



# news

about  
our  
section

International  
Pharmaceutical  
Federation

**FIP/Hospital Pharmacy Section**

## newsletter 52

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## End-of-Year Reflection

Every time of year has its professional activities. At this time of year our Hospital Pharmacy Section (HPS) is focusing on the progress of the work we set out to do, addressing new and emergent needs, honoring our accomplishments, and setting new goals. I will address some of these and you will find additional information in this newsletter.

As an emerging need please see an advisory document, **“Providing pharmaceutical care to migrant populations”**. Produced by an FIP emergency task force set up last month, it identifies resources to help pharmacists, particularly those affected by the current migrant crisis in Europe. Here is the link: <https://www.fip.org/emergencies>.

FIP has a working group (WG) on the **pharmacy workforce** that Rob Moss, our HPS representative, has forwarded. Please take the survey and forward it to as many colleagues as you can: <https://www.surveymonkey.com/r/FIPPSWSurvey2015>. Though the deadline was 13 Dec 2015, please circulate and get your response in as soon as you can.

It will soon be a new budget year and the Hospital Pharmacy Section budget announced by the HPS treasurer, James Stevenson, is funding up to \$3000 to research specific issues within the revised Basel Statements implementation. An article in this newsletter provides more detail on how you can send in a proposal to **apply for those funds**.

We are delighted to congratulate our hospital pharmacy colleague from Leipzig, Germany, **Roberto Frontini**, who received the ASHP Donald E. Francke Medal at the recent Midyear Clinical Meeting of the American Society of Health System Pharmacists in New Orleans. He was honored for contributions to international hospital pharmacy practice. Please see pictures in this newsletter.

Finally, many cultures celebrate holidays at this time of year that have themes of thanksgiving, giving to others, reflection, renewal, and rededication to a productive, meaningful life. **I personally wish you all wonderful times with your family, friends and time for solitude as you energize your leadership for the New Year.** Thank you to all HPS officers and members for contributions throughout the year to make our section so useful and vibrant.

Marianne Ivey  
President; Hospital Pharmacy Section



## Revision of the FIP Basel Statements on the Future of Hospital Pharmacy: From Basel to Bangkok

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### Purpose

The International Pharmaceutical Federation (FIP) Basel Statements were released in 2008 and provide a global vision for hospital pharmacy practice.

This poster provides a summary of processes used to revise the Basel Statements in 2014.

### Methods

#### Phase 1 – Global Online Survey



A survey was sent to hospital pharmacy stakeholders and FIP members.

Revisions to the Statements were made by the FIP hospital pharmacy section executive based on these results.

#### Phase 2 – Online Forum Review



Figure 1. Online forum

Initial revisions of the Basel statements were then made available to the international hospital pharmacy community to review online.

#### Phase 3 – World Café Workshop



A world café workshop was held at the 74<sup>th</sup> FIP World Congress in Bangkok, Thailand, to review the revised Statements.

### Results



Figure 2. Infographic of the revised Basel Statements

#### Disclosures:

Authors of this presentation have the following to disclose concerning possible financial or personal relationships with commercial entities that may have a direct or indirect interest in the subject matter of this presentation.

Jonathan Penn, Rebekah Moles, Jack Collins, Marianne Ivey, and Lee Vermeulen:  
Nothing to disclose.

#### Phase 1 – Global Online Survey

In total, 334 responses were received from 62 countries.

Of these, only 14 Statements were judged by more than 10% of respondents as needing revision or deletion.

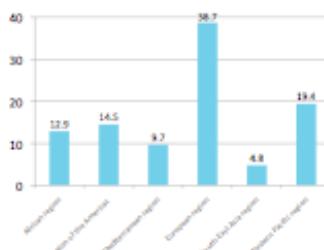


Figure 3. Percentage of respondents by World Health Organization region (WHO)

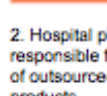
#### Phase 2 – Online Forum Review

Individuals from 28 countries, representing all six WHO regions, participated in the online forum review.

#### Additional concepts introduced:



1. Role in Health Technology Assessment.



2. Hospital pharmacy responsible for the integrity of outsourced sterile products.



3. Developing specialty practice.

#### Phase 3 – World Café Workshop

In total, 80 participants from 20 countries participated in the workshop.



Figure 4. Revised Basel Statements presented at the 74<sup>th</sup> FIP World Congress in Bangkok.

