

News LETTER



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Greetings from Calgary

ISOPP X is now a fond memory in our history. As your new President Elect I am delighted at the committed volunteers who step forward in ISOPP to form your new Secretariat and decided to share with you some early insights into my own journey. Having been a member of ISOPP for many years and involved in various committees and ISOPP meetings, I have still been overwhelmed at the level of activity and positive energy within the Secretariat.

When the world is your workspace the ideas generated are limitless. I would strongly recommend running for future Secretariat positions to those of you in our membership if this interests you. ISOPP attracted me as a potential member, initially to act as a network in an area of practice where I found it challenging to find others dealing with oncology based issues. It has certainly met my need for this and more. My personal travel can now be extended to visiting professional colleagues around the globe where I enjoy consistently great hospitality and new ideas.

You will not find a more supportive journal than JOPP to take the plunge on publishing, and if not JOPP then consider submitting an article to our newsletter.

I hope each of you took the opportunity to review the safe-handling standards that were open for comments until mid July. The Standards Committee has worked diligently to assist our society in creating our future path.

As a new Secretariat member I decided to spend some quality time going through



our website. Wow. What was I doing just skimming the surface before?

I am reminded of the encouragement we received at Turin – network and find 5 new people each day of the ISOPP meeting (quote from Barry Goldspiel if my memory serves me correctly). It does not have to be limited to meetings. Why not try to connect, via the website, to five new members in our ISOPP membership list. Networking is a very powerful foundation for ISOPP and our website is a great forum.

I appreciate the support I have received so far in this journey from our current Secretariat and a wide variety of members at large – it is heart warming and I truly

appreciate hearing from each of you. Please do not hesitate to become more involved in ISOPP where your interests lie or where you wish to try something new. We create our future and our culture, each of us as we interact, share expertise, and see visions move into action.

When our next ISOPP meeting occurs in 2008 it will be on the West Coast of the US sometime in June. As I move into President of ISOPP at that particular meeting I would extend an invitation to extend your travel into early July by coming north to Calgary Alberta Canada... Come share my hometown hospitality at the Calgary Stampede. Pancake flipping has become a recent new skill I acquired at our Greatest Outdoor Show in the World. YaHoo.

Carole R Chambers.

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Editorial

This issue of the Newsletter includes submissions from Canada, Thailand, South America and Saudi Arabia reflecting ISOPP's international coverage. Suphat Subongkot followed up on the ISOPP X symposium in KL, Malaysia by holding an oncology pharmacy congress in Thailand. This well run meeting attracted participants from 10 countries in the local region and was well supported by ISOPP members. Thanks to David Frame for his report. Sarah Jennings tells us that more pharmacist input is needed in the Multinational Association for Supportive Care in Cancer (MASCC). This society, dedicated to educating health care professionals about therapy-induced side effects, as well as symptoms and complications associated with cancer in all its stages, is very useful for oncology pharmacists. The MASCC symposium alternates between Europe and North America and the society also has a journal – Journal of Supportive Care in Cancer. Those of you who regularly visit the ISOPP website, will have had the opportunity to receive a free copy of this journal featuring mucositis. Nagwa Ibrahim tells us about oncology

pharmacy in Saudi Arabia and gives us advance notice of the First International Oncology/Haematology Pharmacy Updates Workshop to be held in Riyadh Military Hospital, Saudi Arabia on 30th of November 2006. If you are interested in attending this meeting please contact Nagwa. John Wiernikowski extended his travel plans in 2006 by attending the third Congress of the Brazilian Society of Oncology Pharmacists – a very well attended meeting. If you plan to attend a SOBRAFO meeting in future it will help if you understand Portuguese. Throughout this Newsletter I have added in some candid photos taken from the ISOPP X meeting – see if you can find yourself. As always, don't hesitate to contact me if you wish to contribute to this Newsletter. My email address is jillian.davis@austin.org.au.

