	

### Comments provided by the attendants

- - Language assistance will help in the presentation.

- The organisation should use the speaker to use official language & FIP should provide translation technology
  - The Model could be adopted for use in various hospitals especially in developing countries.
- harmonization along speakers from different regions
- Speakers could speak in their native language
  - I am not sure how useful it was for those practicing outside these areas

# Session: F11 - FIP Member organisations presenting national updates (part 3)

From Wednesday 07/09/2011, 12:15 until Wednesday 07/09/2011, 13:45

Room: Hall 2 (ground floor)

Session organised by: FIP - International Pharmaceutical Federation

44 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 74

Attendance at the end of the session: 16

**Average attendance: 45**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Explain the need for, the implementation and the impact of the track and trace system in community pharmacies and in the pharmaceutical market as a whole, in Turkey
2. Describe the current situation of counterfeit and safe medicines in Nigeria
3. List the major existing challenges on counterfeit and safe medicines in Nigeria

### Programme of the session

Chair: Thony H Björk (Vice-President of FIP, Sweden)

1. *Introduction by the Chair: Thony H Björk (Vice-President of FIP, Sweden)*
2. *Counterfeit and Safe medicines: Anthony Akhimien (Immediate Past-President Pharmaceutical Society of Nigeria, Nigeria)*
3. *Track and Trace system: how it was implemented in Turkey: Serif Boyacı (Turkish Pharmacists Association, Turkey)*
4. *New drugs innovation and development in China: Wang Xiaoliang (Deputy President Chinese Pharmaceutical Association - CPA, China)*
5. *Questions and answers*

## Evaluation

### Overall evaluation

The length of the session:

Too short	3 / 44
Good	40 / 44
Too long	0 / 44
Blank (no answer)	1 / 44

Overall quality of the session:

Poor	1 / 44
Fair	5 / 44
Good	32 / 44
Excellent	6 / 44
Blank (no answer)	0 / 44

Learning objectives met?

Strongly Disagree	1
Disagree	6
Agree	84
Strongly Agree	51

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Counterfeit and Safe medicines: Anthony Akhimien (Immediate Past-President Pharmaceutical Society of Nigeria, Nigeria)	3,31	2,74	3,17	3,45	42
Track and Trace system: how it was implemented in Turkey: Serif Boyacı (Turkish Pharmacists Association, Turkey)	2,76	3,32	3,35	3,46	37
New drugs innovation and development in China: Wang Xiaoliang (Deputy President Chinese Pharmaceutical Association - CPA, China)	2,68	2,94	3,13	2,97	31
Average for all the evaluations of the session	2,95	2,99	3,22	3,32	

### Comments provided by the attendants

- FIP advocacy on nations on counterfeiting of medicines
- China is the country referred.

- Lecture from china speaker was not related to the topic
- Quality of slides could be improved
- Let the speakers consult deeply the status of the issues
- Specific talk about counterfeit medicines and not on innovation
- We need to get more information from them
- Lots of grammatical errors on the slides
- More elaboration required regarding tracks and traceability of spurious drugs

# Session: F12 - FIP Symposium on counterfeit medicines

From Tuesday 06/09/2011, 14:00 until Tuesday 06/09/2011, 17:00

Room: Hall 3 (ground floor)

Session organised by: FIP - International Pharmaceutical Federation

45 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 154

Attendance at the end of the session: 79

**Average attendance: 116**

## Programme of the session

From consensus to action: a practical, expert-led session, with guidance and tools, to support pharmacists' delivery of authentic and safe medicines to patients

### Learning objectives of the session

The learning objectives of this session were:

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

1. List global trends in substandard and spurious/falsified/falsely-labelled/counterfeit medicines
2. Summarize the current strategies and recommendations from key stakeholders
3. Explain how to advocate implementation of the WHPA regional "Call to Action" in their countries
4. Describe how to establish their own professional strategies to address the following key steps in combating substandard and spurious/falsified/falsely-labelled/counterfeit medicines: identification, notification, awareness, interdisciplinary working...

### Programme of the session

Chairs: Sabine Kopp (World Health Organization) and R.P. Meena (Drugs Control Administration, India)

1. *Introduction of the session and Update on World Health Assembly discussions: Sabine Kopp (World Health Organization)*
2. *Stakeholder perspective: CG Murthy (Indian Pharmaceutical Association, India)*
3. *Stakeholder perspective: Ton Hoek (General Secretary, FIP, Netherlands)*
4. *Stakeholder perspective: Maria Lorena Quirós Luque (Colegio de Farmacéuticos de Costa Rica, Costa Rica)*
5. *Stakeholder perspective: Bejon Misra (Partnership for Safe Medicines, India)*
6. *Stakeholder perspective: Emma Andrews (Pfizer, USA)*
7. *WHPA current strategies and recommendations: Ton Hoek (General Secretary, FIP, Netherlands) and Xuanhao Chan (FIP, Netherlands)*
8. *Presentation of cases studies and group discussions on: identification of counterfeit medicines, reporting and notification of authorities, creating public awareness, collaborative practice among health care professionals, integrity of the supply chain*
9. *Report from group discussions*

## Evaluation

### Overall evaluation

The length of the session:

Too short	5 / 45
Good	35 / 45
Too long	3 / 45
Blank (no answer)	2 / 45

Overall quality of the session:

Poor	3 / 45
Fair	6 / 45
Good	20 / 45
Excellent	12 / 45
Blank (no answer)	4 / 45

Learning objectives met?

Strongly Disagree	10
Disagree	7
Agree	113
Strongly Agree	59

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Introduction of the session and Update on World Health Assembly discussions: Sabine Kopp (World Health Organization)	3,32	3,18	3,22	3,52	34
Stakeholder perspective: CG Murthy on behalf of D Roy (Central Drug Standard Control Organisation, India)	3,21	2,93	3,07	3,33	28
Stakeholder perspective: Ton Hoek (General Secretary, FIP, Netherlands)	3,69	3,31	3,23	3,46	14
Stakeholder perspective: Maria Lorena Quirós Luque (Colegio de Farmacéuticos de Costa Rica, Costa Rica)	3,13	3,1	3,13	3,27	31
Stakeholder perspective: Bejon Misra (Partnership for Safe Medicines, India)	3,31	3,24	3,28	3,36	26



1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Stakeholder perspective: Emma Andrews (Pfizer, USA)	3,36	3,33	3,19	3,47	22
WHPA current strategies and recommendations: Ton Hoek (General Secretary, FIP, Netherlands) and Xuanhao Chan (FIP, Netherlands)	3,69	3,31	3,23	3,46	14
Average for all the evaluations of the session	3,26	3,13	3,16	3,39	

