



Departamento responsable de la enseñanza de la Atención Farmacéutica.

Plantilla docente. Situación en los diferentes países.

Fernando Fernandez-Llimos

Professor Auxiliar

Departamento de Sócio-Farmácia



Anécdota...

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Enseñanza universitaria en España

La enseñanza universitaria en España está regulada actualmente por:

- La Ley Orgánica 6/2001, de 21 de diciembre, de Universidades.¹
- La Ley Orgánica 4/2007 de 12 de abril, por la que se modifica la Ley Orgánica 6/2001²

Por otra parte, el Real Decreto 1393/2007, de 29 de octubre, establece la ordenación de las enseñanzas universitarias oficiales concretando la estructura de acuerdo con las líneas generales emanadas del Espacio Europeo de Educación Superior (EEES). Según esta estructura se divide la enseñanza universitaria en [grados](#) y programas de [posgrado](#) (que, a su vez, constan de [máster](#) y de [doctorado](#)).

Los grados y los másters toman como medida de la carga lectiva el crédito.

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Universidades [[editar](#) - [editar fuente](#)]

Artículo principal: [Universidades de España](#).

Grados [[editar](#) - [editar fuente](#)]

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Anécdota...

147 grados en 5 áreas:

- Artes y Humanidades
- Ciencias
- Ciencias de la Salud
- Ciencias Sociales y Jurídicas
- Ingeniería y Arquitectura

| | | |
|-----------------------------|------------------------------------------------|---|
| Ciencias de la Salud | Grado en Ciencia y Tecnología de los Alimentos | B |
| | Grado en Enfermería | S |
| | Grado en Logopedia | S |
| | Grado en Medicina | C |
| | Grado en Odontología | C |
| | Grado en Óptica y Optometría | |
| | Grado en Podología | C |
| | Grado en Psicología | A |
| | Grado en Terapia Ocupacional | B |

The screenshot shows a detailed list of Spanish universities and their offered degrees. The list includes over 140 universities, each with a link to its Wikipedia page. The columns typically show the university name, address, and the names of various degree programs such as Medicine, Law, and Engineering.



LEY ORGÁNICA 6/2001, de 21 de diciembre, de Universidades.

TÍTULO PRELIMINAR

De las funciones y autonomía de las Universidades

Artículo 1. *Funciones de la Universidad.*

1. La Universidad realiza el servicio público de la educación superior mediante la investigación, la docencia y el estudio.

LEY ORGÁNICA 4/2007, de 12 de abril, por la que se modifica la Ley Orgánica 6/2001, de 21 de diciembre, de Universidades.

PREÁMBULO

Desde la promulgación de la Ley Orgánica 6/2001, de 21 de diciembre, de Universidades, han pasado cinco años. En este período se han detectado algunas deficiencias en su funcionamiento que aconsejan su revisión. Además, otros elementos del entorno han cambiado e inducen también a realizar modificaciones. Entre estos hechos se encuentran los acuerdos en política de educación superior en Europa y el impulso que la Unión Europea pretende dar a la investigación en todos sus países miembros. Estas circunstancias aconsejan la corrección

LEY ORGÁNICA 4/2007, de 12 de abril, por la que se modifica la Ley Orgánica 6/2001, de 21 de diciembre, de Universidades.

tural o educativa. Las universidades, además de un motor para el avance del conocimiento, deben ser un motor para el desarrollo social y económico del país. Junto a la investigación básica, la universidad deberá impulsar la transferencia al sector productivo de los resultados de su investigación en coordinación y complementariedad con los demás agentes del sistema de ciencia y tecnología. Una

Atención Farmacéutica

Int J Clin Pharm (2013) 35:1–2
DOI 10.1007/s11096-012-9728-x

EDITORIAL

What is ‘pharmaceutical care’ in 2013?

J. W. Foppe van Mil · Fernando Fernandez-Llimos



van Mil JWF, Fernandez-Llimos F. What is ‘pharmaceutical care’ in 2013? Pharmacy Practice 2013 Jan-Mar;11(1):1-2.

Editorial

What is ‘pharmaceutical care’ in 2013?

