

Industrial *Pharmacist*

February 2006

FOREWORD

Dear Reader

A recent survey, carried out by the British Pharmaceutical Students' Association, found that 18 per cent of students want a career in industrial pharmacy and 14 per cent are undecided or moving into other career areas. It is the intention of the Industrial Pharmacists Group and this newsletter to secure the decided and win over the undecided. This edition features an article about the summer placement scheme offered by Bristol-Myers Squibb and information about becoming a team leader in the IPG liaison programme. If you would like to get involved and help to promote the industrial sector by speaking at schools and universities, information can be obtained at: www.rpsgb.org.uk/members/society/ipg.html.

The IPG conducted two continuing professional development roadshows at AstraZeneca and Pfizer towards the end of 2005, and the 2006 programme is now under way. If you would like to attend one of the roadshows, contact the site host or Angela Canning at Lambeth and they will help you participate. If you cannot attend a roadshow, we have produced a DVD with video footage of the teaching session and the presentation material in Microsoft Powerpoint format. Contact me if you would like a copy. My thanks goes to Janet Halliday for designing the workshops and for her hard work in presenting the material around the country on behalf of the IPG.

The IPG committee will meet in April to review 2005/06, develop plans for 2006/07 and will publish an annual report in May. We value your feedback on our efforts over the past year and any guidance that you can give on the future direction of the IPG. My e-mail is steve.wicks@pfizer.com.

Steve Wicks
IPG Chairman

Push to make original pack dispensing standard practice



The UK is out of line with the most of the rest of Europe since it is estimated that a significant proportion (45 per cent) of items are still dispensed, either from broken bulk or from split original packs. This creates all sorts of problems, not the least being that patients may not receive the appropriate patient information leaflet (PIL). This means that they may not know how to take their medicines, about when the medicine should not be used, of any precautions and warnings, or of any interactions with other medicines or foods, etc. Plus, the benefits of specially designed packaging are lost if the patient never sees it. Although there are a few people who can read Braille, not even those that can will have the opportunity if they do not receive the original pack.

Because original pack dispensing is not standard practice, some patients receive several pieces cut from original blister strips when their prescriptions are dispensed. Some patients find it difficult to remove tablets from these smaller pieces, because there is nothing for them to hold on to. There have even been hospital admissions as a result of people failing to pop tablets out of these blister pieces and ingesting the tablet still in the foil.

With the use of robots on the increase — there are now some in community pharmacies — there is a need to use original packs for them to be used effectively.

For all these reasons, the Royal Pharmaceutical Society's Council has decided

to have another attempt at trying to introduce original pack dispensing as standard practice. The Council recently issued a statement supporting the introduction of original pack dispensing for primary and secondary care as standard practice, unless it is not in the best interest of the patient (*PJ*, 13 August 2005, p200).

For some people it is appropriate that they receive their medicines in monitored dosage units. Others, eg, those receiving cytotoxic drugs, need to receive the exact quantity.

The Society is committed to working with other stakeholder organisations to influence a change in current legislation to permit pharmacists to be able to dispense original packs and be reimbursed for this. It is important that pharmacists are paid for what they dispense and are not expected to pick up any additional costs for dispensing an original pack.

The Society is also committed to trying to standardise the number of days in a month to 28 for dispensing purposes. They recognise that this will take time to achieve but the aim is to move in this direction. This will help patients manage their medicines and is likely to receive support from doctors. Some doctors have concerns about patients receiving 28-day original packs and 30-day original packs for items on the same prescription.

With original pack dispensing, patients will receive the appropriate PIL. The Medicines and Healthcare products



Regulatory Agency has recently released a report from the committee on safety of medicines working group entitled "Patient information, always read the leaflet, getting the best information with every medicine". This provides guidance on producing clear leaflets. It advises that writing style should be simple, avoiding long paragraphs and sentences. The font size for headings should generally be 14 point and the main body of text 12 point. The typeface should preferably be serif and widespread use of capitals should be avoided. All text should be set horizontally and the contrast between the text and background is important. Factors to bear in mind include the paper's weight, size and colour and the weight and colour of the type. If there is not a great enough contrast between the text and background, the information can be difficult to read. Likewise, it is harder to read off glossy paper. Symbols and pictograms can be useful, providing the meaning is clear and their size makes them easy to see. It is important to use test symbols to ensure the meaning is understood.

