The M.S. program in Quality Assurance / Regulatory Affairs was created by the School of Pharmacy at Temple University to meet the educational needs of professionals in the highly regulated pharmaceutical industry. Established in 1968, Temple’s QA/RA program is the oldest and most comprehensive of its type in the world. Over the last decade the program has grown considerably, both in the number and types of courses as well as in student enrollment. Currently the program provides 50 course offerings with an enrollment of approximately 500 students.

From an industry perspective, Temple’s QA/RA program plays a significant role in training pharmaceutical company personnel in regulations and quality principles and practices. Its courses fulfill regulatory requirements for training and provide the means for individuals to develop regulatory and quality assurance skills for career advancement by integrating the disciplines of pharmaceutical law and regulation, quality assurance and pharmaceutical technology, and business administration. The courses are taught by industry experts who have considerable experience in legal, regulatory, quality and compliance activities in a variety of corporations. One major reason the program has become so successful is the strength of the faculty and the depth and breadth of the staff’s hands-on experience.

The cooperation between industry and academia has been the keystone to the program’s success. Guided by a Steering Committee of key executives from the pharmaceutical industry as well as faculty and administrators from Temple School of Pharmacy, program requirements and course offerings are constantly monitored to reflect the latest quality and regulatory issues. In addition, members of the U.S. Food and Drug Administration (FDA) present lectures as an informational service to students and also provide articles for the program’s biannual newsletter, Information and New Developments. This year the program also sponsored a major conference between the FDA and pharmaceutical industry. Courses are scheduled on weeknights and weekends throughout the year (fall, spring and summer semesters) to meet the demanding work schedules of the program’s students. The program now offers courses in a variety of distance formats. Students can enroll in individual courses of their choosing, complete a four-course (12 credits) certificate program, or pursue the M.S. Degree in Quality Assurance / Regulatory Affairs (36 credits). Post-Master’s certificates in advanced quality and regulatory electives are also available for those who have completed the graduate program.

All of the program’s courses focus on the application of QA/RA principles in today’s pharmaceutical industry. Students comment they can immediately apply their classroom learning to their work. The capstone courses include Food and Drug Law, Drug Development, and Quality Audit.

Graduates of the program continue to be leaders in the pharmaceutical industry. Their participation in the industry ranges from positions in quality assurance, regulatory affairs, research and development to manufacturing, clinical research, medical affairs, and marketing and sales. Temple University is proud of its QA/RA graduates and welcomes interest in this unique program.
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The opinions and views expressed by the authors in this book are not necessarily those of FIP or the publisher. While every care has been taken in the preparation of the book, they are not responsible for the authors’ opinions or for any inaccuracies in the articles.
As the worldwide pharmaceutical organisation representing the pharmaceutical profession and the pharmaceutical sciences, the International Pharmaceutical Federation is one of the older international organisations with a proud history dating back to 1912. But FIP is also a modern organisation with an enviable record of accomplishment and ready for the future, as this publication aims to show.

In a world of globalisation, internet communication and accelerated change, FIP is reaching out to our partners in healthcare. Therefore, this year’s edition of FIP Facts has a broad set up and gives room to many players in the healthcare field to contribute with their thoughts in search for a better health for all in the future.

We start by giving an overview of our structure, staff and early history, before launching into reports from the Board of Pharmaceutical Practice and its Sections, the Board of Pharmaceutical Sciences and its Special Interest Groups and the Working Group on Public Policy. For reference we are also publishing recent policy statements on Counterfeit Medicines and on Professional Standards on Medication Errors Associated with Prescribed Medication.

FIP works closely with a range of international organisations in the healthcare and pharmaceutical sectors and this is highlighted by articles from the World Health Organisation, International Federation of Pharmaceutical Manufacturers Associations (IFPMA), International Pharmaceutical Students’ Federation (ISPF), International Council of Nurses (ICN) and World Self-Medication Industry (WSMI). The WSMI Director Tobacco Dependence, David Graham, additionally contributes an article looking at the role of nicotine replacement therapy in treating tobacco dependency.

In the following section David Pilling gives an overview of the wave of consolidation sweeping the pharmaceutical industry, Antony D’Emanuele contributes a primer on getting connected to the internet and looks at the issues involved in pharmacy and e-commerce, while Justina Molzon looks at the role of pharmacists in managing the risks from medical product use.

Finally, 38 of our 87 Ordinary Members profile their associations and report on their activities.

On behalf of FIP and the publisher, I would like to thank all the contributors to this publication and to invite readers to send us their comments, suggestions and contributions for future editions.
The mission of FIP, as defined in the Statutes, is to "represent and serve pharmacy and pharmaceutical sciences worldwide".

In its role representing both the practice and science of pharmacy, much of FIP's work involves contacts with the World Health Organisation (WHO). FIP was recognised as a non-governmental organisation by WHO in 1948 and has an appointed representative to each of WHO's regional offices. FIP also maintains close links with other international and regional organisations. The contacts are detailed below.

**WHO Head Office**  
Avenue Appia 20  
1211 Geneva 27  
Switzerland  
Tel: +41 22 791 2111  
Fax: +41 22 791 3111  
E-mail: info@who.int  
Website: www.who.org

<table>
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<tr>
<th><strong>WHO event</strong></th>
<th><strong>When?</strong></th>
<th><strong>FIP Liaison</strong></th>
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<tbody>
<tr>
<td>WHO Head Office Geneva</td>
<td>in general</td>
<td>Mr Ton Hoek</td>
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<td>World Health May Assembly</td>
<td></td>
<td>Mr Ton Hoek and FIP Bureau</td>
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<td>WHO Executive Jan/Board May meetings</td>
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<td>April</td>
<td>Mr Ton Hoek</td>
</tr>
</tbody>
</table>

