

CONFERENCE ABSTRACTS

FIP Seville conference abstracts 2022

80th FIP World Congress of Pharmacy and Pharmaceutical Sciences in Seville, Spain, 18 to 22 September 2022

Military and emergency pharmacy

The sustaining of virtual missions partnerships with pharmacists without borders Canada during the COVID-19 pandemic

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Background: Pharmacists without Borders (PSF) Canada is Canada's only humanitarian organization dedicated to global health which is staffed by pharmacists and pharmacy technicians. The organisation is dedicated to enhancing medication management through sustainable approaches, focused on inventory management, compounding, pictograms, patient counselling, and as other clinical pharmacy initiatives. PSF Canada has been active in over thirty countries for over 25 years, and over 150 pharmacists and students have been deployed during this time. The COVID-19 pandemic has forced global health NGOs to pivot in various directions to improve global health delivery. Through strategic partnerships, virtual missions have been operating during the COVID-19 pandemic while the number of partnerships has expanded. This poster presentation will focus on the sustaining of virtual missions, with a focus on findings and lessons learned.

Methods: From April 2020 to the current date, six separate virtual partnerships have been underway in Bangladesh, India, Poland, Ghana, Tanzania, and Madagascar. Each virtual mission focuses on host-specific strategic initiatives, including inventory management, antimicrobial stewardship, and to COVID-19 updates. Virtual infrastructure is chosen based on host preferences and internet availability. Approaches have used consistent re-evaluation to reliably improve quality improvement over a period of several months, and lessons have been learned through virtual engagement

Results: (a) Virtual infrastructure: The comfort of the host country with virtual infrastructure and internet availability is perhaps the most important factor in sustaining global health initiatives through the COVID-19 pandemic.

(b) Champion: An on-the-ground touchpoint champion for continuing virtual involvement is also vital.

(c) Type of relationship: Relationships that started on the ground prior to the COVID-19 pandemic were sometimes easier to sustain virtually, provided that the first two conditions had been met.

(d) Recruitment: PSF Canada's recruitment structures were also developed significantly during the pandemic, as partnerships with the key pharmacist and technician-related bodies for awareness purposes were critical in order to increase volunteer staffing of virtual missions.

(e) Future merging: It was critical for each mission partnership to review whether future-long term strategies could continue in a hybrid virtual and in-person dynamic post-pandemic.

Conclusion: Virtual missions are new approaches that organisations such as PSF Canada have used during the COVID-19 pandemic due to issues with travel. These approaches can be further developed into hybrid virtual and in-person environments, in order to reduce climate footprint while achieving global health goals.

International medical relief activities by pharmacists during the COVID-19 pandemic

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Background: On August 14, 2021, a magnitude 7.2 earthquake struck the Republic of Haiti. The International Federation of Red Cross and Red Crescent Societies set up a temporary field hospital with surgical and inpatient functions (Hospital ERU), led by the Finnish Red Cross Society. This Hospital ERU supported local healthcare from its opening on September 21 until the end of November.

Objectives: The Japanese Red Cross Society (JRC) dispatched two pharmacists to support the Hospital ERU. Japanese Red Cross (JRC) pharmacists have been involved in many international medical relief activities in the past. The main purpose of this deployment was to work as “Medical Logistics”, those in charge of procurement, transportation, and management of medicines and medical supplies, but it was also required to respond to the COVID-19 pandemic and fuel shortage caused by the deteriorating security.

Methods: In collaboration with a local pharmacist, the authors managed the storage of medicines including narcotics and controlled medicines, procured and distributed medical supplies, educated local staff, and donated medicines when the Hospital ERU closed. In addition, to prevent the COVID-19 outbreak, it was also required for pharmacists to secure a stock amount of disinfectants and personal protective equipment (PPE), instruct facility cleaning and disinfection, and educate on wearing masks and washing hands thoroughly.

Results: In the end, during the COVID-19 pandemic, the authors examined 5,423 patients and handled 114 hospitalisations, 91 surgeries, and 114 deliveries. Moreover, psychosocial support provided counseling services to 366 patients and group activities to 1,695 patients. Throughout the activity, the team handled approximately 180 medicines and 200 medical consumables and procured medicines working with the logistics department. Narcotics and controlled medicines were managed properly by the intervention of pharmacists. COVID-19 was also prevalent in the Republic of Haiti, the Hospital ERU prevented its outbreak by strictly controlling the flow of outpatients, promptly transferring suspicious cases, zoning the facility, and thoroughly disinfecting the area.

Conclusion: JRC pharmacists can conduct medical logistic operations in the different national emergency medical teams (EMTs), as in this case. This is because JRC regularly takes place study sessions with other professionals and invites lecturers from other Red Cross Societies and NGOs. The authors have been trying to improve their knowledge and skills by obtaining the latest information on international medical relief. During this operation, these pieces of training were extremely useful in many situations, such as collaboration with the logistics department and managing cold chain medicines. Therefore, the authors believe that these pieces of training will continue to be essential in the future. And they will do more to develop human resources to pass on their knowledge, experience, and skills.

Management of the COVID-19 health crisis: A survey in Swiss hospital pharmacies

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Background: The COVID-19 pandemic has put a lot of strain on health systems since 2020. A review of the Swiss hospital pharmacies (HP) actions undertaken and challenges experienced during the first wave was performed to improve pharmaceutical management of future health crises.

