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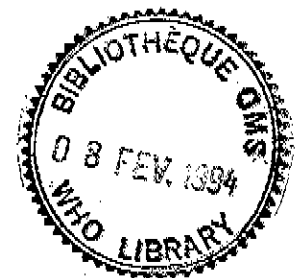
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**Report of
the Second Annual Meeting of
the European Forum of Pharmaceutical Associations
and the World Health Organization**

Thessaloniki, Greece, 8-9 February 1993



WHO, Regional Office for Europe
Scherfigsvej 8, DK-2100 Copenhagen Ø
Denmark



OD.
EURO

This activity was organized by the WHO Regional Office for Europe to promote work aimed at achieving the following target in the health for all strategy.*

TARGET 31

QUALITY OF CARE AND APPROPRIATE TECHNOLOGY

By the year 2000, there should be structures and processes in all Member States to ensure continuous improvement in the quality of health care and appropriate development and use of health technologies.

Keywords

ORGANIZATIONS
HEALTH FOR ALL
HFA STRATEGY COORDINATION
PHARMACISTS
EUROPE

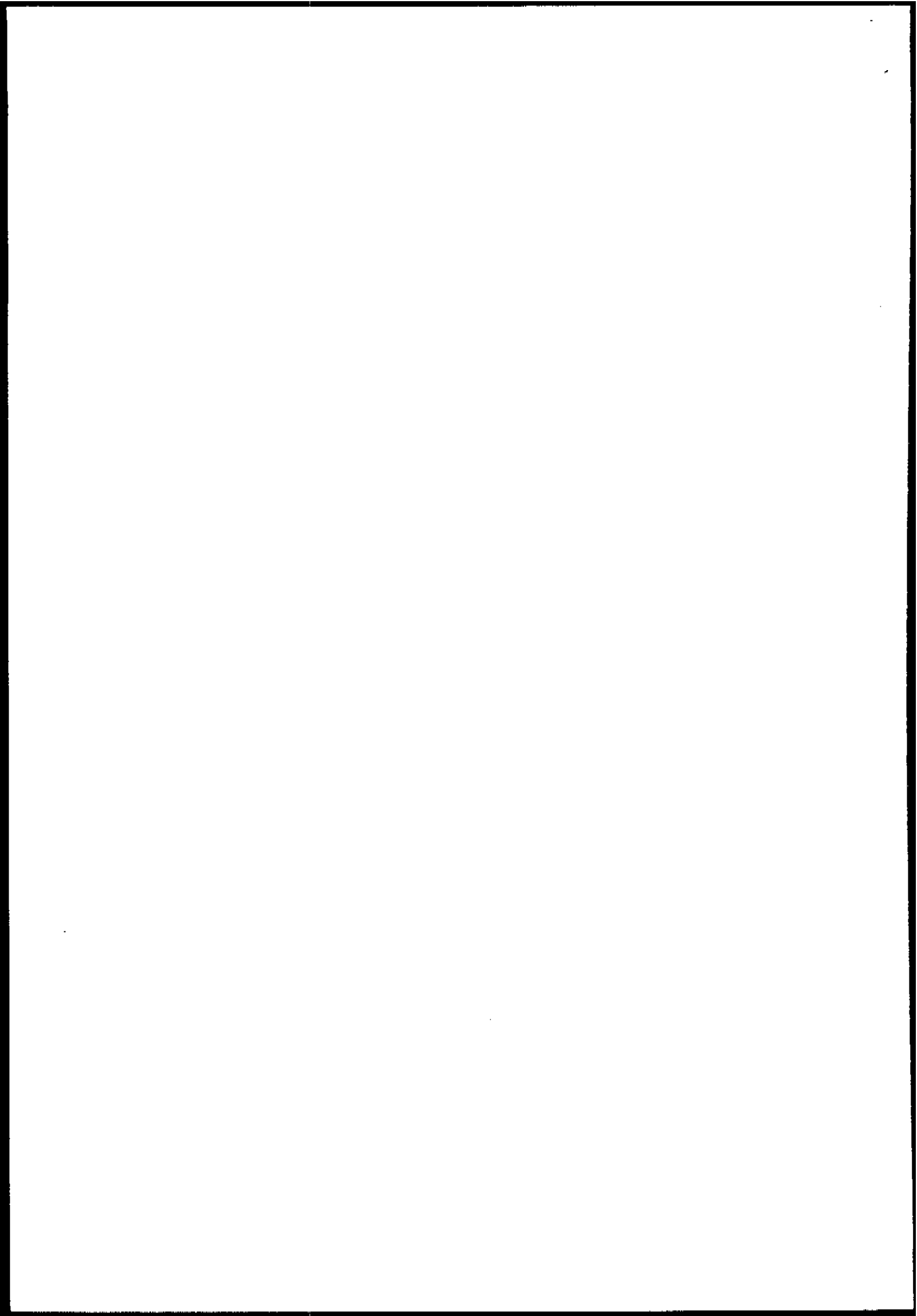
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* *Updating of the European HFA targets.* Copenhagen, WHO Regional Office Europe, 1991 (document EUR/RC41/Inf.Doc/1 Rev.1).

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**The Second Annual Meeting of
EuroPharm Forum
Thessaloniki, Greece, 8-9 February 1993**

Opening Ceremony

The Chairman of EuroPharm Forum, Mr Almar Grimsson welcomed participants and expressed, on behalf of the Forum, its gratitude to the Greek hosts for making arrangements for the Second Annual Meeting in Thessaloniki. He referred to the interesting developments during the first year of the existence of the Forum.

In his opening address, Dr J.E. Asvall, WHO Regional Director for Europe expressed his pleasure to see the Forum as a natural meeting point for pharmaceutical associations and other important European and international organizations in the pharmaceutical field.

He congratulated the Forum for a very excellent and active work in the past twelve months, initiating projects in the field of diabetic care, smoking, health promotion and information about medicines. These projects cover activities promoted by the Regional Office for Europe.