J. W. Foppe VAN MIL, Fernando FERNANDEZ-LLIMOS.

Received (first version): 16-Nov-2012

Accepted: 19-Nov-2012

Pharmaceutical care

- Does “the responsible provision of drug therapy” mean that pharmaceutical care is necessarily associated with the provision, (or dispensing) of drugs (medicines)?
- Is the provision of drug therapy than something pharmacists do?
- Does “the purpose of achieving definite outcomes” limit the process of pharmaceutical care to outcome oriented activities only?
- Does the aim to “improve a patient’s quality of life” mean that pharmaceutical care is not implemented to improve clinical or economic outcomes, following Kozma’s ECHO model?
- Should ‘pharmaceutical care’ always be associated with the existence of medicine treatment in a given patient?
- Is pharmaceutical care a ‘pharmacist-only’ activity?

Pharmaceutical care

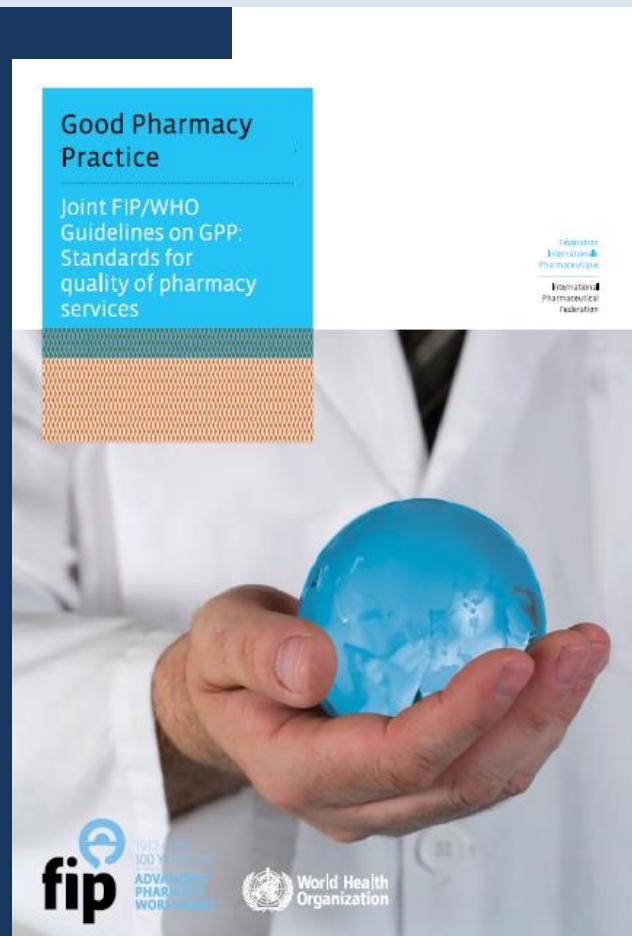
- Pharmaceutical care is the contribution of pharmacists to the care of individuals in order to optimise medicines use and to improve health outcomes.

Pharmaceutical Care European Network Invitational Meeting, 4th March 2013

Pharmacy Practice

- Práctica farmaceutica
- Farmacia Práctica
- Ejercicio de la Farmacia

FIP/WHO



The mission of pharmacy practice is to contribute to health improvement and to help patients with health problems to make the best use of their medicines.

Joint FIP/WHO guidelines on good pharmacy practice, 2012

Departamento responsable de la enseñanza de *Pharmacy Practice.*

Plantilla docente. Situación en los diferentes países.

Fernando Fernandez-Llimos

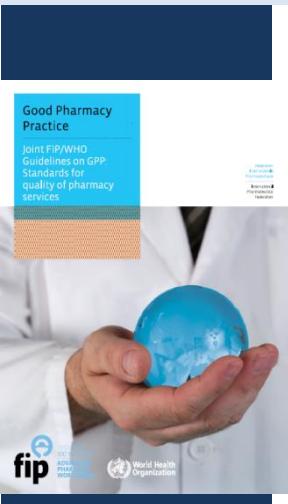
Professor Auxiliar

Departamento de Sócio-Farmácia



4 major roles for pharmacists

- Role 1: Prepare, obtain, store, secure, distribute, administer, dispense and dispose of medical products
- Role 2: Provide effective medication therapy management
- Role 3: Maintain and improve professional performance
- Role 4: Contribute to improve effectiveness of the health-care system and public health



4 major roles for pharmacists

- Role 1: Prepare, obtain, store, secure, distribute, administer, dispense and dispose of medical products
 - Function A: Prepare extemporaneous medicine preparations and medical products
 - Function B: Obtain, store and secure medicine preparations and medical products
 - Function C: Distribute medicine preparations and medical products
 - Function D: Administration of medicines, vaccines and other injectable medications
 - Function E: Dispensing of medical products
 - Function F: Dispose of medicine preparations and medical products



