THE MALTA COLLEGE OF PHARMACY PRACTICE

PROFESSIONAL DEVELOPMENT PROGRAMME - WINTER 2008















Renewal of Membership

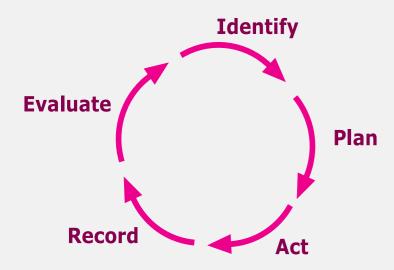
October 2007 - September 2008

€20.96 (Lm9.00) Full Member (≥30 credits) €23.29 (Lm10.00) Associate Member (< 30 credits) €23.29 (Lm10.00) New Member

For clarification of membership status and amount payable you may send an email to: registrar@mcppnet.org

In the interest of efficiency we would like to urge pharmacists to pay their membership in advance. Cheques payable to The Malta College of Pharmacy Practice Cheques should be mailed to: Dr Maria Cordina, President Malta College of Pharmacy Practice c/o Department of Pharmacy University of Malta, Msida

Continuing Professional Development Cycle



- Identify knowledge gaps through personal assessment
- Select appropriate learning activities
- Participate in activities
- Document activities as proof of participation
- Evaluate the success of your activity

Session		Date	Book by
1	Hypertension & cholest	. 22 January	15 January
2	Atrial fibrillation	29 January	22 January
3	Diabetes	5 February	29 January
4	Dyspepsia	12 February	5 February
5	Common drugs	19 February	12 February
6	Geriatric	26 February	19 February

Exclusive attendance

All registered pharmactists are invited to become members of the Malta College of Pharmacy Practice and attend. Only registered pharmacists are eligible to become members of the College and thus particiate in the events organised.

Students wishing to attend should send an email to: president@mcppnet.org

BOOKING

may be placed preferably by email info@mcppnet.org or by phone 7947 0720

> Update your details online www.mcppnet.org

FIRST ANNOUNCEMENT

9 February 2008 **Dolmen Resort Hotel, Bugibba**

Epilepsy: a Multidisciplinary Approach

organised by The Caritas Malta Epilepsy Association in conjunction with Epilepsy Society of Malta; Department of Clinical Pharmacology and Therapeutics, University of Malta; Malta College of Pharmacy Practice; Malta College of Family Doctors and Malta Union of Midwives and Nurses. Registration and further information contact: Dr Janet Mifsud email: janet.mifsud@um.edu.mt tel 23402845 This event will be accredited by MCPP. Proof of attendance must be produced.



c/o Department of Pharmacy University of Malta Msida MSD 06 • Malta Tel: (356) 2340 2908

www.mcppnet.org

MALTA COLLEGE OF PHARMACY PRACTICE

CONTINUING PROFESSIONAL DEVELOPMENT PROGRAMME WINTER 2008

in collaboration with Department of Pharmacy Department of Clinical Pharmacology & Therapeutics University of Malta



Dear Colleagues

The 2008 programme will open with a very hands on and interactive session on the pharmacotherapeutic management of disease. The aim of this session is to further support members of the profession in ensuring optimal use of drugs in the management of highly prevalent chronic conditions such as cardiovascular disease and diabetes and commonly encountered conditions such as dyspepsia.

The need was felt to target OTC use as various international studies indicate that pharmacists' intervention in the use of these products leads to better outcomes. Polypharmacy in the geriatric population is a significant cause for concern as it can lead to morbidity and merits increased attention.

These workshops will be delivered by our excellent team of clinical pharmacists who have gained significant experience both in the hospital and community setting. As always we urge all pharmacists to become members of The College and to attend our programmes.

We would like to thank all our speakers who have kindly agreed to prepare and facilitate these workshops and to the sponsoring companies for their support.

Maria Cordina

BPharm(Hons), PhD(QUB), Dip Health Outcomes Rese President, Malta College of Pharmacy Practice

PHARMACEUTICAL CARE

...is the responsible provision of drug therapy for the purpose of achieving definite outcomes that improve a patient's quality of life... ...is provided for the direct benefit of the patient and the pharmacist is responsible directly to the patient for the quality of that care."