### **Comments provided by the attendants**

- I want to suggest that indiscriminate brandings should be stopped. After the innovator drugs, all the other companies should produce generics. They should be recognised with name of their companies.
  - The workshop mode makes more interesting learning. All the presenters and presentations were excellent.
  - Speakers have delivered their speech superficially and it should be in detail with importance why counterfeit medicines should not
  - How to find physically the counterfeit /spurious drugs by a common man. How to reduce or how to find/ investigate manufacturing of counterfeit/spurious drugs
  - Issue about drug need was not answered
  - Doing good
  - We need more time for the discussion
1. Except India, and Pfizer no other organisations or nations gave any data on extent of counterfeit/spurious medicines in their nation. Lack of data is not satisfactory nor motivates any action.
  2. Most strategies put forth ahead professionals and technical focus and not consumer friendly.
  3. Most communications need to be made consumer friendly language/ through logos codes/signals, logos etc which will enhance effectiveness of communication

# Session: FIP Høst Madsen Award Lecture - Personalised medicines: we are virtually there

From Monday 05/09/2011, 14:00 until Monday 05/09/2011, 14:45

Room: Hall 3 (ground floor)

Session organised by: FIP - International Pharmaceutical Federation

0 session evaluation form collected

## Attendance data

Attendance at the beginning of the session: 52

Attendance at the end of the session: 129

**Average attendance: 90**

# Session: J1 - Building practitioner skills

From Monday 05/09/2011, 09:00 until Monday 30/08/2010, 12:00

Room: Hall 2 (ground floor)

Session organised by: Hospital Pharmacy Section; Academic Pharmacy Section; Pharmacy Information Section

77 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 90

**Average attendance: 104**

Attendance at the end of the session: 117

## Programme of the session

This session will demonstrate at least one method of teaching pharmacists the skills they require to apply evidence-based practice, to implement public health programs in pharmacy, to develop disease state management programs and to become pharmacist prescribers

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe methods used to teach evidence-based practice
2. Describe methods used to teach skills in public health
3. Describe methods used to teach skills in disease state management
4. Describe methods used to teach pharmacist prescribers

### Programme of the session

Chairs: Wafa Dahdal (American College of Clinical Pharmacy, United States) and Andrew Lofts Gray (University of KwaZulu-Natal, South Africa)

1. *Teaching evidence-based practice to undergraduate and postgraduate pharmacists: Gregory Duncan (Monash University, Australia) and Vimal Kishore (Xavier University of Louisiana, United States)*
2. *Teaching Public Health skills: Gregory Duncan (Monash University, Australia) and Janie Sheridan (University of Auckland, New Zealand)*
3. *Teaching skills in disease state management: Wafa Dahdal (American College of Clinical Pharmacy, United States)*
4. *Teaching skills in pharmacist prescribing: Lyn Weekes (National Prescribing Service, Australia) and Karen Louise Hodson (University of Cardiff Wales, United Kingdom)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	2 / 77
Good	69 / 77
Too long	4 / 77
Blank (no answer)	2 / 77

Overall quality of the session:

Poor	1 / 77
Fair	7 / 77
Good	48 / 77
Excellent	20 / 77
Blank (no answer)	1 / 77

Learning objectives met?

Strongly Disagree	0
Disagree	4
Agree	207
Strongly Agree	110

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Teaching evidence-based practice to undergraduate and postgraduate pharmacists: Gregory Duncan (Monash University, Australia) and Vimal Kishore (Xavier University of Louisiana, United States)	3,56	3,3	3,36	3,52	56
Teaching Public Health skills: Gregory Duncan (Monash University, Australia) and Janie Sheridan (University of Auckland, New Zealand)	3,28	3,31	3,34	3,46	59
Teaching skills in disease state management: Wafa Dahdal (American College of Clinical Pharmacy, United States)	3,28	3,37	3,38	3,45	60

1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Teaching skills in pharmacist prescribing: Lyn Weekes (National Prescribing Service, Australia) and Karen Louise Hodson (University of Cardiff Wales, United Kingdom)	3,42	3,4	3,47	3,58	55
Average for all the evaluations of the session	3,48	3,34	3,39	3,50	

### **Comments provided by the attendants**

- Better to include in the booklet to whom the lectures are targeted for. It seems more relevant to those in academic lines.
- A primary intro to broad terms, ideas to keep it interactive, I appreciate the programme.
- The last three were polished and thoughtful
- Speakers desk in front of the screen=half audience couldn't read the whole screen
- Beautiful
- Everything was excellent, excellent way to get oriented before getting out as a pharmacist
- Teaching skills in disease state management was very good
- Titles of topic lecturers given by speakers should be mentioned over the display board at entrance
- Collective responsibility, what do u do to control self medication, transitional interventions.
- Interaction is good to have in the programme. Could continue to incorporate audience participation.
- The lectures should be moduled as all don't understand English
- The material of the presentation must have been given so that we could have concentrated on the speaker rather on slides
- The session was well organized and quite informative
- Thank you .That was worthy listening to
- Mostly a non English speaking audience, too fast talks.
- Chairs were great

# Session: J2 - Your career in Industrial Pharmacy - From drug development to drug distribution

From Monday 05/09/2011, 09:00 until Monday 05/09/2011, 12:00

Room: MR 2.03-2.04 (second floor)

Session organised by: Industrial Pharmacy Section; Young Pharmacists' Group

30 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 52

Attendance at the end of the session: 59

**Average attendance: 56**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Identify the various employment opportunities within the Pharmaceutical Industry
2. Identify new career opportunities that have emerged within the Pharmaceutical Industry
3. List the key competencies required to fulfill various Pharmaceutical Industry positions

### Programme of the session

Chairs: Avanthi Govender Bester (Becton Dickinson, South Africa), Claudio Zurzica (YPG, Portugal) and Dimple Modi (IPSF, India)

1. *The Industrial Pharmacist's role in Drug Development: Ibrahim El-Bagory (King Saud University, Saudi Arabia)*
2. *The Industrial Pharmacist's role in Drug Development: Linda B. Hakes (UCB, Belgium)*
3. *The Industrial Pharmacist's role in Drug Manufacture and Quality Assurance: Michael H. Anisfield (Globepharm Consulting, United States)*
4. *The Industrial Pharmacist's role in Drug Manufacture and Quality Assurance: Andrei Meshovski (Russia)*
5. *The Industrial Pharmacist's role in Drug Regulation / Pharmacovigilance: Luther Gwaza (Zimbabwe)*
6. *The Industrial Pharmacist's role in Drug Regulation / Pharmacovigilance: Alan Chalmers (Pharma International, Switzerland)*
7. *The Industrial Pharmacist's role in Drug Distribution: Didier Mouliom (France)*
8. *The Industrial Pharmacist's role in Drug Distribution: Claudio Zurzica (Portugal)*
9. *Round table discussion*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 30
Good	28 / 30
Too long	0 / 30
Blank (no answer)	1 / 30

Overall quality of the session:

Poor	0 / 30
Fair	7 / 30
Good	17 / 30
Excellent	5 / 30
Blank (no answer)	1 / 30

Learning objectives met?

