EURO DURG bulletin

No. 6 December 1998

EUROPEAN DRUG UTILIZATION RESEARCH GROUP

Editors. *This issue was prepared by the following members of the Executive Committee of EURO DURG: Morten Andersen, and Ulf Bergman.*

Minutes of the EURO DURG General Assembly

The General Assembly was held at Hotel President, Berlin, 16 August 1998 and attended by about 60 persons.

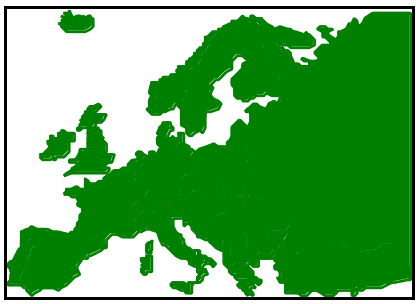
Marit Rønning and Ulf Bergman

1. Report of the Executive Committee

Ulf Bergman presented the report of the executive committee concerning the activities in the period 1996-1998. Since the election June 30, 1996 in Club Aliga, Lake Balaton, Hungary, the Executive Committee has had a number of teleconferences and meetings. The following is a list of the major achievements: a report from the Lake Balaton meeting was published in the Eur J Clin Pharmacol 1997;52(Suppl 2) I-VIII, A19-A28; a EURO DURG web page has been opened; a EURO DURG bulletin with 5 issues and 1 supplement (constitution) has been published (all to be found on the webpage); working rules and a plan of action have been developed (see bulletin No.2); the number of member states has increased from 9 to 14, new members are Greece, Hungary, Iceland, Israel and Norway; arranged a EURO DURG workshop, a joint EURO DURG/EACPT symposium and a poster session at the EACPT meeting in Berlin in September 1997; arranged a EURO DURG workshop, a joint EURO DURG/ISPE symposium, an Introductory half-day course in Pharmacoepidemiology, and a poster session at the ISPE meeting in Berlin in August 1998, all these arrangements in collaboration with WHO-EURO in Copenhagen; established closer collaborations with EACPT (Jerusalem 1999) and ISPE (for future joint European conferences) and WHO-EURO; coordinated EURO DURG working groups; arranged a meeting in collaboration with WHO-EURO with representatives of EU in Brussels on the harmonisation of collecting drug utilisation data in Europe.

Financial report

Emilio Sanz presented the financial report for the period 1996-1998, and a very preliminary budget for 1999 and 2000. The main problem is that the expenses now are bigger than the incomes, resulting in a steady decrease in the economy of EURO DURG. One solution to this problem could be to increase the fee per member paid by the national groups to EURO DURG. For most of the national groups this would not be possible for 1999, as the membership fee for next year already has been agreed upon. The Eastern European countries found it difficult to pay more to EURO DURG as the present fee was considered quite big as related to the general income level. A good solution for the finance situation would be to increase the number of members. It was also proposed to look for possible sponsors of EURO DURG. WHO-Europe (represented by Kees de Joncheere) informed that their plan is to provide some money for running the EURO DURG network in the coming years.



It was concluded that the membership fee to EURO DURG from the national groups should be kept also for 1999. At the meeting in Jerusalem in 1999, an extraordinary business meeting should be arranged in order to discuss an increase in the membership fee from year 2000. The new executive committee should discuss possible sponsorships for EURO DURG.

2. Election of Executive Committee 1998-2000

13 candidates were proposed for the new executive committee (see EURO DURG bulletin No. 5), the following eleven were present and elected:

Flora Haaijer Ruskamp - Netherlands **(chair)**
Robert Vander Stichele - Belgium
Frantisek Perlik - Czech Republic
Morten Andersen - Denmark **(new)**
Joerg Hasford - Germany **(new)**
Zsuzsanna Szepezdi - Hungary
Almar Grimsson - Iceland **(new)**
Marit Rønning - Norway **(new)**
Emilio Sanz - Spain
Ulf Bergman - Sweden
John Ferguson - UK **(new)**

3. Nominating committee 2000

The following members of the nominating committee were elected:

Ebba Holme Hansen - Denmark
Annemarie Hoffmann - Germany
Nicola Montanaro – Italy

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4. Report from new members
Four new national DURGs were welcomed as members: DURG Greece, DURG Iceland, DURG Israel and DURG Norway. A representative from each of the new member countries presented the national DURGs.

5. Communication and collaboration between DURGs
An important source for this communication is the EURO DURG bulletin. Two issues are planned for next year. It was commented that a better time schedule should be introduced for the publishing of the issues. So far, the bulletin has been published late according to the contents of it (e.g. the information about the Berlin meeting), and has in general not arrived when it has been expected to.

