



Daily dose

Information that makes you feel good!



Welcome to the EAHP Daily Dose! Hot off the press and available on Wednesday and Thursday at the Congress, this newspaper will come in handy to plan your day or brush up on some important issues. From a mixture of preview articles of sessions and seminars, to interviews with some of the key people behind the Congress and ‘at a glance’ overviews of the day’s schedule: the EAHP Daily Dose is a must-read for all attendees!

Welcome to our 27th Congress!



photo: Mariona Ribo

Dear Colleagues from Europe and beyond,

It is with great pleasure and with humbling honour that I welcome you all in Lisbon, for the 27th EAHP Congress.

The whole EAHP team, the Scientific Committee and the Board of Directors are delighted to offer you this exciting event for which all our efforts have been utilised to make this an extraordinary and festive opportunity for all participants.

These last few years have brought upon a significant era for the European hospital pharmacy profession, during which our commitment to patient care and medication safety, as well as our dedication towards evidence-based medicine, was put to a major test. I believe that our profession steadily stood up to the challenge and prevailed. Moreover, a multitude of novel roles for hospital pharmacists has been enabled and, therefore, provided further recognition and expanded visibility for all the services our colleagues offer and fulfil.

Our moral imperative dictates our devotion toward helping those in need. It is our duty to provide the best possible care for our patients – spanning from the initial steps of drug design to our ultimate goal: treatment success. A success that is not solely defined by medical parameters, but also through the patient’s perceptions and engagement to play an active role in their own journey towards recovery.

The scientific programme will encompass this wide horizon and provide an appreciation of these different and distinct, but also overlapping, sub-specialities. It will also be our pleasure to synthesize a comprehensive insight into the employment of evidence-based decisions and evidence-informed policies within reasonable timeframes, especially during times when available resources are limited and often uncertain. I am sure that the Congress programme will effectively enable us all to grasp this rather complex landscape and to take home with us some valid answers.

Furthermore, your time with us in Lisbon is also going to be an ideal opportunity to meet your fellow colleagues, exchange experiences and knowledge, and find new professional connections and friends.

Welcome to the 27th EAHP Congress! Welcome to Lisbon!

Dr. Andr s S le – EAHP President

The power to reduce the chaos of RSV season

Beyfortus[®] is a long-acting antibody designed for all infants,* offering direct protection against RSV lower respiratory tract disease throughout their first RSV season.**

With a single dose, Beyfortus[®] reduces the risk of medically attended RSV lower respiratory tract infections, including hospitalizations, in infants.†

Discover more on **Booth 29** or by attending our **Symposium**

Thursday March 23rd
3pm – 4:30pm
Auditorium II

* Beyfortus[®] is indicated for the prevention of RSV lower respiratory tract disease in neonates and infants during their first RSV season. Beyfortus[®] is contraindicated in infants with hypersensitivity to the active substances or to any of the excipients.†

** Beyfortus[®] affords at least 5 months of protection against RSV lower respiratory tract disease.†
RSV, respiratory syncytial virus.
†. Beyfortus (nirsevimab), Summary of Product Characteristics. AstraZeneca, 2022

▼ This medicinal product is subject to additional monitoring. This will allow quick identification of new safety information. Healthcare professionals are asked to report any suspected adverse reactions.

Beyfortus[®] (nirsevimab) – Abbreviated Prescribing Information

Presentation: Beyfortus 50 mg and 100 mg solution for injection in pre-filled syringe containing 50 mg of nirsevimab in 0.5 mL (100 mg/mL) and 100 mg of nirsevimab in 1 mL (100 mg/mL) respectively.

Indication: Prevention of Respiratory Syncytial Virus (RSV) lower respiratory tract disease in neonates and infants during their first RSV season. Beyfortus should be used in accordance with official recommendations. **Dosage and administration:** The recommended dose is a single dose of 50 mg for infants with body weight <5 kg or 100 mg for infants ≥5 kg, administered intramuscularly. Beyfortus should be administered prior to commencement of the RSV season, or from birth for infants born during the RSV season. For infants undergoing cardiac surgery with cardiopulmonary bypass, an additional dose may be administered as soon as the infant is stable after surgery to ensure adequate nirsevimab serum levels. If within 90 days after receiving the first dose of Beyfortus, the additional dose should be 50 mg or 100 mg according to body weight. If more than 90 days have elapsed since the first dose, the additional dose could be a single dose of 50 mg regardless of body weight, to cover the remainder of the RSV season. There are no safety and efficacy data available on repeat dosing. There are limited data available in extremely preterm infants (Gestational Age [GA] <29 weeks) less than 8 weeks of age. No clinical data available in infants with a postmenstrual age (gestational age at birth plus chronological age) of less than 32 weeks. Safety and efficacy in children 2-18 years not established. Beyfortus is for intramuscular injection only, preferably in the anterolateral aspect of the thigh. Gluteal muscle should not be used routinely due to risk of sciatic nerve damage. **Contraindication:** Hypersensitivity to the active substance or to any of