Although some companies have spent a significant amount of time and resources developing packaging to meet patient needs, there have been instances where poor packaging has contributed to errors. It is estimated that 33 per cent of errors with medicines can be attributed to confusion triggered by packaging and labelling.¹

The National Patient Safety Agency and the Helen Hamlyn Research Centre (part of the Royal College of Art) have recently released "Information design for patient safety", which includes design guidance for the packaging of prescription medicine. The work was

Good manufacturing practice: understanding recent developments

The Medicines and Healthcare products Regulatory Agency is hosting a one-day symposium that will cover topics relating to good manufacturing practice and provide attendees with up-to-date knowledge on legislative changes, the MHRA inspectorate, expectations, GMP deficiencies and future issues.

Date: 7 March

Venue: Moat House Hotel, York

Event fee: £499 (+ VAT). This includes documentation, lunch and refreshments.

Registration:

www.mhra.gov.uk/mhra/conferences/register.htm.

For more information: e-mail

mhraconferences@mhra.gsi.gov.uk or telephone 020 7084 2903.



Generic atenolol tablets from Almus: an example of good packaging design

undertaken by Thea Swayne, a research associate at the centre. She found that when taking medicines, patients and health care professionals do not usually recognise individual design elements, but perceive all visual stimuli simultaneously. Individual issues must not be judged in isolation since each visual element impacts upon another, eg, colour impacts on packaging dimensions, typography, corporate identity of the manufacturer, etc.

It is important that secondary packaging should have a clearly designated space for a dispensing label. This should be preferably a white space and should be at least 70 x 35mm. It is also recommended that the generic name and strength of the medicine should be located directly above or beside the space provided for the dispensing label. The purpose of this is to allow the medicine to be easily checked with the dispensing label.

For blister strips, the type colour should contrast with the background colour. The blister strip should have an identical (or linked) distinctive visual style (eg, use of colour) with the outer (secondary) packaging.

With the drive to improve patient safety and an increased use of technology, the time is right to move to original pack dispensing as standard practice. Let us hope that this time it is successful. — *Sue Kilby, head of UK business, Total Healthcare Solutions*

Reference

1. Berman A. Reducing medication errors through naming, labelling and packaging. *Journal of Medical Systems*. 2004;28:9–29.

Purpose of the IPG

- To promote better integration and communication between pharmacists in industry and those in other sectors
- To inform the Royal Pharmaceutical Society of issues affecting or likely to impact on industrial pharmacy
- To represent the views of the members to the Society
- To promote high standards of education and professional training which are relevant to the needs of industrial pharmacy
- To expand the role and increase awareness of the value of pharmacy and pharmacists within industry

MEETINGS

Contact for all meetings: Lisa Gilbert at science@rpsgb.org.

Pharmaceutical nanotechnology

Held by the Academy of Pharmaceutical Sciences.

Date: 27 February

Venue: Thistle Hotel, Buckingham Palace Road, London

Website: www.apsgb.org

Controlled release development and technology

Held by the Royal Pharmaceutical Society, the Academy of Pharmaceutical Sciences and the American Association of Pharmaceutical Scientists.

Date: 20–22 March

Venue: Harrington Hall, London

Website: www.rpsgb.org

Changing regulatory requirements in API manufacture and control

Held by the Joint Pharmaceutical Analysis Group.

Date: 29 March

Venue: King's College London

Website: www.jpag.org

Natural products active against human pathogens

Held by the Academy of Pharmaceutical Sciences.

Date: 6–7 April

Venue: Kew Gardens, London

Website: www.apsgb.org

Pharmacokinetic and pharmacodynamic data analysis

Held by the Royal Pharmaceutical Society and the Academy of Pharmaceutical Sciences.

Date: 15–19 April

Venue: Madingley Hall, Cambridge

Website: www.rpsgb.org

Pharmacovigilance of herbal medicines

Held by the Royal Pharmaceutical Society and collaborating organisations.

Date: 26–28 April

Venue: Royal College of Obstetricians and Gynaecologists, London

Website: www.rpsgb.org

SYMPOSIUM

CPD roadshows are well received



Fred Ayling, Janet Halliday and Steve Wicks at one of the CPD roadshows

Over the past three months the Industrial Pharmacists Group has conducted roadshows at AstraZeneca, Pfizer and Controlled Therapeutics. The roadshows examined the reasons behind the requirement to do continuing professional development, the activities that comprise CPD and how to record these using the Royal Pharmaceutical Society's on-line system. The sessions were a combination of lectures, demonstration and hands-on par-

ticipation. Most pharmacists attending the roadshows were from the areas of discovery or development.

