Geriatric Pharmacology Subcommittee of the Clinical Division of IUPHAR
Annual Report 2019
Sarah Hilmer

Geriatric pharmacology continues to be an area of increasing international interest as the global population ages. The three key action areas for the current WHO 3rd Global Patient Safety Challenge: Medication without harm (polypharmacy, high risk situations and transitions of care) are all highly relevant to older people and can be informed by geriatric clinical pharmacology.

The major activities of the geriatric pharmacology subcommittee in 2019 have been:

1. Increase membership. The existing members Prof Sarah Hilmer (chair, Australia), Prof Petra Thuermann (Germany) and Prof David Le Couteur (Australia) decided to broaden the membership to achieve better global representation and include an early career clinical pharmacologist. We are delighted that Prof Mirko Petrovic (Belgium), Prof Janet Schwartz (USA) and Dr Anna Renom Guiteras (Spain, early career) have agreed to join the subcommittee.

2. Publication of geriatric pharmacology curriculum for medical students. Kashyap M, Thuermann P, Le Couteur DG, Abernethy DR, Hilmer SN. IUPHAR International geriatric clinical pharmacology curriculum for medical students. Pharmacol Res. 2019 Mar;141:611-615. doi: 10.1016/j.phrs.2019.01.032. We mentored the first author, an early career post-doctoral pharmacist whose degrees were from India. Members have disseminated this within our networks, and we hope that it will be a useful resource to support the WHO 3rd global patient safety challenge: medication without harm, internationally.

3. Satellite Symposium at the EACPT Scientific Meeting, Stockholm, June 2019. Sarah Hilmer and Petra Thuermann presented a symposium entitled, ‘Informing Medication Without Harm in Older Patients’. We highlighted the role of geriatric clinical pharmacology and IUPHAR in achieving the WHO 3rd global patient safety challenge. We took the opportunity to disseminate the IUPHAR geriatric pharmacology curriculum to leaders in clinical pharmacology from across Europe. Sarah highlighted the role of pharmacologically based tools such as Drug Burden Index, in clinical risk assessment of older patients. Petra showcased innovative ideas for rigorous clinical trial design in older people for both prescribing and deprescribing. We gratefully acknowledge funding from IUPHAR clinical division towards travel costs and registration to allow us to contribute to the EACPT meeting.

Our plans for 2020 are to engage our new members, further disseminate our curriculum, consider producing IUPHAR guidance on clinical trials in older adults and look for opportunities to build our mentoring program. We will investigate presenting an IUPHAR geriatric pharmacology symposium for a different audience.