4 major roles for pharmacists

- Role 2: Provide effective medication therapy management
 - Function A: Assess patient health status and needs
 - Function B: Manage patient medication therapy
 - Function C: Monitor patient progress and outcomes
 - Function D: Provide information about medicines and health-related issues



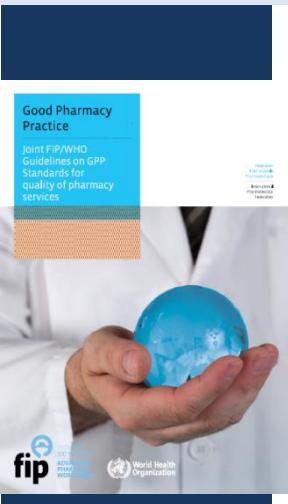
4 major roles for pharmacists

- Role 3: Maintain and improve professional performance
 - Function A: Plan and implement continuing professional development 4 strategies to improve current and future performance



4 major roles for pharmacists

- Role 4: Contribute to improve effectiveness of the health-care system and public health
 - Function A: Disseminate evaluated information about medicines and various aspects of self-care
 - Function B: Engage in preventive care activities and services
 - Function C: Comply with national professional obligations, guidelines and legislations
 - Function D: Advocate and support national policies that promote improved health outcomes



Int J Pharm Pract

- Topics covered include: medicines utilisation, medicine management, medicines distribution, supply and administration, pharmaceutical services, professional and patient/lay perspectives, public health (including, e.g. health promotion, needs assessment, health protection) evidence based practice, pharmacy education.

Pharm Pract

- Pharmacy Practice covers a wide range of pharmacy activities, among them and not being comprehensive, clinical pharmacy, pharmaceutical care, social pharmacy, pharmacy education, process and outcome research, health promotion and education, health informatics, pharmacoepidemiology, etc.

responsable de la enseñanza?

Seis. El artículo 9 queda redactado del siguiente modo:

«Artículo 9. Departamentos.

1. Los departamentos son las unidades de docencia e investigación encargadas de coordinar las enseñanzas de uno o varios ámbitos del conocimiento en uno o varios centros, de acuerdo con la programación docente de la universidad, de apoyar las actividades e iniciativas docentes e investigadoras del profesorado, y de ejercer aquellas otras funciones que sean determinadas por los estatutos.

LEY ORGÁNICA 4/2007, de 12 de abril, por la que se modifica la Ley Orgánica 6/2001, de 21 de diciembre, de Universidades.

Razonamiento:

Universidad = Investigación + Docencia

**Departamento = Unidad coordinadora
de la Investigación y la Docencia**

**Departamento responsable de la
enseñanza de *Pharmacy Practice*...**

El que investigue en *Pharmacy Practice*

Quien investiga en *Pharmacy Practice* en España?

- To identify publications in the pharmacy field, we searched PubMed/MEDLINE in May 2013 for all journals containing articles indexed by the term “pharmacists” [MeSH term] and published in 2012 .
- We selected the 10 journals containing the most articles indexed with “pharmacists” as a MeSH. To assess a potential inaccuracy, we included one journal, not included in the Top-20, but with a clear scope on pharmacy.
- All the articles published in these 11 journals from January 2008 to December 2012 were included for the analysis.

Quien investiga en *Pharmacy Practice* en España?

| | Articles analyzed (2008-2012) | % original research articles |
|----------------------------------|-------------------------------------|------------------------------------|
| Am J Health Syst Pharm | 1773 | - |
| Am J Pharm Educ | 919 | 24.7 |
| Ann Pharmacother | 1374 | 30.2 |
| Consult Pharm | 344 | 12.8 |
| Int J Clin Pharm/Pharm World Sci | 516 | 77.7 |
| Int J Pharm Pract | 237 | 63.7 |
| J Am Pharm Assoc | 604 | 25.2 |
| J Manag Care Pharm | 271 | 43.2 |
| J Pharm Pract | 242 | 0.0 |
| Pharmacotherapy | 732 | 38.9 |
| Res Social Adm Pharm | 248 | 66.5 |
| Total | 7260 | 100 |

Quien investiga en *Pharmacy Practice* en España?