the excipients. **Warnings and precautions:** To improve traceability of biological medicinal products, record the name and batch number. Serious hypersensitivity reactions, including anaphylaxis, have been observed with monoclonal antibodies. If signs and symptoms of a clinically significant hypersensitivity reaction or anaphylaxis occur, immediately discontinue administration and initiate appropriate medicinal products and/or supportive therapy. As with any other intramuscular injections, nirsevimab should be given with caution to infants with thrombocytopenia or any coagulation disorder. **Interactions:** Nirsevimab can be given concomitantly with childhood vaccines. Nirsevimab should not be mixed with any vaccine in the same syringe or vial. When administered concomitantly with injectable vaccines, they should be given with separate syringes and at different injection sites. **Fertility, Pregnancy and Lactation:** Not applicable. **Undesirable effects:** Adverse reactions reported in clinical trials are uncommon: rash, injection site reaction, pyrexia. As with all therapeutic proteins, there is potential for immunogenicity. For a complete list of undesirable effects please refer to the Summary of Product Characteristics. Health care professionals are asked to report any suspected adverse reactions via their national reporting system. **Marketing Authorisation Holder:** AstraZeneca AB, SE-151 85 S dert lje, Sweden. **Legal Classification of the medicinal product regarding medical prescription:** Prescription Only Medicine. **Date of last review:** January 2023.

Abbreviated Prescribing Information based on the EU SmPC as of October 2022. **Before prescribing the product always refer to your full local prescribing information as this information may vary from country to country.**

Informa  o do Produto em Portugu s dispon vel em:
chrome-extension://efaidnbmnnnibpcajpcglclefndmkaj/https://www.ema.europa.eu/en/documents/product-information/beyfortus-epar-product-information_pt.pdf

SOCIAL MEDIA

Engage in the social media debate using the hashtag #EAHP2023



Wednesday, 22 March		
Time	Meetings/Events	Room
07.00 - 17.00	Registration opens (individuals, groups and exhibitors)	Main Entrance Foyer
08.30 - 10.15	Opening Ceremony & Keynote 1 – Personalised medicine - opportunities for hospital pharmacists in clinical practice - <i>R. Onatade</i> ACPE UAN: 0475-0000-23-001-L04-P - A knowledge-based activity	Auditorium I
10.15	Exhibition opens	Pavilion I & II
10.15 - 11.45	Coffee Break	Pavilion I & II
10.30 - 12.00	Poster Award Nominees – Oral presentations	Auditorium VI
	Section 3 – Production and Compounding	
	10.35 – Impact of agitation on pembrolizumab (keytruda®) safety and efficacy: aggregation and functionality - <i>A. Torrente-López</i>	
	Section 4 – Clinical Pharmacy Services	
	10.44 – Using machine learning to predict pharmaceutical interventions in a hospital setting - <i>E. Johns</i>	
	10.53 – Bedside check of medication appropriateness (bed-cma) as a risk-based tool for bedside clinical pharmacy services: a proof-of-concept study at the trauma surgery ward - <i>G. van de Sijpe</i>	
	11.02 – Evaluating the potential clinical and economic impact of chemotherapy prescribing by pharmacists at a university teaching hospital - <i>S. Nally</i>	
	11.11 – Consensus validation of a screening tool for cardiovascular pharmacotherapy in geriatric patients: the rasp_cardio list - <i>J. Hias</i>	
	11.20 – Sepsis code: improving outcomes for patients with sepsis - <i>M.E. Martinez Nuñez</i>	
	11.29 – Agamenon-seom model for the prediction of survival in patients with her2-positive advanced esophagogastric adenocarcinoma receiving trastuzumab-based first-line treatment - <i>L. Macía-Rivas</i>	
	Section 5 – Patient Safety and Quality Assurance	
	11.38 – Using a text-mining approach to identify the context variables language barrier, living alone, cognitive frailty and non-adherence from electronic health records (ehrs) - <i>F. Karapinar</i>	
10.30 - 12.00	Good Practice Initiatives – Oral presentations	Auditorium VII
	Section 2 – Selection, Procurement and Distribution	
	10.35 – Hospital Pharmacists pioneering in installation of an Automated Dispensing System in General Public Hospital, Chania, Greece - <i>M. Petrongonas</i>	
	10.42 – First Danish pharmaceutical tender with environmental criteria - <i>L. M. Deleuran</i>	
	Section 3 - Production and Compounding	
	10.49 – Preparation of Monoclonal Antibodies on the Pharmacy Benchtop - Risk Assessment and Practical Considerations - <i>A. Morris</i>	
	Section 4 – Clinical Pharmacy Services	
	10.56 – Pharmacist prescriber, embedded within medical team, improves patient care by timely and accurate discharge medication prescribing - <i>F. Watson</i>	
	11.03 – Implementation of a multidisciplinary personalized medicine unit for pharmacogenetic testing - <i>J. Fernández-Fradejas</i>	
	11.10 – Optimising anticoagulation counselling using video media - <i>S. Al-Rawi</i>	