SESSION 1

Hypertension & cholesterol: management & monitoring

Scope

The definition of hypertension varies and takes into consideration other co-existing co-morbidities such as diabetes mellitus. The overall goal to treat hypertension is to achieve a systolic blood pressure <140mmHg or a diastolic of <90mmHg. A high cholesterol level (LDL >3.1mmol/l) like hypertension can be asymptomatic. It is vital to diagnose these two silent conditions and treat them in order to minimise risk factors for other co-morbidities and indirectly decrease health care costs and improve the quality of life of patients. This session will provide an overview of hypertension and cholesterol management.

Objectives

- · To understand the end points of untreated hypertension and hypercholesterolaemia
- · To highlight the various target levels of blood pressure and blood cholesterol levels
- · To discuss possible ways of monitoring blood pressure and cholesterol levels
- · To review possible symptomatic features of hypertension and when to refer
- · To review pharmacological and non-pharmacological management of hypertension and cholesterol levels
- To discuss the new European guidelines on management of hypertension

Learning objectives

By the end of the session, pharmacists will be able to:

- Identify signs and symptoms of hypertension and hypercholesterolaemia
- Be able to discuss management with other health care providers
- Be able to provide pharmaceutical care to patients suffering from hypertension and high cholesterol

Delivered by

Louise Azzopardi

BPharm (Hons), MPhil(Glasgow) Clinical Pharmacist, MDH

Date Tuesday, 22 January 2008 **Time** 19:30 for 20:00 Lecture Centre, Car Park 2 Venue University of Malta Tuesday, 15 January 2008 Book by

This workshop provides 4 credits towards the MCPP continuing education requirement.

SESSION 2

Atrial fibrillation: addressing common therapeutic issues

Scope

Atrial fibrillation (AF) is the most common chronic arrhythmia. It is a major cause of morbidity and mortality, particularly increasing the risk for stroke as well as leading to heart failure. The strategies chosen to treat a patient will depend primarily on whether the underlying cause can be corrected, symptom severity and the characteristics of the AF. Many of the drugs used in AF are associated with clinically significant side effects and drug interactions. Whereas it is important not to undertreat patients with AF, every effort should be made to ensure that the benefits of treatment outweigh the risks.

Objectives

- to provide an overview of AF
- · to illustrate the goals of treatment
- · to discuss the pharmacological management, with particular attention to some important therapeutic considerations

Learning objectives

By the end of the session pharmacists will:

- · be familiar with the causative factors and characteristics of AF
- understand the appropriate management strategies

Tuesday, 29 January 2008

Lecture Centre, Car Park 2

Tuesday, 22 January 2008

19:30 for 20:00

This workshop provides 4 credits towards

the MCPP continuing education requirement.

University of Malta

• be aware of their role in ensuring optimal treatment

Delivered by

Date

Time

Venue

Book by

Marise Gauci

BPharm(Hons), MSc(Clin Pharm) Clinical Pharmacist 7CH/KGH

SESSION 3

Insulin and oral hypoglycemic agents

Ensuring optimal use of insulin and oral hypoglycemic agents in diabetes

Diabetes is a condition primarily defined by the level of hyperglycaemia giving rise to risk of microvascular damage (retinopathy, nephropathy and neuropathy). It is associated with reduced life expectancy, significant morbidity due to specific diabetes related microvascular complications, increased risk of macrovascular complications (ischaemic heart disease, stroke and peripheral vascular disease), and diminished quality of life. About 10% of the Maltese population suffers from diabetes and due to the disease complications, they are a group of patients whom pharmacists encounter regularly in their day to day practice.

- To provide an overview of diabetes mellitus and its complications
- · To review the drugs which are used in the management diabetes
- To discuss practical points in the management of natients with diabetes

Learning objectives

By the end of the session pharmacists will:

- · Familiarise themselves with the disease and its complications
- Acquire general guidance on phamacotherapeutic management including indications, contra-indications, side-effects, interactions, monitoring, administration and storage of drugs used
- Understand how to manage problems presented by patients with diabetes and when to refer

Delivered by

Book by

Ruth Theuma

Senior clinical pharmacist, MDH Secretary, MCPP

SESSION 4

Management of dyspepsia

Scope

For a high percentage of patients the consequence of dyspepsia is symptoms affecting their quality of life. Although lifestyle changes can help to avoid triggering dyspepsia, evidence for this is lacking and it is inappropriate to withold treatment on lifestyle grounds. In most patients without alarm signs it is appropriate to manage symptoms without the need of an official diagnosis. Pharmacists are in an ideal position to offer initial and ongoing help for people suffering from symptoms of dyspepsia.