Cheers



Jill Davis

JOPP Best Papers of the Year

In the June edition of the Newsletter these awards were announced. We have now received photos of the award winners with their awards and include them here. Don't forget – this could be you! All you need do is submit your work to JOPP and you may be chosen in 2008. The award consists of a plaque and a cash award. Congratulations again to the following authors.



Erica and Suzanne
1. E.D. Greanya; S.C.M. Taylor; F. Hu; J. Barnett; B. Thiessen
"Temozolomide for malignant gliomas in British Columbia; A population –based cost-effectiveness analysis." published in December, 2004.



2. Dawn Annable
"Developing a targeted pharmacy oncology guide," published in December, 2004

Thanks to Lynne Nakashima for her considered work in summarising the ASCO Guideline for Antiemetics in Oncology: Update 2006. This summary document can be found in the Education Centre on the ISOPP website www.isopp.org

New Members

Australia:
Gary Lewis-Toakley

Germany:
Oliver Feth
Patricia Koch
Christine Seidel

Jordan:
Haitham Tuffaha

Malaysia:
Stephanie Chan

Poland:
Kajetan Drozd

Serbia:
Maja Ilic

USA:
Clement T. Chung
Christy Harris

Visit www.isopp.org today!

FIRST ASIA PACIFIC ONCOLOGY PHARMACY CONGRESS

The first meeting of the newly formed Asia Pacific Oncology Pharmacy Congress was held in Bangkok, Thailand on August 3rd to 5th. The meeting was an outstanding success! The meeting organization was lead by Dr. Suphat Subongkot and colleagues from Thailand. Participants came from 10 different countries including Thailand, Japan, Korea, Hong Kong, Malaysia, Singapore, Mongolia, India, China and the Philippines as well as speakers from Australia (Jude Lees and Robbie McLauchlan) and the United States (David Frame). The meeting was started with a lecture on the application of evidence-based medicine to oncology pharmacy practice by Dr. Kamol Udol of Thailand and the meeting held up to the standards of trying to apply these principles in the talks. The educational agenda included sessions related to scientific rationales and changes, therapeutic updates, managing toxicities, supportive care, herbal treatments, safe handling procedures, setting up and changing a cytotoxic service, and a discussion on isolators versus biologic safety hoods. Speakers included both physicians and pharmacists and the opening ceremony was honoured by the address of Dr. Bung-orn Sripanidkulchai, the Dean of Faculty of the Pharmaceutical Sciences from Khon Kaen University.

An important highlight of the meeting was an award presentation to Lita Chew of Singapore, Harbans Dhillon of Malaysia and Surasit Watcharasukpoh of Thailand for their perseverance and dedication to the development, change, upgrade, and education of oncology pharmacy services in the Asia Pacific region. All awardees stated "I do not know what I did to deserve this" but looking at their practices, their dedication and their desire to advance the practice it is easy to see that is well deserved.

Another highlight of the meeting was a panel discussion from Keith So (Hong Kong), Ae-Ryoung Park (Korea), Kamonsak Reungjarearnrung (Thailand), Lita Chew (Singapore), and the team of Harbans Dhillon and Birinder Kaur (Malaysia) led by moderator Suphat Subongkot (Thailand). This session described ongoing practices by pharmacists in oncology in these countries and suggestions on how future collaboration may help. The discussion brought out many of the struggles that these countries are facing and the diversity of where the countries currently stand in the implementation of services and standards. It was easy to see that the ISOPP guidelines for standards of practice will help in benchmarking where we all need to be in the near future. It appeared that the furthest along in providing clinical services was Hong Kong where there is active participation in the weekly haematology conferences, routine patient counselling and the preparation of all computer templates



for chemotherapy protocols and studies. In all of the discussions it was brought up that collaborations in developing educational tools for students, pharmacists, and patients would help to move further in the direction of more

clinical practice. Keith So stated that he went to Singapore for 3 weeks to learn more on how to set up standard operating procedures [SOP's] and standards for cytotoxic preparation where he had an "eye opening" experience that allowed him the capability to come back and start developing a similar model in Hong Kong. Lita Chew stated that Singapore has grants available each year for people to come to Singapore to further their education. Kamonsak Reungjarearnrung and Suphat Subongkot stated they have started educational programs for young pharmacists to have further training in oncology. Suphat has taken several pharmacists for more formal programs and trained them in the techniques of cytotoxic drug preparation as well as in methods of clinically following patients. In a discussion with one of these young pharmacists you felt the enthusiasm as she showed me where she now prepares cytotoxics routinely in a Bangkok hospital and the excitement of the prospects on being more involved in patient care. No good conference is complete without a little fun. A grand time was had at the