Initiatives to develop lifestyles and health-related counselling and health education, offered by pharmacies as part of their normal service to the general public, can be one of the most important health-for-all initiatives in the Region. There is an appalling lack of services to the population at local level.

Dr Asvall emphasized that well-organized smoking withdrawal courses, nutritional counselling, stress management and similar lifestyle counselling services organized by pharmacies under the overall technical guidance of National Pharmaceutical Associations, in co-operation with health promotion specialists, have a tremendous potential. WHO are therefore, very interested in working with pharmacists through the Pharmaceutical Forum, to develop models and guidelines for such initiatives throughout the European Region.

In the field of quality of care, Europe stands at the threshold of a completely new development. The biggest challenge and the key interest in European health care during the 1990s will be a strong focus on what really improves the health of individuals and patients' groups and what truly helps to promote better approaches to promotion of health and treatment of patients. This is a field of major interest for WHO in Europe and an exciting field of potential co-operation with the Pharmaceutical Associations - as is now already the case with the Medical and the Nursing Associations.

Dr Asvall finally expressed his warm thanks to the Greek colleagues for their co-operation in connection with the organization of this meeting and he expressed a wish to all in having an exciting meeting - and much hard work and interesting challenges for 1993.

Mr D. Sioyfas, the Greek Minister of Health, Welfare and Social Security and Mr D. Vagionas, President of the Panhellenic Pharmaceutical Association, welcomed the participants and explained the role of the pharmacist within the Greek health care system.

Mr N.O. Strandquist, President of the International Federation of Pharmacists (FIP) stressed the good collaboration between EuroPharm Forum, the Groupement and FIP and hoped that these organizations could continue to hold their meetings together.

Dr C.M. de Vos gave the keynote lecture on behalf of the State Secretary of Public Health of the Netherlands with the title: "Pharmacists and the Dutch pharmaceutical market". Dr de Vos described the pharmaceutical scene in the Netherlands and explained how arrangements had been made to bring doctors and pharmacists closer together and to give pharmacists incentives for helping to reduce the drug bill by substituting cheaper generic and parallel imported products for more expensive branded medicines.

Business session, first part

Following the keynote lecture, the first part of the Business Session took place. In his opening remarks the Chairman, Mr. Almar Grimsson, referred to the Inaugural Meeting in Hillerød in January 1992 and the reason for the formation of the Forum - to enable pharmacists to help achieve the WHO "Health for All" targets.

He stressed that it was not the wish or function of the Forum to compete or overlap with existing organizations, like the International Pharmaceutical Federation (FIP) and the Pharmaceutical Group of the European Community (PGCE), but should be regarded as an important step towards a total coverage of pharmaceutical activities within the European Region and WHO.

He thanked Ms Inga Lunde, the first Professional Secretary, for her hard work up to September 1992, when she was succeeded by Mr Cornelis van Gruting. He also thanked the Danish Pharmaceutical Association for their initiative, help and hospitality in getting the Forum started. Assisting the countries of Eastern and Central Europe (CCEE) was amongst the most important tasks facing the Forum, he said.

It was noted that only those associations who had paid their membership fee would be permitted to vote. Mr T.P. Astill (UNK) was appointed Rapporteur.

Report by the Executive Committee

The report of the Executive Committee (Annex 1) was circulated and considered. The Chairman and other members of the Committee answered a number of detailed questions from the floor. The Secretariat was requested to distribute a month before the Annual meeting, at least the background papers regarding financial affairs. It was agreed that the report be received and approved.

Report by the Treasurer

The Treasurer, Mr Joep Winters, presented his report (Annex 2), which had previously been circulated. He said there were still two countries which had not paid at all and some which had not paid the full amount. He stated that expenses had reduced the credit balance from US\$ 23 000 to US\$ 4 600.

He said that the Executive Committee would be discussing with WHO the question of the Secretariat and its workload.

At the Treasurer's suggestion, it was agreed that audited accounts for the two years 1992 and 1993, including the accounts for the Thessaloniki meeting, be presented at the 1994 meeting to be held in Copenhagen, Denmark.

On the recommendation of the Chairman it was agreed that Mr D. Broeckx and Mr J. Cuypers (Belgium) be appointed as honorary auditors.

Budget and Membership fee for 1993

The Treasurer presented his 1993 budget (Annex 3) and a recommendation to relate a four-tier fee for 1993 to the number of pharmacists in the country (Annex 4).

The budget and the proposed membership fee was accepted by the members.

In reply to a question about the US dollar as the basic currency within EuroPharm Forum, the Committee responded that it will continue this practice, because this is in line with the tradition in WHO.

Amendments to the Statutes

As indicated in Article 35 of the Statutes (Annex 5), any proposed change shall be sent to the Secretariat and reported to the members six months before the meeting of the Forum at which it will be considered.

The Executive Committee has not received any proposal for changing the Statutes.

Applications for membership

A list of members and observers of EuroPharm Forum per February 1993 is attached as Annex 6.

The National Pharmaceutical Association of Switzerland attended the Founding Meeting in Hillerød as observer. Ms Anne Decollogny (Switzerland) informed the Forum that her Society had decided in 1992 to become a member and they definitely wished to join (applause).

The Professional Secretary reported that, so far, no firm applications had been received from the countries of Central and Eastern Europe (CCEE), but that he now expected a letter from Estonia.

Applications for observer status

During the year, the Executive Committee have had contacts with representatives of the FIP and The European Forum of Medical associations (Medical Forum).

Because these organizations are so close to the work of EuroPharm Forum, the Executive Committee invited both organizations to become observers.

These invitations were accepted. However, the Statutes stipulate that observer status can only be granted to European pharmaceutical organizations or representatives from WHO Headquarters or Regional Offices. The Executive Committee considers that, in principle, these organizations come within Article 8. To ensure no possible doubt at any time in the future, the Executive Committee will put forward a proposal for an amendment of the Statutes at the next Annual Forum meeting.