Strongly Disagree	0
Disagree	5
Agree	81
Strongly Agree	35

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
The Industrial Pharmacist's role in Drug Development: Ibrahim El-Bagory (King Saud University, Saudi Arabia)	2,93	3,15	2,96	3,31	27
The Industrial Pharmacist's role in Drug Development: Linda B. Hakes (UCB, Belgium)	3,38	2,55	3,22	3,33	24
The Industrial Pharmacist's role in Drug Manufacture and Quality Assurance: Michael H. Anisfield (Globepharm Consulting, United States)	3,38	3,31	3,38	3,56	26
The Industrial Pharmacist's role in Drug Manufacture and Quality Assurance: Andrei Meshovski (Russia)	2,79	2,88	3,00	3,30	24

1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
The Industrial Pharmacist's role in Drug Regulation / Pharmacovigilance: Alan Chalmers (Pharma International, Switzerland)	3,05	2,95	3,20	3,42	20
The Industrial Pharmacist's role in Drug Regulation / Pharmacovigilance: Luther Gwaza (Zimbabwe)	2,94	2,82	2,88	3,31	17
The Industrial Pharmacist's role in Drug Distribution: Didier Mouliom (France)	2,69	2,77	2,77	3,17	13
The Industrial Pharmacist's role in Drug Distribution: Claudio Zurzica (Portugal)	2,80	2,73	3,00	3,30	10
Average for all the evaluations of the session	3,04	2,96	3,08	3,35	

### **Comments provided by the attendants**

- Since many of the industries are set up as business concerns with profit in mind, the pharmacist as a businessman should be explored even as he/she is a grounded professional.
- The details covered by most speakers were preliminary for industrial pharmacists and did not adequately cover recent developments in industry as witnessed buys in India
- Excellent program
- Contents of slides should be screen for quality and duration before approval for presentation. Some of the slides were too long.
- Emphasize on sales and marketing in industrial pharmacy
- It would be beneficial o give speakers some kind of format for presentations so that we can ensure the quality and consistency throughout the session.
- It is suggested to include a computer CD in the conference kit covering presentations of all speakers from all the tracks.
- The session was excellent but would also appreciate IFA professional in sales and marketing be invited to speak on how to market and sell industrial products
- Sensitizing a chaotic distribution like we have in Nigeria as a case study.
- It's a great arrangement for introducing this area
- Technical setup is catastrophic. Slides can't be recognized clearly and the projector switched off two times in the middle of session.
- Some presentations were good but many presenters talked what they do personally and not what opportunities are present and what skills are needed.
- Some speakers were simply reading the slides which was very difficult to follow as the seating arrangement did not allow to see the slides properly.
- Speakers who do not speak official language of the congress should have translator because it is very difficult to follow presentation.
- Session had variety which was good and offered different perspectives on the issue under discussion



# Session: J3 - Regulatory and legislative changes in pharmacy from across the world

From Monday 05/09/2011, 09:00 until Monday 05/09/2011, 12:00

Room: G03-G04 (ground floor)

Session organised by: Academic Pharmacy Section; Social and Administrative Pharmacy Section

32 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 69

Attendance at the end of the session: 83

**Average attendance: 76**

## Programme of the session

There have been recent significant regulatory and legislative changes in the pharmacy profession across the world. These relate to educational reform and university training of pharmacists, ownership of pharmacies, registration requirements, national regi

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe the rationale for regulatory and legislative changes in pharmacy in various countries across the world
2. Discuss the implications and challenges presented by regulatory and legislative changes in pharmacy
3. Determine how pharmacists and other stakeholders may contribute to any regulatory and legislative changes in their country
4. Describe how to prepare pharmacists and other stakeholders for (future) regulatory and legislative changes in pharmacy in their country

### Programme of the session

Chair: Ann Lewis (University of London, United Kingdom)

Co-Chair: Jennifer Marriott (President of the FIP Academic Pharmacy Section, Australia)

1. *Regulation in Pharmacy – Threat or challenge?: Stephen Marty (Pharmacy board of Australia, Australia)*
2. *Implications of regulatory changes on the education and further education of pharmacists: Anthony Smith (Principal and Dean of the School of Pharmacy University of London, United Kingdom)*
3. *Professional bodies coping with regulatory changes: Jeff Poston (Executive Director of the Canadian Pharmacists Association - CPhA, Canada)*
4. *Regulation in Europe, the changing scene: John Chave (General Secretary Pharmaceutical Group of the European Union - PGEU, Belgium)*
5. *Panel discussion*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 32
Good	31 / 32
Too long	0 / 32
Blank (no answer)	0 / 32

Overall quality of the session:

Poor	0 / 32
Fair	4 / 32
Good	18 / 32
Excellent	10 / 32
Blank (no answer)	0 / 32

Learning objectives met?

Strongly Disagree	1
Disagree	3
Agree	74
Strongly Agree	44

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Regulation in Pharmacy – Threat or challenge?: Stephen Marty (Pharmacy board of Australia, Australia)	3,41	3,3	3,31	3,3	26
Implications of regulatory changes on the education and further education of pharmacists: Anthony Smith (Principal and Dean of the School of Pharmacy University of London, United Kingdom)	3,54	3,43	3,44	3,49	27
Professional bodies coping with regulatory changes: Jeff Poston (Executive Director of the Canadian Pharmacists Association - CPhA, Canada)	3,61	3,46	3,44	3,32	27

1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Regulation in Europe, the changing scene: John Chave (General Secretary Pharmaceutical Group of the European Union - PGEU, Belgium)	3,83	3,76	3,62	3,66	29
Average for all the evaluations of the session	3,6	3,49	3,46	3,42	

### **Comments provided by the attendants**

- Comparative study of intercontinental country's of all the above topic would've been given
- Need to be eloquent and slow to be audible to the participants
- Great session
- Most of the speakers had a slide where contact information(links) am. Nobody can write those because during the discussion the last slide (=thank you) is on board
- It would've been nice to have slides at the start or before lesson. You can focus more on the topic instead of trying to thing down
- Design of room made it difficult to read slides too many heads in way. Also couldn't see panel list during open forum. Panel session was good.
- Good presentations
- The chair & co-chair were quite rude. Tone of speaker to audience was arrogant & bossy. No need
- The pharmacist has responsibility in respect of all medicines they supply(POM & OTC).While certain OTC medicines maybe available on general sale, we must not forget or ignore these that are pharmacy- only as in the case in a number of countries