FIRST ASIA PACIFIC ONCOLOGY PHARMACY CONGRESS

continued

Gala Dinner event at the Royal Navy Yacht Club overlooking the Royal Palace. The evening was enjoyed with traditional Thai food (especially desserts), dances, and craftsmanship all together with a spectacular view. Participants in the conference also had the opportunity to visit two of the largest private hospitals in Bangkok (Bumrungrad International Hospital and Bangkok International Hospital) where they were impressed with state of the art PET/CT scanning, cytotoxic preparation suites and elegant surroundings.

When Suphat was asked if he could believe the great turnout and enthusiasm he said he was truly stunned. After working on this for over a year he said he really did not realize until a week before the meeting how many registered and how many countries would be represented. He stated that this would have not have been possible without all of the contacts he had made at ISOPP. He quickly added that this would also have not been possible without all of the help he had received from his colleagues. Pharmacists in Bangkok helped with all of the arrangements of the hotel and social events. The Khon Kaen University group did all of the registration, program planning and technical work while a congress secretariat took on the responsibility of developing the industry support to make the meeting feasible. A special thank you to the outstanding volunteer pharmacists, students and residents who did all of the logistics at the meeting itself, from technical support to registration to meals- all details were impeccable. A JOB WELL DONE!! It is truly this type of dedication that will carry the progress forward.

The meeting was summed up by Lita Chew with a very appropriate quote from Henry Ford:

“Coming Together is a Beginning,
Keeping Together is Progress,
Working Together is Success”

This meeting has shown what hard work from many motivated individuals can accomplish. They have come together and we look forward to their progress and success in accomplishing a strong and motivated group of oncology pharmacists to be able to further enhance patient care in the Asia Pacific Region.

David Frame



Publication Committee Chair

Call for
Interest

If the following describes you then the Chair of Publications Committee may be a great fit:

- Experience of / interest in some form of publication or editorial work
- Computer literate, able to interact with ISOPP web provider
- Motivational skills - able to get others to work for you and meet deadlines
- Eye for detail and flair for presentation
- Ideas and innovation

After reading the responsibilities below, if you see this as an opportunity for involvement please email

carole.chambers@cancerboard.ab.ca and say why you meet these requirements (please limit this to maximum of 300 words) and what expertise you can bring to ISOPP. We will consider those who express their interest prior to October 30, 2006 and hope to announce a new Chair later this year. ISOPP committees are key components of a healthy vibrant Society so I encourage you to consider this opportunity.

Publication Committee Chair
Responsibilities:

1. Maintain and further develop the official ISOPP Website including:
 - weekly (or more often as required)

updating, communication with the WebMaster to relay official requests, ask for reports, and for day to day running of the website - the public face of ISOPP and an added value benefit for all ISOPP members

- the website design
- the website content, with input from Secretariat or ISOPP Committee Chairs as requested and collaboration particularly with the Education Committee Chair

2. Establish and revise as required appropriate publications for communication to Society members, future members, potential sponsors and the public including official ISOPP publications as requested by the President

3. Assist as requested with the content, design, publication, and printing of written material prepared by any other Committees of the Society.

4. Interact with the Editorial Board and publishers of the Journal of Oncology Pharmacy Practice, to ensure the objectives of the Society are achieved. Interact with the Newsletter Editor for the ISOPP Newsletter, a publication to inform members and other of ISOPP activities.