In 1992 the Executive Committee received letters from pharmaceutical associations outside the European Region of WHO, which are interested in the work of EuroPharm Forum, and would like to attend the Annual Meeting or show interest in receiving the observer status.

The Executive Committee welcomes the interest of these organizations and is of the opinion that, in principle, observer status should be the proper way to define the relation if there is a lasting mutual interest. However, the Statutes state that observer status may only be granted to European pharmaceutical associations.

After a short discussion it was agreed:

- * that FIP and the European Forum of Medical Associations (Medical Forum) be granted observer status;
- * that Article 8 of the Statutes be amended in 1994 to widen the definition of qualification for observer status;
- * to consider observer status to organizations, which have expressed the wish to work closely with the Forum (the American Association of Colleges of Pharmacy, the Canadian Pharmaceutical Association and the Pharmaceutical Society of Mauritius);
- * that the Statutes be appropriately amended at the 1994 meeting to remove any doubt about the validity of article 2a;

On the recommendation of the Executive Committee it was agreed that observer status be granted to:

- * European Association of Hospital Pharmacists
- * European Society of Clinical Pharmacy
- * Pharmaceutical Group of the European Community
- * European Pharmaceutical Students' Committee and
- * the Professional Group of Industrial Pharmacists of the European Community.

Selected targets for action

At the Founding Meeting in Hillerød, it was decided that the Forum would adopt the recommendations of the meeting on "The role and functions of Community and Hospital Pharmacists in Europe", Madrid, 29 November-1 December 1988, as the

"Targets for Pharmacy for the Year 2000". The recommendations were formulated in 1988 at which time the problems of Central and Eastern Europe were not known and therefore not reflected in the recommendations.

At the suggestion of the the Executive Committee it was therefore agreed to set up a working group to oversee progress on the EuroPharm Forum adopted "Targets for Pharmacy for the Year 2000" and to liaise with other organizations such as FIP and GPCE. On request for volunteers there was a positive response from Sweden.

In addition to this item, Ms A. Wehrli informed the participants about the plans to hold a second WHO meeting on the role of the pharmacist in the health care system in Tokyo from 31 August to 3 September 1993. As with the previous meeting, this would be a private meeting limited to some 35 participants.

She explained that the objective of this second meeting was not so much to revise the recommendations contained in the report of the first meeting held in New Delhi in 1988, but rather to look more specifically into the contributions of the pharmacist towards health cost savings. She also mentioned that a questionnaire based on the recommendations contained in the New Delhi report, has been sent by the FIP and the Commonwealth Pharmaceutical Association (CPA) to their respective national pharmaceutical member associations, with the objective of determining a base line of pharmaceutical services; it was envisaged that FIP and CPA would monitor progress by follow-up questionnaires on a regular basis, e.g. every 3 years.

The Forum decided to select three items from the "Targets for pharmacy for the year 2000" and to give these items special attention in the coming two years:

- * establish the pharmacist's central role in the provision of advice and information to patients and the general public on the use of medicines;
- * establish effective cooperation between pharmacists and prescribers; and
- * increase the contribution made by pharmacists to promoting healthy life-styles among the general public, including the prevention of illness and screening in the field of prophylactic health care.

Presentations in relation to ongoing EuroPharm Forum projects

The first part of the business session was followed by a lecture on experiences in the USA on patient information campaigns and presentations of the status of the 3 EuroPharm Forum Projects: Questions to ask about your medicines, Smoking Cessation and Diabetes Care. At last a presentation was given on EuroPharm Forum follow-up activities.

Questions patients should ask about their medicines, Experiences in the USA
Mr. Robert M. Bachman, Executive Director of the U.S. National Council on Patient Information and Education (NCPIE) described his organization and the steps it had taken to encourage consumers (patients and customers) to ask their doctors and pharmacists more questions. The five key questions he identified are:

- * What is the name of the drug and what is it supposed to do?
- * How and when do I take it and for how long?
- * What foods, drinks, other medicines or activities should I avoid while taking this drug?
- * Are there any side effects and what do I do if they occur?
- * Is there any written information available about the drug?

NCPIE also sought to persuade doctors and pharmacists to give more information. Mr Bachman emphasized the importance of this "Push/ Pull" approach - patients pull information out of pharmacists and pharmacists push it into patients.

Questions to ask about your medicines, Status quo of the EuroPharm Forum project

Ms Lillian Møller, Project Coordinator EuroPharm Forum presented a Status quo of the project: Questions to ask about your medicines.

After the introduction of the project at the first Annual Meeting in EuroPharm Forum, a letter was sent to the member countries requesting whether they wished to participate actively in implementation of the project. Twelve countries have confirmed their interest in participating.

A project description, including a model for evaluation, has been prepared and the project has been piloted in Denmark and Malta.

Based on the results and the experiences from the Danish pilot project, some changes in the methodology of the evaluation and a new time schedule for the project was suggested by Lillian Møller.

The presentation was followed by a short meeting of countries which had decided to carry out the campaign "Questions to ask about your medicines". At this meeting, a task force was set up consisting of the following 8 countries: Belgium, Finland, Malta, The Netherlands, Norway, Portugal, Spain, and the United Kingdom. Mr D Broeckx, Belgium would act as the manager of Task Force, and the group would be assisted by the Project Coordinator Lillian Møller. The Task Force would come up with a final project plan and will implement the project in 1993-1994.

Diabetes projects of EuroPharm Forum

Mr Joao Silveira, member of the Executive Committee and Ms Maria Augusta Soares, The National Pharmaceutical Association of Portugal presented the status of the Diabetes projects and some very interesting experiences on a diabetes programme carried out at pharmacies in Portugal.