Table 4. Prevalence of use of MeSH describing pharmacists activities among the fully indexed articles.

| MeSH term | N | % articles |
|---------------------------------------|------|------------|
| Pharmacists | 1554 | 22,42% |
| Education, Pharmacy | 881 | 12,71% |
| Students, Pharmacy | 720 | 10,39% |
| Pharmaceutical Services | 545 | 7,86% |
| Pharmacy Service, Hospital | 541 | 7,80% |
| Community Pharmacy Services | 525 | 7,57% |
| Schools, Pharmacy | 269 | 3,88% |
| Societies, Pharmaceutical | 200 | 2,89% |
| Pharmacies | 162 | 2,34% |
| Education, Pharmacy, Graduate | 150 | 2,16% |
| Pharmacy | 142 | 2,05% |
| Insurance, Pharmaceutical Services | 92 | 1,33% |
| Education, Pharmacy, Continuing | 85 | 1,23% |
| Drug Compounding | 72 | 1,04% |
| Pharmacists' Aides | 61 | 0,88% |
| Clinical Pharmacy Information Systems | 31 | 0,45% |
| Pharmacy Administration | 21 | 0,30% |
| Legislation, Pharmacy | 19 | 0,27% |
| Pharmacy and Therapeutics Committee | 16 | 0,23% |
| Technology, Pharmaceutical | 15 | 0,22% |
| Fees, Pharmaceutical | 13 | 0,19% |
| Ethics, Pharmacy | 12 | 0,17% |
| Licensure, Pharmacy | 12 | 0,17% |
| Behind-the-Counter Drugs | 3 | 0,04% |
| Pharmaceutical Services, Online | 1 | 0,01% |
| Dictionaries, Pharmaceutical | 0 | - |



Quien investiga en *Pharmacy Practice* en España?

[All MeSH Categories](#)

[Health Care Category](#)

[Health Care Facilities, Manpower, and Services](#)

[Health Services](#)

Pharmaceutical Services

[Community Pharmacy Services](#)

[Drug Information Services](#)

[Adverse Drug Reaction Reporting Systems](#)

[Clinical Pharmacy Information Systems](#)

[Medication Therapy Management](#)

[Pharmaceutical Services, Online](#)

[Pharmacy Service, Hospital](#)

[Prescriptions](#)

[Drug Prescriptions +](#)

[Electronic Prescribing](#)

Quien investiga en *Pharmacy Practice* en España?

Table 4. Prevalence of use of MeSH describing pharmacists activities among the fully indexed articles.

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| Ethics, Pharmacy | 12 | 0,17% |
| Licensure, Pharmacy | 12 | 0,17% |
| Behind-the-Counter Drugs | 3 | 0,04% |
| Pharmaceutical Services, Online | 1 | 0,01% |
| Dictionaries, Pharmacutic | 0 | - |



23,24%



Quien investiga en *Pharmacy Practice* en España?

- **591 artículos on “pharmaceutical services”[MH] entre 2000 y 2013.**
- **112 (18,95%) artículos afilian por una Universidad.**
 - **23 de una universidad extranjera**
 - **89 (15,06%) de una Universidad española**

Quien investiga en *Pharmacy Practice* en España?

| Universidad | Artículos Pubmed* 2000-2013 |
|--------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| Santiago de Compostela | 19 |
| Granada | 9 |
| Sevilla; Oviedo | 8 |
| Valladolid | 6 |
| La Laguna | 5 |
| Pompeu Fabra | 4 |
| Barcelona; Valencia; Rovira i Virgili | 3 |
| Autonoma Barna; Extremadura; Lleida; Zaragoza | 2 |
| Alicante; Complutense; Elche; Girona; Huelva; La Rioja; Malaga; Miguel Hernandez; Murcia; Navarra; Pais Vasco; Rey Juan Carlos | 1 |

Quien investiga en *Pharmacy Practice* en España?

| Departamento/Instituto/Grupo | Artículos Pubmed* 2000-2013 |
|-----------------------------------------------------------------------------|-----------------------------------|
| Departamento Medicina Preventiva y Salud Pública, U. Santiago de Compostela | 18 |
| Grupo de Investigación en Atención Farmacéutica, U. Granada | 6 |
| Instituto de Farmacoepidemiología, U. Valladolid | 4 |
| Departamento de Farmacología, U. Sevilla | 3 |
| Centro de Atención Primaria Jaume I, U. Rovira I Virgili | 3 |

Quien investiga en *Pharmacy Practice* en España?