Objectives

- · To identify which factors predispose patients to
- To identify alarm signs which would require urgent referral for further investigations
- · To identify which patients would benefit from overthe-counter preparations
- To discuss the monitoring and follow up required

Learning objectives

By the end of the session pharmacists will be able to:

- · Identify which drugs are associated with dyspepsia
- Give patients lifestyle advice to minimise dyspeptic
- Advise on OTC and prescription medications
- · Identify patients requiring referral

Delivered by

Valerie Vella

B Pharm(Hons) MSc(Aberdeen) MpharmS Senior Clinical Pharmacist, Mater Dei Hospital

SESSION 5

Commonly used preparations

Highlighting misuse and promoting appropriate use of OTC and other commonly used preparations

Medicines available over-the-counter often have ingredients which can be highly abused or misused. Analgesics, cough mixtures, decongestants and laxatives are all known to cause such a problem. Other medicines which can unintentionally be misused are prochlorperazine and calcium containing antacids. Benzodiazepines, although dispensed against a prescription, pertain to a class of highly abused drugs locally. As herbal medicines become more popular, several adverse effects have been reported especially in patients who are also taking other medications. Pharmacists should ensure that patients are aware that these medicines can cause problems and advise accordingly.

Objectives

- · To identify the most commonly used drugs which can easily be misused or abused
- To identify the most common adverse effects caused by commonly used medicines
- To discuss which patients should be referred
- · To discuss advice which should be offered by the pharmacist when dispensing OTC medicines and other commonly used preparations

Learning objectives

- By the end of the session pharmacists will be able to: Identify common drugs which can potentially be abused or misused
- Consider herbal medicines as drugs that can cause adverse effects
- Identify the patients who need to be referred
- · Advice patients on commonly used drugs and herbal preparations

Tuesday, 19 February 2008

Lecture Centre, Car Park 2

Tuesday, 12 February 2008

19:30 for 20:00

This workshop provides 4 credits towards

the MCPP continuing education requirement.

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Delivered by

Lorna West

Date

Time

Venue

Book by

BPharm(Hons), MSc(Clin Pharm)Aberdeen Senior Clinical Pharmacist, MDH Chairperson of Publications. MCPP

Effects and consequences of polypharmacy in a geriatric population

Scope

Elderly people are high consumers of medicines - prescribed or otherwise. These patients are usually managed through repeat prescriptions, which, without regular review can often lead to inappropriate or unnecessary therapy, such as prescribing for 'diseases' that are actually ADRs.

Objectives

- To ensure that older people gain maximum benefit from their medication to maintain or increase their quality and duration of life
- To ensure that older people do not suffer unnecessarily from illness caused by excessive, inappropriate or inadequate consumption of medicines

Learning objectives

and pharmacodynamics

By the end of the session pharmacists will be able to: Identify the risk of ADRs caused by polypharmacy, drug interactions and changes in pharmacokinetics

- Identify underprescribing of some medicines in the
- Identify nonadherence
- · Identify patients with repeat medicines not being reviewed leading to unnecessary long-term therapy and stockpiling

Delivered by

Angela Borg Barthet

B Pharm(Hons), MSc (Public Health) Pharmacist 7CH/KGH Treasurer, MCPF

Date **Time** Venue

Tuesday, 26 February 2008 19:30 for 20:00 Lecture Centre, Car Park 2

University of Malta Tuesday, 19 February 2008 **Book by**

This workshop provides 4 credits towards the MCPP continuing education requirement.

BPharm(Hons), MSc(Aberdeen)

Date Tuesday, 5 February 2008 **Time** 19:30 for 20:00 Lecture Centre, Car Park 2 Venue

This workshop provides 4 credits towards the MCPP continuing education requirement.

University of Malta

Tuesday, 29 January 2008

Date Tuesday, 12 February 2008 19:30 for 20:00 Time Lecture Centre, Car Park 2 Venue

University of Malta Book by

This workshop provides 4 credits towards

Tuesday, 5 February 2008

the MCPP continuing education requirement.