EuroDURG bulletin

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EUROPEAN DRUG UTILIZATION RESEARCH GROUP

Editors. *This issue was prepared by the following members of the Executive Committee of EuroDURG: Peter Mol, Monique Elseviers, Robert Vander Stichele, Ingrid Schubert, Hege Salvesen Blix, Ria Benko. Send reactions to:benko@clph.szote.u-szeged.hu*

The Chair's message

Dear friends,

During the General Assembly at the ISPE conference in Lisbon last summer, I took up the challenge and candidated for the EuroDURG chairmanship for the next two-year period. My decision was mainly based on the fact that most of the active ExCo members also decided to stay as the representative of their country for the coming period. Moreover, the WHO Collaborating Centre for Drug Statistics Methodology of Oslo continued to support EuroDURG offering the secretarial help of Hege Salvesen Blix. And Peter Mol took over the unrewarding task of treasurer. I am grateful for all the support I received from the ExCo members and the national chairs. With their help, I hope to guide EuroDURG through the current transitional period.

From the discussion at the General Assembly in Lisbon, it became clear that most national DUR organizations supported the continuation of a DUR organization at the European level, at least for the next two-year period. We realize that it will be difficult to continue with the limited financial resources available. However, we also realize that challenging perspectives and new initiatives are present, offering the opportunity to play an active European role in the field of pharmaco-epidemiology, also in the coming years.

Limited financial resources still is the main problem for the survival of EuroDURG. We need a guarantee to have sufficient resources to cover the costs for at least four teleconferences per year and to keep our website functioning. Communication with the ExCo members, with the national organizations and with fellow researchers forms a minimum requirement to keep EuroDURG alive. We are trying to cut down the costs of teleconferences and the website. Meanwhile, we trust on the goodwill of the national DURGs to pay their membership fees in due time.

Despite these problems, we already have an exciting program to work out during the coming years:

- There will be the EACPT meeting 2007, organized in Amsterdam, with the participation of EuroDURG (the next occasion to present DUR material at the European level!). You will find detailed information in this bulletin.
- In collaboration with ISPE, EuroDURG is invited to organize a symposium on the role of Health Insurance Organizations in Drug Utilisation and Public Health that will take place in Germany or Belgium in November 2007.
- During the Ulster meeting of 2005, EuroDURG took the initiative to work out a common framework for national drug registries (with ATC browser). EuroDURG will take the lead to finalize this work in at least 5 countries and to promote this tool within the ISPE-DURSIG.
- As a follow-up of the DURQUIM meeting on Prescribing Quality Indicators (Mechelen 2004), a catalogue of quality indicators will be published and distributed with the help of EuroDURG
- EuroDURG will take part in the Happy Audit project (ambulatory prescription of antibiotics) and the Druid

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study (registration of medication with an influence on driving capabilities). Both projects are presented in this issue of the bulletin.

To finalize, I invite the EuroDURG readership to play an active role during the upcoming conferences of 2007. Please remember that the deadline for abstract submission for the EACPT conference in Amsterdam will be March 1, 2007. and for the ISPE conference in Quebec it will be February 16, 2007. I hope to meet you and to see your research work presented during the conferences in Amsterdam or Quebec!

Monique Elseviers,
Chair EuroDURG

News from the treasurer

EuroDURG continues to function on a limited budget. Our income is fully dependent on the contribution of national DURG members, who pay a fee of € 5 per estimated individual member. Since the previous financial report payment status has improved and now most national groups have paid their fees up to 2006. Those groups who have not done so are asked to make their payments as soon as possible. At the last general assembly it was decided that national DUR groups that did not fulfil their financial obligations cannot delegate a member in the executive committee.
Additional income for larger projects in the past, such as the Ulster Conference and the Prescribing Quality Indicator meeting in Mechelen is and will be generated in the future also on a project basis.

Expenditures made by EuroDURG are mainly on telephone conference costs for the executive committee and subcommittees and the maintenance of the EuroDURG website. Several routes are explored to reduce these costs. Due to the more intensive cooperation with ISPE the Executive Committee expects that fewer telephone conferences are needed in the future while the same output is maintained. Furthermore, experiments are conducted to reduce telephone costs through calling via the internet. Alternative options are explored to move the EuroDURG website to an academic centre where the costs for maintenance are negligible.

Peter Mol
Treasurer

The new constitution

European Drug Utilisation Research Group
CONSTITUTION, 2006

1. NAME

The name of the organization shall be the "European Drug Utilization Research Group", herein after called the EuroDURG. The location of the EuroDURG will be at the secretariat of that time.