Mr Silveira described the EuroPharm Forum Diabetes "Action Programme" designed to involve pharmacists more in the field of diabetes care. The purpose of the programme is to involve pharmacist in implementing the St. Vincent Declaration with special focus on the pharmacists' role in prevention, screening, education and information of the diabetic patients and their families.

The "Pharmacist in diabetes care programme" included an evaluation of existing or past pharmacy programmes on diabetes in the member countries and results from 8 countries were presented by Ms Soares.

Ms Soares also presented a proposal on guidelines for the role of the pharmacist in diabetes care and she invited the members to discuss and comment on the proposal. The member countries were also invited to nominate a contact person on diabetes care. This person will be the link to the Executive Committee and to the Task Force on diabetes care, responsible for further development and implementation of the diabetes action programme.

Smoking projects of EuroPharm Forum

Ms Lillian Møller, Project Coordinator EuroPharm Forum presented the smoking cessation projects.

Ms Møller presented some preliminary results of the EuroPharm Forum and the WHO Tobacco or Health survey on "Smoking behaviour and smoking attitudes among pharmacists". The presentation was based on results from Austria, which already has carried out the survey. Nine more countries have informed that they will carry out the survey before the World No Tobacco Day in May 1993. When the data are available, a report on the total results from those countries will be produced.

Ms Møller gave a description and a status of the very successful project "Pharmacists helping smokers to quit", which can be seen as the pharmacists' contribution to the WHO Action Plan for a Tobacco Free Europe. In June 1992 an interim report on the project was forwarded to the members of EuroPharm Forum. Later this year an International Guide on how to implement the smoking cessation project in other countries will be finalized and sent to the members.

The final report on "Pharmacists helping smokers to quit" and a booklet "The role of the pharmacist in smoking cessation" is expected to be published at the end of the year.

Finally, Ms Møller emphasized that smoking cessation in support groups at the pharmacy is a new and challenging way of providing information and health care to people and she encouraged the members to start similar activities in their countries.

In addition to the presentation, Ms H. Bymel (Israel) described how Israeli pharmacists had also conducted a "stop smoking" campaign using, amongst other things, posters, nicotine replacement products and a telephone "hot line". The results had been similar to those in Denmark.

Follow-up activities, EuroPharm Forum

Mr C.W.D. van Gruting, Professional Secretary, EuroPharm Forum briefly presented a report on the answers which EuroPharm Forum had received to a questionnaire which had sought information from Forum members on four topics: quality indicators, adverse drug monitoring reactions, collaboration between doctors and pharmacists to develop common approaches as to the choice of medicines and availability of anti-smoking material in pharmacies.

The conclusions based on 11 answers were:

- * Only one country (Malta) worked with quality indicators.
- * Hospital pharmacists in most countries are involved in adverse drug reaction reporting. But the community pharmacists play often no role in this area. In The Netherlands there is an interesting new development with pharmacists in doing systematic evaluation of drug use for detecting side effects.
- * In most countries, doctors and pharmacists have regular contact with each other. But a formal collaboration between doctors and pharmacists in order to develop common approaches to the choice of medicines, only exist in a few countries.
- * Anti-smoking material is available in most pharmacies.

The presentations was followed by a workshop.

Workshop: Pharmaceutical problems within the countries of Central and Eastern Europe (CCEE)

Chairmen: Mr Z. Vincze and Mr K. Fonnesbæk Rasmussen

Mr Z. Vincze welcomed participants and informed about the background of the workshop. The theme of the workshop was briefly introduced by Dr K. Staehr Johansen, followed by a short introduction by Mr K. Fonnesbæk Rasmussen of the new WHO/EURO Special Action Programme for Pharmaceuticals in CCEE.

The problems seen from an East European viewpoint

The main presentation: "The problems seen from an East European viewpoint" was given by Professor G. Guencheva, Director of the National Drug Institute, Sofia, Bulgaria.

Ms Guencheva mentioned that the lack of modern legislation is the source of most of the problems facing Bulgarian pharmacists. The proposed drug and pharmacy law is still awaiting discussion in the National Assembly. The present health act allows non pharmacists to own a pharmacy and to engage in wholesaling; the result in practice is that pharmacies are often run in an unprofessional way.

The drug reimbursement system, the free pricing system and the lack of fixed retail prices also cause problems.

As an example, Ms Guencheva mentioned the opening of pharmacies and storehouses in quite unsuitable premises - so-called garage pharmacies, selling all drugs without prescription and preferring dealing with more expensive drugs.

New programmes for educating pharmacists are urgently needed and Ms Guencheva ended her presentation by giving a lot of examples on topics and areas on which collaboration and support from foreign experts and pharmaceutical associations could be helpful.

This lecture was followed with back-up from Mr R.V. Sandulescu and Mr L. Rosenberg (Romania), Mr S. Durresi (Albania) and Dr J. Lazowski (Poland).

All speakers from Eastern Europe painted graphic pictures of pharmacy in their respective countries and talked of the professional, legal and operational difficulties caused by the profound political changes which had taken place. It became clear that the major difficulty now was not inadequate supplies, but rather drug utilization and misuse resulting from lack of an adequate regulatory framework.

Dr J. Lazowski mentioned that, in Poland a licence for a pharmacy can now be given to anyone who employs a pharmacist as manager and a similar situation exist in Romania and could arise in the Baltic States. Taking into account this situation, he proposed that the meeting make a declaration that would remind governments and parliaments that drugs are not an ordinary, generally available consumer product, but a very complex item of health care that needs special handling, which can be ensured solely by an educated professional - a pharmacist.

The suggestion was followed by a discussion and an agreement on drawing up a declaration (Annex 7).

Twinning: a possible approach for assisting CCEE

Ms Hanne Bak Pedersen, WHO/EURO presented the idea of twinning as a possible approach for assisting CCEE. She defined Twinning as "a direct personal working relationship between members of two similar associations/institutions, which might be at different stages of development but which have common interests and goals".