	Section 5 – Patient Safety and Quality Assurance	
	11.17 – Software tool development for reconstitution and administration of parenteral antibiotics in hospitals - An international project - <i>Z. Četković</i>	
	11.24 – Assessment of the safety of advanced therapy medicinal products (ATMPs) process: A tutorial videos creation module - <i>C. Jadoul</i>	
	11.31 – Opioids room of horrors - An interactive learning to improve safety of drug administration - <i>S. Hannou</i>	
	Section 6 – Education and Research	
	11.38 – Development of a professional competency framework for clinical pharmacy in Sweden - <i>M. Balgard</i>	
	11.45 – A 3-Year Transformation of a Belgian Clinical Trial Pharmacy Team - <i>M. Coenen</i>	
10.30 - 12.00	Special Interest Group (SIG) Dissemination	Auditorium III & IV
10.30 - 11.15	Investigation of Medication Errors in Intensive Care Units - <i>B. Franklin & S. McCarthy</i>	
11.15 - 12.00	The EAHP roadmap toward eliminating avoidable harm - <i>A. Mulac & S. Guntschnig</i>	
13.30 - 14.45	Lunch	Pavilion I & II
14.45 - 16.15	Seminars	
	Seminar IG1 – Hospital support for pharmacy research activities - <i>I. Spriet & D. Mengato</i> ACPE UAN: 0475-0000-23-002-L04-P - A knowledge-based activity	Room 5A+B
	Seminar SPD1 – Medicines procurement - don't forget patients' needs! - <i>D. Glinborg & E. Caccese</i> ACPE UAN: 0475-0000-23-003-L04-P - A knowledge-based activity	Auditorium VI
	Seminar PC2 – Quality assurance of pharmacy preparations - a key for treatment success <i>H. Baião & F. Lagarce</i> ACPE UAN: 0475-0000-23-004-L04-P - A knowledge-based activity	Auditorium VII
	Pharmacotherapy Session – Safe medication use in patients with cirrhosis <i>M. Aerts & S. Borgsteede*</i> ACPE UAN: 0475-0000-23-005-L05-P - A knowledge-based activity	Auditorium VIII
14.45 - 16.15	Industry Sponsored Satellite	
	Micromedex (MERATIVE) – An intercollaborative practice model approach: supporting the patient experience in medicines management ACPE Non-Accredited Activity	Auditorium II
	Equashield – Unprecedented Technology for Handling Hazardous Drug: The Future of Automated Compounding - Cutting edge technology: Automated compounding at the next level (14.45 - 15.30) & - Revolutionizing hazardous drug compounding with leading technology and uncompromised safety (15.30 - 16.15) ACPE Non-Accredited Activity	Auditorium III & IV
14.45 - 16.15	Young Professional Session	
	Young Professional Session – Learning from the career journeys of others <i>T. Hoppe-Tichy*, S. Deuster*, V. Silvari, K. Chrapková & U. Gillespie</i> ACPE Non-Accredited Activity	Room 5C
16.45 - 17.15	Coffee Break	Pavilion I & II
17.15 - 18.45	Seminars	
	Seminar IG2 – The road to e-hospital pharmacy - are we there yet? <i>S. Amann & J.M. Martínez-Sesmero</i> ACPE UAN: 0475-0000-23-006-L04-P - A knowledge-based activity	Room 5A+B