2. DEFINITIONS

Drug utilization and pharmaco-epidemiological research is defined as research on the quantitative and qualitative aspects and the determinance of drug use, the determinants and the effects on specific patients specifically and on the population in general.

3. MISSION

The EuroDURG has as its mission *"to promote drug utilization research as a means to improve use of drugs by providing a European forum for communication and cooperation between people interested in drug utilization research".*
To achieve its mission, the EuroDURG will on the global level:

- work within the International Society for Pharmacoepidemiology
- to provide an effective platform for communication and cooperation between researchers interested in this discipline from all the continents of the world
- to foster the adoption of standard international drug use research methodology
- to maximize the potential of the information available on drug utilization for improving patient care
- to promote the incorporation of drug utilization research and its applications within educational programs

on the European level:

- cooperate with European drug regulatory authorities, World Health Organization Regional Office for Europe, the European Union, European Council, scientific associations, health insurance agencies, the pharmaceutical industry, academic departments and professional bodies in Europe to further pharmaco-epidemiology and drug utilization research and its application
- stimulate National Drug Utilization Research Groups to promote Individual ISPE membership among their

members and to adopt, where possible, the statue of ISPE National Chapter

4. MEMBERSHIP

The EuroDURG accepts ordinary members, associate members and honorary members.

Ordinary membership of the EuroDURG is open to European residents with an active or developing involvement in drug utilization research. Legally constituted national organizations within Europe with a mission in accordance with that of the EuroDURG have collective membership of the EuroDURG.

EuroDURG may accept researchers with active involvement in drug utilization research from outside Europe as *associate members.*

EuroDURG may award the title of *Honorary member* to persons who have given exceptional service to EuroDURG.

5. MEMBERSHIP FEE

From time to time, the membership fee shall be fixed by the Executive Committee and confirmed by the EuroDURG at a General Assembly. EuroDURG gets individual fees for individuals and collective fees for members of national organizations. This fee shall be payable on January 1 each year. Membership shall be deemed to have lapsed if the payment is more than 12 months in arrears.

6. LOSS OF MEMBERSHIP

The General Assembly may exclude members who do not honor their financial obligations, or who prove unworthy of membership. Members who fail to pay their membership fees, following a proper demand, or who prove unworthy of membership may be excluded from membership from a date to be set by the Executive Committee.

7. ORGANS

The organs of the EuroDURG are the General Assembly, the Executive Committee, and the Nominating Committee.

8. THE GENERAL ASSEMBLY

The General Assembly comprises the members of the executive Committee, and all ordinary members.

Functions of the General Assembly:

- it appoints the Chair and 10 members of the Executive Committee.

The Executive Committee shall be elected in such a manner as to ensure that:

  - the major scientific disciplines are represented; and
  - there is not more than one representative (does not apply to the chairperson) from each country serving on the committee.
  - it appoints 3 members of the Nominating Committee.

- it takes all decisions relating to the scientific policy of the EuroDURG;
- it receives proposals of general interest from members of the EuroDURG;
- it discusses and adopts the financial report and fixes the rate of the membership fee;
- it elects Honorary members;
- it modifies the constitution of the EuroDURG, and such modifications must obtain at least half of the country delegates plus one in favour of these modifications;
- and it decides on the dissolution of the EuroDURG.

Voting rights

All decisions are taken according to the principle 'one country one vote'. The casting vote of the Chair shall be decisive in the absence of a clear majority of voting national representatives.

Appointment of national voting representatives

Members from one country appoint their representative and make this known to the chair at the start of the General Assembly. Each representative of a country may delegate her/his vote to another member by writing.

Decisions are taken by simple majority vote.

Organisation of the General Assembly

The Secretary dispatches the agenda for the General Assembly, accompanied by the reports pertaining to it, to the members of the General Assembly at least one month prior to the meeting. Any proposal intended for the General Assembly agenda must reach the Secretary two months

For detailed information, see page 9 of this bulletin

prior to the date of the meeting. Members of the General Assembly may enter a plea of urgency for a proposal not included in the agenda.

The General Assembly shall decide on whether or not a discussion of the item is appropriate. Members of the General Assembly shall receive a report containing the text of all decisions taken. The General Assembly meets every two years, if possible in conjunction with a scientific meeting. The Executive Committee or a majority of members may also convene such a meeting.

9. EXECUTIVE COMMITTEE

The Executive Committee (ExCO) comprises the Chair, the Vice Chair, the Secretary, the Scientific Secretary, the Treasurer and six Members at Large. The term of elected office shall be two years.