# Session: J4 - Pharmacogenomics in oncology

From Monday 05/09/2011, 09:00 until Monday 05/09/2011, 12:00

Room: G05-G06 (ground floor)

Session organised by: Clinical Biology Section; SIG Individualised Medicine

26 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 33

**Average attendance: 34**

Attendance at the end of the session: 36

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Discuss the pharmacogenomics tests in Oncology
2. Evaluate the benefits of pharmacogenomics in oncology therapeutics
3. Explore the use of new laboratory tests for oncology
4. Describe further developments in pharmacogenomics research

### Programme of the session

Chairs: Hitoshi Sasaki (SIG on Individualized Medicine, Japan) and Bernard Poggi (FIP Clinical Biology Section, France)

1. *Pharmacokinetics and pharmacogenomics in oesophageal cancer chemoradiotherapy: Toshiyuki Sakaeda (Kyoto University, Japan)*
2. *Pharmacogenecis of anti-cancer drugs: Hitoshi Sasaki (SIG on Individualized Medicine, Japan)*
3. *The role of pharmacogenomics in treatment, a physician's perspective: Dechun Jiang (Xuanwu Hospital Beijing, China)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 26
Good	25 / 26
Too long	0 / 26
Blank (no answer)	1 / 26

Overall quality of the session:

Poor	0 / 26
Fair	3 / 26
Good	14 / 26
Excellent	5 / 26
Blank (no answer)	4 / 26

Learning objectives met?

Strongly Disagree	1
Disagree	3
Agree	53
Strongly Agree	27

*Cumulative data for all the learning objectives of the sessions*

### **Evaluation of the speakers**

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Pharmacokinetics and pharmacogenomics in oesophageal cancer chemoradiotherapy: Toshiyuki Sakaeda (Kyoto University, Japan)	3,45	3,55	3,55	3,55	22
Pharmacogenecis of anti-cancer drugs: Hitoshi Sasaki (SIG on Individualized Medicine, Japan)	3,13	3,45	3,5	3,32	22
The role of pharmacogenomics in treatment, a physician's perspective: Dechun Jiang (Xuanwu Hospital Beijing, China)	2,9	3,24	3,05	3,19	21
Average for all the evaluations of the session	3,16	3,42	3,37	3,35	

### **Comments provided by the attendants**

- General implementing of QR codes for serving information about the sessions and their contents, especially the presenter no:3 was a little bit overexcited and failed the listener's expectations. I missed the perspectives of a physician's experience (too academic!)
- Excellent presentations and organisation. Dr. Sasaki provided the overview of the topic and Dr. Sakoeda and DeChun gave specific and interesting points on the topic
- It was very interesting session, it was very well presented and concluded
- The oral skill was not good even though topic was very good. We could not get the whole soul of the presentation
- Presentation 3 is not relevant to the topic and all the slides are matter derived from text books and FDA sites. Nothing new was discussed.

# Session: J5 - Careering toward advanced levels of practice

From Monday 05/09/2011, 14:00 until Monday 05/09/2011, 17:00

Room: MR 2.03-2.04 (second floor)

Session organised by: Academic Pharmacy Section; FIP Pharmacy Education Taskforce

23 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 102

Attendance at the end of the session: 153

**Average attendance: 128**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe the types of advance practice occurring in a range of countries
2. Describe the drivers for development and recognition of advanced practice
3. Describe the types of education that may be required for the recognition of advanced practice status
4. Identify the tools available for the recognition of advanced practice
5. Describe desirable elements for the maintenance of advanced practice status

### Programme of the session

Chairs: Katja Hakkarainen (Nordic School of Public Health, Finland) and Tina Brock (University of California, San Francisco, United States)

1. *What is Advanced Practice and who is doing it?: Andrew Lofts Gray (University of KwaZulu-Natal, South Africa)*
2. *How do we get the ball rolling to advance practice?: Bronwyn Clark (Chief Executive and Registrar, Pharmacy Council of New Zealand, New Zealand)*
3. *Education programs to develop practitioners: Catherine Duggan (Royal Pharmaceutical Society of Great Britain - RPSGB, United Kingdom), Kirstie Galbraith (Monash University, Australia) and D. Parthasarathy (JSS College of Pharmacy, India)*
4. *Credentialing and CPD to maintain advanced status: Mike Rouse (Accreditation Council for Pharmacy Education - ACPE, United States)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 23
Good	22 / 23
Too long	1 / 23
Blank (no answer)	0 / 23

Overall quality of the session:

Poor	0 / 23
Fair	2 / 23
Good	14 / 23
Excellent	7 / 23
Blank (no answer)	0 / 23

Learning objectives met?

Strongly Disagree	0
Disagree	6
Agree	74
Strongly Agree	25

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
What is Advanced Practice and who is doing it?: Andrew Lofts Gray (University of KwaZulu-Natal, South Africa)	3,45	3,35	3,2	3,33	20
How do we get the ball rolling to advance practice?: Bronwyn Clark (Chief Executive and Registrar, Pharmacy Council of New Zealand, New Zealand)	3,25	3,1	3,15	3,42	19
Education programs to develop practitioners: Catherine Duggan (Royal Pharmaceutical Society of Great Britain - RPSGB, United Kingdom), Kirstie Galbraith (Monash University, Australia) and D. Parthasarathy (JSS College of Pharmacy, India)	3,65	3,35	3,41	3,41	17

1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Credentialing and CPD to maintain advanced status: Mike Rouse (Accreditation Council for Pharmacy Education - ACPE, United States)	3,57	3,29	3,43	3,37	7
Average for all the evaluations of the session	3,41	3,18	3,23	3,33	

#### **Comments provided by the attendants**

- Room was noisy. Difficult to hear at times. Bronwyn Clark was wonderful. Too much info-redundancy.
- Patient, product and practice everyone of these important features for improving healthcare system.
- Speakers have restricted their discussion with regard to their country only. They could have compared with others
- This was an excellent session to get to know about pharmacy practice across the globe, being a student I would call this session pharmacy practice across a globe in a nutshell.
- Presenter-5 over the time limit
- Probably a bit ambitious in terms of speakers with time available
- The screen was too small. There was difficulty in viewing the content of slides.
- Excellent coverage of an important topic on advanced practice as we stand on the edge of development in pharmacy practice where a specialization is now at our door step. Thank you for organizing this session.
- Some speakers were talking too low inspire of the microphone



# Session: J6 - Communicating basic medicines information to patients

From Monday 05/09/2011, 14:00 until Monday 30/08/2010, 17:00

Room: Hall 2 (ground floor)