Twinning between pharmaceutical associations as an idea was a result of cooperation between the Danish Pharmaceutical Association and the pharmacists of Lithuania. Associations in different countries could, for example, exchange know-how, experiences, literature, newsletters and training materials. One could help the other by seconding personnel or receiving educational visits and, where appropriate, work together on policy development and projects to effect change at the local or country level.

Ms Bak Pedersen circulated a questionnaire on which EuroPharm Forum's members could indicate their interest in twinning.

Professor E. Tarasevicius (Lithuania) spoke warmly of the help and support (including equipment) given to pharmacists in his country by the Danish Pharmaceutical Association.

Ms A. Wehrli expressed WHO/HQ's commitment and interest to work with EURO and particularly the Special Action Programme for Pharmaceuticals in CCEE/NIS to support these countries. This could be done firstly by providing, on request, information material and publications as referred to in a brochure distributed to participants entitled "WHO Publications, Pharmaceuticals, 1993". The brochure describes WHO publications relevant to national drug policies, drug regulation and control, rational use of drug, and to pharmaceutical products and pharmacy in general. Special reference was also made to HQ support on the strengthening of national drug regulatory authorities and to a WHO model software package designed to organize drug registration and regulatory data.

Business session, second part

Decisions on ongoing and future projects

The Chairman referred to the three projects on which presentations had been made during the meeting and made it clear that little funding could be expected from the Forum. Only US \$ 1000 had been budgeted for projects in 1993, so those member associations taking part would do so at their own expense.

At the suggestion of the Executive Committee, it was agreed that:

- the pharmaceutical association or associations who are members of EuroPharm Forum in each country would appoint a liaison person to function as the formal contact between the Forum and the association(s) in that country;
- a letter be formulated to be sent to all members regarding nomination of a contact person and Task Force members for the following projects: Diabetic Care, Questions to ask about your Medicines and Pharmacists Helping Smokers to Quit;

A report on the National Pharmaceutical Associations in Europe will be prepared in close collaboration with GPCE.

The Chairman referred to the presentation made by Ms Hanne Bak Pedersen and urged everyone to complete the questionnaire which she had circulated.

Any other business

*** London Symposium**

Mr J. Ferguson (UNK), reminded everyone about the Symposium to be held in London on 25 November 1993 on "Pharmacy: effective Care in Practice". He circulated an information leaflet which included an abstract sheet and urged all members to give this event maximum publicity in their respective countries. He said he was anxious to have information about results rather than proposals or suggestions about things that might happen.

*** Declaration**

Following the plea from Dr J. Lazowski (Poland) during his earlier presentation, it was unanimously agreed that the declaratory statement be approved and published.

*** Date and place of next meeting**

At the recommendation of the Chairman and, in accordance with the Statutes, it was agreed that the next meeting of EuroPharm Forum take place in Copenhagen, Denmark, 14-15 February 1994.

With regard to the 1995 meeting, Dr N. O. Strandquist (FIP) suggested that it be held in Stockholm in conjunction with the FIP Congress and the Chairman read a letter from Ms M.A. Sant Fournier (Malta) inviting the Forum to hold the meeting in her country. In accordance with the Statutes, it was agreed that a decision about the venue of the fourth annual meeting be taken in 1994 in Copenhagen.

Conclusions and recommendations of the meeting

At the invitation of the Chairman, the Rapporteur gave a brief summary of the proceedings at the meeting, including the conclusions reached and the recommendations made.

Closure

In making his closing remarks, the chairman thanked everyone for their contributions to the meeting and its organization, including all the members and observers, Dr J.E. Asvall, the staff of WHO/EURO, Mr C.W.D. van Gruting and Ms Doris Sørensen, the visiting contributors, the Rapporteur and, above all, the Panhellenic Pharmaceutical Association and its President, Mr D. Vagionas.

The meeting then closed.

Report of the Executive Committee about the year 1992

Annex 1

Almar Grimsson (Iceland), Chairman
Zoltan Vincze (Hungary), Vice-Chairman
Joep Winters (The Netherlands), Treasurer
John Ferguson (United Kingdom), Member
Joao Silveira, (Portugal), Member
Leopold Schmudermaier (Austria), Member
Kirsten Staehr Johansen (WHO/EURO), WHO Representative

Introduction

The Committee has met four times since the Founding Meeting in Hillerød, in Brussels in March, in Copenhagen in June, in Lyon in September and in Copenhagen in November. They were one day meetings. Due to the illness of the Chairman, Joep Winters chaired two meetings in the Executive Committee.

The main issues of discussion were the relation with members and observers, the organization of the Annual Meeting, the projects and the Secretariat.

Members

The Executive Committee regards it very important that all national pharmaceutical associations within the European Region, which fulfil the requirements of the Statutes of EuroPharm Forum, should become members. That goal has been achieved with regard to the associations in Western Europe. Almost all associations have expressed the desire to collaborate with EuroPharm Forum. The same can be said about the associations within Central and Eastern Europe with the exception of the associations within the countries of the former USSR. It was not possible to come in contact with these organizations.

A few associations from Central Europe have expressed the wish to collaborate with EuroPharm Forum, but lack the money to pay the membership fee. These associations have been informed about the offer of the Danish Pharmaceutical Organization to pay these contributions for the first year.

Observers

The Secretariat has informed all European pharmaceutical associations about the existence of EuroPharm Forum. All organizations have informed the Secretariat that they would like to become observers. Looking at the matter more closely, showed that the criteria for the status of observer exclude many of these organizations. For that reason, the Executive Committee has placed this issue on the agenda of the Annual Meeting.

A few organizations outside the European Region of WHO have expressed the wish to collaborate with EuroPharm Forum and, if possible, to become an observer. The Executive Committee is pleased with these reactions, especially with those of Canada and the USA, because they made clear that, within these countries, the organizations deal with the same projects as those in the development of EuroPharm Forum.