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<tr>
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<tr>
<td><strong>Commonwealth Pharmaceutical Association (CPA)</strong></td>
</tr>
<tr>
<td>c/o Royal Pharmaceutical Society</td>
</tr>
<tr>
<td>1 Lambeth High Street</td>
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<tr>
<td>London SE1 7JN</td>
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<td>England</td>
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<tr>
<td>Tel: +44 20 7820 3399</td>
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<tr>
<td>Fax: +44 20 7582 3401</td>
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<tr>
<td><strong>West African Pharmaceutical Federation</strong></td>
</tr>
<tr>
<td>6 Taylor Drive, off Edmond Crescent</td>
</tr>
<tr>
<td>Medical Compound, P.M.B. 2023</td>
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<td>Yaba, Lagos</td>
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<td>Nigeria</td>
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<td>Tel: +234 1 864 267</td>
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<td>Fax: +234 1 583 4854</td>
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<tr>
<td><strong>Federación Farmaceutica Centroamericana y del Caribe (FFCC)</strong></td>
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<td>Apartado Postal 200</td>
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<td>San Salvador</td>
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<tr>
<td>El Salvador C.A.</td>
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<tr>
<td>Tel: +503 78 8666</td>
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<td>Fax: +503 78 2512</td>
</tr>
<tr>
<td><strong>Conférence Internationale des Ordres de Pharmaciens Francophone (CIOFP)</strong></td>
</tr>
<tr>
<td>4 avenue Ruysdaël</td>
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<tr>
<td>75379 Paris Cedex 08</td>
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<td>France</td>
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<td>Tel: +33 1 56 21 34 34</td>
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<td>Fax: +33 1 56 21 34 99</td>
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<td><strong>EuroPharm Forum Secretariat</strong></td>
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<tr>
<td>c/o WHO Regional Office for Europe</td>
</tr>
<tr>
<td>Scherfigsvej 8</td>
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<td>DK-2100 Copenhagen O</td>
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<td>Tel: +45 39 17 1515 or 1330</td>
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<td>Fax: +45 39 17 1855</td>
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<td>E-mail: <a href="mailto:igu@who.dk">igu@who.dk</a></td>
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<tr>
<td>Website: <a href="http://www.who.dk">www.who.dk</a></td>
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<tr>
<td><strong>PAHO Forum</strong></td>
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<tr>
<td>c/o Pan American Health Organisation</td>
</tr>
<tr>
<td>525 Twenty-Third Street NW</td>
</tr>
<tr>
<td>Washington DC 20037-2895</td>
</tr>
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<td>Fax: +1 202 974 3610</td>
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<td><strong>Industry:</strong></td>
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<tr>
<td><strong>World Self-Medication Industry (WSMI)</strong></td>
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<tr>
<td>15 Sydney House</td>
</tr>
<tr>
<td>Woodstock Road</td>
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<td>London W4 1DP</td>
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<td>Tel: +44 20 8747 8709</td>
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<td>Fax: +44 20 8747 8711</td>
</tr>
<tr>
<td><strong>International Federation of Pharmaceutical Wholesalers (IFPW)</strong></td>
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<tr>
<td>3915 Old Lee Highway, Suite 22-A</td>
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<tr>
<td>Fairfax</td>
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<tr>
<td>Tel: +1 703 352 0808</td>
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<td>Fax: +1 703 352 6905</td>
</tr>
<tr>
<td>E-mail: <a href="mailto:ifpwusa@ifpw.com">ifpwusa@ifpw.com</a></td>
</tr>
<tr>
<td><strong>International Federation of Pharmaceutical Manufacturers Associations (IFPMA)</strong></td>
</tr>
<tr>
<td>67 rue de St. Jean</td>
</tr>
<tr>
<td>P. O. Box 9</td>
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<tr>
<td>1211 Geneva 18</td>
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<tr>
<td>Switzerland</td>
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<tr>
<td>Tel: +41 22 338 3200</td>
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<td>Fax: +41 22 338 3299</td>
</tr>
<tr>
<td>E-mail: <a href="mailto:admin@ifpma.org">admin@ifpma.org</a></td>
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<tr>
<td>Website: <a href="http://www.ifpma.org">www.ifpma.org</a></td>
</tr>
<tr>
<td><strong>Students:</strong></td>
</tr>
<tr>
<td><strong>International Pharmaceutical Students’ Federation (IPSF)</strong></td>
</tr>
<tr>
<td>Street address:</td>
</tr>
<tr>
<td>Andries Bickerweg 5</td>
</tr>
<tr>
<td>NL-2517 JP The Hague</td>
</tr>
<tr>
<td>Mailing address:</td>
</tr>
<tr>
<td>P. O. Box 84200</td>
</tr>
<tr>
<td>NL-2508 The Hague</td>
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<tr>
<td>The Netherlands</td>
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<tr>
<td>Tel: +31 70 302 1989</td>
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<tr>
<td>Fax: +31 70 302 1999</td>
</tr>
<tr>
<td>E-mail: <a href="mailto:ipsf@fip.nl">ipsf@fip.nl</a></td>
</tr>
<tr>
<td>Website: <a href="http://www.ipsf.org">www.ipsf.org</a></td>
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The objectives of the FIP Foundation shall be to promote the education of and research by pharmacists and pharmaceutical scientists within the general fields of design, development, manufacture, distribution and use of medicines for humans and/or animals. The FIP Foundation is a non-profit organisation according to Dutch and European law.

The means
In order to achieve its objectives, the FIP Foundation may undertake one or more of the following activities:
- the making of awards in recognition of excellence;
- the making of grants to support education or research;
- the granting of fellowships to permit a period of research at an approved institution;
- the awarding of scholarships to permit short periods of international travel in order to study the practice of pharmacy or pharmaceutical science in another country or in other countries; and
- all other charitable activities which do not conflict with the aforementioned objectives or the general objectives of FIP.

The results
The FIP Foundation, founded in 1993, has in its first decade of existence already granted over 100 awards, grants, scholarships and fellowships to people all over the world. In this way the Foundation stimulates education and research in pharmacy in those areas where it is most needed, such as in developing countries, for young pharmacists and in new and promising research areas.

The benefits for contributors
Those contributing to the FIP Foundation:
- stimulate education and research in those areas where support is most needed;
- have access to an international pharmacy network;
- create visibility of their (organisation’s) name as a beneficiary in reports, through the internet, press releases and special FIP Foundation events; and
- have the opportunity to stimulate specific developments in pharmacy with restricted grants.

The way forward
For more information take a look at our website:
http://fip.nl/foundation or contact our office:

FIP Foundation for Education and Research
Chairman: Dr Dieter Steinbach
Executive Director: Mr Ton Hoek
Street address:
Andries Bickerweg 5
NL-2517 JP The Hague
Mailing Address:
P. O. Box 84200
NL-2508 AE The Hague
The Netherlands
Tel: +31 70 302 1970
Fax: +31 70 302 1999
E-mail: foundation@fip.nl

With FIP Foundation support:
- Young pharmacists from around the world are able to travel abroad, complete their education or invest in their innovative ideas to progress pharmacy.
- Pharmacists and pharmaceutical scientists from developing countries are able to progress pharmacy significantly in their community.
- New and innovative projects in the future of pharmacy are supported and developed throughout the world.
- Pharmacists and pharmaceutical scientists, who contribute to international pharmacy developments, are recognised for their efforts through prestigious awards.
Before FIP was established, contacts between pharmacists of different countries were only possible at pharmaceutical congresses, which were held at irregular times. The first of these congresses was convened in 1865 on the initiative of the German Pharmaceutical Association.

The 10th Congress was held in Brussels, Belgium in September 1910. At that congress, the formation of an international federation was proposed by the Netherlands Society of Pharmacy. The resolution on the formation of FIP was as follows: “The 10th International Congress of Pharmacy, at its meeting in Brussels, resolves: To establish an International Pharmaceutical Federation with the object of protecting Pharmacy by international means, both as a profession and as an applied exact science.” The Congress also agreed to set up an International Provisional Committee to draw up the Statutes of FIP. On 25 September 1912, FIP was formally constituted under Dutch Law. The meeting was addressed by the Home Secretary of The Netherlands, Mr T. L. Heemskerk and Dr L. van Itallie and Mr Hofman were elected President and General Secretary respectively. The Dutch government gave a grant to the new FIP to cover initial expenses. It is interesting to note that the government still makes a small annual contribution to the expenses of FIP to this day.

Twenty national pharmaceutical associations together made up the founder members of FIP. These were the national associations of Austria, Belgium, Denmark, Finland, France, Germany, Hungary, The Netherlands, Poland (at that time included in the entry for Russia), Romania, Russia, Sweden, Switzerland and the United Kingdom. FIP was governed by the Central Committee, afterwards re-named the General Assembly and later re-named the Council, which is composed of delegates of Ordinary Members. When the Council was constituted in 1947, representatives of the FIP Sections were given delegate status, as was the newly found Scientific Section (which became the Board of Pharmaceutical Sciences in 1974).

One year after the founding of FIP, it held its first scientific congress in The Hague, the 11th International Pharmaceutical Congress. The outbreak of the First World War in 1914 interrupted FIP activities and it was not until eight years later, in 1922, that the 3rd General Assembly reconvened in Brussels. After 1922, Congresses were held at regular intervals, with the 12th International Congress being held, partly under FIP auspices, in Brussels in 1935. Thereafter, the General Assembly met at regular intervals in various European Cities until war broke out again in 1939, causing another seven-year suspension in FIP activities. In 1957, it was decided that there would be a General Assembly in even numbered years and a Congress of Pharmaceutical Sciences in odd numbered years.
**Work of the Sections**

Much of the programme of Congresses today is taken up with the Section meetings. During the early years of FIP, numerous committees were set up. In 1925, a Scientific Committee was set up which was re-organised into a Scientific Section in 1947 and, as has already been noted, became the Board of Pharmaceutical Sciences in 1974. As early as 1928, a committee to study methods of testing the efficacy of mild medicants was set up. In 1950, pharmacognosists met separately for the first time and in 1953, the Medicinal Plants Section was formed. In 1931, a committee was set up for Hospital Pharmacists. The Hospital Pharmacists Section was founded in 1957. As with other Sections, military pharmacists began to meet separately (starting in 1957) and became a separate Section in 1963.

One of the first actions taken by the new Bureau of FIP in 1912 was to set up an International Pharmaceutical Press Office. The editors of the pharmaceutical periodicals met independently, starting in 1950, and formed their own Section in 1953. Since then, the membership of the Section has gradually been extended to include all those FIP members concerned in any way with pharmacy and drug-related information. This is reflected in its current title "Pharmacy Information Section".