Session organised by: Community Pharmacy Section; Pharmacy Information Section

77 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 134

Attendance at the end of the session: 120

**Average attendance: 127**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe the global problems of medicines information, particularly the need to provide clear information in low literacy populations
2. Identify methods to improve medicines information based on case studies
3. Explain how patient counseling can be improved by using the FIP Patient Counseling Booklet
4. Describe how to implement basic medicines information in daily practice

### Programme of the session

Chairs: Rian Lelie-Van der Zande (Royal Dutch Association for the Advancement of Pharmacy - KNMP, Netherlands) and Paul Sinclair (FIP Community Pharmacy Section, Australia)

1. *Challenges for basic medicines information in low literacy populations: Parisa Aslani (University of Sydney, Australia)*
2. *Case studies on Medicines Information and Patient Counseling - The evaluation of key visual elements of pictograms to label medications: Jane Dawson (FIP Military and Emergency Pharmacy Section, New Zealand)*
3. *Case studies on Medicines Information and Patient Counseling - Risk communication on medicines and driving: The use of pictograms based on a EU categorization system: Marlies Geurts (Department of Pharmacotherapy and Pharmaceutical Care, University of Groningen)*
4. *Case studies on Medicines Information and Patient Counseling - The speaking book experiences in low literacy communities: Emma Andrews (Pfizer, United States)*
5. *Case studies on Medicines Information and Patient Counseling - IPSF/FIP Patient Counseling Handbook: Marja Airaksinen (University of Helsinki, Finland)*
6. *General discussion*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 77
Good	67 / 77
Too long	5 / 77
Blank (no answer)	5 / 77

Overall quality of the session:

Poor	1 / 77
Fair	12 / 77
Good	45 / 77
Excellent	14 / 77
Blank (no answer)	5 / 77

Learning objectives met?

Strongly Disagree	16
Disagree	12
Agree	193
Strongly Agree	82

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Challenges for basic medicines information in low literacy populations: Parisa Aslani (University of Sydney, Australia)	3,28	3,27	3,16	3,53	66
Case studies on Medicines Information and Patient Counseling - The evaluation of key visual elements of pictograms to label medications: Jane Dawson (FIP Military and Emergency Pharmacy Section, New Zealand)	3,64	3,36	3,4	3,5	66

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Case studies on Medicines Information and Patient Counseling - Risk communication on medicines and driving: The use of pictograms based on a EU categorization system: Marlies Geurts (Department of Pharmacotherapy and Pharmaceutical Care, University of Gro	3,49	3,3	3,36	3,43	60
Case studies on Medicines Information and Patient Counseling - The speaking book experiences in low literacy communities: Emma Andrews (Pfizer, United States)	3,59	3,31	3,46	3,47	60
Case studies on Medicines Information and Patient Counseling - IPSF/FIP Patient Counseling Handbook: Marja Airaksinen (University of Helsinki, Finland)	3,12	3,18	3,14	3,32	50
General discussion					
Average for all the evaluations of the session	3,44	3,29	3,31	3,46	

#### **Comments provided by the attendants**

- You should supply with hand out and not make us wait till 1st December
- The third person was done by a speaker who represented the author
- Good presentation
- The research pictogram can be done in Africa also.
- Make the slides with less words and the speakers explain more.
- Attempt should be made to address challenges for the basic medicines in illiterate population
- Looking for interaction between speakers and the audience
- Very interesting

# Session: J7 - Trends in Community Pharmacy – Debating the future of the profession: Forum for policy makers

From Tuesday 06/09/2011, 09:00 until Tuesday 06/09/2011, 12:00

Room: Hall 6 (ground floor)

Session organised by: IPSF - International Pharmaceutical Student's Federation; Community Pharmacy Section; Young Pharmacists' Group; Laboratories and Medicines Control Services Section; Social and Administrative Pharmacy Section

47 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 115

Attendance at the end of the session: 60

**Average attendance: 88**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Acknowledge the current global threat of counterfeit medicines
2. Recognise the enhanced roles and challenges facing pharmaceutical organisations and individual pharmacists to thwart counterfeit drugs
3. Critically discuss the role of community pharmacy in guaranteeing patient safety
4. Debate strategies that have been put in place by organisations and/or individuals to ensure patient safety
5. Understand the specificities of maternal and child care and the role of the pharmacist in dealing with this special group of patients

### Programme of the session

Chairs: Ema Paulino (FIP Community Pharmacy Section, Portugal) and Timothy Chen (University of Sydney, Australia)

1. *Counterfeit medicines – Will they affect you? Main speaker: D Roy (Central Drug Standard Control Organisation, India)*
2. *Counterfeit medicines – Will they affect you? Responder 1: Mohamed Kawsar Sharif Siam (Pharmacy Students' Society, Bangladesh)*
3. *Counterfeit medicines – Will they affect you? Responder 2: Mohamed Abdelhakim (EMRO Office, World Health Organization)*
4. *Patient Safety – First rule: do no harm! Main speaker: Romano Fois (University of Sydney, Australia)*

5. *Patient Safety – First rule: do no harm! Responder 1: Satyanarayana Murthy Chittoory (International Pharmaceutical Students' Federation - IPSF, India)*
6. *Patient Safety – First rule: do no harm! Responder 2: Luther Gwaza (YPG, Zimbabwe)*
7. *Maternal and child health – Investing in the future. Main speaker: Astrid Kågedal (Apoteket AB, Sweden)*
8. *Maternal and child health – Investing in the future. Responder 1: Ryan A. Forrey (James Cancer Hospital at The Ohio State University, United States)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	4 / 47
Good	40 / 47
Too long	1 / 47
Blank (no answer)	2 / 47

Overall quality of the session:

Poor	1 / 47
Fair	19 / 47
Good	27 / 47
Excellent	0 / 47
Blank (no answer)	0 / 47

Learning objectives met?

Strongly Disagree	0
Disagree	33
Agree	113
Strongly Agree	32

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Counterfeit medicines – Will they affect you? Main speaker: D Roy (Central Drug Standard Control Organisation, India)	3,24	2,92	2,95	3,25	40
Counterfeit medicines – Will they affect you? Responder 1: Mohamed Kawsar Sharif Siam (Pharmacy Students' Society, Bangladesh)	3,1	2,97	2,75	3,08	29

1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Counterfeit medicines – Will they affect you? Responder 2: Mohamed Abdelhakim (EMRO Office, World Health Organization)	3,03		2,9	3,1	29
Patient Safety – First rule: do no harm! Main speaker: Romano Fois (University of Sydney, Australia)	3,14	3	3,14	3,27	22
Patient Safety – First rule: do no harm! Responder 1: Satyanarayana Murthy Chittoory (International Pharmaceutical Students' Federation - IPSF, India)	3,31	3,5	3,11	3,17	18
Patient Safety – First rule: do no harm! Responder 2: Luther Gwaza (YPG, Zimbabwe)	3,07	3	3,18	3,18	11
Maternal and child health – Investing in the future. Main speaker: Astrid Kågedal (Apoteket AB, Sweden)	3,36	2,63	3	3,11	9
Maternal and child health – Investing in the future. Responder 1: Ryan A. Forrey (James Cancer Hospital at The Ohio State University, United States)	3,3	2,86	3,4	3,11	9
Average for all the evaluations of the session	3,18	2,99	3	3,17	