The sessions were well received by the participants who declared that the "fear factor" of tackling online CPD had been removed and that they were reassured that the required content of the records was directly applicable to the roles that they were working in.

Upcoming CPD roadshows

Non-company pharmacists are welcome to attend these roadshows. As places are restricted please check availability via the relevant e-mail contact or alternatively: Janet.Halliday@ctscotland.com.

Date: 13 March 2006
 Venue: Napp
 Location: Cambridgeshire
 Contact: Derek Prater
 (Derek.Prater@napp.co.uk)

Date: 25 April 2006
 Venue: AstraZeneca
 Location: Charnwood
 Contact: Elaine Harrop
 (Elaine.harrop@astrazeneca.com)

On behalf of the IPG I would like to thank Mike Parker of AstraZeneca, Steve Wicks of Pfizer and my own company, Controlled Therapeutics, for hosting the events. Fred Ayling, CPD manager at the Royal Pharmaceutical Society attended each event and has aided greatly in our understanding of CPD. — Janet Halliday, director of research and development, Controlled Therapeutics, IPG committee member

Team leaders — what are they and how can you become one?

Team leaders are pharmacists who work in industry or associated areas who are prepared to give up their time to inform pharmacy students of the different career opportunities in industry. This can be done in a number of different ways: by taking part in careers fairs, giving presentations over lunchtimes or by giving more formal lectures as part of a module. This may be either to undergraduate or postgraduate students.

The different schools of pharmacy have their own preferred style in delivering information to the students — so it is important to know and understand what is possible for each school.

Each school of pharmacy has or needs a team leader who will take overall responsibility for linking with the school of pharmacy and ensuring that the session is delivered. Although some pharmacists have worked in a number of different positions within industry, due to the ever widening scope of opportunity it would be highly unlikely that any one person would have worked across a company from research and development to sales, manufacturing and health policy. It is, therefore, useful to have more than one pharmacist involved in the sessions so that a wider range of

knowledge and experience can be passed on to the students. A mixture of those working in research and development and the more commercial or regulatory positions is ideal.

Students like to hear particularly from industrial pharmacists who are at the start of their career because they can often relate better to them. Older pharmacists, however, have the advantage in that they can give first hand experience of their progress through or across companies.

Many pharmacy students and even lecturers are totally unaware of the range of positions occupied by pharmacists in industry. Many do not know that pharmacists work in health economics, in consultancies advising industry or even at the Medicines and Healthcare products Regulatory Agency and Veterinary Medicines Directorate. Students do not realise that it is not essential to have a PhD or a love of chemistry or pharmaceuticals to work in industry. They have never considered marketing, let alone sales.

The visits to schools of pharmacy are an ideal opportunity to encourage students to consider industry as an option in their future career. The students may need reassurance that they do not need to do their preregistra-

tion training in industry. This is important because although the opportunities for preregistration are slowly increasing, there are still only a limited number of places. This is something that the Industrial Pharmacists Group would like to see change and it would like to encourage more companies to provide positions.

There are a number of schools of pharmacy that are short of a team leader and many would be interested in receiving additional pharmacists to support the team. The time involved is minimal since visits to schools are usually only once a year. However, it can be rewarding to know that you can shape someone's future career as a result of a few hours' time.

The team leaders are headed by Steve Robertson of Controlled Therapeutics. If this is something that would interest you, please contact Angela Canning at angela.canning@rpsgb.org or telephone 020 7572 2412.

Further information on team leaders can be accessed on the IPG page of the Royal Pharmaceutical Society's website: www.rpsgb.org. — Sue Kilby, head of UK business, Total Healthcare Solutions



From the industrial pharmacist's viewpoint — a summer placement at Bristol-Myers Squibb

Working in the pharmaceutical industry is an immensely challenging and rewarding career choice. Unfortunately, pharmacy undergraduates are currently finding it increasingly difficult to experience the varied roles within industry. Bristol-Myers Squibb recently offered an eight-week summer placement for a pharmacy student within the regulatory affairs team.

I have been working at Bristol-Myers Squibb as a regulatory affairs associate for two years, having previously worked and trained in a hospital environment.