	Seminar SPD3 – Green Hospital - The Role of Hospital Pharmacists <i>A. Harjans & J. Baehr</i> ACPE UAN: 0475-0000-23-007-L04-P - A knowledge-based activity	Auditorium VI
	Seminar PC1 – Advanced therapy medicinal products (ATMPs) - challenging opportunities for hospital pharmacy <i>A. Black* & C. Alonso-Martínez</i> ACPE UAN: 0475-0000-23-008-L04-P - A knowledge-based activity	Auditorium VII
	Seminar CPS1 – Pharmacogenetic testing to optimise therapy <i>M. Lampert & J.J. Swen</i> ACPE UAN: 0475-0000-23-009-L04-P - A knowledge-based activity	Auditorium VIII
	Workshop 2 – Patient reported outcome measures - what tools can be used? <i>T. Graabaek</i> ACPE UAN: 0475-0000-23-010-L04-P - An application-based activity	Room 5C
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	Workshop 2 – Patient reported outcome measures - what tools can be used? <i>T. Graabaek</i> ACPE UAN: 0475-0000-23-010-L04-P - An application-based activity	Room 5C
17.15 - 18.45	Synergy Satellite	
	Non-Biologic Complex Drugs (and nano medicines) (supported by an education grant from CSL Vifor) <i>J. De Vlieger, G. Stemer & M. Bañobre-López</i> ACPE UAN: 0475-0000-23-011-L04-P - A knowledge-based activity	Auditorium II
19.00 - 21.00	Get Together Reception	Pavilion I & II
19.30 - 21.00	Poster Walk – Join the Scientific Committee during their evaluation of the abstract posters selected for the Poster Walk	Gallery
20.00	Exhibition closes	Pavilion I & II

EAHP thanks the continued support of its Corporate Partner:



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27th EAHP CONGRESS

What to look out for at the congress



Welcome to the 27th Congress of the European Association of Hospital Pharmacists!

This year's 2023 Congress theme will talk about assessing the process involved from the patient's point of view and informing them of their condition every step of the way.

The programme for this congress, themed: "From drug design to treatment success – what really matters to patients?" offers a wide range of topics covering all aspects of communication, interaction and personalised approach of hospital pharmacists: from pharmacy research activities to a safer use of medication, from more challenging opportunities for hospital pharmacists

with a greener hospital, from facing innovation and changes in healthcare by using e-hospital pharmacy, to involving and listening to patient's voice. A Young professional session will also take place which will offer participants the opportunity to get worthwhile information, advice and guidance to a future and exciting career in Hospital Pharmacy.

You will be surrounded by colleagues that will bring you more knowledge and will give answers to all your questions.

Over the course of the next three days, we will host 3 Keynote speeches, 8 industry sponsored satellites sessions, seminars, interactive sessions, sorkshops, a young professionals session and a Synergy satellite session. Don't miss the Poster Walks, Abstract and Good Practice Initiatives' Poster Awards (whose Oral presentations will take place today at 10.30, with the awards handed out during the Closing Ceremony on Friday),

and various networking opportunities the EAHP Congress offers, such as the Get Together Reception that will take place from 19.00 to 21.00 in the exhibition areas.

Visit the EAHP booth #57 in the Exhibition area to get a full review and presentation of what's happening at EAHP!

You are also warmly invited to join us this evening at 19.00 in the exhibition areas for the Get Together Reception - a network opportunity you do not want to miss.

Enjoy your journey & welcome to our Lisbon Congress!

Jennie De Greef - EAHP Managing Director

KEYNOTE 1 | PREVIEW

Personalised medicine - opportunities for hospital pharmacists in clinical practice

In this lecture, Dr. Raliat Onatade will reflect with us on the inevitable evolution towards personalised medicine and the related opportunities for hospital pharmacist in clinical practice as well as the potential threats.

Raliat Onatade is Chief Pharmacist – Director of Medicines and Pharmacy at the NHS North East London where she's responsible for leading and advising on the strategic development of pharmacy services and medicines optimisation. She's also Chief Pharmacist for the North Thames Genomic Medicines Service Alliance and therefore an expert speaker on this topic.

Dr. Onatade obtained her diploma as a pharmacist from the University of Ife in Nigeria, a masters degree in clinical pharmacy from the London School of Pharmacy, followed by a masters in clinical risk management from University College London. In 2019 Raliat obtained the degree of Doctor in Health

from Middlesex University for her work in advancing clinical pharmacy services.

Personalised medicine is defined by the European Health Ministers as a medical model using characteristics from individuals' phenotypes and genotypes for tailoring the right therapeutic strategy for the right person at the right time and/or to determine the predisposition to disease and/or to deliver timely and targeted prevention.

New technologies are developing to determine the individual patient's genetic information, often referred to as "omics", which assist in identifying the risk of developing certain diseases as well as selection effective medication treatments and avoiding medication side effects. This omics information combined with the patient's age, organ function, comorbidities, existing medication treatment, diet and allergies provide the basis for selecting the best medication treatment

for the individual patient. This information should be combined with the patient's preference of medication treatment.