Functions of the Executive Committee include:

- it carries out the general and financial business of the EURO DURG subject to the decisions of the General Assembly;
- it may co-opt up to five additional, non-voting members for a term expiring not later than the following General Assembly. Co-option may be used to replace members who can no longer function or to bring special expertise into the Committee for specific purposes;
- it may fill mid-term officer vacancy from existing Committee members;
- in urgent circumstances, the officers may act on behalf of the Committee, and they shall report on such activities to the next meetings of the Committee and of the General Assembly;
- it shall initiate and oversee scientific meetings in collaboration with a local organising committee.

10. ELECTION OF THE EXECUTIVE COMMITTEE

Elections of the executive committee are prepared by a Nominating Committee, existing of the past chair and two other EuroDURG members. No member seeking election or re-election can be a member of the Nominating Committee. Candidates can be proposed by countries or individual members. The election shall be by secret ballot.

The Executive Committee shall be elected at the General Assembly by members present at that meeting on the basis of "one country one vote". Elected members will hold a two year term in a rotating Executive Committee membership. Members who have served in one of the following offices (chair, vice-chair or scientific secretary) for two consecutive terms, i.e. four years, shall not be eligible for re-election in the office they have held, for the following two terms, i.e. four years. No person shall hold more than one office simultaneously.

11. FINANCES

The Committee shall send the annual financial report including the audited statements on the affairs and conduct of business of the EuroDURG to all members before every General Assembly.

EuroDURG Constitution was approved as draft at the EuroDURG meeting held in Huddinge (Sweden), September 1st, 1994 and accepted by the General Assembly on June 30, 1996, at the EuroDURG 1st Congress, Lake Balaton, Hungary.

Hege Salvesen Blix
Secretary

Founding of SIG-DUR

A bit of history

(Bergman U. Pharmacoepidemiol Drug Saf. 2006;15:95-8)

Following the recommendations from a World Health Organization (WHO)/Euro symposium Consumption of drugs in 1969, a common classification system for drugs was developed, the Anatomical Therapeutic Chemical (ATC), and a technical unit of comparison, the Defined Daily Dose (DDD), as a comparative unit of drug use. This was found to be robust across therapeutic classifications, dosing forms and diverse populations.
To maintain and develop the

ICPE 2007 in Quebec city

23rd International Conference on Pharmacoepidemiology & Therapeutic Risk Management
August 19-22, 2007
Quebec city, Canada

Abstract submission deadline: ***February 16, 2007***
Online abstract submission site: http://www.call4abstracts.com/ispe

For detailed information, see page 10 of this bulletin

ATC/DDD system a WHO-Collaborating Centre was established in Oslo.
As this was found to be of global interest the centre now reports to the WHO headquarters in Geneva. An informal WHO Drug Utilization Research Group (WHO-DURG), later the EuroDURG, has by now met 28 times in Europe. Since 1994 in Stockholm all these meetings have been with ISPE (International Society for Pharmacoepidemiology) when meeting in Europe. The main focus was initially to improve drug utilization through cross-national drug utilization studies based on the ATC/DDD methodology as they revealed large differences between and within countries that could not easily be explained by morbidity differences alone. These observed differences have led to the expansion of the area to include social, economic and qualitative methods with a more generalized public health focus. One of the most recent contributions was the development of drug use quality indicators.

Recently, EuroDURG and ISPE converged and agreed to cooperate for the promotion of drug utilization research.
At the global level EuroDURG will work within ISPE to:

a) provide an effective platform for communication and cooperation between researchers interested in this discipline from all continents of the world;

b) foster the adoption of standard international drug use research methodology;

c) maximize the potential of the information available on drug utilization for improving patient care;

d) promote the incorporation of drug utilization research and its applications within educational programs.

Definition of Drug Utilisation Research

Drug utilization research is an eclectic collection of descriptive and analytical methods and theories for the quantification, the understanding and the evaluation of the processes of prescribing, dispensing and consumption of medicines and the testing of interventions to enhance the quality of these processes.

Mission statement of the Special Interest Group on Drug Utilization Research (SIG-DUR)

The creation and maintenance of a global forum for discussion and cooperation between drug utilization researchers

Deliverables for the SIG-DUR for 2006-2007

1. An ISPE website with a collection of national drug dictionaries, linked to the Anatomical Therapeutic Chemical classification system (ATC) and the Defined Daily Dose unit of measurement system (DDD)
2. Development of an ISPE policy statement (through regular ISPE policy statement processes) on Prescribing Quality Indicators
3. Playing a participatory and official representative role in the current initiative of the European Science Foundation for development of a range of prescribing quality indicators: (eg. antibiotic prescribing quality indicators)
4. Formal cooperation with large cross national comparative drug utilization studies (eg the European Surveillance of Antibiotic consumption (ESAC), and the European Society of Cardiology's EUROASPIRE group - European Action on Secondary Prevention through Intervention to Reduce Events)
5. Enhanced participation in ISPE in communication with health insurer's organisations (both public and private) in Europe and US.