5. Attend annual ISOPP Secretariat meetings. ISOPP pays for airfare and 3 nights accommodation.

MASCC / ISOO

18th international symposium

22-24 June 2006, Toronto

The Multinational Association for Supportive Care in Cancer (MASCC) is dedicated to educating health care professionals about therapy-induced side effects, as well as symptoms and complications associated with cancer in all its stages. MASCC's annual symposium is held jointly with the International Society of Oral Oncology (ISOO). This makes for a plethora of learning opportunities in oral care, such as mucositis, voice rehabilitation, and osteonecrosis of the jaw. MASCC, however, has a much broader scope. Symposium topics included neutropenia, anaemia and fatigue, nausea and vomiting, and many other treatment-related side effects near and dear to the hearts of pharmacists everywhere ... so where were all the pharmacists?

Pharmacists are shockingly under-represented in MASCC, an organization that deals with our "bread and butter." To my knowledge, there was one just pharmacist on the symposium faculty and one other who spoke in a satellite symposium. However, kudos are due to all of the Torontonians in attendance.

One could hardly fail to notice the presence of Sick Kids, Sunnybrook, and Princess Margaret Hospital pharmacists in the poster sessions, study groups, and informal discussions throughout the conference.

A recurring theme throughout the conference was the need for continued study in the area of supportive care. Endpoints in supportive care trials are, by definition, symptom measurements. This makes for rather subjective outcome measures and, consequently, a field of study that is perceived as "soft" by many researchers and clinicians. The keynote speaker discussed the evolution of clinical trials in supportive care and encouraged the continued pursuit of

relevant, objective endpoints.

He emphasized the need for patient-rated, multidimensional, longitudinal outcome measures; e.g., we cannot just measure a patient's haemoglobin on clinic day and expect to understand the impact of fatigue on this patient's quality of life.

A shortage of research leads, in turn, to a shortage of validated scales and assessment tools. Various speakers presented on assessment tools in various stages of development, from neurocognitive tests used to measure side effects of cranial irradiation to pictograms used to measure fatigue. For the most part, these were pilot studies with exciting potential but much work still to be done.



MASCC/ISOO 20th International Symposium

Supportive Care in Cancer

When data is available, MASCC study groups publish evidence-based practice guidelines on a variety of supportive care topics. The mucositis study group has recently developed guidelines and there was much discussion around the best way to disseminate this information.

The antiemetic study group updated their guidelines last year and have since

been studying the translation of these guidelines into clinical practice. The study group co-chair presented a review of 33 cancer centres in his country, showing that 25% of patients on highly emetogenic chemotherapy were still not receiving appropriate therapy. Simple guideline dissemination did not decrease this statistic. A prescriber audit with individual feedback improved the situation to some degree, but greater improvement was observed following an expert's visit to the centre. The presenter's conclusion was that a combination of strategies, including educational outreach visits, should be used to transfer research results into practice.

For something completely outside the comfort zone of an average pharmacist, I attended a session on technological advances in radiation therapy. I learned that, historically, "geographic misses" have been a problem in radiation therapy: if the target organ can move around, the radiation might

miss the target (leading to decreased efficacy) and hit normal tissue (leading to increased toxicity). One study even showed that prostate cancer patients had poorer outcomes if their rectum was distended during treatment planning (i.e., if they had gas!). [Int J Rad Onc Biol Phys 62(4);965-73, 2005.] Image-guided radiation therapy can virtually eliminate



Kuala Lumpur



MASCC / ISOO continued

this problem, since it allows for target imaging and sub-millimetre adjustments to the treatment field within a conventional treatment time frame.

A few other tidbits:

- On a subjective rating scale, the perceptible difference to the patient is 7-8% of the scale's breadth; e.g., on the FACT-An, a patient can tell the difference between 80 and 87, but not 80 and 83.
- Despite a 92% cure rate for testicular cancer, patients have many unmet supportive care needs, including employment and insurance discrimination, infertility, long-term side effects of treatment, and fear of relapse.
- Depression is drastically under-diagnosed and under-treated in cancer patients. The idea that patients are "understandably" depressed by their diagnosis is a misconception. Many patients studied before diagnosis already show signs of depression. This is particularly true of pancreatic cancer patients, and an increased level of cytokines is one suspected etiology.
- 100% of patients will die. A good reason to increase the palliative care component of our educational programs and to encourage more health care professionals to specialize in this area.
- BLT with a Kosher Pickle. A good way to remember the cancers that commonly spread to bone: breast, lung, thyroid, kidney, and prostate.
- 180 million: the number of Google results for "cancer support"
- "To cure, sometimes. To relieve, often. To comfort, always." – commonly attributed to Hippocrates

Overall, the MASCC/ISOO symposium was a smorgasbord of information, making it difficult for one pharmacist to choose between the parallel sessions.