At the end of the workshop, the statements were voted upon, resulting in the final 65 revised Basel Statements.

### Conclusions

The revised 65 Basel Statements included new concepts as the roles of hospital pharmacists continue to expand. The revised Basel Statements are available online at:

<http://www.fip.org/basel-statements>

## FIP HPS Research Grant – Call for Proposals

The FIP HPS is proud of the research that our members are involved in and are pleased to announce the creation of the FIP HPS Research Grant to support such initiatives. In light of the release of the revised Basel Statements in 2015, the FIP HPS is opening up the FIP HPS Research Grant to FIP HPS members for research that focuses on the implementation of the revised Basel Statements. The grant will fund a project of up to €3000 (EUR).

The application form for this grant can be downloaded at: <https://uc.box.com/FIPHPSGrant>

Applications forms must be submitted to [LC.Vermeulen@hosp.wisc.edu](mailto:LC.Vermeulen@hosp.wisc.edu) by **28 February 2016**.

For additional information, please contact [jimsteve@med.umich.edu](mailto:jimsteve@med.umich.edu)

## **WHO publishes a smart phone and tablet application of the Pocketbook for Hospital Care for Children**

The WHO has released the android version of the “WHO e-Pocketbook for hospital care for children.” It can be downloaded for free from either the Apple or Google play store using the following links:

1)Android phones:

<https://play.google.com/store/apps/details?id=au.org.rch.hospitalCareForChildren>

2)iTunes, iPhone and iPads:

<http://appshopper.com/medical/who-e-pocketbook-of-hospital-care-for- children>

This is the electronic version of the widely used pocket book of Hospital Care for Children (Blue Pocketbook). It is designed for doctors, nurses, and other health workers responsible for the care of children. The guidelines focus on the management of major causes of childhood mortality, including:

- Neonatal illness including low birth weight, prematurity, sepsis, perinatal asphyxia, congenital anomalies
- Pneumonia and other breathing problems, including bronchiolitis, asthma and tuberculosis
- Diarrhoea, acute and chronic
- Fever, including malaria, meningitis, septicaemia and rheumatic fever
- Severe acute malnutrition
- HIV/AIDS
- Surgical problems, including trauma and burns

The app includes guidance on the stages of management for every child: triage and emergency treatment, history and examination, laboratory investigations, supportive care and monitoring, and discharge planning and follow-up. With this WHO e-Pocketbook of Hospital Care for Children app, all guidelines can be viewed offline and will be updated regularly.

This app has been developed by the World Health Organisation, The Royal Children’s Hospital Melbourne, the University of Melbourne and Murdoch Children’s Research Institute.

## Translation of the Basel Statements in China

Prof. Chao Zhang, Peking University Third Hospital, and Prof. Zhu Zhu

The Basel Statements on the Future of Hospital Pharmacy has been followed worldwide since the first version was published in 2008. Its Chinese version was soon pasted on the Chinese Pharmaceutical Association (CPA) website ([www.cpa.org.cn](http://www.cpa.org.cn)) and published in the Chinese Hospital Pharmacy Journal in 2009 (Fig. 1),

中国医院药学杂志 2009 年第 29 卷第 6 期 Chin Hosp Pharm J, 2009 Mar, Vol 29, No. 06

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### 全球医院药学大会共识

2008 年 8 月 30 日 - 31 日,在瑞士巴塞尔举行的全球医院药学大会(Global Conference on the Future of Hospital Pharmacy)是国际药学联合会 FIP 第 68 届年会的会前会,也是全球医院药学的第一次大会。共有 98 个国家的代表参加。

会前在国际药联药学实践专业委员会 BPP 基金资助下,利用一年时间进行了全球医院药学现状的调研,有 85 个国家参与(44%是联合国成员国,代表全球人口的 83%,覆盖了 WHO 的各个区域),为会议讨论形成共识提供了详细的信息和证据。

会上大家分 6 个专题组热烈讨论了多项共识,并经各国家和地区的官方代表对共识进行投票表决,获得全球多数一致通过。会后按反馈意见修订并再度通过 E-mail 表决,于近日发布了最终版的共识共计 75 条,涵盖了医院药学实践基本框架,并具体到药品的采购、制备、处方、配发、监测和管理、以及药师培训等方面,为医院药师未来该做什么、怎么做有了明确指南。特将共识具体介绍如下:

#### 总的共识(16 条)

1 医院药师的共同目标是通过合理、安全、有效、适当和经济的用药优化病人的治疗结果。

10 所有的处方在调配、执行前都应经过医院药师的审核、解释和确认。

11 医院药师应监测病人的用药(每天或当给药方案有变化时)以确保病人用药安全,适当用药,治疗结果优化。当资源有限不能支持药师监测全部病人用药时,可选择一些进行。

12 应允许医院药师登陆和查阅病人的病历。

13 医院药师应提供病人用药教育,确保病人适当用药。

14 医院药师应提供对护士、医生和其他医院工作人员的人职教育和继续教育,就用药和优良实践提供最佳建议。

15 本科药学生课程应包含医院药学相关内容,研究生培训项目和医院药学专科化培训也应建立起来。

16 医院药师应主动参与研究,用新的方法和系统来改进用药。

#### 主题 1 采购(9 条)

17 采购途径必须透明、专业、符合道德,以促进其公正性,并确保对相关控制和法人的责任。

18 必须遵循安全采购的原则。

This statement has become one of the most important documents to guide the development of hospital pharmacy practice in China. The CPA, the highest formal pharmacy organization in China, has put much effort into publicizing and disseminating it to the whole hospital pharmacy profession. Key components of the Basel Statements were disseminated in a variety of settings, including summit conferences, workshops, seminars and experiences from different hospitals. Nowadays, the core concepts of the Basel Statements have been firmly planted and accepted by hospital pharmacy in China.

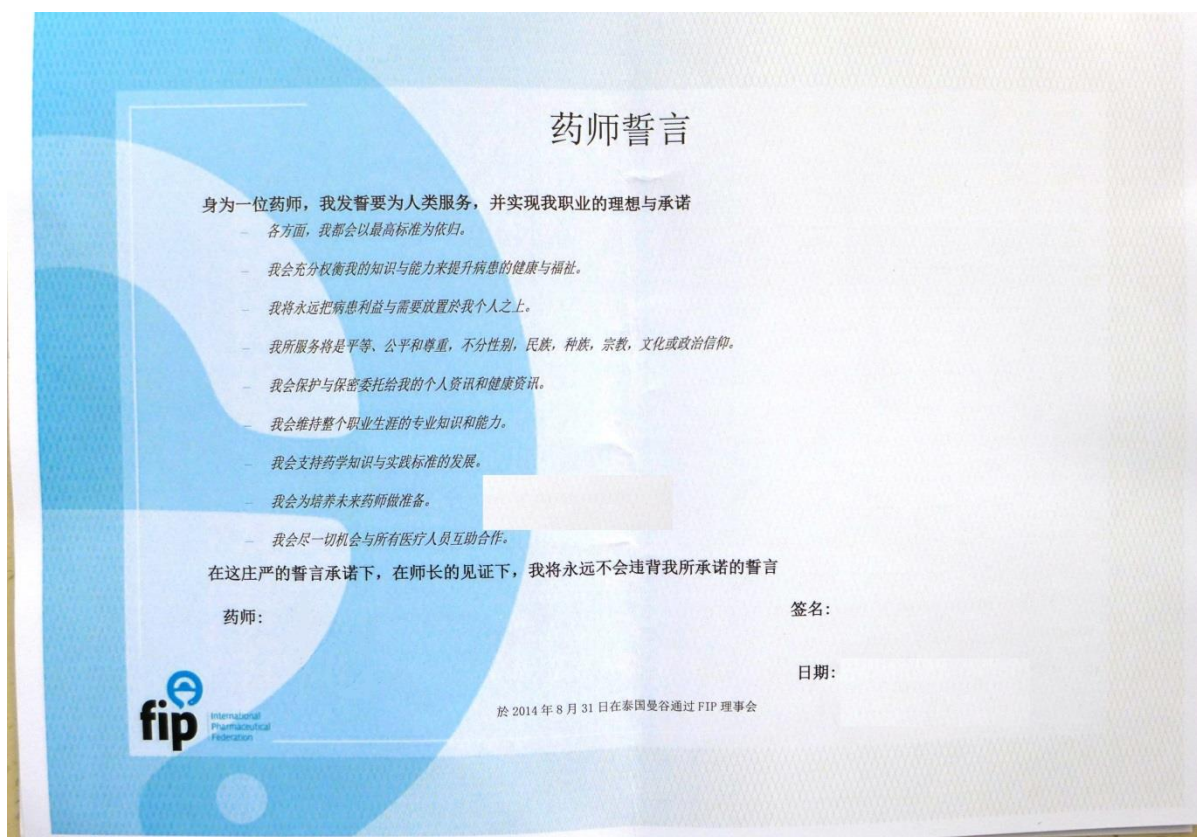
On 10<sup>th</sup> September 2015, FIP released the revised version of Basel Statement on the Future of Hospital Pharmacy in order to align with contemporary practices and encourage the development of hospital pharmacy practice around the world. CPA acted promptly as soon as the revised version was released and organized experts in hospital pharmacy to build the