### **Comments provided by the attendants**

- Basic infrastructure of pharmacists in developing country has to be ascertained and its alterations to be done by FIP.
- Main speakers should be made committed and responsive by not absenting themselves from the sessions.
- Mohammed Abdelhakim was able to do well without any slides and spoke well on the topic. He is a very good speaker.
- To frame the stringent rules worldwide for counterfeit medicines. Case studies to be given to attain more interaction. To give countrywide data on different subjects.
- Good discussion on patient safety with many comments and questions from the audience.
- Some English is very hard to understand. Slides were missing.
- Dr. Roy key role presentation was revised but the responders did well and under the circumstances
- Disappointing that Dr. Roy did not show up.
- Very relevant topic, but some aspects of pharmacoepidemiology are missing. Perhaps a session on methods would be useful in the future.
- FIP leadership should be more involved in ensuring or enforcing SOP in Pharmacy practice particularly in the developing countries (Nigeria)

- Pharmacists provide communication and are in key role. How can we make this possible in a still global differentiated society? We are the small drop of water and this need to change.
- The responders are not meeting to my expectations. There was problem keeping time.
- You need to take break between the sessions. People are getting tired; question from the audience should be short
- Pre-pregnancy concerning in detail/planning for pregnancy concerning problem etc

# Session: J8 - Competition for the best oral industrial presentation (Short Oral Communications)

From Tuesday 06/09/2011, 14:00 until Tuesday 06/09/2011, 17:00

Room: G03-G04 (ground floor)

Session organised by: Industrial Pharmacy Section; Young Pharmacists' Group

12 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 27

Attendance at the end of the session: 27

**Average attendance: 27**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe some original industrial pharmacy contributions from young pharmacists and young pharmaceutical scientists
2. Discuss and compare the impact of these contributions based on their own experiences

### Programme of the session

Chairs: Luther Gwaza (FIP Industrial Pharmacy Section, Zimbabwe) and Claudio Zurzica (YPG, Portugal)

1. *Welcome by the Chairs: Luther Gwaza (FIP Industrial Pharmacy Section, Zimbabwe) and Claudio Zurzica (YPG, Portugal)*
2. *Impact of variability in commercial Carbamazepine on the drug release: Felicia Flicker (Industrial Pharmacy Lab., University of Basel, Switzerland)*
3. *A novel versatile bio adhesive excipient: Modification of tamarind seed Polysachharide by grafting with ethylmethacrylate for improved characteristics: Sasi Bhushan (G. Pullareddy College of Pharmacy, India)*
4. *Low dose drug and lubricant quantification in powder blends by near infrared spectroscopy: Lizbeth Martinez (University of Basel, Switzerland)*
5. *Phospholid-emulsified gel of local anesthetic for topical delivery: Poonam Negi (Panjab University, India)*
6. *A novel lipid-based formulation of coal tar: Sheetu Wadhwa (Panjab University, India)*
7. *Development of novel flexible lipid-vesicles of an estrogen receptor modulator: Deepa Dhone (Panjab University, India)*
8. *Summary - reflection on what has been presented, participation certificates and photos*



## Evaluation

### Overall evaluation

The length of the session:

Too short	2 / 12
Good	9 / 12
Too long	1 / 12
Blank (no answer)	0 / 12

Overall quality of the session:

Poor	0 / 12
Fair	0 / 12
Good	9 / 12
Excellent	3 / 12
Blank (no answer)	0 / 12

Learning objectives met?

Strongly Disagree	0
Disagree	2
Agree	30
Strongly Agree	9

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Impact of variability in commercial Carbamazepine on the drug release: Felicia Flicker (Industrial Pharmacy Lab., University of Basel, Switzerland)	2,9	3,3	3,44	3,4	10
A novel versatile bio adhesive excipient: Modification of tamarind seed Polysachharide by grafting with ethylmethacrylate for improved characteristics: Sasi Bhushan (G. Pullareddy College of Pharmacy, India)	3	3	3	3,3	10
Low dose drug and lubricant quantification in powder blends by near infrared spectroscopy: Lizbeth Martinez (University of Basel, Switzerland)	3,3	3,3	3,2	3,3	10

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Phospholid-emulsified gel of local anesthetic for topical delivery: Poonam Negi (Panjab University, India)	3,3	2,7	3,1	3,4	10
A novel lipid-based formulation of coal tar: Sheetu Wadhwa (Panjab University, India)	3,09	2,82	3,18	3,45	11
Development of novel flexible lipid-vesicles of an estrogen receptor modulator: Deepa Dhone (Panjab University, India)	CANCELLED (NO SHOW)				
Average for all the evaluations of the session	3,12	3,02	3,18	3,37	

**Comments provided by the attendants**

- Time 10mins not followed similarly for all the participants
- I think more time should be given to present the research work for the better clarity and conveying rightly
- By providing more time for presentation and discussion, so that we are able to clarify further

# Session: J9 - Pediatric medicines - Challenges and opportunities

From Wednesday 07/09/2011, 09:00 until Wednesday 01/09/2010, 12:00

Room: Hall 6 (ground floor)

Session organised by: Hospital Pharmacy Section; Industrial Pharmacy Section; Military and Emergency Pharmacy Section; Pharmacy Information Section; Laboratories and Medicines Control Services Section

52 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 120

Attendance at the end of the session: 70

**Average attendance: 95**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe the challenges facing use of medicines in pediatric patients
2. Discuss the steps being taken to make information about pediatric use more readily available
3. Evaluate the suitability of various dosage forms for pediatric patients
4. List the special problems of emergency treatment of children
5. Describe the steps being taken in Europe and other areas to increase availability of pediatric medicines

### Programme of the session

Chairs: Linda B. Hakes (UCB, Belgium) and Lindsay McClure (Pharmaceutical Services Negotiating Committee - PSNC, United Kingdom)

1. *Developing and implementing the WHO Essential Medicines List for Children: Andrew Lofts Gray (FIP Hospital Pharmacy Section, South Africa)*
2. *Overcoming the lack of information on medicines for children: Parisa Aslani (University of Sydney, Australia)*
3. *Administration of IV drugs in pediatric emergency: Danica Irwin (Children's Hospital Eastern Ontario, Canada)*
4. *Development of orally disintegrating and chewable tablets as pediatric dosage forms: Nandu Deorkar (Avantor, United States)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 52
Good	46 / 52
Too long	4 / 52
Blank (no answer)	1 / 52

Overall quality of the session:

Poor	0 / 52
Fair	2 / 52
Good	32 / 52
Excellent	17 / 52
Blank (no answer)	1 / 52

Learning objectives met?