ISPE SIG-DUR
Special Interest Group - Drug Utilisation Research

The inaugural meeting of the SIG-DUR took place in Lisbon, August 26, 2006, with the election of a steering group and the creation of 5 project groups.

Steering Group

Chair :
Robert Vander Stichele
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Vice-chair :
Frank May
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Members :
Ilse Truter (South Africa)
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SIG-DUR Project groups

1. Project WorkGroup: ATC/DDD Browser

Robert Vander Stichele, Qasim Al Riyami, Monique Elseviers

Long term objective of the project group:

- To enhance rigor in the development and application of the descriptive methodologies in DUR, such as the ATC/DDD methodology
- To continue and intensify cooperation with the WHO Collaborating Centre for Drug Statistics Methodology (Oslo Center).
- To stimulate National Chapters to validate the national link between ATC/DDD and the national drug register and make it available to researchers and data collectors in the country.

Middle term objective of the project group (2007):

- Creation of an ATC/DDD browser of national drug registries on the ISPE website

2. Project WorkGroup: Cross National Comparison

Ilse Truter, Vera Vlahovic, Hege Salvesen Blix, Matus Ferech, Judith Mackson, Ulf Bergman

Long term objectives of the project group:

- To stimulate the use of WHO indicators of rational drug use throughout the world (including developed countries)
- To stimulate the globalisation of ongoing large cross national monitoring programs of the use of specific drugs e.g. European Surveillance of Antibiotic Consumption
- To stimulate the recording of drug utilisation in cross national epidemiological disease registers. e.g. Euraspire
- To enhance comparability of data on drug exposure (volume, expenditures and quality) in international databases

Middle term objective of the project group (2007):

- Convene a poster session with country posters on the state of the art in the country of drug utilisation in Public Health

Short term objective:

- Prepare an international survey on the state of the art at national level of Drug Utilisation Research in Public Health

3. Project WorkGroup: Methods for testing interventions

Debra Rowett, Sharon Hems

Long term objective of the project group:

- To explore, support and better characterize effective interventions to achieve improved outcomes from the use of pharmacotherapies
- To foster sound methodologic approaches to tests for quality of the processes of prescribing, dispensing and consumption of medicines

Middle term objective of the project group (2008):

- To develop and update a methodological handbook for quality measurement and interventions in drug utilization research
- To establish a formal link with the The Cochrane Effective Practice and Organisation of Care Group (EPOC): http://www.epoc.uottawa.ca/

Short term objective:

- Collect information on existing resources for training for DU improvement interventions and quality measurement initiatives in drug utilization research
- Enlarge the group

4. Project WorkGroup: Prescribing Quality Indicators

Morten Andersen, Sean McBride-Stewart, Lynn Weekes, Bjorn Wettermark, Flora Haaijer, William Schrank

Long term objective of the project group:

- To enhance rigor in the development and application of Prescribing Quality Indicators in the testing of interventions, and in monitoring quality audit and quality assurance programs.

Middle term objective of the project group (2007):

- Develop an ISPE policy statement on Prescribing Quality Indicators, starting from the DURQUIM statement (Eur J Clin Pharmacol, 2005)
- Build and maintain a Catalogue of validated prescribing quality indicators

Short term objective:

- Write a protocol for the development of the Catalogue (including timing, finances and draft contracts with third parties)

- Prepare and submit the request for a Policy Statement on PQI to ISPE.
- Make contact with the spearheading organisations in the world, already involved in PQI programs (QOF in the UK, AHRQ Agency for Healthcare Research, NPS, RIZIV etc.)

5. Project WorkGroup: Relations with Health Insurers

Ingrid Schubert, Julie Zito, Judith Mackson, Kirstin Myhr, Katrin Janhsen, Shirin Ahmed, Frank May

Long term objective of the project group:

- To foster the relationships between health insurers and the International Society of Pharmacoepidemiology
- To highlight the potential of sound pharmacoepidemiological practice as a means to gain better value and outcomes from resources committed to pharmacotherapy

Middle term objective of the project group (2008**):**

- Hold an International Meeting, cosponsored by ISPE and the Health Insurers Associations in Germany, early 2008.