I had always envisaged a career in the pharmaceutical industry but had found it difficult to find work experience within this sector. Despite advice to the contrary, making the switch to industry was relatively straightforward and I soon found I used far more of the scientific knowledge I obtained from my degree in this role. However, my clinical background has certainly provided me with an advantage in my interactions with commercial and medical colleagues.

The role of the regulatory affairs professional is wide and varied and our work involves products in clinical trials, launch and post-marketing. In essence, we ensure the



Kelsey Mower guides Dami Aderinto through her placement

product is safe, works and is manufactured to a high quality, while keeping up to date with ever-changing legislation, both at a national and European level. Within my role at Bristol-Myers Squibb I also have a commercial focus and work closely with medical and marketing colleagues to ensure promotional materials are both in line with the industry code of practice and our product licence.

As part of the summer placement at Bristol-Myers Squibb, we wanted the student to become fully integrated into the team and perform everyday regulatory activities as well as experience other roles within our company. Dami Aderinto worked closely with a

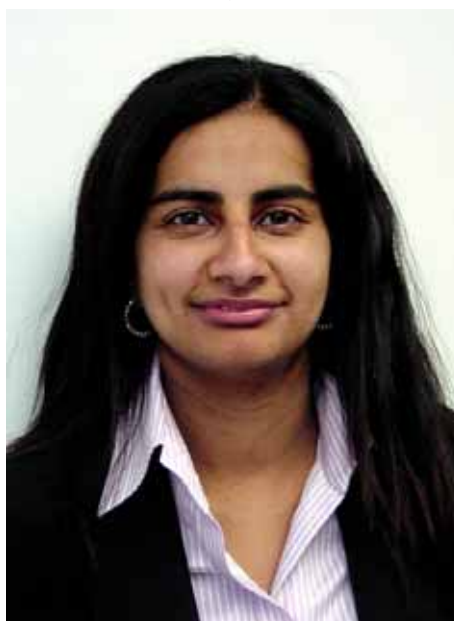
number of members of our regulatory team to ensure that marketing authorisations were up to date by preparing applications to renew or vary the licences and managing the process once approvals were received. Each week a member of the team talked her through specific aspects of the regulatory department, to provide her with an in-depth knowledge of the field. This was complemented by visits to other departments, which included accompanying a sales representative for a day.

Pharmacists have a valuable role within pharmacovigilance, medical information, marketing, clinical trials and sales, in addition to manufacturing, quality assurance and research roles. At Bristol-Myers Squibb, pharmacists are employed to perform all these functions, both at the head office, based in Uxbridge, Middlesex, and at our research and development site at Moreton, Merseyside. In partnership with a hospital in Liverpool, we offer a six-month industry and hospital preregistration placement. This is exclusively based at the Moreton site but students do have the opportunity to spend time at the head office in Uxbridge.

Although not a prerequisite, industrial preregistration and summer placements can be advantageous for gaining a career within industry. However, graduate vacancies are available after registration in many different and varied roles and I strongly encourage any interested pharmacist to apply for industrial positions. As I can testify, you do not need past industrial experience or a PhD to enjoy a challenging and varied career within the pharmaceutical industry. — Kelsey Mower, regulatory affairs associate, Bristol-Myers Squibb

Welcome Baldip — new secretary for IPG

It is all change at the Royal Pharmaceutical Society for the administration of the Industrial Pharmacists Group. Baldip Dhariwal is the new secretary for the IPG. She took over the post in November from Sue Kilby, who was head of practice at the Society and, who has overseen the activities of the group for the past year. Sue who worked previously in industry, has left the Society and joined Total Healthcare Solutions as head of UK business. Baldip, while not having worked in industry, is used to the commercial world as she has only recently left community pharmacy. She has produced a document covering topics such as the purpose of the IPG, activities undertaken by the IPG, achievements (including the launch of the newsletter), key issues affecting industrial pharmacists and future activities. The document can be accessed on the industrial pharmacists' page of the Society's website: www.rpsgb.org. — Sue Kilby, head of UK business, Total Healthcare Solutions



New secretary — Baldip Dhariwal

Calling all pharmaceutical companies

The Student Exchange Programme is offered to pharmacy students all over the world via the International Pharmacy Students Federation (IPSF) and is administered in the UK by the British Pharmaceutical Students' Association. The BPSA would like to encourage all members of the pharmaceutical industry to consider being a host. It is a rewarding and beneficial scheme.

For more details and an information pack e-mail: seo@bpsa.com.