- Limitaciones:
 - Pueden estar mal indexados en Pubmed.
 - Pueden estar con una primera afiliación diferente a la del grupo
 - ...

Farmacia comunitaria (10 años)

Andrés Iglesias JC, Andrés Rodríguez NF, Fornos Pérez JA. Community pharmacy-based research in Spain (1995-2005): A bibliometric study Pharmacy Practice 2007;5(1): 21-30.

Original Research

Community pharmacy-based research in Spain (1995-2005): A bibliometric study

José Carlos ANDRÉS IGLESIAS, N. Floro ANDRÉS RODRÍGUEZ, José Antonio FORNOS PÉREZ.

Table 1. Distribution of articles and impact factors of journals

| Journal | Articles published | IF (year) |
|--------------------------------------------|--------------------|--------------|
| Pharmaceutical Care España | 74 | No |
| Seguimiento Farmacoterapéutico | 22 | No |
| Atención Primaria | 6 | No |
| Atención Farmacéutica | 5 | No |
| Ars Pharmaceutica | 4 | No |
| Annals of Pharmacotherapy | 2 | 1.837 (2005) |
| Pharmacy World & Science | 2 | 1.009 (2005) |
| Revista Española de Salud Pública | 2 | 0.388 (2003) |
| Headache | 2 | 2.455 (2005) |
| Clinical Pharmacokinetics | 1 | 5.195 (2005) |
| American Journal of Health-System Pharmacy | 1 | 1.437 (2005) |
| Revista Española de Nutrición Comunitaria | 1 | No |



FACULDADE DE
FARMÁCIA
Universidade de Lisboa

Pharmacy Practice en USA

American Journal of Pharmaceutical Education 2012; 76 (7) Article 127.

RESEARCH

A 5-Year Analysis of Peer-Reviewed Journal Article Publications of Pharmacy Practice Faculty Members

Marie A. Chisholm-Burns, PharmD, MPH,^a Christina Spivey, PhD,^a Jennifer R. Martin, MA,^b Christina Wyles, RN, MS,^b Clara Ehrman, BS,^b and Lauren S. Schlesselman, PharmD, MEd^c

^aUniversity of Tennessee College of Pharmacy, Memphis, TN

^bUniversity of Arizona College of Pharmacy, Tucson, AZ

^cUniversity of Connecticut School of Pharmacy, Storrs, CT

Submitted February 6, 2012; accepted April 24, 2012; published September 10, 2012.