A Committee for Industrial Pharmacists was formed in 1930 and it was in London in 1955 that the Section was founded. The purpose of the Section was to provide the means for industrial pharmacists to exchange information and ideas on technical and professional questions concerning the pharmaceutical industry.

The largest Section today is the Community Pharmacy Section. Surprisingly, this Section was not one of the original Sections founded as a result of the 1947 FIP Statutes. A Commission for the General Practice of Pharmacy was set up in 1956 and in 1962 a sub-Commission for the Techniques of General Practice Pharmacy was set up. The Section itself was not formally established until 1970.

The need for a Section for Clinical Biology was first discussed in 1966 during the FIP Congress in Madrid and the Section was formally founded in 1973.

Another later Section is the Academic Section. In 1968, in Hamburg, the Linstead Commission proposed...
that the Scientific Section of FIP be disbanded and an Academic Section be formed for pharmacists engaged in academic activities. It was formally founded in 1972. It is interesting to note in passing that the Academic Section was the first to introduce a new form of social and professional contact during the annual congresses, namely the Section dinner. The first dinner was held in 1975 in the Great Hall of Trinity College, Dublin. Since that time, Section dinners have been held during every Congress and the idea has been taken up by many of the other Sections.

The Section for Official Laboratories and Medicines Control Services was formed at the Madrid Congress in 1980 and subsequently amended its name to the Laboratories and Medicines Control Section. The Section evolved from regular meetings of directors of test laboratories, which began in 1931. The youngest Section of FIP is the Administrative Pharmacy Section. This was created in 1993 at the FIP Congress in Tokyo. The past few years has seen the most notable development, with the formation of a
to form a new Section for this discipline. Although the application was not successful, FIP has helped and continues to help arrange an annual Symposium on the History of Pharmacy, held during Congress.

The above is a very short report of the early years of FIP. Much of FIP’s original documentation from the early years is no longer available and this report has relied heavily on the report of the 50th anniversary of the International Pharmaceutical Federation (J. Mond. Pharm. 5, 1962, pp.181-219) and Professor Zalai’s excellent review of the following 25 years of FIP which was published as a special supplement to the International Pharmacy Journal in 1987.

Working Group for Administrative Pharmacists and its subsequent transformation into a Section in its own right.

Mention should also be made here of two other FIP activities of earlier times. The Committee for Secretaries of Pharmacopoeias was formed in 1966 to assist in the publication of an international pharmacopoeia. It applied pressure on WHO for publication of this essential standard work and played a significant role in its content and arrangement. The Committee has subsequently been dissolved. The Committee for the History of Pharmacy and the World Union of Societies for the History of Pharmacy sought permission in 1953 to form a new Section for this discipline. Although the application was not successful, FIP has helped and continues to help arrange an annual Symposium on the History of Pharmacy, held during Congress.
The Chairman of the BPS is elected by the Council, upon nomination of the BPS, for a 4-year term.

The Scientific Secretary is elected by the Council, after nomination by the BPS, for a 4-year term, once renewable, term.

Upon nomination of the BPS the Council elects 2 Vice Presidents for a 4-year term, once renewable, term.

The President is elected by the Council for a 4-year term.

The Immediate Past President is a member of the Bureau and Council for 4 years after his presidency.

A Honorary President is a member of the Council, but without voting rights.

The Chairman of the BPP is elected by the Council, upon nomination of the BPP, for a 4-year term.

The Professional Secretary is elected by the Council, after nomination by the BPP, for a 4-year term, once renewable, term.

Upon nomination of the BPP the Council elects 2 Vice Presidents for a 4-year term, once renewable, term.

Each section has the right to appoint one Section Delegate in the Council.

The Ordinary Members* propose candidates to the Bureau who then nominates Vice Presidents of which 5 are elected by the Council for a 4-year term, once renewable, term.

The Associate Members* are members of the Council, but without voting rights.

* Note: Ordinary and Associate Members also include Predominantly Scientific Ordinary and Associate members.
MEMBERS OF THE BOARD OF PHARMACEUTICAL PRACTICE

Members of the Board of Pharmaceutical Practice (BPP)

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Academic Pharmacy
Jane Nicholson
Administrative Pharmacy
François Schubert
Clinical Biology
Jean Parrot
Community Pharmacy
Mike Rouse
Hospital Pharmacy
John Gans
Industrial Pharmacy
Sandy Florence
Laboratories & Medicines
Kamal Midha
Medical & Aromatic Plants
Howard Rice
Military & Emergency Pharmacy
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Kamal Midha
Medical & Aromatic Plants
Howard Rice
Military & Emergency Pharmacy
Zoltán Vincze
Dr Peter J. Kielgast

Dr Kielgast obtained his pharmacy degree in 1969. From 1969 to 1973, he served on the staff of the Drug Section of the National Board of Health for Denmark. From 1973 to 1994, he was successively Secretary (1973 to 1977), Head of Department (1977 to 1978) and Director General of Danmarks Apotekerforening (the Danish National Association for proprietor pharmacists). In 1994 he became a proprietor pharmacist of Taastrup Pharmacy, Denmark. From 1973 to 1994, he was a member of the Executive Committee of the Pharmaceutical Group of the European Union (PGEU); its Vice-President (1984 to 1986) and President (1987 to 1989).

Within FIP, he was Professional Secretary of the Section for Community Pharmacists and Chairman of the Board of Pharmaceutical Practice prior to being elected President of FIP in 1998. He holds a number of directorships and is a member of the Advisory Board for the International Center for Pharmacy Education and Research, Mercer University Atlanta, Georgia, USA. Dr Kielgast received a Honorary Doctorate of Science from the Mercer University in Atlanta on 29 April 2000.

FIP is on the web at www.fip.nl
Dr Dieter Steinbach

Born in 1940, Dr Steinbach graduated from the School of Pharmacy, Munich University, in 1966 and obtained his Ph.D. from the School of Pharmacy, Frankfurt University, in 1970. From 1970 to 1974 he was assistant to the Executive Director of the Bundesvereinigung Deutscher Apothekerverbaende – ABDA (Federal Union of German Associations of Pharmacists) and became Director of its central laboratory in 1975. In 1983 he became the owner of Hof-Apotheke in Bad Homburg, Germany, a community and hospital service pharmacy.

His scientific interests are drug quality, bioavailability and pharmacokinetics. He has published over 60 papers and has lectured extensively all over the world. Whilst at university, he was President of the German Pharmaceutical Students’ Association and then Vice President and Treasurer of the International Pharmaceutical Students’ Federation.

He has been active with FIP for nearly 30 years. He was Chairman of a Working Group on Continuing Education with the Community Pharmacy Section from 1972 to 1978; a delegate to the FIP Council from 1973 to 1978 and the first Treasurer of the FIP Congress Foundation, now called the FIP Foundation for Education and Research.

In 1981 he became Congress Coordinator and was a member of the Management Committee (now known as the Executive Committee) from 1981 to 1993. He was appointed the first Professional Secretary and Secretary of the Board of Pharmaceutical Practice on its founding in 1993. He has been awarded a number of honorary positions and has edited a number of journals during his long career. He was involved with the reorganisation of FIP, being a member of the Becket Commission from 1974 to 1977, and again as part of the Executive Committee developing the new statutes in 1993, which led to the setting up of a Board of Pharmaceutical Practice. He was elected FIP President in Lisbon in 1994 and has completed his four-year term in 1998. Now he is FIP’s Immediate Past President and also Chairman of the FIP Foundation for Education and Research until 2002.

Dr Dieter Steinbach

Germany

Immediate Past President

Mr Ton Hoek

Ton Hoek studied Pharmacy at the State University of Leiden in the Netherlands. He obtained his Master of Science degree in 1983 and graduated as a pharmacist in 1984. He had training periods in both the pharmaceutical practice and the hospital pharmacy. During his student time he was active in the pharmaceutical student organisation Aesculapius and served as President during 1980/1981.

After university Ton Hoek joined the pharmaceutical industry and worked at several management positions both in R&D as well as in marketing.

He started in the formulation development department of Solvay Duphar as head of the development of liquid and semi-solid dosage forms. In this position he was responsible for the development of new dosage forms for the new chemical entities coming out of the Solvay pipeline as well as line-extensions of existing products. After that, he switched to the marketing of the Medical Devices Division of Solvay and became Marketing Manager. He was responsible for the marketing of Solvay’s prefilled syringe systems in a global industrial market.

