EPITHEORESE KLINIKES FARMAKOLOGIAS
KAI FARMACOK1NETIKES INTERNATIONAL
EDITION 9: 44-45 (1995)

3rd European Workshop on Drug Information

European Society of Clinical Pharmacy Drug Information Special Interest Group, The Finnish Society of Clinical Pharmacy and the Finnish Centre for Continuing Pharmaceutical Education, Helsinki, Finland 14-16 June 1995

Kari Wallenius

The third European Workshop on Drug Information was held in Helsinki, Finland in June. The main theme of the workshop was risk assessment and risk communication and it was organised in co-operation with ESCP Drug Information Special Interest Group, the Finnish Society of Clinical Pharmacy and the Finnish Centre for Continuing Pharmaceutical Education. The workshop gathered 300 participants from 26 different countries.

Drug therapy is always associated with certain risks and the goal of rational therapy is to maximise the benefits and minimise the risks. Drug information is playing a key role In assuring the desired outcome of drug therapy and good risk communication is an integral part of drug information. These topics together with general drug information themes as well as developments in the information field were discussed during the workshop in plenary lectures, workshops, short communications and poster session.

At the plenary session professor *David H. Lawson* from the Department of Clinical Pharmacology, Glasgow Royal Infirmary, gave an overlook on the subject of *Risk assessment of medicines* on all stages of the medicine's life span. Especially the emphasis of his presentation was on the post marketing surveillance of medicines and on the different methods in gathering information about risks and adverse effects of medicines. Standard spontaneous reporting of adverse drug reactions seems to be main source of information, but we should also be able to gain much greater depth of knowledge of the risks with more sophisticated methods. Formalised studies of cohort recipients of new medicines have gained ground and the advent of record linkage will improve our ability to assess medication risks. However, observational studies are prone to misinterpretations and must be subject to rigorous analyses, professor Lawson concluded.

Dr *Louis A. Morris* from the Food and Drug Administration, USA, discussed in his lecture *the Communication about risks of medicines.* An important issue in the communication of risks to patients is how to balance the patient's needs to be informed so that they can become more responsible for their care and the health professionals need to provide supportive treatment without unduly frightening the patient. Patient must be met in different ways depending whether he is at so called pre-patient phase, initiating a treatment or maintaining a therapy. The content and methods of drug information as well as direct to patient advertising must be different in these patient phases. Communication is a process where patients beliefs and knowledge must be understood to play an important role too.

Professor *Per Lundborg* from Astra Hassle Ab, Sweden, gave us a drug manufacturer's view on risk communication in his lecture *Drug industry, ADRs and the public*. He discussed the content of

public drug information, e.g. the language that is used in PPIs must be such, that the patient truly understands the information. He also gave examples how drug industry has dealt with health authorities, the public and the media in a case of sudden and unexpected drug events. He supported open policy and active information role for the manufacturers when possible medication hazards have been suspected.

The last lecture at the plenary session was given by Dr *Henk Buurma* from Apotheek Steven- shof, The Netherlands, under the title *Developments in informing consumers about prescription drugs.* He discussed the increase in direct to consumer advertising as a means to indirectly influence doctor's prescribing. Non-biased drug information direct to patients must be seen as an ef- fective counter force balancing the DTC-advertis- ing. The pharmacists who have direct contact to patients should take an active role in this patient information he said.

At the four short communication sessions of the workshop we heard altogether eighteen presentations in the field of drug information. The presentations of the first session dealt with the cost-effectiveness and quality assurance of drug therapies, patient education and information services. The second session concentrated in drug information centres and information systems and there were descriptions of DIC activities and information system. At the third session *Adverse drug reactions and risk assessment* the themes were most closely related with the main title of the workshop. We heard examples of ADR-reporting systems and interaction controlling, a case of risk assessment and a study of patient risk perceptions. The fourth short communication session dealt with drug information to patients and health care professionals. The presentations covered hospital patient information and education as well as evaluation of written information to professionals in forms of bulletins and handbooks.

At the poster session there were altogether 30 posters covering the economic aspects of drug therapy, drug information to patients and health care professionals, cases of special risk situations and risk communication, the activities of DICs and other information themes. The poster prize, which was a free participation to the 24th European Symposium on Clinical Pharmacy in Prague, was awarded to *G. Loof* and *A. Stjerna* from Malars- jukhuset, Eskilstuna, Sweden for their poster *How to convey information to genera! practitioners about workshop recommentations from medical products agency - is collaboration between pharmacist and specialist physician a good model?*

The workshop contained also five parallel workshops: I Informing patients about ADRs, II The role of DICs in risk communications, III Drug advertisement and the public, IV Technological advances in DICs and V Informing professionals about medication hazards. All the workshops attracted a lot of participants and there were fruitful discussions about the topics. The workshop re- ports and recommentations were presented and discussed at the final session of the meeting. As a general summary from the workshops can be concluded that although drug information services and especially risk communication as a part of information are not uniformly organised and information disseminated in different countries, the balance between treatment supportive information and risk information must be established. In the same way the balance between commercial information and independent drug information must be established. Patients must be able to get the information primarily from their local health care professionals and the role of drug information centres as well as the role of drug industry is to support these professionals with all the information the possess. The use of new technologies, e.g. computers and information networks, must be enhanced in gathering of information and in disseminating of information.

The next European Workshop on Drug Information will be held in Amsterdam in May 1997 under the title of *Disseminating drug information.*