translation group responsible for the formal Chinese version. In order to translate the revised version accurately, precisely and smoothly, the translation group worked carefully and strictly. The final Chinese translation was finalized within 10 days and after more than 20 revisions. Each sentence, even each word, was carefully chosen and deliberated by the translation group. The Chinese translation was the first and fastest translated version in FIP, and is made available online at the CPA website ([www.cpahp.org.cn](http://www.cpahp.org.cn)) (Fig. 2). The translation will be included in the ‘Standardized Management on Hospital Pharmacy in China’ book, which will be published by the end of this year. The updated statements will be important for nearly 400 000 hospital pharmacists in China.



Also, the Chinese version of the FIP Oath of Pharmacists will be made available on the CPA website (Fig. 3).



These related papers will be published on the Journal of Chinese Pharmaceutics soon. This will ensure the revised Basel Statements are available to all pharmacists and related healthcare staff, to promote hospital pharmacy practice and implement medication safety in China.

Additional translated versions of the revised Basel Statements are currently being compiled in Portuguese, Russian, Spanish, French and Mongolian. If you are interested in translating the revised Basel Statements in another language, please contact Robert Moss ([robert.j.moss@gmail.com](mailto:robert.j.moss@gmail.com)).

## 2015 13<sup>th</sup> Taiwan Society of Health-System Pharmacists Annual Congress

*Meng-San Lee*

The 13<sup>th</sup> Taiwan Society of Health-System Pharmacists (TSHP) Annual Congress and its 3<sup>rd</sup> executive board meeting took place on 8<sup>th</sup> November at Kaohsiung Chang Gung Memorial Hospital. Despite the first day of winter by lunar year, pharmacists around Taiwan all gathered and heated up the south by discussing the congress theme "Medication safety, quality and efficacy." The first keynote speaker was Director Jiang Yu Mei, Food and Drug Administration Taiwan Ministry of Health and Welfare, explaining the government's efforts regarding ensuring the quality of the medicines, improvements on regulatory systems and other projects, including risk control, risk communication and drug relief system. Hoping that through inter-collaboration from industry, government and academia can strengthen Taiwan health system. The second half, Dr. Hung-wei Chih told us more about biosimilar products' in its quality, safety and efficacy.

Various Awards were given during lunch and was followed by five parallel sessions focusing on: Medicine News, Pharmacy Ethics and Professionalism, Clinical Pharmacy Showcase, Oral presentations and Clinical research and publishing.

Among all, clinical research and presentations skills are a burgeoning topic. How to strike a balance between busy working hours and still carry out the abstracts is very demanding in Taiwan. But to transform these experiences into research is the key of all matters. Panelists shared their own stories and hope that more pharmacists will be willing to invest their time and efforts in this field.

### Clinical Pharmacy Showcase

China Health Promotion Foundation Secretary General Mr. 于国超, spoke on "Continual Education," explaining that China has more than 400 universities that have 4 to 6 years of pharmacy department systems. As such, their overall quality varies. Facilities like universities are responsible for promoting the profession and ensuring the competence of their students. Geographically speaking, how to make this program effective, and enroll broader pharmacists to take part in and keep them interested are very challenging. He proposed to utilize online courses, periodical regional forums and professional development competitions to enhance their capacity. On the other hand, Pharmaceutical tools net (<http://www.yxgi.net>) is, like the combination of Micromedex and Wikipedia, qualified pharmacists co-edit the information and it is divided in to two teams, one focusing on life threatening cases, one solving the public rumors/questions. It surely is helping China to establish a "think tank" and is worth learning from, but in Taiwan, intellectual property rights are far more stricter than China. Secondly, online courses are very common in Taiwan but are still not as effective as on-site/face-to-face learning. Thirdly, competitions such as students' Patient Counseling Event (PCE, an IPSF project [ipsf.org](http://ipsf.org)) and Pharmacists' Evidence Based Medicine (EBM) Competition are all very successful but the gap between competition and real clinical works still exists and needs to be



improved.