In 1991 he was appointed as Director of Development and Registration for veterinary pharmaceuticals of Solvay’s Animal Health Division. After the takeover of Solvay’s Animal Health business by American Home Products, he continued his directorship reporting into the head office of Fort Dodge Animal Health, a daughter company of American Home Products Corporation, in Kansas City.

Ton Hoek was appointed General Secretary of FIP on 1 March 1999.

Mr Ton Hoek

The Netherlands

General Secretary

28
Colin worked in the National Health Service in the United Kingdom for some 30 years. In 1995 he established his own individual consultancy service and since then has been working at the hospital/community/industry interface.

Colin has long believed in the unity of the profession and to this end has held positions within the European Association of Hospital Pharmacists and the Royal Pharmaceutical Society of Great Britain as well as sectional activity within FIP.

As Professional Secretary of FIP he is the secretary to the Board of Pharmaceutical Practice which consists of 10 individual Sections representing the main international professional aspects of the profession. The 10 Sections are:

- Academic Pharmacy
- Administrative Pharmacy
- Clinical Biology
- Community Pharmacy
- Hospital Pharmacy
- Industrial Pharmacy
- Laboratories and Medicines Control
- Medicinal and Aromatic Plants
- Military and Emergency Pharmacy
- Pharmacy Information

Pharmacy is numerically a small profession and has always tended to form splinter groups within its ranks. Colin’s one main ambition is to unify the profession both nationally and internationally so as to maximise its potential for the benefit of the patient.

Hans was appointed as head of the Department of Pharmaceutical Technology of the Leiden/Amsterdam Center for Drug Research in Leiden in 1981. Between 1986 and 1990 he was President of the International Association for Pharmaceutical Technology (APV) and between 1994 and 1995 he was President of the Controlled Release Society (CRS) and of the Dutch Association of Pharmaceutical Sciences (NVFW). In 1995 he was appointed Scientific Secretary of the Board of Pharmaceutical Sciences (BPS) and re-elected in 1999. In 1995 he received an honorary doctorate from the University of Gent.

As the Scientific Secretary of FIP Hans is the secretary of the Board of Pharmaceutical Sciences, which consists of five Special Interest Groups (SIGs), 15 Expert Members and the members of the Predominantly Scientific Ordinary Members (PSOMs) i.e. the American Association of Pharmaceutical Sciences (AAPS), Pharmaceutical Society of Japan (PSJ), Academy of Pharmaceutical Science and Technology of Japan (APSTJ), Association Pharmaceutique Galénique Industrielle (APGI), Science Group of the Royal Pharmaceutical Society of Great Britain (RPSGB), European Federation of Pharmaceutical Scientists (EUFPS) and CRS.

FIP-BPS is the only global umbrella for pharmaceutical scientists and it is the aim of Hans to further strengthen the position of FIP-BPS and to cooperate with its constituencies for the benefit of all areas of pharmaceutical sciences and of the pharmacy profession.

Professor Dr Hans E. Junginger

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Mr Colin R. Hitchings

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More than ever, worldwide advocacy for and visibility of our profession is needed. This is clearly being addressed by the Bureau’s commitment to partnerships with WHO, our sister organisations in healthcare, pharmacy’s related industries and the consumer. Nowhere can the support for and benefits from such partnerships be better realised than in FIP’s practice Sections. The forum for planning, implementing and communicating Section activities is the Board of Pharmaceutical Practice (BPP). As Chairman of the BPP, I am committed to enhanced communications, strategic planning, inclusive participation and building partnerships within pharmacy and with our external stakeholders.

We have embarked on several new initiatives including the creation or updating of internal standards for the profession (e.g., labelling, storage, education, medication error reporting); defining the value of the pharmacist and translating this value (along with our partners in the Board of Pharmaceutical Sciences) to practitioners; and identifying public policy issues of importance to pharmacists. The BPP has also begun looking at ways to increase individual membership in the Sections and to ensure that it is operating effectively and efficiently on its members’ behalf.

These are challenging, but exciting times for our profession. I encourage each of you to become active in the Section of your choice; in so doing, know that the expertise, experience and commitment of the Bureau, the Council and the BPP are behind you and ready to help. I invite you to dialogue with me at ctrinca@westernu.edu; your views are important to ensure our success.

<table>
<thead>
<tr>
<th>Professor Dr Carl E. Trinca USA</th>
<th>Chairman, Board of Pharmaceutical Practice</th>
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<th>Professor Dr Leslie Z. Benet USA</th>
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<td>Dr Benet, Professor, Department of Biopharmaceutical Sciences, University of California San Francisco and founder and Chairman of the Board of AvMax, Inc., received his AB, BS and MS from the University of Michigan, and Ph.D. from the University of California. He has received five honorary doctorates: Uppsala University, Sweden (Pharm.D., 1987), Leiden University, The Netherlands (Ph.D., 1995), University of Illinois at Chicago (D.Sc., 1997), Philadelphia College of Pharmacy and Science (D.Sc., 1997) and Long Island University (D.Sc., 1999). His most recent work has addressed the cooperative effects of metabolic isozymes of cytochromes P-450 and anti-transport proteins as related to immuno-suppressive, anti-cancer, anti-AIDS and anti-parasitic drugs. He continues his studies to explain the immunotoxicity of NSAIDs as resulting from covalent adducts. Dr Benet is a Fellow of the American Association of Pharmaceutical Scientists (AAPS), American Association for the Advancement of Science (AAAS) and Academy of Pharmaceutical Research and Sciences (APRS). In 1985 he served as President of the Academy of Pharmaceutical Sciences. During 1986, Dr Benet was a founder and first President of the AAPS. In 1987 he was elected to membership in the Institute of Medicine of the National Academy of Sciences. In 1989 he received the first AAPS Distinguished Pharmaceutical Scientist Award; in 1991, the American Association of Colleges of Pharmacy’s Volwiler Research Achievement Award; in 1995, the American Society for Clinical Pharmacology and Therapeutics (ASCPT) Rawls-Palmer Award; and in 2000 the American Pharmaceutical Association’s Higuchi Research Prize. He presently serves as Chair of the FIP Board of Pharmaceutical Sciences and of the Organising Committee for the highly successful FIP Millennial World Congress of Pharmaceutical Sciences. Dr Benet has published over 390 scientific articles and book chapters, and served as editor of five books.</td>
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Professor Dr Leslie Z. Benet USA

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I have been Dean of the School of Pharmacy of the University of London since 1989. Prior to that I was Professor of Pharmaceutics and for a time Dean also in the University of Strathclyde, Glasgow, Scotland. I am the second of a three generation pharmaceutical family. I have always strongly believed in the science base of pharmaceutical education and indeed of the profession but also in the fact that science and practice should not be in conflict or competition, as sometimes they appear to be.

On my travels I have recognised the need for dissemination of best practice in pharmaceutical education. In Europe as President of the fledgling European Association of Faculties of Pharmacy we encourage new elements of the syllabus such as pharmaceutical care and discuss new modes of delivery to avoid each faculty reinventing wheels.

In the wider arena, I feel that FIP must have a role in this educational outreach; conferences are only one way, and often an expensive way, of reaching an audience. New modes of interaction must be developed. While it is valuable for FIP to be attempting to influence policy at WHO and governmental levels, it is also necessary certainly in the educational arena to touch individual teachers and heads of institutions. As one uncomfortable in committees, we need action. A strong educational base in every country leads to a highly educated profession which can not only clearly demonstrate, by what it achieves and what it does, the value of pharmacy, but argue convincingly at all levels about its development, so that it attains its true potential. Then there is a chance for healthcare to be optimised.

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John A. Gans is the Executive Vice President and Chief Executive Officer of the American Pharmaceutical Association (APhA). The APhA is the first established and largest professional association of pharmacists in the United States. APhA’s more than 53,000 members include practising pharmacists, pharmaceutical scientists, pharmacy students, pharmacy technicians, and others interested in advancing the profession. The Association is a leader in providing professional information and education for pharmacists and an advocate for improved health through the provision of pharmaceutical care.