Hospital pharmacists, in collaboration with physicians and patients, are key players in decision making regarding the optimizing the medication treatment of patients, based on objective data. Personalised medicine has in recent years become a hot topic with new opportunities to individualise medication therapy, and therefore it is important for hospital pharmacists to understand and operate within this field.

In this lecture we will define the concept of personalised medicine, we will describe the role of hospital pharmacists in this domain and discuss their current and future tasks.

Prof. Dr. Thomas De Rijdt
EAHP Scientific Committee Chairman



EAHP NEWS

The European Council for Pharmacy Education Accreditation: a new horizon for continuing pharmacy education



The European Association of Hospital Pharmacists (EAHP) and The European Society of Clinical Pharmacy (ESCP) have collaborated to jointly set up The European Council for Pharmacy Education Accreditation (ECPhA).

ECPhA will establish a system for accrediting lifelong learning education in pharmacy in Europe and internationally. ECPhA's goal is to help improve the quality of continuing

ECPhA will closely work with national and international accreditation bodies and international healthcare associations in order to exchange and improve existing practices in the assessment of available European and international educational programmes. It's important to understand that ECPhA is an accreditation provider so the goal of ECPhA is to present an additional layer to the national accreditation systems and not be a substitute of it.

education in pharmacy practiced in healthcare settings across Europe via accrediting live and online lifelong learning events throughout collaborating with national healthcare professional associations and accrediting bodies. This will be achieved through applying high quality standards in the assessment of available educational programmes, which address the needs and current practice of pharmacists, pharmacy technicians and the pharmacy staff practicing in Europe.

Currently EAHP and most of the pharmacy organisations in Europe depend on the accreditation done by non-European bodies, whose standards might not always meet European practice requirements.

A European body, such as ECPhA, would ensure that accreditation of European continued education events is aligned with European practice. In addition, ECPhA could also facilitate the attendance of national education events by foreign pharmacists by ensuring the transferability of continued education points between countries. ECPhA's accreditation is also open to other countries from outside Europe.

Do you want to learn more about ECPhA? Contact the team at info@ecpha.eu or visit the EAHP Booth #57

Gonzalo Marzal Lopez - EAHP Project Portfolio Manager

PROJECT UPDATE

Developing a conceptual framework of patient prioritisation & definition of pharmaceutical acuity

Dr Penny Lewis's team from the University of Manchester approached EAHP back in 2021 to collaborate on developing a definition for pharmaceutical acuity. Given the importance of this topic and the absence of an existing definition of acuity from the pharmacy perspective, the EAHP team decided to provide the support, in particular in the set up and coordination of the consensus workshops.

This project lies within EAHP's aim to support its member countries to move towards the implementation of the European Statement of Hospital Pharmacy.

The project proposed by the University of Manchester relates directly to the European Statement of Hospital Pharmacy 1.3: "Health systems have limited resources, and these should be used responsibly to optimise outcomes for patients. Hospital pharmacists should develop, in collaboration with other stakeholders, criteria and measurements to enable the prioritisation of hospital pharmacy activities".

The project aiming to create a definition for pharmaceutical acuity was divided in three different phases: a screening of the existing assessment tools, a thorough and detailed literature review and the set-up of expert consensus workshops. In addition, a patient's group provided input on the final draft definition. The outcome of this project was a detailed report that can be found on the EAHP website.

The report defines pharmaceutical acuity as "an attribute of a patient, determined by an assessment of the likely requirement for pharmacy services, and used to direct and prioritise pharmacy workflow and workforce to ensure the right patient is seen by the right pharmacy professional at the right time - an approach that seeks to reduce medication-related problems and ensure person-centred care."

Gonzalo Marzal Lopez - EAHP Project Portfolio Manager

POLICY ARTICLE

Share your views on medicine and medical device shortages

For over a decade, EAHP has been advocating on the issue of medicines shortages and their threat to patient care in hospitals. Due to EAHP's tireless efforts, the issue has also gained more and more importance in the different European Institutions, leading to the adoption of an own initiative report by the European Parliament in 2020, a study on shortages in the EU published at the end of 2021 and structured dialogues with institutions and health stakeholders in the same year.