Side effects of radiation therapy, communication with cancer patients, sexuality/fertility problems in cancer patients, antiemetics, toxicities associated with targeted therapy, depression in advanced cancer, supportive care for paediatric patients, and oral and voice rehabilitation were just a few of the topics on this year's agenda. I'd encourage every ISOPP member to consider attending at least one MASCC conference. Next year's 20th anniversary conference will be held on June 28-30 (with pre-symposium workshops on June 27) in St. Gallen, Switzerland.

Sarah Jennings, BSc, BScPhm
ISOPP Publications Committee Member

Report from the 3rd Congress of the Brazilian Society of Oncology Pharmacists (SOBRAFO)

Having participated in the inaugural Congress of the Brazilian Society of Oncology Pharmacists in Rio de Janeiro in September of 2002; I was honoured to be re-invited to participate in the Society's 3rd Congress held in Belo Horizonte, Brazil from April 20-22 of this year.

As with the first Congress, participation in the meeting was truly outstanding with more than 360 Oncology pharmacists from 16 Brazilian States in attendance. With global changes being



introduced into the health care system by the Federal Ministry of Health; the Society adopted a theme of "Health system process quality" as a theme for their meeting. Day 1 of the conference featured a number of pre-conference courses and workshops on Basics of medical/clinical oncology (I and II); Clinical Pharmacokinetics, Evidence based Medicine, and Pharmaceutical Care/Monitoring of the oncology patient (given by yours truly); as well as two workshops on clinical pharmacology of anti-neoplastics. The opening ceremonies held in the evening, featured an opening plenary session given by Dr. Margareth Sena from the Ministry of Health, outlining the various initiatives being implemented by the Ministry of Health ranging from Quality Indicators and outcomes assessment, to new regulations and standards for approval/marketing of drugs and all other health care related products within

Brazil. The latter being a very welcome initiative. This was followed by a reception featuring live music, wine and food characteristic of the State of Minas Gerais.

Day 2 featured a full slate of plenary and concurrent sessions on topics ranging from Safe Handling of anti-neoplastics; pharmacogenomics, pharmaceutical care of the transplant patient, and disease updates on Breast cancer. In keeping with the theme of the meeting, there were more in-depth sessions on Quality indicators, and regulations and standards affecting the pharmaceutical industry in Brazil. As well, a session featuring oral presentations of the 4 best papers/posters was held. To the credit of SOBRAFO; and the incredibly hard work of member pharmacists; there were more than 40 posters presented at the meeting on a host of topics including: Pharmaceutical care, Quality of Life; Programs in safe

medication handling; interventions aimed at medication and treatment compliance, experience with oral topotecan in children with solid tumours; as well as some truly exciting pre-clinical work on the extraction of a compound from the Ricinus communis plant which grows abundantly in northern and north eastern Brazil. The same authors also evaluated the anti-tumour activity of the compound in mice bearing sarcoma-180 tumours; as well as pharmacokinetic data in the same mouse model. Listening to the presentation (in my less than perfect Portuguese), reminded me of the Sean Connery film, "Medicine Man". With thanks to SOBRAFO President, Graziella Escobar, I was given a few minutes before a plenary session to tell the membership about ISOPP and invite them all to join. There was also a good deal of enthusiasm among the



SOBRAFO membership for the society to become an ISOPP chapter.