From 1970 to 1989, Gans was professionally affiliated with the Philadelphia College of Pharmacy and Science (PCP&S), where he earned his pharmacy degree in 1966 and his doctorate in pharmacy in 1969. He also served on the faculty from 1980-88, and from 1988 until his appointment to APhA in May 1989, he served as the Dean of the School of Pharmacy. During his pharmacy career, Gans has practised in community and hospital pharmacy settings and served as a consultant to nursing homes.

Dr Gans has been actively involved in international pharmacy for many years. He served as the Pan American Federation of Pharmacy (FEPAFAR) Secretary General (1991-1994) and has served as Vice President for North America since 1994, having been re-elected in 1997 for a second three-year term. In 1999, he was instrumental in developing the concept and provided the leadership in establishing the Pharmaceutical Forum of the Americas in collaboration with the Pan American Health Organisation (PAHO) and the WHO Regional Office in the Americas. He has served as a member of the FIP Council since 1989 and as a member of the Working Group on FIP Public Policy since 1995. He was most recently elected as a Vice President to the FIP Bureau in 1998.

Dr Gans has served as the Chairman of the Delaware Valley Regional Poison Control Program, which established a 24-hour regional poison control centre in 1985. In 1980-81, he served as President of the Pennsylvania Society of Hospital Pharmacists and, in 1986-87, as President of the American Society of Hospital Pharmacists. Other honours include the 1997 PCP&S Alumni Award; a research award in 1972 from the American Society of Hospital Pharmacists; and the 1998 Harvey A. K. Whitney Lecture Award presented by the American Society of Health-System Pharmacists.
Dr Midha is Adjunct Professor of Pharmacy and Associate Member of Psychiatry, University of Saskatchewan, Saskatoon, Saskatchewan, Canada. He is Coordinator of the Drug Metabolism Drug Disposition Institute, Colleges of Pharmacy and Medicine at the University of Saskatchewan. Dr Midha is the author/co-author of approximately 300 scientific articles and book chapters. He is a frequently invited speaker at conferences throughout the world on bioavailability, bioequivalence, bioanalysis, pharmacokinetics and pharmacodynamics.

Dr Midha’s initial active involvement with FIP began when he was appointed an Expert Member in 1980, a position he held till 1988. This was followed by his being elected Chairman of the Board of Pharmaceutical Sciences (BPS) of FIP, which position he held from 1988 to 1996. From 1996 he has held the position of Immediate Past Chair of the BPS. Moreover, in September of 1998 he was elected to the position of Vice President of FIP for a four-year term.

During Dr Midha’s tenure as Chairman of the Board of Pharmaceutical Sciences the most notable contribution was the change in the Constitution of FIP (1992) and the setting up of two Boards – the Board of Pharmaceutical Sciences and the Board of Pharmacy Practice.

From 1988 to 1992 Dr Midha contributed towards the development of the new Statutes, Bylaws and Action Plan of FIP with other members of FIP Bureau, under the presidency of Dr Joe Oddis. The Action Plan was effectuated from 1993 to 1996. During 1996-1997, together with Professors L. Benet (Chair of BPS) and H. Junginger (Scientific Secretary), an innovative plan was conceived and initiated to provide service to the Ordinary Members in different regions of the world by holding Regulatory Workshops in conjunction with the American Association of Pharmaceutical Scientists. The first of these Regulatory Workshops was held in 1998 in Bombay with the Indian Pharmaceutical Association. This was followed by the Regulatory Workshop on “Bioequivalence and Biopharmaceutical Classification System” held in Cairo, Egypt, and the Workshop “Scientific and Regulatory Considerations in the Development and Evaluation of Oral MR Products” held in Israel in February 2000.

During his tenure as Chair of BPS, he initiated the Bio International Conferences on scientific regulations in the pharmacokinetics/bioavailability/bioequivalence fields. These conferences [1992-Bad Homburg; 1994-Munich; 1996-Tokyo; 1999-London, UK] have had a significant impact on the development of science based regulations in the spirit of global regulatory harmonisation.

Dr Midha continues to contribute towards improving global health through his active involvement in these FIP initiatives.

Mr Jean Parrot graduated in pharmacy from the University of Paris in 1966. Since 1970 he has been a community pharmacist first in Montargis and subsequently in Bellegarde. He was President of his Regional Council of the French Pharmaceutical Society (1985 to 1989). He was a member of the Society’s National Council (1989 to 1993) and became President of the National Council in 1993. He was elected Vice President of FIP in 1994 and Treasurer of the FIP Bureau in 1999. He created a Working Group on AIDS and Drug Addiction in 1996.

Since 1993, Mr Parrot has been, in France, Vice Chairman of the Conseil Supérieur de la Pharmacie (Upper Council for Pharmacists) whose Chairman is the French Minister of Health. He is also a member of the National Academy of Pharmacy, of the National Pharmacopeia Commission of France and Vice President of the National Centre for Pharmacovigilance.
Mrs Jane Nicholson

*United Kingdom*  
**Vice President**

Every pharmacist should have the experience of attending a FIP Congress. Whether it is to share one’s knowledge of best pharmaceutical practice or to collaborate with fellow pharmaceutical scientists from around the world, our Congress is an invaluable event.

Continuing education is a vital ingredient of the development of both the profession and the individual. Our FIP Sections provide a forum through which educational requirements can be identified and targeted to the specialist needs of pharmacists. I believe FIP could put more effort into the production of distance learning/training courses.

Pharmacies are an undervalued asset, providing large amounts of unremunerated help with both social and medical problems. Many times I have heard a pharmacist saying: "My government’s goal posts have moved again!" A working group of the Board of Pharmaceutical Practice (BPP) is to produce a report on the value of the pharmacist.

Both our Boards have identified strategic plans and I am assisting with documenting the progress made by our Sections within the BPP. I believe FIP can help pharmacists respond to the pressures for change in our profession.

Nowadays, many women are active in national pharmacy politics. More of them need to be involved in developing the policies of FIP.

When I lie in my bath and gaze into the crystal ball, I see a network of pharmacists all over the world. They are working in the various branches of pharmacy but are all part of a team of healthcare professionals. The community and hospital branches are "patient focused", while others working in industry and research are "product focused", but they are all concentrating on patient outcomes rather than on inter-professional rivalries. All of them have studied a broad base of pharmaceutical sciences as well as professional aspects of pharmacy and they are all individual members of FIP because they consider it essential to the forward development of our profession.

Mr Mike Rouse

*Zimbabwe*  
**Vice President**

Mike Rouse was born in Harare, Zimbabwe in 1956. He was educated in Zimbabwe and graduated with an Honours Degree in Pharmacy from the University of Zimbabwe in 1977. Mike has worked in hospital and community pharmacy and is currently the CEO of the Medix Group. Medix is Zimbabwe’s largest group of pharmacies. The Group also includes two information systems companies serving the pharmacy and health sectors.

Mike is a past-President of the Pharmaceutical Society and the National Pharmaceutical Council of Zimbabwe. He is (or has been) active on a number of other committees and was a part-time lecturer to pharmacy students, technicians and nurses. He has spoken at a number of local, regional and international congresses.

As Founder President of the Zimbabwe Pharmacy Students’ Association, Mike attended the IPSF Congress in Mexico in 1977, and since that time has been interested in developing international contacts. He has achieved this through active involvement in FIP and the Commonwealth Pharmaceutical Association.

By special invitation, he served on the Executive Committee of FIP’s Community Pharmacy Section representing developing countries and he chaired their Working Group on Good Pharmacy Practice in Developing Countries.

In 1996, nominated by the Board of Pharmaceutical Practice (BPP), Mike was elected as a Vice President of FIP. He is also a Director of FIP’s Foundation for Education & Research, Chairman of the Foundation’s International Travel Scholarships Committee, a member of the BPP, a member of FIP’s Twinning Project Group and the Bureau’s liaison for the Community Pharmacy Section and the Young Pharmacist’s Group.

One of Mike’s main interests is the development and use of information technology to enhance professional and customer services and he has pioneered several initiatives in this regard. He has also been active in the revision of pharmacy legislation in Zimbabwe. He is married with three children.
My election mandate was to leave no stone unturned in further promoting FIP as an organisation that reached out to a large number of pharmacists and pharmaceutical scientists. I know that with a much larger individual membership, we at FIP could further increase our powers of persuasion on the international scene and thus be in an even better position to help pharmacists and their associations in lesser-developed countries benefit from the vast experience that has accumulated within FIP over the years.