Statutes

The Executive Committee developed a procedure for handling the question of membership in countries where more than one pharmaceutical organization applies for membership.

Projects

During the Founding Meeting in Hillerød, the participants expressed interest in many projects. The Executive Committee decided to gather more information before making proposals for projects. As a result, all members received many letters with regard to the projects the members have showed interest in. The outcome was that most members were very interested in cooperating, but had problems to send their information in time. One solution to overcome these problems could be the nomination within the member organization of a special liaison person, to keep contact between EuroPharm Forum and the member organization. EuroPharm Forum, on the other hand, will avoid, in future, sending out too many inquiries simultaneously. Nevertheless, members' reactions were, in most cases, very positive and contain a lot of information. The interest to take part in proposed projects came from members of the Nordic countries and Western Europe. The countries within Central and Eastern Europe sent letters in which they expressed interest, but did not have time and money to cooperate. Because these countries need projects adapted to their special needs, the Executive Committee decided to have a special workshop at the next Annual Meeting in Thessaloniki with the aim of developing special projects for these countries

In May 1992, Mrs Lillian Møller, pharmacist, started working for EuroPharm Forum two days per week. Her experiences with many projects in Denmark to strengthen the advisory role of the pharmacist, were very beneficial.

The Executive Committee is grateful to the National Pharmaceutical Organization of Great Britain for hosting, in the autumn of 1993, an important meeting of the pharmacists' role in Health Promotion.

Annual meeting

The Greek National Pharmaceutical Organization were willing to host the Second Annual Meeting of EuroPharm Forum. During the last months, the Secretariat has worked in close contact with the Greek organizing committee. The GPCE also decided to hold their meeting in Thessaloniki, directly after the EuroPharm Forum Meeting. To avoid problems with registering the participants, it was decided that the Secretariat of Europharm Forum would act as central registration Office for both meetings.

The Executive Committee discussed the program of the meeting many times. They decided that all activities, besides the business Meeting, must in principle be linked with the projects under development or with new projects, like those for the countries of Central and Eastern Europe. Speakers have been invited and the programme has been structured against that background.

In principle, the Executive Committee wishes to invite, at EuroPharm Forum expense, all national pharmaceutical associations, who would like to work closely with EuroPharm Forum, but are unable to pay the costs. It is a happy circumstance, that not more than five associations from the CCEE have made requests to be paid by Euro-

Pharm Forum, because the budget is not sufficient to cover more. A solution has to be found for the Future years, when more participants from the CCEE are expected to attend the Annual Meeting of EuroPharm Forum.

Budget

At the Founding Meeting, decision was made to have a membership fee. Although the Treasurer had to remind members to pay their fee, almost all organizations paid. Some countries were not in agreement with the amount of money they were obliged to pay. For this reason, the Executive Committee will present a proposal at the Annual Meeting in Thessaloniki in which the contribution of EuroPharm Forum is directly related to the number of pharmacists of the national pharmaceutical organizations.

Secretariat

Ms Inga Lunde was the first Professional Secretary of EuroPharm Forum. She fulfilled her function with enthusiasm, until the first of September 1992 when Mr Cornelis van Gruting took over. A month later, Ms Doris Sorensen took over the function of Secretary from Angela Hendriksen and Sheila Schmidt. The Executive Committee was worried about these changes, because they can harm the continuity of the activities of the Secretariat. WHO was informed about these feelings.

The payment of the secretarial staff is made by WHO on the basis of a generous voluntary donation by a member state. If these voluntary donations cannot be continued in the future, a serious problem may arise. The Executive Committee is keeping in close contact with WHO officials about this matter.

Newsletter

The Executive Committee decided to publish a quarterly Newsletter to inform interested parties about the main events of EuroPharm Forum. The first issue was published in December 1992. A thousand copies have been distributed among interested organizations and persons. A reply card makes it possible to obtain a free subscription.

A new logo has been designed for EuroPharm Forum.

Conclusion

In retrospect, the Executive Committee is of the opinion that, despite some problems, much has been achieved. EuroPharm Forum has been widely accepted as an organization and there is a lot of interest in projects under development. The Committee is grateful for the positive attitude of the members and the interest shown by Observers. Of great importance is the development of new projects, and especially those which can be implemented by the countries of Central and Eastern Europe. On the condition that the continuity of the Secretariat can be safeguarded and more funds be made available for running the projects, EuroPharm Forum will have a promising future.

Treasurer's report

Annex 2

**Budget v/s actual EuroPharm Forum 1992
(including annual meeting 1993)**

Income	Budget	Actual	Note
WHO	\$ 5,000	5,000	
Contributions	\$ 54,000	36,000	(Recieved)
		10,000	(Outstanding)
Total	\$ 59,000	51,000	
Expenses			
Secretariat			
25% professional secretary (P4)	\$ 10,500	10,500	
25% secretarial assistant (C3)	\$ 6,000	6,000	
Central and Eastern European			
12 participants at Annual meeting per diem 2 days a \$250	\$ 6,000	6,000	(6 participants)
Temporary advisers (maximum 2 advisers for 2 planning meetings)			
travel 2*2*\$1200	\$ 4,800	-	
per diem 2*2*2*\$250	\$ 2,500	-	
Speakers for the Annual meeting (3)			
travel 3*\$1200	\$ 3,600	3,000	
per diem 3*\$500	\$ 1,500	1,900	
Project funds	\$ 20,000	-	
Miscellaneous	\$ 4,600	-	
Bank account	\$	23,600	
Total	\$ 59,000	51,000	
Bank Account	\$	23,600	
Expenses to be expected:			
Thessaloniki, travel secretariat	\$ 4,000		
Perhaps compensation for \$ 3,000			
Thessaloniki, various	\$ 10,000		
Meetings Executive Committee	\$ 1,000		
Newsletter	\$ 2,000		
Administrative costs	\$ 2,000	<u>19,000</u>	
Result	\$	4,600	