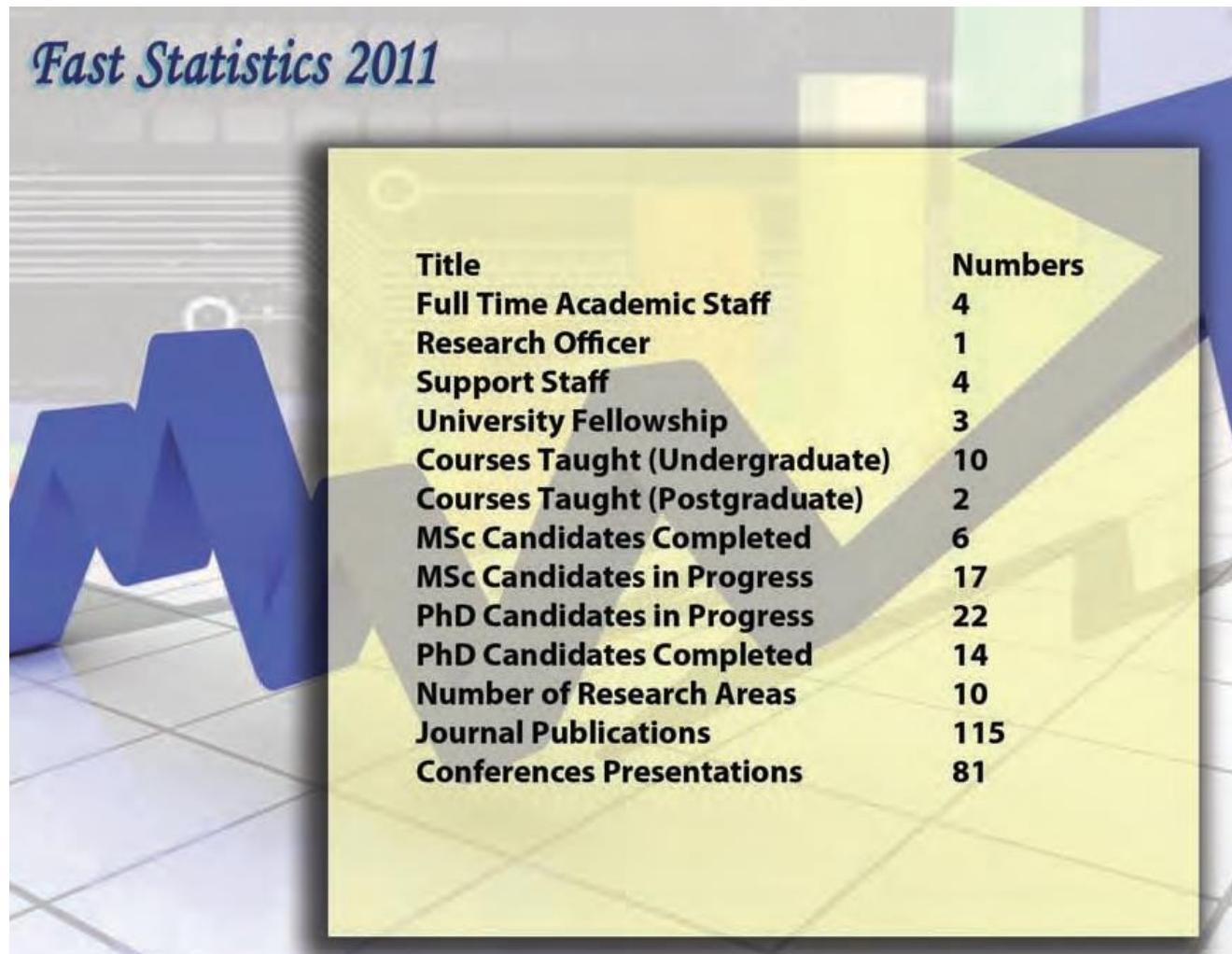
Table 2. Descriptive Statistics of Total Peer-Reviewed Journal Articles Published by Faculty Members at Pharmacy Colleges and Schools, by Year and Type of Institution

| Type of Institution | 2006 | 2007 | 2008 | 2009 | 2010 |
|-----------------------------------|-------------|----------------|-------------|-------------|-------------|
| All pharmacy colleges and schools | | | | | |
| Mean number per institution (SD) | 11.3 (10.0) | 13.6 (12.3) | 13.4 (12.0) | 14.7 (13.3) | 14.7 (11.1) |
| Median | 7 | 10.5 | 9 | 11.5 | 13 |
| Mode | 4 | 1 ^a | 2 | 4 | 2 |
| Range | 0-39 | 0-57 | 0-52 | 0-49 | 0-47 |

Pharmacy Practice en Malasia



Pharmacy Practice en Malasia



Quien investiga en *Pharmacy Practice* en USA?

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PubMed "pharmaceutical services"[MH] "united states" 2000:2013[dp] Search RSS Save search Advanced Help

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[New laws affecting physicians.](#)
1. [No authors listed]
Tenn Med. 2013 Aug;106(7):14, 22. No abstract available.
PMID: 23930370 [PubMed - indexed for MEDLINE]
[Related citations](#)

[WHO option B+: early experience of antiretroviral therapy sequencing after cessation of breastfeeding and risk of dermatologic toxicity.](#)
2. Cohan D, Mwesigwa J, Natureeba P, Aliba Luwedde F, Ades V, Plenty A, Kakuru A, Achan J, Clark T, Osterbauer B, Kamya M, Havlir D.
J Acquir Immune Defic Syndr. 2013 Mar 1;62(3):e101-3. doi: 10.1097/QAI.0b013e31828011ca. No abstract available.
PMID: 23924639 [PubMed - indexed for MEDLINE]
[Related citations](#)

[Accountable prescribing.](#)
3. Morden NE, Schwartz LM, Fisher ES, Woloshin S.
N Engl J Med. 2013 Jul 25;369(4):299-302. doi: 10.1056/NEJMmp1301805. No abstract available.
PMID: 23883375 [PubMed - indexed for MEDLINE] [Free Article](#)
[Related citations](#)

[NIH gambles on recycled drugs.](#)
4. Wadman M.