The following panelists are from Taiwan, first is Director Yang Bi-ying, Taipei City Hospital Chung Hsiao Branch, talked about the role of a pharmacist in home visits. Cases were mainly of patients who had been discharged from hospital, unable to leave their houses, in a nursing home, enrolled in citizen service<sup>[1]</sup> or patients from diabetes clinics. Pharmacists take advantage of their ingenuity (mini reminding stickers, medication guide stamps, etc.) to aid people on self-care and self-medication; this is truly valuable for general hospital pharmacists' despite the fact that they are often short of manpower.

### Clinical Research and Publishing

Dr. Ye Ming-gong, the editor of TSHP Journal, opened this panel by explaining the current status and its direction. Their team is in the process of inviting more experts from different areas in order to have broader scope and speed up the review process. The next speaker, Mr. Richard Hill Davis, then taught us on how to write a for peer-reviewed journals and encouraged pharmacists to not be afraid of being rejected. Young pharmacist, nick-named Hua from Chi Mei Hospital, is an example of being able to balance heavy workload and research. Fresh eyes, time management and teamwork were crucial factors required for their success.

[1] Citizen service is a multisectoral project launched in April 2015. It aims to fully implement family medicine and integrate all government agencies, district chiefs by visiting patients' homes. Through home visits, this service hopes to foster optimal medical care where every citizen, particularly those in need, can have a designated doctor/healthcare provider to lean on.

## **Generic Equivalency and Biosimilarity**

*Shao C. Chiang*

On November 7th of 2016, Taiwan Pharmacy International Collaboration Center held its first conference in Kaohsiung, Taiwan titled: *Generic Equivalency and Biosimilarity*. The purpose of this meeting is to raise the alertness of pharmacists in taking their responsibility as a gatekeeper for patients in selecting appropriate generic and biosimilar products.

The conference lasted for 8 hours and covered eight topics in which the speakers were from different countries, including Australia, China, Germany, Taiwan, and the United States of America. The total number of participants was estimated around 150, who were mainly pharmacists working in hospital pharmacy, government agencies, and pharmaceutical companies.

Dr. Peter Pitts, the president of the Center for Medicine in the Public Interest and the former Associate Commissioner in the United States Food and Drug Administration (US FDA), spoke to the audience with the topic "the Urgency of Quality & Innovation", and mentioned that

innovation is necessary, but is slow, hard, and expensive. He mentioned that although new drugs are usually expensive, they really increase patients' life expectancy and have been conservatively estimated as bringing benefits worth more than US\$ 500 billion a year in United States. After the expiration of patents, generic substitutions came into the market and it is difficult to know whether the money saved on the initial drug will still be saved. There are three current major strategies in improving the control of drug quality in US FDA: 1) the establishment of Office of Pharmaceutical Quality to strengthen pharmaceutical quality on a global scale; 2) urgent role of 21st century pharmacovigilance; 3) outcome-based bioequivalence and biosimilarity.

During the conference, Dr. Churn-Shiouh Gau, Executive Director of Taiwan Center for Drug Evaluation, also presented on the development of biosimilars and the regulations according to different countries. She provided essential knowledge and criteria in comparing biosimilars. Finally, Dr. Antonio Pires from Janssen Medical Affairs used Remicade (infliximab) and its biosimilars as an example to illustrate the complexity of biosimilars in terms of clinical aspects.

## **New Initiatives for the Society of Hospital Pharmacists of Australia**

The Society of Hospital Pharmacists of Australia (SHPA) has recently announced three exciting new projects; the SHPA Residency Project, the Pharmacy Technician Role Re-design in Australian Hospitals Project and the SHPA National Research Collaborative Project. These projects have emanated from the first two annual SHPA Future Summits. The SHPA Future Summits bring together some of pharmacy's best thinkers and leaders to focus on the key challenges facing the pharmacy profession now and into the future. These new projects are part of SHPA's commitment to assisting pharmacists to meet these challenges, and to working to shape the pharmacy profession of the future.

### **Residency Project: Pharmacy Residencies by 2017**

SHPA is working to shape the early career experience of new pharmacists through the development and implementation of a National Residency Program. The SHPA Residency will be a structured, formalised, supported, accredited two-year generalist training program that hospitals across all states and territories in Australia will be able to participate in. Accredited sites providing residencies will have defined core clinical rotations and curriculum, and competencies will be mapped to existing competency frameworks. The Residency Project will also explore the potential for two-year specialist residencies after implementation of the generalist residency and also the option of a research fellowship program. The first intake of residents for the two-year generalist residency will be in 2017.