Short term objective:

- Prepare a business plan for this International Meeting

Robert Vander Stichele
For the Executive Committee

Projects

DRUID project: Driving under the Influence of Drugs, Alcohol and Medicines

Over 40,000 people were killed on the roads in the year 2000 in the EU. The EU has fixed the target date of 2010 to reduce the number of road-injury fatalities by 50% (White Paper). As the number of accidents that can be attributed to psychoactive substances (alcohol, drugs and certain medicines) is constantly at a high level with drugs and medicine proportionally increasing over the years, special efforts have to be directed upon gaining better knowledge of the various aspects of this explicit problem and developing appropriate solutions. DRUID aims to combat the scourge of drink-driving and find answers to the question of the use of drugs or medicines that affect people's ability to drive safely.
The objective of DRUID is to give scientific support to the EU transport policy to reach the 2010th road safety target by establishing guidelines and measures to combat impaired driving.

DRUID will

- conduct reference studies of the impact on fitness to drive for alcohol, illicit drugs and medicines and give new insights to the real degree of impairment caused by psychoactive substances and their actual impact on road safety
- generate recommendations for the definition of analytical and risk thresholds
- analyse the prevalence of alcohol and other psychoactive substances in accidents and in general driving, set up a comprehensive and efficient epidemiological database
- evaluate "good practice" for detection and training measures for road traffic police allowing a legal monitoring of drivers.
- establish an appropriate classification system of medicines affecting driving ability, give recommendations for its implementation and create a framework to position medicines according to a labelling system
- evaluate the efficiency of strategies of prevention, penalisation and rehabilitation, considering the difficulties of appropriate evaluation strategies for combined substance use and recommend "good practice"
- define strategies of driving bans, combining the road safety objectives with the individual´s need for mobility
- define the responsibility of health care professionals for patients consuming psychoactive substances and their impact on road safety, elaborate guidelines and make information available and applicable for all European countries.

Part of the project is to gather information about the consumption of drugs with central nervous system (side)-effect in the general (non-hospitalized) population in various EU member states.

The included ATC subgroups and further information is available on the EuroDURG website: www.eurodurg.com

HAPPY AUDIT project

The aim of the HAPPY AUDIT project is to strengthen the surveillance of respiratory tract infections in primary health care in Europe through development of intervention programmes targeting general practitioners (GPs), parents of young children and healthy adults. The team will study the incidence of respiratory tract infections among patients in general practice and carry out research based on audit registration to explore the existing use of diagnostic tools in patients with respiratory tract infections. Based on results from audit registrations in primary health care, the team will develop locally adapted intervention programmes for improving the quality of antibiotic prescription. The overall aim of the intervention programme is to reduce the occurrence of bacterial resistance by reducing prescribing of unnecessary antibiotics for respiratory tract infections and by improving the use of appropriate antibiotics in suspected bacterial infections.

On behalf of EuroDURG R. Vander Stichele (former president) has accepted the three selected tasks for EuroDURG's role in the partnership

- to provide available statistical information from different countries (e.g. use of antibiotics)
- to help organising a 2-day working conference at the end of the 36-month project
- and to contribute in disseminating the results of the project.

Further information is available on the EuroDURG website: www.eurodurg.com

He also reflected our interest in participating in the design of a registration project that could supplement existing national efforts to collect aggregated data and could test quality indicators.

Ria Benko
For the Executive Committee

Conferences

…Previous conferences

22nd ICPE in Lisbon, Portugal
August 24-27, 2006

During the 22nd ICPE Conference in Lisbon, Portugal EuroDURG organized a posterwalk for all posters submitted within the category of Drug Utilization Research. A total of 79 posters were included. A panel of chair and co-chair visited between 8 and 10 posters. Poster presenters gave a brief, 3-minutes presentation followed by a discussion of 4 minutes. After the posterwalk, the EuroDURG selection panel scored all posters based on the scientific value of the study and on the poster presentation.