Objectives: To propose an overview of the actions undertaken by HP across Switzerland as they responded to the challenges encountered during the first wave of the COVID-19 pandemic and to provide information to improve pharmaceutical management in future health crises or disasters.

Methods: An electronic survey was sent to all heads of HP in Switzerland. The questionnaire was organized into eleven clusters of questions and covered many topics regarding the management of the first wave of COVID-19. Data collection was conducted from May 19 to June 19, 2020.

Results: Analyses were performed with 43 answers (66%) out of 65 questionnaires sent. At the peak of the first wave, 59% of HP reported that some of their workforces had to change jobs: from <10% of change (21% of HP) to >50% of change (3% of HP). Standard operating procedures or pandemic plans were previously available in 41% of HP. A crisis unit has been created in some HP mainly with the head pharmacist (61% of

HP) and a member of the pharmaceutical logistics unit (34% of HP). The drug availability in COVID-19 wards was managed by increasing existing stocks (54% of HP) and/or creating extra storage space (51% of HP). Reserve supplies had been anticipated in 56% of HP. A total of 51% of HP created specific drug lists for wards treating COVID-19 patients although 15% of HP created partial drug lists. The drugs contained in these lists were mainly COVID-19-specific treatments (83% of HP), sedatives (81% of HP), anaesthetics (77% of HP), and antibiotics (73% of HP). Remdesivir ran out of stock in 26% of HP and two drugs generated the most concern of shortages: propofol (49% of HP) and midazolam (44% of HP). In some HP, a pharmacist was present at ICU to support medical staff (24% of HP) and a pharmacy assistant was also dedicated (22% of HP) to resupplying wards with drugs. Specific documents were drawn up to respond to medical and care personnel's needs with regard to drug administration (29% of HP), drug preparation (29% of HP), and treatment choices (24% of HP). A total of 47% of HP implemented specific hygiene measures (e.g. disinfection of surfaces and equipment) and 77% of HP experienced problems procuring hand sanitizers and among them 53% manufactured them. Also, 28% of HP introduced debriefings in teams.

Conclusions: HP in Switzerland has encountered many challenges related to the COVID-19 disaster and had to find solutions quickly and effectively. Major concerns have been identified, underlining the critical role of HP in such a crisis. Managing and facing complex pandemic response scenarios requires a disaster management plan, communication, staff flexibility, teamwork, and collaboration. Therefore, team briefings and debriefings are more than important to establish a climate of trust.

Management of the COVID-19 health crisis: a survey of Swiss health authorities' response

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Background: The COVID-19 pandemic has put a lot of strain on health systems since 2020. The three groups of Swiss health authorities (cantonal doctors, cantonal pharmacists, and federal authorities) have undertaken a lot of actions and faced various challenges.

Objectives: To review the actions undertaken by the Swiss health authorities to respond to the first wave of the COVID-19 pandemic and to provide information to improve pharmaceutical management in future health crises.

Methods: An electronic survey was sent to all Swiss cantonal doctors (CD) and cantonal pharmacists (CP), as well to the following federal health authorities: Federal Office of Public Health (FOPH), Federal Office for National Economic Supply (FONES) and Swiss Agency for Therapeutic Product (Swissmedic). The questionnaire was organized into ten clusters of questions and covered many topics regarding the management of the COVID-19 crisis. Data collection was conducted from July 20 to September 30, 2020.

Results: Analyses were performed with 33 answers (54%) out of 61 questionnaires sent. Both federal (88%) and cantonal (65%) authorities had prepared an internal pandemic plan after the 2009 H1N1 pandemic and before the COVID-19 pandemic. Within the cantonal authorities, six of the CPs (67%) and six CDs (64%) used an internal pandemic plan. To decrease the problems of drug shortage during the first wave, some drugs as lopinavir/ritonavir were quickly purchased from the market by the Swiss Armed Forces Pharmacy and delivered to the CPs to distribute them further in the cantons. At the beginning of the crisis, there was a precarious bottleneck of ethanol for hand sanitisers due to the lack of reserves at the Alcosuisse federal warehouse. However, the planning reliability of this product was rated satisfying by five (72%) of federal health authorities and nine (47%) of all respondents (n=19). Because of the rapid response of the FOPH that issued a general permit facilitating pharmacies and other stakeholders the manufacturing of biocidal products and their supply, and of the important offer of disinfectant based on the WHO formula from a chemical company for Switzerland. In contrast, professional expertise was frequently not consulted enough during the purchase of Personal Protective Equipment (PPE). Moreover, the responsibility for this material was unclear between the different departments of the Swiss Confederation according to the respondents. The need for PPE for healthcare workers to protect against COVID-19 contamination was assessed by the cantons mostly by email (11.55 %) or by phone (6.30 %). The distribution was performed mainly by the watering can principle (9.45 %) thanks to the creation of an e-shop (5.25%).

Conclusions: Swiss health authorities have encountered many challenges during the COVID-19 disaster and had to find solutions quickly and effectively according to this survey. The majority of respondents advocate the maintaining of stockpiles at wholesalers and in hospital pharmacies for medicines and PPE and at Alcosuisse for disinfectants to manage a future crisis. Likewise, the competent authorities desire regular practice of scenarios (simulations) to be better prepared for such crises.