

## **Minutes of the meeting of the Council of the Clinical Division of IUPHAR held on Monday, July the 28<sup>th</sup> 2008 at 9.45 in Room 304A of Québec Convention Center**

**Present:** Darrell Abernethy, Kim Brøsen, Gilberto Castañeda, Lars Gustafsson, Kalle Hoppu, Shinichi Kobayashi, Douglas Oliver, Emilio Perucca, Wim du Plooy, Emilio Sanz, Patrick du Souich, Petra Thürmann, and David Webb.

### **1. Apologies for absence**

Don Birkett, Luigi Cubbedu, Mohammed Ibrahim A. Ibrahim, Hyung-Keun Roh, Phillip A. Routledge, Folke Sjöqvist, Fan-Dian Zeng.

### **2. Adoption of the agenda**

The agenda was adopted after the addition of the item “support to EACPT” in Other Business. The agenda was proposed by D. Abernethy and seconded by G. Castañeda.

### **3. Treasurer’s report**

Petra Thürmann explained in detail the budget of the Division, as well as the source of funds. Briefly, IUPHAR gives annually 5000 US\$ to the Division and in addition, may support in part other projects, e.g. relationship with WHO, development of paediatric clinical pharmacology, workshop of pharmacogenetics in Brazil.

A discussion ensues about IUPHAR's and other sources of funding.

Revenues and activities of the Division will be further discussed at item 11, Future of the Division.

David Webb and Emilio Sanz accept to audit the budget reported by the Treasurer before it is sent to the EC of IUPHAR.

### **4. Report from Councillors.**

Patrick du Souich mentioned that the reports of the Councillors and of the Chairmen of the Sub-Committees have been previously circulated and will be summarized at the General Assembly.

### **5. Report of the Sub-Committees**

5.a. Report of the Chairman of the Sub-Committee of Drug Utilization and Pharmacoepidemiology.

Emilio Sanz reported that a draft of a project on E-learning has been circulated to the Sub-Committees of Clinical Pharmacology in Less Developed Countries and of Paediatric Clinical Pharmacology for comments. Once the project will be in its final form, the Division will have to decide on a strategy to make it accessible to Developing Countries. The Web site of IUPHAR may be a useful tool.

5.b. Report of the Chairman of the Sub-Committee of Paediatric Clinical Pharmacology.

Kalle Hoppu added to the report already tabled that the International Alliance for Better Medicines for Children does not progress, and raises concerns about its future and its relationship with the Sub-Committee. The Council trusts K. Hoppu and supports any decision the Sub-Committee will take concerning the International Alliance for Better Medicines for Children.

5.c. Report of the Chairman of the Sub-Committee of Clinical Pharmacology in Less Developed Countries.

Lars Gustafsson mentioned the difficulty to start activities with such limited resources. Petra Thürmann commented that there is certain amount of money available for the activities of the Sub-Committee, so they must start the activities and send the bills.

## **6. Collaboration with WHO**

Folke Sjöqvist has tabled a report summarizing the activities held during two years which shall be presented at the General Assembly.

## **7. Suggestions regarding members of the new council, 2008-201?**

The slot of nominees proposed for members of the Council, including the re-election of the Chairman and the Vice-Chairman is unanimously endorsed.

The proposal to nominate Petra Thürmann as Secretary of the Division is unanimously accepted.

The nomination of Professor María Isabel Lucena, from Spain, for the position of Treasurer is unanimously accepted.

The fact that the CPT meeting is not programmed for 2012 raises the question of the duration of the newly elected Council. Several possibilities were discussed. During WorldPharma 2010 in Copenhagen, it is probably too early for new elections. It is decided that the Council should be re-elected in 2014, during the combined IUPHAR meeting in Cape Town, South Africa. Nevertheless, it is agreed to remain flexible in case changes in the Council are needed.

The nominations for the new Council 2008-2014 will be submitted for approval to the General Assembly on Wednesday, July the 30<sup>th</sup>.

## **8. Report about CPT2008**

Patrick du Souich reported that there are 1700 registrations. Unfortunately, not all of these are full paying registrations raising doubts about potential benefits.

## **9. Report about WorldPharma 1010**

Kim Brøsen expressed optimism about the success of WP2010 due to the new approach taken to organize the scientific program in 18 areas each of them developed over 2-2½ days. Each area could attract between 150 to 200 delegates, to reach the goal of 3000 registrants.

## **10. Report about the 17<sup>th</sup> World Congress of Pharmacology 2014**

Douglas Oliver and Wim du Plooy explained the facilities available in Cape Town and a preliminary strategy on how to attract delegates from Africa.

## **11. Future of the Clinical Division of IUPHAR**

This item aimed to inform the Councillors on the need to reanalyze the actual position of the Clinical Division. This is because the Division is in a transitory situation regarding its relationship with IUPHAR, and that at different levels, such as the combined basic and clinical pharmacology meetings, and the status of the Division in IUPHAR.

Combined basic and clinical pharmacology meetings. The success of WorldPharma 2010 will indicate whether the combined meetings satisfy the objectives of the Division, e.g. do the combined meetings attract clinical pharmacologists? Several scenarios are possible.

- WP2010 is a success and attracts many clinical pharmacologists. In this case the Division shall promote combined meetings and in addition, may consider organizing regional/topic oriented meetings every four years between the combined IUPHAR Congresses.

- WP2010 does not attract clinical pharmacologists so the Clinical Division does not achieve its goals to be a forum for clinical pharmacologists. The Division needs to seek new strategies urgently to apply as soon as possible.

Nevertheless, the IUPHAR2014 congress should be maintained as a combined meeting. However, the balance of basic or clinical presentations might be revised.

Status of the Clinical Division within IUPHAR. The Division has increased its visibility and influence and improved considerably the relationship with IUPHAR. For instance, the word clinical was added to the description of IUPHAR; actually, the Executive Committee of IUPHAR has five members of the Division (the officers, e.g. chairman, vice-chairman, secretary and treasurer, and one councillor), some members of the Division participate to budget discussions, contracts, etc.

However, and despite the activities deployed by the Division and its international recognition, it is clearly felt that clinical activities are not considered by IUPHAR at the same level of basic activities and the Clinical Division feels to be estimated as a sub-committee. To achieve an equal balance, several scenarios and solutions are suggested and will be further discussed in the General Assembly and especially in the meeting with the new Council on July 31<sup>st</sup> 2008.

## **12. Any other business**

The Coucillors voted to provide for financial support (approx. 3.000,- €) to EACPT 2009, as in EACPT 2007, to organize a special symposium for Eastern European countries and allow for their travel expenses.

Patrick du Souich thanked the members of the Council ending their terms, Emilio Perucca, Luigi Cubbedu, Kim Brøsen, Shinichi Kobayashi and Fan-Dian Zeng for their support and contribution to the Clinical Division of IUPHAR.

The meeting was adjourned at 12.15

Respectively submitted

Patrick du Souich