The following posters were nominated:

26. Defining Polypharmacy as the Use of Five or More Drugs is of limited Value in the Assessment of Drug-Related Problems.
Kirsten K Viktil, Hege S Blix, Tron Moger, Aasmund Reikvam (Norway)

41. Primary Care Physicians' Clinical Interests do not affect their Adoption of New Drugs: a Pharmaco-Epidemiological Study.
Torben Dybdahl, Jens Sondergaard, Jacob Kragstrup, Ivar S Kristiansen, Morten Andersen (Denmark)

69. Emergency Oral Contraception Use Patterns in Portuguese Women.
Ermelindo Fontes, Patricia Ferreira, Telma Costa, Ana Miranda (Portugal)

Best Poster Award
Julie Blouin *et al.*

51. **Impact of Once-Weekly Biphosphonates on Persistance Rate and Adherence Level with Antiresorptive Therapies Used in Primary prevention of Osteoporosis.** *Julie Blouin, Alice Dragomir, Louis-Georges Ste Marie, Julio Cesar Fernandes, Sylvie Perreault (Canada)*

The winner will receive the new edition of the book: Pharmacoepidemiology and Therapeutic Risk Management by Abraham G Hartzema, Hugh H Tilson and K Arnold Chan.

Monique Elseviers
Chair EuroDURG

13th Annual Conference of the German DURG
November, 2006

About 80 persons attended the conference 2006. The lectures and posters this year once again targeted a wide range of research themes on drug utilisation. Over a period of two days, a series of lectures covering four central topics were held, as well as an evening and a poster session.

Patient Safety and Pharmacovigilance constituted the first topic of the conference. In addition to summary presentations on drug utilisation safety, the analysis of medication errors and current concepts of pharmacovigilance, several national and international research contributions were presented.

For the topic **Drug Utilisation Research in the Institutional Setting**, experts provided reports on the current situation following the introduction of DRGs and the restructuring of the clinical landscape. Research findings from the residential/nursing home sector were also presented.

The topic **Self Medication and Drug Use in Children** was introduced in a series of current research contributions. Among other findings, these also revealed the degree to which and the complaints for which – particularly in light of the most recent health policy regulations, according to which numerous medicines are excluded from reimbursement by health insurance funds – drugs are used in the form of self medication, as well as the extent to which health insurance fund data are useful for analysis.

Drug Treatment for Patients with Chronic Diseases comprised a number of research contributions investigating the quality of care provided for chronically ill patients and its influence on treatment outcome. The poster session in this year's conference focused on the topic of **Pharmacoeconomy.** Methodological aspects and investigations of treatment costs were presented. The abstracts have been published in English in German Medical Science (http://www.egms.de).
The 14th conference will take place at Frankfurt/Main, November 15-16, 2007.

Guest are cordially welcome; further information is available on our website: http://www.awmf.org/fg/gaa

Ingrid Schubert
For the Executive Committee

Upcoming conferences…

EACPT conference 2007 Amsterdam, the Netherlands

EuroDURG members are cordially invited to attend the 8th Congress of the European Association for Clinical Pharmacology and Therapeutics in Amsterdam, the Netherlands. The congress will be held from August 29 –September 1, 2007. Meeting, hotel and registration information can be found at www.eacpt2007.nl

The conference theme will be 'patient-tailored pharmacotherapy'. The conference will comprise the whole field of clinical pharmacology ranging from drug research and development, regulation, teaching pharmacotherapy and pharmacotherapy in daily clinical practice including aspects of drug safety and costs.
EuroDURG contributes to the program filling a half day with the invited speakers Jesper Hallas, Flora Haaijer-Ruskamp and Ton de Boer and presenters selected from submitted abstracts. The focus will be on quantitative and qualitative indicators of drug use and strategies to improve rational drug use. In addition we will organise the traditional EuroDURG poster walk for contributions in the field of Drug Utilisation Research.

CALL FOR ABSTRACTS
We invite you to submit an abstract(s) for an oral/poster presentation. All abstracts will be evaluated by the Scientific Committee. Authors will receive confirmation before 1 June 2007. Accepted abstracts will be published in the Programme & Abstract book and on the conference web-site (see Abstract Form). All submitted abstracts should be accompanied by a registration from the first author (see Registration paragraph).

EACPT 2007
Online abstract submission site: http:// www.eacpt2007.nl
DEADLINE: March 1, 2007

Call for abstracts: EACPT 2007 Amsterdam, the Netherlands
Submit your abstract at: http:// www.eacpt2007.nl, before March 1

ISPE 2007 Mid-Year Meeting Amsterdam

The 2007 ISPE Mid-Year Meeting will be April 21-23, 2007 in Amsterdam. The meeting will be held in conjunction with the Pharmaceutical Sciences World Congress.
More info: www.pharmacoepi.org