Despite efforts by hospital pharmacists to address them, medicine shortages continued to materialise at increasing speed throughout Europe. In particular, the percentage of hospital pharmacists reporting shortages to be an issue in terms of delivering the best care to patients has seen a significant increase with 95% of the 2019 Medicines Shortages Survey respondents, compared to 91.8% in 2018 and 86.2% in 2014,



stressing that medicines shortages are a problem faced in their hospital pharmacy. Similarly also the types of medicines most commonly in shortage – including antimicrobial agents (57% in 2014 | 77% in 2018 | 63% in 2019), oncology medicines (55% in 2014 | 39% in 2018 | 47% in 2019), preventative medicines (20% in 2014 | 43% in 2018 | 33% in 2019) and anaesthetic agents (27% in 2014 | 39% in 2018 | 38% in 2019) – did not change significantly over the past couple of years.

Besides the shortage of medicines, in particular amoxicillin, also the shortage of medical devices started to rise. Consequently, the 2023 EAHP Shortages Survey targets the impact of both medicine and medical device shortages in the hospital environment. In addition to hospital pharmacists, EAHP is seeking input from patients and all healthcare professionals working in hospitals. Hospital staff as well as patients that have experienced medicines shortages during their hospital stay are invited to provide feedback via the following: <https://www.surveymonkey.com/r/EAHP2023ShortageSurvey>.

The deadline for response is 30 April 2023.

Stephanie Kohl - EAHP Policy & Advocacy Officer



EAHP FunRun: Explore Lisbon Running! Bring your running shoes!

When? Friday 24 March from 07:00 to 08:00 (Sunrise at 06:34)

Where? 07:00 Start at Entrance Congress Centre

How much? € 15 - Pay cash at 06:50 on Friday 24 March

Why? To support Children with Cancer

How? 5 km run through highlights of Lisbon

Preregistration is appreciated: kikarun@xs4all.nl
A cultural run in Lisbon, at slow speed, for everyone with running shoes.

Expected temperature: +11° to 16° Celcius
Souvenir: White running jacket
We will be back and have a shower before the Scientific program starts.

Berry van Schaik, Children's Cancer Netherlands (KIKa), Mobile +31 655 572 153

KEYNOTE 2 | PREVIEW

Improving the communication of risks and benefits to patients

The second Keynote of Congress will be presented by María del Carmen Climent from the UK. She will address the issues around the conventional 'persuasive' approach so often taken in risk communication to 'maximise compliance', and the importance of moving towards an informative style which clearly communicates risks and benefits. Pharmacists have a crucial role to play in this, in order to facilitate shared decision making and enable truly person-centred care.

María has just started a new role as Risk Communication Lead at the Medicines and Healthcare Products Regulatory Authority (MHRA) in the UK. Previously, she worked at the Winton Centre for Risk and Evidence Communication in Cambridge University, where she conducted research in risk communication for transplant patients, wrote about risk communication for different media, and developed tools for improving risk communication in journalism and health settings.

María studied Veterinary Medicine and an MSc on Animal Health with a focus on breast cancer, at the National Autonomous University of Mexico (UNAM). After this, she

worked for seven years on TV and radio science programmes as a content researcher, scriptwriter and host. In 2015, supported by a prestigious Chevening Award, María moved to the UK to study an MSc in Science Communication at the University of Sheffield.

In this keynote, Maria will illustrate the importance of finding out 'what matters to people', rather than 'what's the matter with them'. Using her experience with patients who are candidates for a lung transplant she will explain how similar people with similar conditions don't always want the same treatment choice. What they feel about the different risks and benefits and their attitudes to risk can be very different. We are all individuals after all!

Historically, risks and benefits have been communicated persuasively, as if clinicians knew the patients' values and preferences. Comments like 'the risk of birth-defects with this treatment is too low, don't worry' or 'you should stop taking this as they come with a high risk of...' without explaining the real magnitude of such risks.

Choosing a treatment, deciding whether or not to have a surgical procedure or interrupting a treatment are all scenarios which can be influenced by how we present risks and benefits to patients.

Communicating risks and benefits is not straightforward; it is not simply about presenting the numbers you have to hand. It requires a series of strategies to ensure that these numbers have context, are only as precise as they deserve to be, are balanced, and are understandable.

The keynote will cover crucial strategies that pharmacists can put in practice any time they communicate risks and benefits of treatments to patients, which hopefully can lead to more informed and patient-centred decisions.

Jonathan Underhill - EAHP Scientific Committee Member

AUDITORIUM I

**Thursday
23 March**

11.00 - 11.45

SPECIAL INTEREST GROUP

Join the SIG dissemination session on investigating medication errors and eliminating harm

At the end of 2020, EAHP opened a new chapter of hospital pharmacy engagement by setting up Special Interest Groups (SIGs). EAHP's SIGs gather and evaluate the evidence in specific, innovative and novel fields of hospital pharmacy practice with the aim to address patient needs and to advance the profession. Two of EAHP's SIGs will be showcasing their findings at the 27th Congress of the Association.