Strongly Disagree	1
Disagree	10
Agree	91
Strongly Agree	121

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Developing and implementing the WHO Essential Medicines List for Children: Andrew Lofts Gray (FIP Hospital Pharmacy Section, South Africa)	3,49	3,35	3,49	3,78	49
Overcoming the lack of information on medicines for children: Parisa Aslani (University of Sydney, Australia)	3,7	3,63	3,48	3,59	46
Administration of IV drugs in pediatric emergency: Danica Irwin (Children's Hospital Eastern Ontario, Canada)	3,51	3,41	3,43	3,63	41
Development of orally disintegrating and chewable tablets as pediatric dosage forms: Nandu Deorkar (Avantor, United States)	3,16	3,49	3,46	3,28	37
Average for all the evaluations of the session	3,49	3,47	3,47	3,59	

**Comments provided by the attendants**

- Most topics were likely informative but not debative
- Reordering the programme was not helpful-affected the flow of the session
- I particularly enjoyed the first 3 lectures. In my opinion the speakers were on point.
- Amazing speakers
- Satisfactory

# Session: J10 - Building a Toolbox for practitioner development and support

From Wednesday 07/09/2011, 09:00 until Wednesday 07/09/2011, 12:00

Room: Hall 2 (ground floor)

Session organised by: Academic Pharmacy Section; FIP Pharmacy Education Taskforce

30 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 43

Attendance at the end of the session: 60

**Average attendance: 52**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe a number of tools that may be used to develop and assess practitioner skills
2. Describe the advantages and disadvantages related to the use of portfolios
3. Describe the advantages and disadvantages related to the use of competency frameworks
4. Describe a range of post-graduate programs available to develop and support pharmacists

### Programme of the session

Chair: Mike Rouse (Accreditation Council for Pharmacy Education - ACPE, United States)

1. *How can we develop competent practitioners? What do we need in the 'toolbox'? A broad discussion of progression from novice to expert practitioner: Ian Bates (University of London, United Kingdom)*
2. *Competence-based assessment: Jennifer Marriott (Monash University, Australia)*
3. *Postgraduate development and education for practitioners- challenges to deliver a flexible workforce that is fit for purpose: Catherine Duggan (Royal Pharmaceutical Society of Great Britain - RPSGB, United Kingdom)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	1 / 30
Good	29 / 30
Too long	0 / 30
Blank (no answer)	0 / 30

Overall quality of the session:

Poor	0 / 30
Fair	7 / 30
Good	14 / 30
Excellent	9 / 30
Blank (no answer)	0 / 30

Learning objectives met?

Strongly Disagree	5
Disagree	1
Agree	66
Strongly Agree	48

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
How can we develop competent practitioners? What do we need in the 'toolbox'? A broad discussion of progression from novice to expert practitioner: Ian Bates (University of London, United Kingdom)	3,78	3,52	3,65	3,82	22
Competence-based assessment: Jennifer Marriott (Monash University, Australia)	3,46	3,08	3,5	3,74	24
Postgraduate development and education for practitioners- challenges to deliver a flexible workforce that is fit for purpose: Catherine Duggan (Royal Pharmaceutical Society of Great Britain - RPSGB, United Kingdom)	3,5	3,48	3,52	3,72	25
Average for all the evaluations of the session	3,57	3,37	3,52	3,70	

**Comments provided by the attendants**

- How to implement manpower planning and manpower development for pharmacy work force
- Excellent
- Great speakers however I would like to see more varied representation
- Speakers good, the disappointing thing about these sessions is overuse of same people
- I would love to have a copy of Dr.Bates slides
- Competencies can be changed and will be different in each country
- Presentations varied considerably in quality or challenge for audience



# Session: J12 - Globalization of pharmaceutical production - Environmental implications and future developments

From Wednesday 07/09/2011, 14:00 until Wednesday 07/09/2011, 17:00

Room: Hall 6 (ground floor)

Session organised by: Industrial Pharmacy Section; Social and Administrative Pharmacy Section

9 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 30

Attendance at the end of the session: 45

**Average attendance: 38**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe how regulatory demands and internal policies drive PIE developments
2. Evaluate the contribution pharmacists can make to support developments
3. Discuss how the future may look, including the main trends seen for the coming 10-20 years

### Programme of the session

Chairs: Ulf Janzon (Merck, Sweden) and Timothy Chen (University of Sydney, Australia)

1. *Moving production to India - the Indian perspective: Uday R. Parikh (Market Trends Pvt. Ltd., India)*
2. *Environmental regulation of pharmaceutical production in India, with special emphasis on international collaboration: M.K. Unnikrishnan (Manipal College of Pharmaceutical Sciences, India)*
3. *The role of the community pharmacy in guiding the developments in an environmentally positive direction: Helena Latvala (Pharmacy owner, Finland)*
4. *A look into the crystal ball as regards environmental issues for pharmaceuticals, design, production, transportation, distribution and destruction. What may the future look like?: Charlotte Unger (Medical Products Agency, Sweden)*
5. *Panel debate*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 9
Good	9 / 9
Too long	0 / 9
Blank (no answer)	0 / 9

Overall quality of the session:

Poor	0 / 9
Fair	1 / 9
Good	7 / 9
Excellent	1 / 9
Blank (no answer)	0 / 9

Learning objectives met?

Strongly Disagree	0
Disagree	0
Agree	14
Strongly Agree	20

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
Moving production to India - the Indian perspective: Uday R. Parikh (Market Trends Pvt. Ltd., India)	3,33	3,4	3,4	3,4	5
Environmental regulation of pharmaceutical production in India, with special emphasis on international collaboration: M.K. Unnikrishnan (Manipal College of Pharmaceutical Sciences, India)	3,6	3,75	3,75	4	5
The role of the community pharmacy in guiding the developments in an environmentally positive direction: Helena Latvala (Pharmacy owner, Finland)	3	4	3	4	1

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
A look into the crystal ball as regards environmental issues for pharmaceuticals, design, production, transportation, distribution and destruction. What may the future look like?: Charlotte Unger (Medical Products Agency, Sweden)	4	4	4	4	1
Average for all the evaluations of the session	3,45	3,58	3,53	3,58	

#### **Comments provided by the attendants**

First of all congratulations on attempting and addressing FIP in India. If possible please send the soft copies to all participants

# Session: J13 - Developing young academics through networking and mentoring

From Thursday 08/09/2011, 09:00 until Thursday 08/09/2011, 12:00

Room: Hall 2 (ground floor)