ISPE 2007 conference (ICPE) Quebec city

The International Society for Pharmacoepidemiology (ISPE) announces the 23rd International Conference on Pharmacoepidemiology & Therapeutic Risk Management (ICPE 2007). This meeting represents an important opportunity to participate in the exchange of timely scientific information from the fields of pharmacoepidemiology, therapeutic risk management, and drug utilization. The diverse audience represents the key stakeholders- pharmaceutical industry, academia, government, contract research organizations, and consulting firms.
We are delighted that the following organizations have agreed to co-sponsor this important conference: Canadian Association for Population Therapeutics, Faculty of Pharmacy-Laval University, Quebec Network of Researchers in the Use of Drugs.
This meeting is generally acknowledged to be the preeminent global conference on pharmacoepidemiology and therapeutic risk management. The agenda will be a discriminate blend of invited lectures, submitted papers, posters, workshops and symposia - together representing the current state of experience and knowledge in these dynamic disciplines. All abstracts submitted will be published in Pharmacoepidemiology and Drug-Safety, ISPE's official journal.

CALL FOR ABSTRACTS

We invite you to submit an abstract(s) for an oral/poster presentation or for a workshop/symposium for presentation at the 2007 annual meeting.

Results that have been published (except in abstract form) before January, 2007 are not eligible for submission. Results that have been presented at meetings of other scientific societies are eligible, provided that they have not been published (except in abstract form) before January 1, 2007.

ICPE 2007
Online abstract submission site:
http://www.call4abstracts.com/ispe
DEADLINE: February 16, 2007

ESCP 2007 conferences

The 7th spring conference on clinical pharmacy will be held in Edinburgh, UK, May 17-19, 2007. The main topic is: „Tackling inequalities in the delivery of Pharmaceutical Care".
The annual symposia titled "Implementing Clinical Pharmacy in Community and Hospital Settings: Sharing the Experience" will be organized between 25-27 October, 2007 Istanbul, Turkey .

Further information about ESCP conferences available at: http://www.escpweb.org

EUPHA conference 2007 October 11-13, Helsinki, Finland

The 15th European Conference on Public Health will be held in between October 11-13, Helsinki, Finland. The main theme is: "The Future of Public Health in the Unified Europe"

EUPHA 2007
Abstract submission deadline: May 1, 2007

Call for abstracts: ICPE 2007 Quebec city, Canada
Submit your abstract at: http://www.call4abstracts.com/ispe, before February 16

Members of the EuroDURG Executive Committee 2006-2008

Monique Elseviers (**chair**)
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Monique Elseviers's role in the executive committee of EuroDURG started in 2000 when she was elected as representative for Belgium. As a member of the ExCo, she helped organizing the EuroDURG symposia of Prague (2001) and Ulster (2005) and the workshop on prescribing quality indicators in Mechelen (2004). During the last ICPE conference in Lisbon, she accepted my new task as EuroDURG chair aiming to lead the organization through the current transitional period. She worked for more than 20 years as an epidemiological researcher in the field of nephrology. Since her doctoral dissertation focused on the nephrotoxicity of analgesics, she became more and more involved in problems of pharmaco-epidemiology. This interest resulted in the coordination of the ESAC project (European Study on Antibiotic Consumption) during 3 years. Now, she is responsible for the research activities at the Department of Nursing Sciences at the University of Antwerp. Her current research activities focus on the European practice of dialysis and on the quality of the medication management systems in the Belgian geriatric population.

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Six years ago Peter Mol entered the field of drug utilisation research when he started working on a PhD project aimed at optimising the quality of antimicrobial drug use in the University Medical Centre Groningen. He continued as a postdoctoral fellow at the department of clinical pharmacology, section Drug Utilisation Research and Implementing Evidence Based Medicine in Practice with a research interest in patient safety and risk communication. This latter topic neatly integrates his work as a clinical assessor for the Dutch Medicines Evaluation Board. He has been a member of the EuroDURG executive committee since August 2003.

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Hege Salvesen Blix has been working within the field of pharmacoepidemiology for ten years. At the time being she is working three different places – luckily not full time. Firstly, at the department of Pharmacoepidemiology at the Norwegian Institute of Public Health were her main tasks are the ATC/DDD methodology and drug statistics. The WHO Collaborating Centre for Drug Statistic Methodology is situated here. Furthermore, she works at a small hospital in Oslo as a clinical pharmacist and at the University of Oslo, doing research on drug-related problems in hospitals.