The SIG for the Investigation of Medication Errors in Intensive Care Units (financially supported by BD) worked on determining the prevalence of medication errors in intensive care units, their causes or contributing factors, and strategies to improve medication safety and prevent medication errors. The result of the SIGs work stems from an online cross-sectional descriptive survey that collected anonymous feedback from healthcare professionals working in European intensive care units (ICUs). In addition, focus group discussions based on the literature review findings and the survey analysis were conducted with medication safety officers and healthcare professionals working in ICUs. All of this fed into a Delphi consultation with the help of which the 32 policy recommendations were finalized.

Closely linked to the World Health Organization's (WHO's) Medication Without Harm initiative, EAHP SIG Working Towards Eliminating Avoidable Harm reflected on different root causes of harm and carried out identification and classification of a variety of incidents triggered by inevitable human error, slips or lapses, or mistakes. Each incident was carefully analysed and linked to different root causes, ranging from technical and resource problems to training and system errors. The recommendations developed by the SIG centre around improvements at human resource, institutional and technical resource levels.

Join today's dissemination session between 10.30 and 12.00 to learn more about the root causes and recommended measures for reducing avoidable harm within the supply, preparation and safe administration of medicines in European hospitals, and to familiarise yourself with the policy recommendations that seek to enhance medication safety and reduce medication errors in ICUs across Europe.

Stephanie Kohl - EAHP Policy & Advocacy Officer

Posters & Posters

Don't forget the Poster Walk!

Join the Scientific Committee during their evaluation of the abstract posters selected for the Poster Walk.

Today, Gallery, 19.30 to 21.00

European Statements of Hospital Pharmacy: a commented version

Find out more.

Visit the Statements Posters.

Every day, Exhibition Area, anytime

YOUNG PROFESSIONAL SESSION

Learning from the career journeys of others

The Young Professional Session will offer participants the opportunity to learn from the career journeys of five Hospital Pharmacists who will describe their respective experiences and take time to answer questions Student and Young Professionals may have.

This is an opportunity to get worthwhile information, advice and guidance to a future and exciting career in Hospital Pharmacy.

Join the Young Professional session and be inspired!!!

The Speakers are:

Kornélia Chrapková, Head of Clinical Pharmacy Department, Institute for Clinical and Experimental Medicine, will talk about how she achieved her dream of working in a hospital pharmacy and becoming a clinical pharmacist.

Stefanie Deuster, Head of the department quality assurance in the pharmacy, University Hospital Basel (Switzerland). She will show possibilities to create and shape the general requirements for pharmaceutical preparation in pharmacies through cooperation and networks, and also talk about the different pharmacies (production and quality assurance).

Torsten Hoppe-Tichy, Chief Hospital Pharmacist at Pharmacy Department, Heidelberg University Hospital (Germany), who will focus his presentation on the reasons and motivations for his career path. He will recount the gaps and challenges, how he overcame them and also on the fun and pains of being a chief hospital pharmacist.

Ulrika Gillespie, Department Chief Pharmacist at Uppsala University Hospital and Associate Professor at the Department of Pharmacy, Uppsala University (Sweden). In her presentation, she will describe her journey where she has used pharmacy

practice research to promote and refine the clinical services and talk about her experiences - good and bad - of running everything from small student projects to large randomised controlled trials.

Virginia Silviri, Pharmacy Department, Cork University Hospital, Cork (Ireland), who will describe her experiences and the journey she could never have imagined. On how, since graduation, her pharmacy degree has allowed her to take so many different career paths: from research, to community pharmacy and finally to hospital pharmacy. In hospital pharmacy, she found the working environment that suits her best with a mixture of her previous roles.

Branislava Miljković - EAHP Scientific Committee Member

EAHP's crossword game

Do you want to win a FREE REGISTRATION for the next EAHP Congress, held from 20 to 22 March 2024, in Bordeaux?

