

## HOME

ROBERTO FRONTINI, PRESIDENT OF THE EUROPEAN ASSOCIATION OF HOSPITAL PHARMACISTS

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It ensures that medical devices directive is not enough to ensure the safety of patients

### Felix Espoz. Madrid

"At this time, there is insufficient harmonization throughout Europe and the specialization of hospital pharmacy is not mutually recognized by States." "For this reason, the European Association of Hospital Pharmacists (EAHP) advocates a specialization that Yes is recognized in all countries", says in an interview with publication of hospital pharmacy the President of the Association, Roberto Frontini, which analyzes in addition other European directives, the crisis and the future of the pharmaceutical business.

### What are the main concerns of European hospital pharmacists?

Pharmacists in hospital (HPS) are well recognized as advocates for the safety of medicines in hospitals in many European countries. However, this is not a reality at all, especially in the eastern part of Europe. Therefore, it is an important task for EAHP promote the hospital pharmacy in those countries in order to achieve optimal use of medications and increase the safety of the patient.

Individualized medications are related to production on a small scale in hospitals, as recognized in the resolution of EDQM 2011. Special groups such as children and the elderly need more attention. It is necessary to establish standards in this field to ensure exactly the same high quality in every hospital in Europe.

The shortage of medicines also are becoming, increasingly a problem. It is necessary to work with the industry to avoid the shortage of essential drugs that directly influence the safety of the patient. This fact also underlines the need to produce drugs in hospitals if the shortage occurs.

Finally, pharmacists in the hospital environment need specialized skills that can only be reached by additional training. At this time, there is insufficient harmonization throughout Europe and the specialization of hospital pharmacy is not mutually recognized by States. For this reason, EAHP advocates a specialization that Yes is recognized in all countries, in order to ensure the safety of the patient.

### Europe is developing a series of directives relating to the pharmacy. What is the position of the EAHP thereon?

There are some important directives under review. The first is on mutual recognition in the so-called 'sectoral professions' (doctors, pharmacists, nurses, dentists, architects, etc.). EAHP supports the introduction of hospital pharmacists in a manner similar to proprietary products referred to in the directive to physicians.

The second is the directive on pharmacovigilance. EAHP is an interested party in the promotion of the role of pharmacists in this field. The side effects of drugs are the leading cause of hospitalization in at least 5 per cent of revenues. It is therefore crucial that pharmacists are involved.

Thirdly, there is the directive on medical devices. The regulation on medical devices, which include some of the critical devices, such as smart bombs for the application of intravenous drugs, is not enough to ensure the safety of the patient. The EAHP recognizes the complexity of the subject and believes that pharmacists should be involved in the assessment in hospitals.

### Is the crisis affecting the work of hospital pharmacists?

Personally, I am lucky to work in Germany, where the crisis is not as dramatic as in other countries. Portuguese colleagues have informed us of wage cuts of 20 percent and from Greece we hear that some companies not supplying important cancer drugs in quantities sufficient due to their economic situation. This unethical behavior that creates an artificial scarcity is unacceptable and put patients at risk.

### Can the efficiency provided by the hospital pharmacy help in times of crisis?

Hospital pharmacists continue being perceived by the authorities as a 'cost factor' in hospitals. This point of view underestimates the influence of pharmacists in the efficient prescription of medicines and the reduction of drugs-related events. I think that the question is more than efficient logistics, clinical services. We need proactive clinical pharmacists in doctors in their prescribing information for drugs that influence.

### Where happens the future of hospital pharmacy in the medium term?

We are going to organize a Conference 'vision 2020' with our members, probably at end of the year or beginning of 2013. Needs and actions across Europe are very different and as a pan-European have to understand more about the vision they have our members for years, and convert that vision into the substance of our policy.

Personally, I see the hospital pharmacist in 2020 as a full member of the care team the patient who decides on the route of administration, dose and timing of implementation for all prescribed medications. This includes the daily physical presence of pharmacists where are these decisions and continuous communication with other health professionals such as doctors and nurses. Pharmacists will have to take responsibility for their actions and help doctors to make the best use of medicines. Likewise, they will have to stay connected to their roots, which are the production of medicines. Finally, they will be the only competent specialized partner for the small scale production of individualised medicines.

### In what projects is he working the Association?

We need more visibility and support at the national level. As President, I'm trying to get a better contact with the national authorities to achieve this goal. In addition, my main interest and commitment is education. I firmly believe that the education of hospital pharmacists in Europe must be updated to the needs of pharmacists in the future. We must focus on the clinical pharmacy instead of chemistry, and we have to focus on instead of biotechnology in plants. Without adequate forward-looking education we faulty in our mission.