Session organised by: Academic Pharmacy Section; Young Pharmacists' Group; FIP Pharmacy Education Taskforce

24 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 35

Attendance at the end of the session: 15

**Average attendance: 25**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. Describe the types collaboration required to develop a good academic career
2. Describe how to develop and maintain a network of academic colleagues
3. Describe the benefits of development of a mentoring relationship

### Programme of the session

Chairs: Claire Anderson (University of Nottingham, United Kingdom) and Ryan A. Forrey (James Cancer Hospital at The Ohio State University, United States)

1. *What do young academics need at the beginning of their career? Does mentoring help?: Juha Mönkäre (University of Kuopio, Finland)*
2. *What do young academics need at the beginning of their career? Does mentoring help?: Katja Hakkarainen (University of Helsinki, Finland)*
3. *What do young academics need at the beginning of their career? Does mentoring help?: Bruno Sarmento (Portugal)*
4. *How can academics develop supportive networks?: Ralph Altieri (University of Colorado Hospital, United States)*
5. *How can academics develop supportive networks?: Jennifer Archer (Jennifer Archer Consulting Ltd, United Kingdom)*
6. *How can academics develop supportive networks?: T.V. Narayana (Indian Pharmaceutical Association, India)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 24
Good	24 / 24
Too long	0 / 24
Blank (no answer)	0 / 24

Overall quality of the session:

Poor	0 / 24
Fair	0 / 24
Good	17 / 24
Excellent	7 / 24
Blank (no answer)	0 / 24

Learning objectives met?

Strongly Disagree	10
Disagree	1
Agree	25
Strongly Agree	62

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
What do young academics need at the beginning of their career? Does mentoring help?: Juha Mönkäre (University of Kuopio, Finland)	3,42	3,37	3,21	3,42	19
What do young academics need at the beginning of their career? Does mentoring help?: Katja Hakkarainen (University of Helsinki, Finland)	3,68	3,58	3,53	3,58	19
What do young academics need at the beginning of their career? Does mentoring help?: Bruno Sarmento (Portugal)	3,44	3,39	3,44	3,5	18
How can academics develop supportive networks?: Ralph Altieri (University of Colorado Hospital, United States)	3,58	3,42	3,37	3,42	19

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
How can academics develop supportive networks?: Jennifer Archer (Jennifer Archer Consulting Ltd, United Kingdom)	3,58	3,5	3,6	3,7	10
How can academics develop supportive networks?: T.V. Narayana (Indian Pharmaceutical Association, India)	3,08	3,15	2,92	2,92	13
Average for all the evaluations of the session	3,48	3,41	3,35	3,43	

**Comments provided by the attendants**

- More interactive sessions like this
- List of mentors on different areas
- Interesting

# Session: J14 - Pharmacovigilance: Ensuring serious medication safety concerns are recognised, addressed, reported and monitored

From Thursday 08/09/2011, 14:00 until Thursday 02/09/2010, 17:00

Room: Hall 2 (ground floor)

Session organised by: Hospital Pharmacy Section; Pharmacy Information Section

26 session evaluation forms collected

## Attendance data

Attendance at the beginning of the session: 95

Attendance at the end of the session: 86

**Average attendance: 90**

## Programme of the session

### Learning objectives of the session

The learning objectives of this session were:

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

1. List current trends, barriers and best practices in ADE reporting
2. Describe measures used when ADE reporting is low (use of trigger tools, medication use evaluations and other quality assessments)
3. Investigate the accuracy of Black Box Warning information provided in drug information references
4. Explain the structure, function, goals, achievements and future directions for the WHO programme for International Drug Monitoring

### Programme of the session

Chairs: Robert Moss (Central Hospital Pharmacy of The Hague, Netherlands) and Alexander Doodoo (Centre for Tropical Clinical Pharmacology and Therapeutics, Ghana)

1. *What is the evidence? Current trends, barriers and best practices for adverse drug event reporting: Kishore Gnana Sam (Manipal College of Pharmaceutical Sciences, India)*
2. *Effects of regulatory warnings on safe use of medicines: Jude Nwokike (Management Sciences for Health - MSH, United States)*
3. *ARV Adherence counseling and the Emergency Room: Useful but unexploited sources of drug safety data: Stephen Corquaye (Korle-Bu Teaching Hospital, Ghana)*
4. *Let's talk about box warnings: Priya Bahri (European Medicines Agency, United Kingdom)*
5. *WHO programme for international drug monitoring: goals, function, achievements and the future: Sten Olsson (Uppsala Monitoring Centre, Sweden)*

## Evaluation

### Overall evaluation

The length of the session:

Too short	0 / 26
Good	23 / 26
Too long	0 / 26
Blank (no answer)	3 / 26

Overall quality of the session:

Poor	0 / 26
Fair	1 / 26
Good	14 / 26
Excellent	9 / 26
Blank (no answer)	2 / 26

Learning objectives met?

Strongly Disagree	0
Disagree	2
Agree	32
Strongly Agree	68

*Cumulative data for all the learning objectives of the sessions*

### Evaluation of the speakers

1= Poor 2=Fair 3=Good 4=Excellent

	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
What is the evidence? Current trends, barriers and best practices for adverse drug event reporting: Kishore Gnana Sam (Manipal College of Pharmaceutical Sciences, India)	3,36	3,32	3,32	3,6	25
Effects of regulatory warnings on safe use of medicines: Jude Nwokike (Management Sciences for Health - MSH, United States)	3,6	3,5	3,46	3,73	26



1= Poor 2=Fair 3=Good 4=Excellent	Oral skills	Quality of the slides	Content	Topic relevance	Number of eval.
ARV Adherence counseling and the Emergency Room: Useful but unexploited sources of drug safety data: Stephen Corquaye (Korle-Bu Teaching Hospital, Ghana)	3,45	3,41	3,55	3,57	21
Let's talk about box warnings: Priya Bahri (European Medicines Agency, United Kingdom)	3,65	3,39	3,61	3,83	23
WHO programme for international drug monitoring: goals, function, achievements and the future: Sten Olsson (Uppsala Monitoring Centre, Sweden)	3,8	3,65	3,7	3,85	20
Average for all the evaluations of the session	3,56	3,45	3,52	3,71	

#### **Comments provided by the attendants**

- The introduction of the warning box warning is an innovative idea towards patient safety and should be extended to develop [...]
- Not all objectives are met as described but the content was good / relevant
- Session 1 needed to be based upon update and current information which in fact was not. Otherwise most of sessions excellent with a lot of information
- Presentation WHO ADR should be more pictorial as people need to see the black box
- Get resource persons who have experience in field
- Would not be a bad idea to repeat this next year, as a follow-up
- Great session