**Budget EuroPharm Forum 1993
(including annual meeting 1994)**

Annex 3

Income	Budget	Actual	Note
WHO	\$	5,000	
Contribution	\$	46,000	
Total	\$	51,000	
Expenses			
Secretariat			
25% professional secretary (P4)	\$ 10,500		
25% secretarial assistant (C3)	\$ 6,000	16,500	
Central and Eastern European			
8 participants at Annual meeting			
travel 8*1000	\$ 8,000		
per diem 2 days, 8*2*250	\$ 4,000	12,000	
Temporary advisers			
maximum 2 advisers for 2 planning meetings of 2 days			
travel 2*2*US \$1000	\$ 4,000		
per diem 2*2*2*US \$250	\$ 2,000	6,000	
Speakers for the Annual Meeting (3) 2 days			
travel 3*US \$1000	\$ 3,000		
per diem 2*2*2*US \$250	\$ 1,500	4,500	
Project funds	\$	1,000	
Miscellaneous			
Annual Meeting Copenhagen	\$	5,000	
Newsletter	\$	3,000	
Administrative Costs	\$	2,000	
Meetings of Executive Committee	\$	1,000	
Total	\$	51,000	

Membership fee for 1993

Annex 4

Group A: Countries with 10,000- 100,000 pharmacists. Membership fee: US\$ 4,000

Group B: Countries with 500-9,999 pharmacists. Membership fee: US\$ 2,000

Group C: Countries with 1 - 499 pharmacists. Membership fee: US\$ 500

Group D: Countries in Central and Eastern Europe. Membership fee: US\$ 500.

	Number of pharmacists (sorted)	Category	Membership fee 1993
West European Countries			
Italy	50,000	A	4,000
France	49,150	A	4,000
Germany	42,600	A	4,000
United Kingdom	37,500	A	4,000
Spain	21,647	A	4,000
Turkey	16,500	A	4,000
Greece	10,000	A	4,000
Belgium	9,200	B	2,000
Finland	7,100	B	2,000
Sweden	5,800	B	2,000
Portugal	5,000	B	2,000
Austria	3,300	B	2,000
The Netherlands	2,600	B	2,000
Israel	2,500	B	2,000
Denmark	2,378	B	2,000
Ireland	2,083	B	2,000
Switzerland	2,000	B	2,000
Norway	1,400	B	2,000
Malta	406	C	500
Luxembourg	260	C	500
Iceland	235	C	500
Monaco	?	C	500

Countries	Number of pharmacists (sorted)	Category	Membership fee 1993
San Marino	?	C	500
Central- and Eastern Europe			
Albania	-	D	500
Armenia	-	D	500
Azerbaijan	-	D	500
Belarus	-	D	500
Bosnia-Herzegovina	-	D	500
Bulgaria	-	D	500
Croatia	-	D	500
The CZECH Republic	-	D	500
Estonia	-	D	500
Georgia	-	D	500
Hungary	-	D	500
Kazakhstan	-	D	500
Kyrgyzstan	-	D	500
Latvia	-	D	500
Lithuania	-	D	500
Rep. of Moldova	-	D	500
Poland	-	D	500
Romania	-	D	500
Russian Federation	-	D	500
Slovakia	-	D	500
Slovenia	-	D	500
Tajikistan	-	D	500
Turkemenistan	-	D	500
Ukraine	-	D	500
Uzbekistan	-	D	500
Yougoslavia	-	D	500

Name and purpose

1. The organization shall be called "The European Forum of Pharmaceutical Associations and WHO", hereinafter referred to as "the Forum".
2. The aim of the Forum shall be, by establishing a dialogue and cooperation between national pharmaceutical associations and WHO in the European Region:
 - (a) to strengthen contact between the national pharmaceutical associations on the one hand and the pharmaceutical associations and WHO on the other;
 - (b) to improve health in the WHO European Region;
 - (c) to support the WHO European health for all (HFA) policy and targets;
 - (d) to integrate appropriate aspects of policies of HFA into basic, postgraduate and continuing pharmaceutical education;
 - (e) to formulate policy statements on health issues identified at the annual meetings of the Forum.

The Forum will seek to improve all aspects of dealing with health especially in relation to:

- drug treatment and the rational use of drugs;
- drug information to health professionals, patients and the general public;
- health promotion and health education;
- the prevention of disease and disability;
- quality assurance;
- adverse drug reactions;
- drug utilization studies;
- collaboration with other health professionals;
- organization and management of pharmaceutical services

Membership

3. Any national pharmaceutical association in the WHO European Region shall be eligible to become a member of the Forum and participate in its programme of work, subject to the provisions of paragraphs 4 and 5.
4. For the purpose of the Forum, a national pharmaceutical association shall be defined as a "free, independent nongovernmental association of pharmacists, whose activities cover all aspects of professional practice". ("A nongovernmental association of pharmacists" is defined as an organization that elects its own representatives, appoints its own staff and determines its own constitution except for any statutory duties that it undertakes.)

5. Further, the national pharmaceutical association shall be involved in most or all of the following activities:
 - representing the professional and scientific interests of individual pharmacists and the pharmaceutical profession as a whole;
 - advising on health policy issues;
 - ethical aspects of pharmaceutical practice;
 - pharmaceutical education;
 - discussion of health issues and drug problems with interested parties, including governments and the public;
 - production of information for the profession in journals or other publications.
6. National pharmaceutical associations that meet the criteria in paragraphs 4 and 5 and attend the meeting which decides on the final guidelines shall be considered to be founder members. Thereafter, applications for membership will be considered as set out in paragraphs 13 and 28 below.
7. Each member association may be represented by two participants.
8. Observer status may be granted to European groups or associations of national pharmaceutical associations. Observer status may also be granted to representatives from WHO Headquarters and the other WHO Regional Offices.
9. Applications for observer status will be considered as set out in paragraphs 10, 13 and 28 below.
10. National pharmaceutical associations and groups of such associations from outside the WHO European Region may attend the meeting of the Forum on the invitation of the Executive Committee.