Everyone was encouraged to provide material for the bulletin. The members were also encouraged to form new working groups. Emilio Sanz informed about a new group concerning drugs and children, which now comprises 6 countries. He hopes to be able to include 15-20 countries.

Annemarie Hoffmann made a proposal to elect a contact person for the individual members. This proposal was agreed to, and it was left to the executive committee to arrange this.

6. Relationships with DURG groups outside Europe

The proposal from the Executive Committee, that at this stage we should offer our bulletin and link up with our webpage to national DURGs outside Europe, was approved.

7. Future meetings
The next meeting is planned in connection with EACPT in Jerusalem in October 1999. Robert Vander Stichele will communicate with EACPT and establish a scientific committee from EURO DURG to plan this meeting.

It was proposed to have a future meeting in an Eastern European country in order to reduce the costs. It was left to the scientific committee to discuss this further.

8. Closing remarks
The Chair, Flora Haaijer Ruskamp, welcomed the new members of the Executive Committee and thanked the former members of Executive Committee for the passed years. She also expressed our thanks to the Nominating committee, in particular Annemarie Hoffmann for an excellent job.

Report of the EURO DURG workshop and ISPE EURO DURG joint sessions, Berlin 1998

Zsuzsanna Szepezdi

Attended by 70 participants from 24 countries, EURO DURG held its 3rd annual meeting in Berlin on 15 and 16 August. The scientific meeting was in collaboration with the 14th ICPE of the International Society for Pharmacoepidemiology (ISPE).

The EURO DURG workshop and the General Assembly, which was conducted in co-operation with the WHO Regional Office for Europe, took place in advance of the ISPE-EURO DURG joint sessions and lasted for a day. In the EURO DURG workshop the participants of the 4 working groups, started in Berlin 1997, met again to exchange information on latest developments as well as to discuss possible further joint research projects.

The ISPE-EURO DURG joint sessions had 3 different parts:

The main topic of the **ISPE-EURO DURG educational session** was the history and uses of pharmacoepidemiologic and drug utilization research. The lectures of joint **ISPE-EURO DURG plenary session** gave an excerpt from pharmacoepidemiological research. The common topic was the appropriateness of drug utilization and prescribing behaviour. Five themes were presented: antibiotic prescription (Thomas Einarson), antiepileptic drug use (Judith Garrath), polypharmacy (Lars Bjerrum), NSAID use and GI Toxicity (Ulf Bergman) and Educational Intervention Project (Petra Denig).

In the **joint ISPE-EURO DURG poster session** (co-ordinated by Dr. Liselotte von Ferber and Dr. Robert Vander Stichele) 105 posters were discussed in six parallel small groups and the 12 best posters were selected and awarded a prize.

JERUSALEM 1999:
* * * * *
EURO DURG: 2-3 October
EACPT3: 3-8 October

Prize-winning posters

Pharmacoeconomics/Cost Effectiveness

a. Interface Primary Care-Hospital: Peter Davey et al., Scotland. The influence of case mix bias on costs of hospitalisation for lower respiratory tract infection.
b. Disease-specific Items: Jaime Caro et al., USA. Estimating the survival impact of preventing cardiovascular disease.

Improving Prescribing Practices

a. Methodology: Corinne de Vries et al., Netherlands. Effects of audit meetings on prescribing.
b. Disease-specific Items: J. Soon et al., Canada. Screening for depression among residents of nursing homes increases the frequency of intervention by primary care physicians.

Outcomes Research

a. Disease-specific Items: A.C. Egberts et al., Netherlands. Patterns of switching and stopping initial, highly-active antiretroviral therapy (HAART) in a cohort study of Dutch HIV-seropositive patients.
b. Methodology: Jean-Pierre Grégoire et al., Canada. Perceived side effects and discontinuation of new courses of anti-hypertensive medication.

Drug Utilization

a. Patterns of Drug Use Related to Social Groups.
1. Women and Children: Charlotte Olesen et al., Denmark. Trends in use of hormone replacement therapy among Danish women: a 5-year population-based survey.
2. Elderly and Social Class: Jacques Lelorier et al., Canada. Age-related differences in the use of thrombolytic therapy in patients who had an acute myocardial infarction.

a. Consumption: Ludvik Stika et al., Czech Republik. The consumption of hypolipidemic drugs in the Czech Republik.
b. Patterns of Prescribing: Robert H. Vander Stichele et al., Belgium. Impact of benefit information in patient package inserts on patients' perception of risk/benefit of medicines.
c. Methodology, Pharmacoeconomics, Politics: Bernard Bégaud et al., France. Methodology of an observational study concerning the prescription of an antidepressant.
d. Patterns of Drug Use Focused on Drugs: Ilse Truter et al., South Africa. An investigation into the prescribed daily doses (PDDs) of hypolipidemic agents in South Africa.