The synergism of pharmacists from all over the world, with problems both similar and otherwise, creates a forum that helps us mould the future and foresee the challenges and problems that lay ahead. Counterfeiting of medicines, pharmaceutical e-commerce, prevention of mistakes in providing medicines, working relationships with physicians or aspiring to the qualities of Pharmaceutical Care and Good Pharmaceutical Practice, are a few of the many examples set out in some of the many statements of FIP. The exchange of ideas, making contacts or self-educating at some of the lectures or workshops at FIP Congresses are invaluable to us all. This and more is what FIP is all about.

Besides my involvement as a Bureau member, I serve on the Managed Care and Twinning Project Groups. I have spent a great deal of time investigating, exploring and planning additional added value that FIP can, should and could give to each of its members that will encourage many more pharmacists to join us.

At present I am the Chairman of the Pharmaceutical Association of Israel, serve on the National Council of Health, the Committees on the Quality of Medical Services and the National Planning of the Future of Pharmacy, and was appointed member of the Council for Higher Education with respect to Pharmacy.

My involvement and commitment to pharmacy, both nationally in my own country and internationally within FIP are total and they give me the opportunity of helping to mould a better tomorrow, not just for pharmacists and pharmaceutical scientists, but also for the patients who seek our knowledge, help and advice in promoting healthier and better lives for all.

Dr Schubert graduated in Pharmacy in 1975 and received his D. Pharmacy in 1976. He also received a Masters degree in Hospital Administration in 1981.

In 1978 he was appointed Pharmacist-in-chief in a major hospital and in 1986 was made Assistant Director of Hospital and Professional services.

In 1989 he joined Sandoz, Canada as Director of Professional Services, Immunology. In 1992 he was appointed Director, Pharmacy and Pharmacoeconomics. He joined Glaxo, Canada in 1994 in a similar capacity and is currently on secondment in the United Kingdom at Glaxo Wellcome.

In Canada he was a Director of the Order of Pharmacists in Quebec (1979-1991) and served as Vice President (1989-1991). He was elected Vice President of the Canadian Pharmaceutical Association in 1988 and served as President 1991-1992.

Dr Schubert was elected a Vice President of FIP in 1992.
Zoltán Vincze was born in Gödöllo, Hungary on 30 September 1940. He received his Master of Science in Pharmacy degree in 1966 from Semmelweis Medical University Budapest. He earned a Ph.D. in 1969 and a C.Sc.M. in 1985 from the Hungarian Academy of Sciences. The title of his diploma work was: "Utilisation Studies of Antiepileptics".

Dr Vincze has been affiliated to the Semmelweis Medical University Pharmacy Institute for Pharmacy Administration since 1966. He has been a professor and the director of the Institute since 1992. From 1990 to 1996 Dr Vincze was the General Manager of Pharmafontana, Hungary’s largest pharmaceutical wholesaler and proprietor of Budapest’s retail pharmacies. He played a significant role in coordinating the privatisation of pharmacies after the political changes in 1989. Since 1996 Dr Vincze has been the appointed Dean of the Faculty of Pharmacy at Semmelweis Medical University Budapest.

From 1986 to 1996 Dr Vincze served as the Secretary General of the Hungarian Pharmaceutical Society. In 1996 he was elected to be the President of the Society, the organisation which is dedicated to pharmaceutical sciences in Hungary. Dr Vincze was the founder and the first President of the Hungarian Chamber of Pharmacists in 1989.

Dr Vincze has represented Hungarian pharmacists in the FIP Council since 1986. He has been serving as a Vice President of FIP since 1992.

Dr Vincze has published numerous articles, books and passages in the area pharmaceutical sciences (157 publications altogether). He is the chief editor of the Journal called Pharmacy and member of the editing committee of The Current Questions of Pharmacy journal. He is the responsible editor for several other journals upon request.

Dr Vincze’s areas of research, teaching and consulting include Pharmacy Administration, Pharmacoeconomics and Clinical Pharmacy. Besides his impressive professional achievements, Dr Vincze is the proud husband of Dr Maria Vermes (since 1966) and the happy father of Gabor (born in 1972) and Ágnes (born in 1975).
The Board held its usual two meetings during 1999, the first one in March at The Hague and the second one during the Congress in Barcelona in September.

The new Chairman of the Board of Pharmaceutical Practice, Dr. Carl Trinca, chaired his first meeting in March 1999. He indicated at that meeting his desire to make the workings of the Board as open as possible and has encouraged members to enter into dialogue whenever possible.

**Strategic planning**

All 10 Sections have been developing a strategic plan and Jane Nicholson, one of our two designated Vice Presidents, has been coordinating these plans into an overall strategic plan for the Board of Pharmaceutical Practice.

Six working groups are currently established under the auspices of the Board and are at various stages of development with their tasks:

- **Working Group on Good Storage Practice.** Chaired by Helga Moeller this group will be presenting its final draft at a workshop meeting in September 2000 during the Congress in Vienna.
- **Working Group on Labelling and Packaging.** This group was established on the initiative of Stein Lyftingsmo who chairs the group and, likewise, will be presenting its final draft during the Congress in Vienna.
- **Working Group on Medication Error Reporting.** This group is chaired by Tom Thielke and is working in close cooperation with the Institute for Safe Medication Practices. A draft report is due in September 2000 with a final meeting in Singapore in 2001.

Three of the working groups were established during 1999 and are at various stages with their respective tasks:

- **Membership and Participation of Members.** Chairman: Prof. Peter Noyce.
- **Fiscal and Organisational Matters.** Chairman: Marian Schaefer.
- **Value of the Pharmacist.** Chairman: Prof. Dick Tromp.

**Finance**

The Board currently has a budget of 145,000 Dutch Guilders. A reserve account of some 12,000 Guilders per annum is being established to meet special projects.

**Expert Members**

Currently Prof. Peter Noyce, UK and Dr. Sabine Kopp-Kubel from WHO are our two appointed expert members.

**BPP Executive Committee**

This met on one occasion during 1999 at The Hague in June. The aim of this body is to direct the agenda of the Board of Pharmaceutical Practice and to draft programmes for future conferences and congresses. A small programme sub-committee was established under the Chairmanship of Prof. Peter Noyce and this has been responsible for the Vienna programme.

**Meeting of BPP and BPS Executives**

The two Executives held a breakfast meeting during the Barcelona Congress. The object of these meetings is to coordinate the work of the two groups and to ensure cooperation whilst, at the same time, avoiding duplication.

The Board expressed its thanks to Mr (now Dr) Peter Kielgast, the current President during 1999 at The Hague for his work both as Chairman and Professional Secretary for the previous four years from 1994 to 1998. A small presentation in recognition of his work for the BPP was made during the meeting in Barcelona.

It was noted that Mrs Agathe Wehrli from WHO had recently retired and appreciation for her work for the Board and for FIP in general was noted.

Colin Hitchings is the Professional Secretary of FIP.
Interactions and discussion between teachers in pharmacy from all over the world result in learning and friendship. The Section provides a network of teachers who also contact each other after the annual Congress. The section maintains fruitful contacts with the IPSF and European Pharmaceutical Students’ Association (EPSA) and has a symposium with other Sections each year.

**Section projects**

Important Section projects include: a worldwide survey on the teaching of drug information (1986); continuing education (1988); pharmacy administration (1992); a survey on global student exchanges (1994); global guidelines for pharmacy education, the World List of Pharmacy Schools and workshops on academic management and leadership. The active contribution of the Section to the World Conference on Pharmacy Education (1998) in New Orleans has been one of recent highlights in the ongoing activities of the section. Key members of the Section such as Professors Aiache, Dolusio and Trinca have been participating in this very important project. As a result of this conference and building on the WHO consultancy on pharmaceutical education conducted in August 1997, in Vancouver, Canada, the Good Pharmaceutical Education Practice (GPEP) was developed. An open hearing during the 1998 FIP Congress in The Hague further fine-tuned the GPEP.

During the 1999 FIP Congress in Barcelona the Section was involved in the symposium on “Evidence based pharmacy practice”. The Sections programme included also a symposium on “Teaching and learning methodology in pharmacy” and a symposium on “Quality assurance in pharmacy education”. The programme of the Section during the coming FIP Congress in Vienna will focus on how to review, assess and adjust the pharmacy curriculum towards modern pharmacy practice from different perspectives.