Rules of Procedure

11. If more than one national association from a Member State of the WHO European Region are members of the Forum, these organizations form one delegation.
12. Each delegation from a Member State of the WHO European Region shall have one vote.
13. Decisions should normally be made by consensus, except for matters of Constitution, the election of the Executive Committee and the approval of applications for membership or observer status.
14. A simple majority of the delegations from Member States of the WHO European Region present and voting at the meeting shall be required for the election of the Executive Committee.
15. Voting shall normally be by a show of hands, except for the election of the Executive Committee.
16. For the election of the Executive Committee, voting shall be by secret ballot.
17. The Forum shall meet once a year.

18. Every even year the Forum shall meet in Copenhagen. During that meeting, the Forum shall determine the host national pharmaceutical association and the location of the next meeting.
19. At the annual meeting, the Forum shall elect its Executive Committee, receive reports from the Executive Committee and the Treasurer, determine the membership fee and conduct other business in accordance with the aims of the Forum set out in paragraph 2.
20. The Forum may establish working groups as appropriate.
21. For the purpose of conducting formal business, the quorum for the Forum shall be at least 50% of the delegations plus 1.

Executive Committee

22. The Executive Committee shall consist of: - the Chairperson and Vice-chairperson - three representatives of national pharmaceutical associations - the WHO Regional Director or a representative - the Treasurer.
23. The Executive Committee shall be elected in a manner that shall ensure that the Committee is geographically representative of the whole European Region.
24. No person shall serve in or hold any form of office continuously for a period exceeding six years.
25. The representatives serving on the Executive Committee shall be elected by the Forum for a period of two years. This mandate may be renewed twice only.
26. The Forum shall elect a Chairperson and Vice-chairperson at the annual meeting. Each shall serve for a two year period that shall not be renewed.
27. The Forum shall elect a Treasurer who shall serve for a period of four years.
28. The tasks of the Executive Committee shall be:
 - to pursue the objectives and implement the decisions of the Forum between meetings;
 - to make arrangements for the meetings of the Forum;
 - to prepare proposed statements of policy for consideration by the Forum;
 - to take responsibility for statements of policy as decided by the Forum;
 - to advise the Regional Director for the WHO European Region;
 - to approve, together with the WHO European Region, reports of meetings; and
 - to undertake the initial consideration of applications for membership or observer status.
29. The Executive Committee may co-opt individuals for specific purposes

The Secretariat

30. The Secretariat of the Forum shall be provided by the WHO European Region. Its functions shall be:
- to provide administrative support for the Executive Committee;
 - to take all necessary action deriving from decisions taken by the Forum;
 - to act as clearing-house for information;
 - to provide administrative support for collaborative programmes;
 - to arrange for the provision of expert advice and consultant reports to assist national pharmaceutical associations in developing their programmes;
 - to provide liaison, where appropriate, with similar programmes organized jointly by WHO and national pharmaceutical associations in other WHO regions .

Language

31. The working language of the Forum will be English.
32. Any pharmaceutical association or group of such associations may speak in a language other than the working language. In this case, that association or group of associations shall provide for interpretation into English at its own expense.

Financing and support

33. Members shall contribute a yearly membership fee to be determined by the Forum.
34. Financing and support for the Annual Meeting of the Forum shall be sought from three sources: WHO, members of the Forum, and external sources including the government of the host Member State.
35. Any proposed change to the Constitution shall be sent to the Secretariat and reported to the members six month before the meeting of the Forum at which it will be considered.
36. A two-thirds majority of the delegations present and voting at the meeting shall be required to effect the change.

List of members and observers of EuroPharm Forum		
Member organizations		
Pharmaceutical organizations by country	Founder Members	Members
Austria	*	yes
Belgium	*	yes
Denmark	*	yes
Finland	*	yes
France	*	yes
Germany	*	yes
Greece	*	yes
Hungary	*	yes
Iceland	*	yes
Israel	*	yes
Italy	*	yes
Luxembourg	*	yes
Malta	*	yes
Norway	*	yes
Portugal	*	yes
Romania	*	yes
San Marino	*	yes
Spain	*	yes
Sweden	*	yes
The Netherlands	*	yes
United Kingdom	*	yes
Lithuania	**	
Poland	**	
Switzerland	**	
* A Founder Country is following the Statutes of Europharm Forum, a national pharmaceutical organization which meets the criteria for membership and has attended the Founding Meeting (Art. 6)		
** observer		
Observer organizations		
European Society of Clinical Pharmacy		
European Association of Hospital Pharmacists		
Pharmaceutical Group of the European Community		

The Thessaloniki Declaration**Annex 7**

At the Second Annual Meeting of the European Forum of Pharmaceutical Associations and the WHO Regional Office for Europe (EuroPharm Forum) held in Thessaloniki, Greece, 8-9 February 1993, the Forum discussed pharmaceutical questions arising from the development of new structures for production and distribution of medicinal products in the countries of Central and Eastern Europe. The Forum resolved that, when taking decisions on the distribution and supply of medicines, governments must apply the following principles:

1. Medicines are not ordinary articles of commerce and, in the interest of public health, special conditions must be applied in their distribution. They should be available only through pharmacies where proper controls on supply will be exercised.
2. For medicines subject to supply only on medical prescription, there should be separation between the prescribing and dispensing functions. The patient is best served when each professional undertakes the duties for which he is specifically educated and trained and the prescriber has no economic interest in the medicine prescribed.
3. Public health can only be assured when the law provides that the pharmacist who has the necessary education and training and is governed by strict rules of professional conduct and ethics, has control of the supply of medicines to the public and thus the pharmacist must have complete managerial control of the pharmacy, free of economic influence from non-pharmacist sources.

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