Reports from the working groups

Workshop on Confidentiality

Coordinator: *Liselotte von Ferber*

With the exception of Spain and Italy, there was a complete overview of the drug utilisation research situation since the European Directive on privacy came into force. Discussion focused on questions concerning the data protection laws in connection to pharmaco-epidemiological databases. The important aims of Pharmacoepidemiology and drug utilisation: drug safety, quality of prescribing, cost containment are hampered by data protection laws when attempting to access the necessary health data. There was concern as to whether the research, which has already set international standards (e.g. in Sweden), can be continued.

The reports from Germany, Ireland, Sweden, Norway and Denmark showed two strategies which complement each other when applying the European Directive.

- preparation of public health laws to control the access to personal health information for drug utilisation research (as discussed in Norway and Sweden).
- committees for deciding on the access to databases taking into account the protection of privacy and public interest in research. Ethic committees will represent the research's point of view in the legal decisions concerning personal rights (Denmark, Germany).

On the whole, the implementation of the European directive has not been finalised for all of the countries in question. Therefore, the situation concerning drug utilisation remains open. In terms of the resolution of the EURO DURG of July 1996, there is still a lot to be done regarding politicians and the general public.

Improving the quality of drug use

Coordinator: Ingrid Schubert

The aim of this workshop was to bring colleagues who work or are going to work in this field together. Perspectives for further research and implementation of evaluated programmes were discussed. Educational tools, problems of evaluation, and experiences in implementation were highlighted in short talks.

Two educational approaches were described, the teaching methods used in the training of doctors to establish a personal drug list with first-line drugs for commonly encountered health problems (P-Drug-Concept). The second approach focused on individual prescribing profiles, as well as their underlying motives. e

Implementation of educational programmes is supported by indications of effect on actual prescribing. Monitoring of changes is a valuable tool. Other relevant aspects concern: attention for the heterogeneous interest of different participants in educational programme, the necessity of structuring the group meetings, ensuring the quality of the materials and data analyses employed, and giving continuous support from outside, including new impulses, to sustain group dynamics.

An important issue, often overseen, is the political dimension in all efforts to improve prescribing practices. Health planners and politicians must guarantee the access to necessary treatment and its quality but are put under immense pressure with respect to costs, patients' expectations, influence from industry and professional groups.

Changes in health care system provide opportunities for medical doctors and pharmacist to take on new roles, such as improving the communication between pharmacist and GP.

Bottom-up initiatives need support from the Ministry of Health and from insurance companies. In contrast to the political solutions offered so far, the positive effects seem to be more lasting in initiatives at local level.

Finally, the participants discussed internal organisation of the project group. Four subgroups were created, one on internal communication (through Internet), one on methods for implementation of quality circles, one on specific research questions about quality indicators and finally a subgroup on evaluation methodology.

Members are invited to indicate their interest in active participation in one of these groups to the executive committee.

Mapping Europe

Marit Rønning and
Robert Vander Stichele

Present: 37 participants representing the following 15 countries: Armenia, Belgium, Canada, Denmark, England, Germany, Greece, Hungary, Iceland, Italy, Lithuania, Norway, South Africa, The Netherlands, The Czech Republic.

Dr. Robert Vander Stichele presented the strategy proposed by the working group of the "Mapping Europe" project. The working group has the ambitious intention to design a map of European drug utilization. As can be seen from the data concerning drug utilisation available from for several countries, there are regional and national differences in the scope of utilisation, which can only be partly explained by the differences in the morbidity of the population.

The first attempts to generate international data soon showed that the methodological requirements are not present in many countries or that the methodology employed would not be easily compatible. For this reason the working group has planned a survey on the status of national classification systems and data collection systems. Not all countries work on the sound basis of the ATC/DDD methodology, which is recommended by the WHO for use in drug utilisation studies and some countries question cost-effectiveness of the investment in time and educational effort to convert to the international standard. Most participants, however, agreed that a common classification system has to be adopted nationally in a common way. A problem often encountered is that decision-makers do not realize that this adoption is a big task and that it is necessary to use experts in this work.

Four proposals were distributed at the meeting and briefly presented:

1. A position paper on the necessity of harmonising methodological instruments
2. A detailed questionnaire on the characteristics of national drug markets, registration processes, reimbursement classification and the level of adoption of the ATC/DDD Methodology.
3. The project plan for the Mapping Europe Project with timetable
4. The funding strategy

The participants in the workshop supported the main content of the project plan.

The main steps for the project now are to achieve funding and active involvement from the national groups. The working group will continue its contacts with the EU commission and approach DGIII, and possibly DGV or DGXII. The position paper, questionnaire and project plan was sent to the national DURGs with the request of active feedback.