The American Journal of Pharmaceutical Education has published several reports on these projects. Moreover, the Section’s Newsletter has contributed significantly to the section’s activities. The section has received substantial support from the American Association of Colleges of Pharmacy and the home universities of the officers of all these projects.

**History**

Since its founding in 1972, the Section has focused on facilitating an exchange of ideas and experiences in pedagogic and scientific issues concerned with the teaching of pharmacy. Founded under the superb leadership of President Prof. Rowson and General Secretary Prof. D’Arcy, the Section continued to prosper and grow under Presidents Kroszynski, Wertheimer, Temple, Aiache and many other serving officers. The present President is Prof. Paalzow. All these officers encouraged the membership to develop creative concepts and projects in the teaching of pharmacy, continuing education, graduate studies and other forms of learning. The Section’s 25th Anniversary Commemoration 1972-1997 by Prof. Marilyn Harris and Prof. Bruce Martin provides a wonderful account of its history.

**Ongoing programmes**

The Section promotes communication between faculty, students and pharmaceutical professionals in various settings. As a tradition during the annual FIP Congresses the Section organises very successful Poster Discussions on current teaching and education issues as well as a visit to the Faculty of Pharmacy in the host city. These visits offer enjoyable and informative programmes on the teaching research and tours of host institution.
The School of Pharmacy, University of London, has had a long tradition of educational outreach. In the past many students from other colleges in the UK and abroad obtained their London BPharm degrees through the University’s external degree programme. Our first Japanese undergraduate was here in the 50’s. Early photographs of the student body show students from throughout the world who have gone on to make major contributions to pharmacy in their own countries and others.

The tradition continues, not only with the present student body, which has representatives from 22 countries of the world, but through our consortium arrangements for postgraduate studies with our ULLA partners. ULLA is the Uppsala, London, Leiden-Amsterdam, and now Copenhagen and Paris link which aims to provide a forum for interaction and learning at the postgraduate level (mainly PhD) in the pharmaceutical sciences.

At the taught postgraduate level we have a Masters degree in Clinical Pharmacy specifically tailored for overseas students, as we do not wish to impose UK pharmacy practices where they are not appropriate. We strip clinical pharmacy down to its core knowledge, skills and attitudes and work with the students to apply those to policy and practice in their own countries. In 1999/2000 students are from ten countries (Austria, Germany, Ghana, Hong Kong, India, Malawi, Palestine, Saudi Arabia, Singapore, and Yemen) and hold prestigious awards from the British Council, Association of Commonwealth Universities, African Development Bank, Department for International Development and the Ghana Ministry of Health.

A joint initiative with the Faculty of Pharmacy University of Alexandria, Egypt, funded through the British Council, has made it possible to launch there a postgraduate Certificate in Clinical Pharmacy in September 2000.

The School has had an important influence in clinical pharmacy in the UK and more recently in Spain and Germany where the provision of clinical pharmacy services is in the developing stages. Joint certificate courses run by clinical pharmacists in hospital and primary care and accredited by the School of Pharmacy are offered at the Hospital de la Sant Creu i Sant Pau in Barcelona and at the University of Tübingen. Academic staff from the School visit these countries and advise on educational initiatives and clinical pharmacy development.

Several staff participate in the European Association of Faculties of Pharmacy (EAFP), of which I am currently president. The remit of EAFP is to share best practice in pharmacy education, to assist in the development of new courses such as in Pharmaceutical Care and to revisit more traditional topics to ensure that these are transmitted in the most relevant ways. We wish to prevent all faculties reinventing educational wheels. EAFP holds meetings (the last in Lisbon) to discuss educational change in relation to the future professional needs of pharmacy, problem based learning, student centred studies and continuing professional development.

It has sometimes been suggested that we should change our name to the “International School of Pharmacy”. There is no doubt that this progressive and outward-looking ethos has contributed to the School’s excellent ratings in teaching and research.

Professor Alexander Florence
Dean
THE SCHOOL OF PHARMACY
University of London

Founded in 1842 by the Pharmaceutical Society of Great Britain.
Joined the University of London in 1949.
Granted a Royal Charter by HM Queen Elizabeth in 1952.

The only independent school of pharmacy in the UK.
Peer-rated excellent in research and teaching.

Undergraduate Degree
- Master of Pharmacy (MPharm) - 4 years full-time

Taught Postgraduate Degrees
- MSc in Clinical Pharmacy - 1 year full-time
- MSc in Clinical Pharmacy, International Practice & Policy - 1 year full-time
- Diploma & MSc in Pharmacy Practice - 1 to 2 years part-time
- Certificate & Diploma in Medicines in Health Care - 1 to 2 years part-time

PhD and MPhil Degrees by research in the following areas:
- Pharmaceutics, including drug delivery and drug targeting, pharmacy practice & policy, materials science, pharmaceutical technology, and microbiology
- Pharmaceutical and biological chemistry, including pharmacognosy & phytotherapy, medicinal chemistry, pharmaceutical analysis
- Pharmacology, including neuroscience, molecular & cellular biology, and toxicology

For information about admission to a degree programme, please contact Margaret Stone, Registrar, The School of Pharmacy, 29/39 Brunswick Square, London WC1N 1AX, England, tel +44 (0)20 7753 5831, fax +44 (0)20 7753 5829, e-mail registry@ulsop.ac.uk. Visit the website at www.ulsop.ac.uk.
Pharmacists involved in administrative roles had no specific home within FIP until 1982 when a small working group was formed to enable such persons the opportunity to share experiences, techniques and solutions to common problems. The working group held meetings, and registered interested persons since it was not permitted to accept individual members. The goal of this group was full section recognition, which was granted in 1993 after the submission of statutes in 1991. Some 300 members were affiliated immediately, demonstrating the need and importance of this area.

Previously, administrative pharmacists joined the Academic, Community, Hospital or Industrial Pharmacy Sections, even though none of these was a good fit. One way to gain a sense of the Administrative Pharmacy Section is to see the subject matter of presentations at its meetings since 1993. Selected topics include the following from a much larger list:

- The Dividing Line Between OTC and Prescribed Drugs
- Pharmacy Economics In Selected Healthcare Systems
- Information for the Patient
- Drug cost containment: The Case for Self-Medication
- Drugs and Formularies
- Home Healthcare
- Pharmacy and Health Promotion
- Pharmacoconomics
- Ethics and Economics
- Automation and robotics in Pharmacy
- Pharmacy Services to the Elderly
- Dispensing Doctors
- What Will Be the Impact of Pharmaceutical Care?

The first Section President was Dr Lars-Einar Fryklof, of Sweden, who also served as founder and editor of the *Journal of Social and Administrative Pharmacy*. The second Section President was Jon Merrills of the UK. He was a pharmacist and attorney and operates a consulting practice in the UK. The third and current Section President is Prof. Albert Wertheimer of the USA. He is an academic and director of outcomes research at Merck and Company, Inc. Section Secretaries have included Dr Bert Leufkens of the Netherlands, Dr Cecilia (Claesson) Bernsten of Sweden and Prof. Marion Schaefer of Germany, the current Secretary. There is an Executive Committee composed of the three section officers and four other members elected by the membership present at the annual congress. This executive committee establishes policy and monitors the work of the officers. The officers and executive committee members communicate regularly via e-mail, telephone and fax, and with the general section membership via a newsletter that is published twice a year. Newsletter editors have been Dr Fryklof, Mr Leroy Fevang of Canada and most recently Dr Jeff Poston of Canada.

The Section has had a tradition of sole sponsorship of some programmes at the annual Congress and of joint sponsorship with other sessions where topics were of interest to different sections. These sessions include podium and poster presentations. A growing proportion of Section business is handled through a new committee structure. At present there are four committees and additional volunteers are always welcome. Perhaps, we should point out at this juncture that persons who are FIP members in another Section are able to add an additional Section affiliation for a very small fee. This means that a CEO of a chain of drugstores can continue to belong to the Community Pharmacy Section as well as to the Administrative Pharmacy Section.

The Section programme committee is already...
speculating about the adoption of new technology for future sessions, as well as considering topics as wide-ranging as privacy issues in the 21st century, the use of automation and robotics, the impact of e-commerce and the internet, the value of the pharmaceutical care concept, data exchange, future roles, and services in lesser developed countries.