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Robert Vander Stichele is a practicing general practitioner in the city of Ghent, Belgium, since 1978, combined since 1982 with research projects at the University of Ghent. In 2004, he presented his PhD thesis on the subject of patient package inserts and the impact on patients, at the University of Ghent and was appointed part time teaching professor.He is on the board of the Centre for Evidence-Based Medicine, the Belgian Branch of the Cochrane Collaboration), since november 2001. He coordinates the IT-applications in the Belgian Centre for Pharmacotherapeutic Information since 1999. He was network-coordinator in the European Surveillance of Antimicrobial Consumption project (ESAC), Departement Microbiology, University of Antwerp, from 2001 to 2004. He is senior researcher in the research Group End-of-Life

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While working as a pharmacist for a number of years, Ingrid Schubert has always had a strong interest in health care research, and has been involved in social studies since the early eighties. Her doctoral thesis in Sociology comprised an analysis of the professional development of pharmacists since the beginning of the 20th century. She has been working at the University of Cologne in the field of pharmacoepidemiology since 1993 and has led the PMV Research Group since 2003. Her main professional interests centre on the evaluation of prescribing and treatment practices (feedback analysis for GPs), the development and validation of quality indicators, the development and implementation of guidelines, the epidemiology of diseases and methodological issues concerning the use of health insurance fund data. She has held the position of adjunct lecturer at the Department of Clinical Pharmacy (University of Bonn) since 1999.

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After the pharmaceutical exam in 1993 Katrin Janhsen worked in the field of hospital/clinical pharmacy for four years and finished a special education for clinical pharmacists. During that time her interest was drawn to Pharmacoepidemiology. So in 1997 I started to work on my thesis (Joint Analysis of the MONICA Optional Study on Drugs – Antihypertensive Drug Treatment in an International Comparison) and finished it in 2001 at the University of Bremen.
Since 2000 she is working with health insurance data at the Centre for Social Policy Research (ZeS), University of Bremen. Their results are presented in the annually GEK drug utilization report (GEK-Arzneimittel-Report) and in several separate projects. Her research fields are Pharmacoepidemiology and Public Health, Drug Utilization Research especially among Children and Youths, Geriatric Patients, Gender Differences, Clinical Pharmacy, Cardiovascular Epidemiology, Cancer Epidemiology. Her teaching experience comprises "Pharmacoepidemiology" for pharmacy students since 2002 at the University of Hamburg, "Chronic Diseases" for postgraduate Master of Public Health students since October 2001 at the University of Bremen, "Epidemiology" for B.A. Public Health students since October 2004 at the University of Bremen.

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Since her graduation in Chemistry and Pharmaceutical Technology, about 10 years ago, Elisabetta Poluzzi has started working in the Pharmacoepidemiology Unit at the University of Bologna. In this field, she received a PhD degree and now she is an Assistant Professor in Pharmacology at the same University. Her main research activity has regarded the development of methods to evaluate the appropriateness of drug use, especially in general practice and in secondary care. Of course, the main sources of data are represented by drug utilisation databases, although clinical records from hospital or primary care has recently become available. Moreover, she is involved in a very specific safety issue, the risk of QT prolongation by drugs, which allows to her to work with drug utilisation data, collaborating with specialists in many different fields related to the drug development, i.e., molecular modelling, structural biology, pre-clinical pharmacology and statistical models.

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Matus Ferech has been working within the field of

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Since her graduation as a pharmacist in 2001, Ria Benkő is working at the University of Szeged, Clinical Pharmacy Department. She has been doing drug utilisation studies since 2004. Her main research areas are hospital and community antibiotics use. She works in close collaboration with microbiologists, they made together lot of antibiotic-related things: surveys on antibiotic use at different level (ward, hospital, regional and national level), surveys on surgical prophylaxis, setting up TDM service, etc. She is also involved in the teaching of the pharmaceutical care, pharmacy management, and clinical pharmacy subjects. In the future she can imagine herself as a clinical pharmacist.

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Vera Vlahović-Palčevski is a clinical pharmacologist working at the Department of Clinical Pharmacology, University Hospital Rijeka, and at the Department of Pharmacology, University of Rijeka Medical School. At the hospital she works as a consultant in pharmacotherapy, and at the university she teaches pharmacology and clinical pharmacology for medical students and nurses. Her closest fields of interest are pharmacoepidemiology and antimicrobial drugs.

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Björn Wettermark defended his thesis in drug utilization at the department of Clinical Pharmacology, Karolinska Institutet in Stockholm two years ago. He is now sharing his time between the Swedish National Corporation of Pharmacies (responsible for Drug and Therapeutics issues) and the Division of Medical Management and Informatics, Stockholm County Council (responsible for drug utilization studies and monitoring of the introduction of new medicines). His research affiliation is still Clinical Pharmacology and the newly established Centre for Pharmacoepidemiology at Karolinska Institutet. Björn W is secretary of the Swedish Society of Pharmacoepidemiology (includes the DURG group) and a member of the EuroDURG executive committee since 2004

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