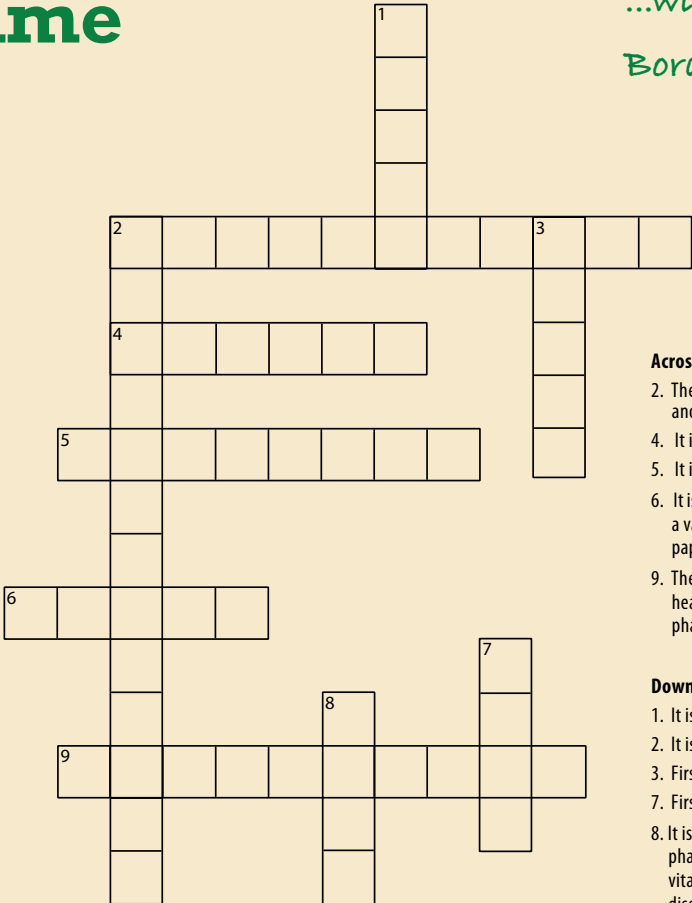
It's easy! You only have to complete the crossword (don't forget to include your name) and leave it at the EAHP booth (#57) in the exhibition area. The winner will be announced at the closing ceremony, on Friday 11.30 to 13.00 (Pavilion I & II).

Do you have problems finding the answers? Stop by the EAHP booth and ask for tips! Still need some answers? Don't worry, here is another tip: walk around the exhibition area, talk with exhibitors and kindly ask for some tips and answers for the crossword!

Not all exhibitors have the answers to the crossword, so don't give up if you don't find them on your first try.

NAME:

LAST NAME:



...win a free registration for Bordeaux 2024!

Across

- 2. The Scientific Committee identifies these needs of EAHP members and prepares the Congress programmes accordingly
- 4. It is the city where last year's congress took place
- 5. It is the city where the EAHP office is located at
- 6. It is the acronym for innovative and complex medicines used to treat a variety of human health issues and EAHP published a position paper on this last year
- 9. They express commonly agreed objectives which every European healthcare system should aim for in the delivery of hospital pharmacy services.

Down

- 1. It is the country from the first EAHP-Associate member
- 2. It is an area where EAHP engages to improve its sustainability
- 3. First name of the current EAHP Director of Finance
- 7. First name of the current EAHP Immediate past president
- 8. It is the acronym for the medicinal products that hospital pharmacists are responsible for their preparation and these are vital for the treatment of both cancerous and other non-cancerous diseases EAHP has a special interest group focused on this.

SYNERGY SATELLITE EVENT

THE EAHP INVITES YOU TO ATTEND THE
2023 SYNERGY SATELLITE SESSION:



NBCDs

NON-BIOLOGIC COMPLEX DRUGS AND NANO MEDICINES

ACPE UAN: 0475-0000-23-011-L04-P - A knowledge-based activity

Wednesday, 22 March 2023

17:15 to 18:45, Auditorium II

27th CONGRESS OF THE EAHP
Lisbon, Portugal

Facilitator Armando Alcobia

Speakers Jon de Vlieger

*International Regulatory
Advances for NBCDs and
their follow-on products*

Gunar Stemer

*NBCDs – Considerations for
hospital pharmacy practice*

Manuel Bañobre-López

*Nanomedicine:
revolutionizing medicine*

Sponsored by
an Educational Grant from CSL Vifor

CONTACT US | synergy@eahp.eu

Non-Biological Complex Drugs (NBCDs) are drugs that comprise large high molecular weight molecules and, often, nanoparticles structures. They differ from typical small chemical molecules and also from biotechnology-derived medicinal products (large proteins). For NBCDs, the entire complex is the active pharmaceutical ingredient and its properties cannot be fully characterized by physicochemical analysis. Most of these medicinal products will have to be managed in a hospital setting, which is why the interdisciplinary pharmacotherapy committees need to consider all levels of evidence generated, focusing specifically on data related to clinical safety and efficacy comparability, discussing interchangeability decisions more like a biosimilar than a generic approach.



The European Association of Hospital Pharmacists (EAHP) is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education