We work hard all year, but especially hard during the week of the annual Congress, but on one evening the work ceases and we have fun. There is an annual Section dinner where we gather and meet new friends and colleagues and greet old ones. We exchange business cards, of course, but we agree to correspond, share resources, loan materials and help each other. How does one become involved and active within the Administrative Pharmacy Section of FIP? A good first step is to attend some of our sessions to check for relevance and interest. If we succeed there, it would be good to join the section when one next renews one’s membership. Then come to our sessions. Shake hands and introduce yourself to others. Be sure to attend the Section business meeting. Volunteer to serve on committees or task forces/working groups. Offer suggestions; ask questions and actively participate.

We are one of the smaller Sections, permitting us to be more flexible, informal and casual. Things can happen faster with less bureaucracy. We are very responsive, and we urge you to try us. For more information, contact the FIP offices in The Hague or the Section Secretary or President.
Pharmacy and Pharmaceutical Sciences World Congress 2001
61st International Congress of FIP

Main Theme: Combining Practice and Science to Extend Horizons

Singapore
Sunday 2 September to Thursday 6 September 2001
The Community Pharmacy Section is the largest of FIP’s 10 Sections with around 2,400 members. As the aims of the Section are

- to improve the professional standards of pharmacy and encourage realisation of the social aims of the profession as a part of public health and as a pharmaceutical service to the community;
- to plan and be responsible for the activities of FIP in the field of community pharmacy;

it was natural for the Section to launch a continuing education programme for community pharmacists and other interested participants in the annual Congresses. This programme was started in 1993 in Tokyo and the Section has since then organised a continuing education programme with specific objectives, planned and coordinated by a Planning Committee. The programme was, when it was first launched, a break with the hitherto seen programme structure for FIP Congresses: it required separate registration and in its form it alternated between lectures and workshops.

The participants are divided into groups of 20-30 according to language (the main languages being English, French and German, and in some years Japanese or Spanish, depending on the venue for the Congress). These workshops give added value to the participants as they can broaden their views through discussions with colleagues from other countries. And one such added value is the broader understanding and network of contacts they get from participating in the workshops. After each Congress proceedings are published and sent to the participants.

In the first four years the programme focused on pharmaceutical care aimed at various patient groups and at how to implement it. After the Vancouver Congress in 1997, the programme widened the focus to the improvement of patients’ outcomes by the intervention of pharmacists, and became a continuing professional development programme. Every year between 12 and 16 per cent of all congress delegates participate in these particular programmes (see table).

Observer for developing countries
In 1992 the Section decided to appoint an observer as representative of developing countries to be on the Executive Committee. The observer is invited to serve for a maximum of four years with a specific aim in mind. The first observer was Mike Rouse from Zimbabwe. He was chairman of a working group on how to introduce Good Pharmacy Practice in developing countries. This resulted in a set of guidelines, which has been sent to relevant countries.

The second observer was Jimi Adesanya from Nigeria, succeeded after two years by Nelson Uwaga, also from Nigeria. Their project has been to develop and start a Drug Information Centre for West African countries. This is now a reality. The next observer will be appointed in 2000.

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* The list of participants for Lisbon is missing. The number of participants is estimated to have been around 1700. If this is correct, the percentage for Lisbon is 13.
** The number of registrants for Stockholm was very high due to a large number of day-cards (800). They are not included in the numbers here, as they had no chance of participating in the workshops.
Our Section is working on many interesting strategic issues such as our International Medication Error reporting system, international standards for medication labelling, standards of practice for providing pharmaceutical care to HIV patients and identifying what are the “core” pharmacy services to be provided to hospitalised patients worldwide. We are also working with WHO on the Pharmabridge project. This project is designed to improve access to quality medication by strengthening pharmacy services and education in developing countries. We would welcome ideas or volunteer support for any of the initiatives. Please contact the President, Thomas S. Thielke, M. S., by fax + 1 608 263 9424 or e-mail ts.thielke@hosp.wisc.edu.

**Postgraduate training**

It is no secret that the tremendous growth in hospital pharmacy practice in the US was stimulated by postgraduate training programmes called residencies. A joint session with the Academic Section was held at the 1998 FIP Congress in The Hague. Subsequent to this, interest has been expressed in developing residency training programmes in South Africa. Vice President Rubin Moss is taking the lead in exploring how to this. He, along with a South African colleague, met with Section officers and the American Society of Health-System Pharmacists (ASHP) Executive Vice President, Henri Manasse to review their interest and discuss ways to achieve their goal of creating hosp pharmacy residencies in South Africa.

One of the items on the Section Strategic Plan is to “develop and expand continuing education”. While the resources of the Section do not currently enable us to take this project on as an FIP Hospital Section Project, our network of resources can be invaluable to pharmacists who are interested in developing residency training programmes. The work of the Commission on Credentialling and the Office of Accreditation Services of ASHP have done a significant amount of work developing accreditation standards and tools to assist residency programme directors develop learning objectives and evaluation tools. Our experience with the South African pharmacists is a good example of how networking among Section members can be of value.

**Major goal**

One of our major goals over the next year is to increase membership in FIP and our Section. Our Section currently has about 350 active members and we would like to reach 500. You can help in this goal. I would like to see every current member recruit one new member. If everyone does their job, we would double our membership and reach our goal. Thank you for your help and support.
The Industrial Pharmacy Section (IPS) was established in 1955 and today has 450 members who come from 26 countries. The main task of the Section is to represent and serve the pharmaceutical profession and pharmaceutical sciences within the pharmaceutical industry worldwide. The Section:

- organises specialised technical, professional and scientific conferences;
- develops recommendations and support international guidelines and their harmonisation in the field of industrial pharmacy; and
- promotes the role of the pharmacist and the pharmaceutical scientist in the pharmaceutical industry.

The IPS is successful:
- through participation in the Dissolution Working Group and the other initiatives of the FIP Special Interest Groups;
- through organising special workshops at FIP annual Congresses, as well as seminars with organisations outside FIP; and
- by providing a platform for direct interaction between experts from industry, academia, and regulatory agencies, as well as colleagues from the Laboratories and Medicines Control Section (LMCS).

IPS awards
At the 1999 Barcelona Congress the Section introduced an award for the best industrial poster. The first winner was Mr Simon Rodriguez Cruz (Boehringer Ingelheim-Promeco, Mexico).

The annual IPS award recognises outstanding scientific, technical or regulatory contribution of particular significance to the pharmaceutical industry. The 1999 award was presented to Dr Eric Sheinin (FDA) for his important contributions to the process of international harmonisation (ICH).

Future plans
At the 2000 FIP Congress in Vienna, our Section programme will focus on parenteral products manufacturing technology and quality. The first symposium “Barrier Isolation Technology – The Future for Parenteral Production” will comprise important topics such as barrier technology design, and qualification, GMP, and regulatory aspects. The second symposium, organised jointly with the LMCS, will cover aspects of “International Harmonisation of Quality Characteristics for Parenterals”. International experts will review the status of harmonised monographs, and will discuss preservative efficacy testing, particulate matter testing and parametric release.

Also in Vienna, we will have the Industrial Pharmacy Section Assembly of Members to elect the new Executive Committee members, and to discuss the IPS plans and strategies for the future.

At the 1999 business meeting in Barcelona, the IPS Executive Committee was asked to further improve communication tools for our interactions amongst the section members as well as with other parties of interest. During the last months we have been working on a new IPS website which will be presented at the Vienna Congress.

In preparing our Section programme for the 2001 Congress in Singapore we have chosen a subject which is of global interest and is of specific relevance to the South-East Asia region: “International Sourcing of Pharmaceuticals”. We are currently planning several presentations and discussions on sourcing strategies for active pharmaceutical ingredients, excipients, pharmaceutical dosage forms, to represent the viewpoint of pharmaceutical companies and local suppliers as well as quality and regulatory aspects.

To expand on the above subject, we are specifically interested in providing a poster session and are even considering a session for short oral contributions to maximise information exchange and communication amongst the participants. We therefore encourage you to contact Tom Sam (a.sam@organon.oss.akzonobel.nl), if you are interested in contributing to our Section symposia in Singapore.

The IPS is looking forward to your feedback (www.FIP.nl/IPS).