Day 3 featured a further slate of presentations on new drugs, paediatric solid tumours, oncologic emergencies, Apoptosis, monoclonal antibodies, as well as cancer prevention. The congress concluded with a round table discussion/plenary with myself, Ana Cristina Cercos Lleti (Spain), and Vania Mari Salvi-Andrzejewski (Brazil). The discussion focused on future directions and initiatives for SOBRAFO to undertake in order to advance oncology pharmacy in Brazil. With their standards of practice now published, they will be looking at the new ISOPP standards of practice and examining commonalities, and opportunities for change. The passion and enthusiasm of the Brazilian oncology pharmacists for learning, and moving the profession forward was evident throughout the meeting; with a great deal of discussion occurring at every session. For my part, I can only congratulate the leadership of SOBRAFO and its member pharmacists for their incredible hard work, dedication to their patients and their profession and sincerely thank them for allowing me to participate in a very small way in this incredible success story. Obrigado

John T. Wiernikowski, BScPhm, PharmD
McMaster Children's Hospital
Hamilton, CANADA



Overview of Oncology Pharmacy in Saudi Arabia

By: Nagwa Ibrahim, Pharm D - ISOPP Member
Active member ISOPP Research Committee

Oncology Pharmacy Supervisor, Riyadh Military Hospital, Saudi Arabia

Saudi Arabia is a big country located in Asia. It has an area of 2,149,790 square kilometres. The capital city is Riyadh.

The health care system in Saudi Arabia is very advanced. Pharmacists are effectively involved in the patient care process and considered as a fundamental part of the health care team. They aim to promote excellence in pharmaceutical care, education, communication, research and innovation by an alliance of hospital and community, pharmacists, pharmacy technician and other health care professionals.

Clinical pharmacy in Saudi Arabia has been established for more than a decade, this includes oncology pharmacy. Currently we have a Clinical Pharmacy Group. This group conducts a monthly meeting presenting educational case reports to enhance interaction between regional clinical pharmacists. Riyadh Military Hospital (RMH) is the institution where I work. It provides services for about 1000 beds, in addition to out-patient services for more than 23 specialties.

Our oncology pharmacists are keen to provide healthcare professionals with the most recent and up to date international evidence-based clinical information to improve patient care. This service might be expressed as developing clinical guidelines, modifying and updating the printed as well as the computerized chemotherapy regimens, evaluating new oncology-related medications compared to the available drugs then presenting them to the Pharmacy & Therapeutics Committee, designing management plans for the expected side effects of cytotoxic drugs and related medications, reporting and investigating adverse drug reactions in order to provide advice, conducting research for better services for our populations, and organizing educational courses.

In addition to the above, oncology pharmacists ensure the safe prescribing, preparation, and administration of



Some of the oncology staff at Riyadh Military Hospital, including pharmacist, pharmacy technician and nurses

cytotoxic agents through strict adherence to pharmacy chemotherapy process steps.

In 2006, we created the 1st edition of a cytotoxic drugs handbook that includes the most important information needed for health care professionals (such as management of side effects, drug interactions, drug nadirs, extravasation management, overcoming infusion related reactions, classification of cytotoxic drugs, cytotoxic drugs hospital formulary and guidelines for the preparation & administration of cytotoxic drugs).

Furthermore, currently we are proudly organizing our 1st International Oncology/Haematology Pharmacy Updates Workshop. It will be held in Riyadh Military Hospital, Saudi Arabia on 30th of November 2006. We aim to improve cancer care by presenting the latest international clinical research and evidence-based practice. I look forward to meeting you there. For more information in order to attend

or to submit an abstract you might refer to <http://www.rmh.med.sa>, or contact me at nagw_ibrahim@hotmail.com.

I would like to take this opportunity to thank Dr. Suliman Al Rashed, PhD, Director of Pharmaceutical Services, Dr. Ahmed Al Eid, PhD, Asst. Director for In-Patient Services, and Dr. Ashraf Al Alwan, PhD, Asst. Director for Clinical Services for their great and impressive support in order to improve oncology pharmacy services at Riyadh Military Hospital.



Nagwa with her poster at ISOPP X in KL, Malaysia.