### **Technician Role Re-design Project**

SHPA is keen to further develop new and advanced practice roles that support provision of integrated care. It sees an immediate need to build capacity in the pharmacist workforce through developing and expanding the scope of practice of pharmacy support roles (pharmacy technicians and assistants). SHPA has now announced the commencement of the Pharmacy Technician / Assistant Role Re-design Within Australian Hospitals Project, which will define the current roles of pharmacy support staff around Australia, identify potential future roles of pharmacy support staff and, in consulting with key stakeholders, re-design the role of pharmacy support staff to meet an expanded scope of practice in line with international standards.

### **SHPA National Research Collaborative Project**

Research, and development of research capability, is a key priority for SHPA. Our aim is to drive high quality research that provides contemporary practice-based evidence to inform quality use of medicine strategies. The goal of the SHPA National Research Collaborative Project is to foster the development of research skills and knowledge within our membership, and to facilitate and coordinate research to drive translation of research focussed on medicine optimisation into practice. The SHPA National Research Collaborative Project will establish a research network, develop priority areas for research and support research in-practice under a research governance model.



Prof Michael Dooley; President of the Society of Hospital Pharmacists of Australia

## **Dr. Roberto Frontini receives the 2015 Francke Medal**

Established in 1971, the ASHP Donald E. Francke Medal honors pharmacists who have made significant international contributions to health-system pharmacy. This year's recipient is Dr. Roberto Frontini, Director of Pharmacy at the University Hospital of Leipzig in Leipzig, Germany and immediate past president of the European Association of Hospital Pharmacists (ESHP).

During his time as EAHP president, Dr. Frontini led efforts to promote patient safety and ensure the continuous improvement of pharmaceutical care and outcomes for hospitalized patients. He also oversaw EAHP's first European Summit on Hospital Pharmacy, which led to the development of the first professional standards for hospital pharmacy across Europe supported by patients, physicians, and nurses.

Dr. Frontini led EAHP projects related to pharmacy education, pharmaceutical pricing, and reimbursement, and he oversaw the publication of the EAHP Surveys of Hospital Pharmacy Practice across Europe.

A researcher in patient safety, Dr. Frontini lectures on pharmacoepidemiology and economics, and has served as a trainer for pharmaceutical technology at the Chamber of Pharmacy in Hanover, Germany.

Widely published, Dr. Frontini has lectured and written about topics important to the global healthcare community, including the use of multidisciplinary hospital teams, the importance of collaboration between academia and hospital pharmacy, and medication shortages across Europe.

"Dr. Frontini's work to advance medication safety, encourage interprofessional collaboration, and improve patient outcomes highlights how much pharmacists can do to advance healthcare in Europe and around the world," said ASHP President John Armitstead. "We are proud to present Dr. Frontini with the 2015 Francke Medal in recognition of his important achievements."

## Other highlights from the ASHP Midyear Meeting



Roberto Frontini (center) with previous Francke Medal recipient Bill Zellmer (right)



Ryan Forrey (left) moderated and Rob Moss (right) presented



Jonathan Penm (right) explaining the Basel Statements to a senior pharmacy student



John Hertig (left) receives congratulations from an attendee on John's International Pearls Presentation



The Hospital Pharmacy Section is very grateful to these sponsors for their support of Section activities:

# ***Baxter***

The logo for Omnicell, featuring a green swoosh above the word "Omnnicell" in a bold, sans-serif font, with a registered trademark symbol (®) to the upper right.The logo for AmerisourceBergen, featuring a blue stylized wave icon above the company name "AmerisourceBergen" in a bold, sans-serif font, with a registered trademark symbol (®) to the upper right.The logo for McKesson, featuring the word "McKESSON" in a bold, blue, sans-serif font, with a small orange square above the "K". Below the name is the tagline "Empowering Healthcare" in a smaller, italicized, sans-serif font.

## **Organizational Sponsors of the Hospital Pharmacy Section**

In addition to corporate sponsors, many national and regional pharmacy organizations have provided financial and in-kind support of the activities of the FIP Hospital Pharmacy Section. We gratefully recognize these contributors:

- The French Ordre des Pharmaciens
- The Japanese Society of Hospital Pharmacists

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