The user perspective in drug utilisation research

Reginald Deschepper and Anna Birna Almarsdóttir

The workshop on the user perspective aimed firstly, to inform about the ongoing TUPP EURO DURG project on the use of mood-modifying medicines. Secondly, to provide an overview of studies in the field of the user perspective on mood-modifying medicines. Finally, to explore the need for and possibilities of continuing research on the use of medicines that focuses on the user.

1. Overview of The User Perspective Project (TUPP) on mood-modifying medicines.
Professor Ebba Holme Hansen from the Royal Danish School of Pharmacy outlined the history of TUPP. At the first EURO DURG conference in 1996, it was concluded that there is a need for a project that focuses on the user perspective. The year after, at the EURO DURG meeting in Berlin 1997, researchers from several countries decided to start a project on the use of mood-modifying medicines. During meetings in Copenhagen and Berlin, research questions and methodology were refined. The overall aim is to uncover the social meanings attached to mood-modifying medicines in different locations in Europe. Medicines groups included in the project are antidepressants, sedatives, tranquillisers and herbals (i.e. St. John's Wort).

The project is carried out in collaboration with WHO/EURO Pharmaceuticals. The countries involved so far are Belgium, Denmark, England, Finland, France, Greece, Ireland, The Netherlands, Norway, Scotland, and Spain. The members of the project form a multidisciplinary team consisting of pharmacists, a pharmacologist, a general practitioner, anthropologists, sociologists, and a psychiatrist.

Qualitative analysis of semi-structured interviews with users has been chosen as the most appropriate core methodology for TUPP. By February 1999, a pilot study of at least three interviews should be conducted in all countries involved in the project. Topics are choices and strategies of the drug users, perceptions of and experiences with medicines (bodily, mentally and social) and communication with professionals and user networks. The main study will consist of at least 20 interviews. In addition to this obligatory part, every country is free to add one or more optional research questions (e.g. role of advertisements) or methods (e.g. focus group interviews).

A publication of a book is planned in collaboration with the WHO. The preliminary title is "The use of psychotropic medicines in Europe". It should cover: Systems and settings across Europe, Sales and use patterns, The lay perspective: summary of findings across Europe, Country profiles, Conclusions and recommendations.

2. A summary of previous work on the user perspective.
Nicky Britten of the University of London presented an overview of existing studies regarding the user perspective in general and the use of psychotropics in particular. These studies are often based on small samples of interviewees and focus on attitudes and self-reported behaviour. Topics covered are perceived efficacy, side effects, worry about addiction, etc. Important issues that have to be considered for TUPP are e.g.:

- how do lay people understand medical terms?
- what is the role of relationships and social contexts?
- different perspectives on illnesses.

It is optional for each research group to include non-users as well as users. It could be important, for instance, to know why people, coping with a depression, don't want to use medicines and what kind of alternatives they prefer.

3. Strategies for further EURO DURG research on the user perspective.
The workshop in Berlin 1998 not only intended to inform about the ongoing project. Anna Birna Almarsdóttir from the Royal Danish School of Pharmacy raised the question of other possible projects and stated that the group should go on and build on the methodology that we are developing for the current TUPP. There are still many topics that are unexplored from the user or lay perspective and hence, would be worth studying. The group came up with examples such as:

- other kinds of medicines, such as medication for AIDS;
- the dynamic aspects of medicine use (e.g. how and why people stop and restart their medication);
- particular groups of medicine users (e.g. children);
- relations between medicine use and e.g. perceptions of illness;
- prescribers' process of choosing a treatment. (They can be viewed as a kind of "user", as they are often decision-makers regarding treatment. Therefore, they may be studied with similar methods as the users).

The workshop concluded that the study of the user perspective would not stop with the project on mood-modifying medicines. There are many ideas for other user-focused projects waiting to be researched within the framework of EURO DURG.

New version of the ATC index with DDDs

Lists of new ATC codes and DDDs assigned in 1998 and ATC/DDD alterations valid from January 1999 are now available from the WHO Collaborating Centre for Drug Statistics Methodology.

The main part of the ATC alterations this year is due to changes in the classification of antivirals in ATC group J05 and immunostimulants in ATC group L03.

In ATC group J05 - *Antivirals*, all reverse transcriptase inhibitors are now classified at two new 4th levels.

ATC group L03- *Immunostimulants* now includes the following 4th levels: *Colony stimulating factors, Interferons, Interleukins* and *Other cytokines and immunomodulators*.

Alterations in DDDs are made for the following four substances: zidovudine, etidronic acid, topiramate and risperidone.

An updated ATC index, valid from January 1999, is ready for distribution mid December. The latest issue of *Guidelines for ATC classification and DDD assignment* was published in August 1998.

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An update of National DURGs in Europe

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