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U.S. trends in antiretroviral therapy use, HIV RNA plasma viral loads, and CD4 [Ann Intern Med. 2012]

Accuracy of pharmacy and coded-diagnosis information i [Pharmacoepidemiol Drug Saf. 2012]

Hospitalizations for intussusception before and after the reintroduction [Arch Pediatr Adolesc Med. 2012]

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Quien investiga en *Pharmacy Practice* en Nigeria?

- **64 artículos on “pharmaceutical services”[MH] entre 2000 y 2013.**
- **44 (68,75%) artículos afilian por una Universidad.**
 - **4 de una universidad extranjera**
 - **40 (62,50%) de una Universidad nigeriana**

Quien investiga en *Pharmacy Practice* en Nigeria?

| Universidad | Artículos Pubmed* 2000-2013 |
|--------------------------------------------------|-----------------------------------|
| Lagos | 10 |
| Lagos State | 6 |
| Nigeria; Obafemi Awolowo | 5 |
| Ibadan | 4 |
| Benin; Usmanu DanFodiyo | 3 |
| Ahmadu Bello; Ambrose Ali; Iliron; Port Harcourt | 1 |

Quien investiga en *Pharmacy Practice* en Nigeria?

| Departamento/Instituto/Grupo | Artículos Pubmed* 2000-2013 |
|------------------------------------------------------------------------|-----------------------------------|
| Department of Pharmacology and Therapeutics, U. Lagos State | 5 |
| Department of Pharmacology, U. Lagos | 3 |
| Department of Clinical Pharmacy and Biopharmacy, U. Lagos | 3 |
| Department of Clinical Pharmacy and Pharmacy Management, U. Nigeria | 3 |

Quien investiga en *Pharmacy Practice* en Portugal?

- **64 artículos on “pharmaceutical services”[MH] entre 2000 y 2013.**
- **42 (65,63%) artículos afilian por una Universidad.**
 - 11 de una universidad extranjera
 - 31 (48,44%) de una Universidad portuguesa

Quien investiga en *Pharmacy Practice* en Portugal?

| Universidad | Artículos Pubmed* 2000-2013 |
|---------------------------------|-----------------------------------|
| Lisboa | 12 |
| Porto | 6 |
| Aveiro; Beira Interior; Coimbra | 3 |
| Minho | 2 |
| Nova Lisboa | 1 |

Quien investiga en *Pharmacy Practice* en Nigeria?

| Departamento/Instituto/Grupo | Artículos Pubmed* 2000-2013 |
|------------------------------------------------------|-----------------------------------|
| Departamento de Socio-Farmacia / iMed Socio-Farmacia | 11 |
| Unidade de Farmacovigilância do Norte | 4 |

Quien investiga en *Pharmacy Practice*?

- España: 591 artículos* entre 2000 y 2013.
 - 112 (18,95%) artículos afilian por una Uni. española.
- Nigeria: 64 artículos* entre 2000 y 2013.
 - 40 (62,50%) artículos afilian por una Uni. nigeriana.
- Portugal: 64 artículos* entre 2000 y 2013.
 - 31 (48,44%) artículos afilian por una Uni. portuguesa.
- Estados Unidos: 6583 artículos* entre 2000 y 2013.

Ejemplo (I)

generic vs. brand pricing



ELSEVIER

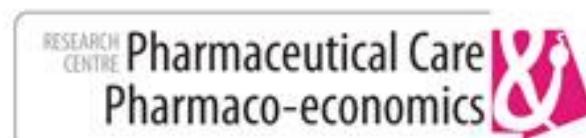
Available online at www.sciencedirect.com

- Results: Price changes for 81 different products in 144 separate presentations were analysed. There was no statistically significant change in brand-name prices when generic competition started. The movement of brand-name prices was not influenced by whether the generic was made by the company producing the brand-name product or price freezes imposed by the Ontario government.

Ejemplo (I)

generic vs. brand pricing

- 1: Dylst P, Vulto A, Simoens S. Demand-side policies to encourage the use of generic medicines: an overview. *Expert Rev Pharmacoecon Outcomes Res.* 2013 Feb;13(1):59-72.
- 2: Simoens S, Sinnaeve PR. Generic atorvastatin, the Belgian statin market and the cost-effectiveness of statin therapy. *Cardiovasc Drugs Ther.* 2013 Feb;27(1):49-60.
- 3: Dylst P, Vulto A, Simoens S. The impact of reference-pricing systems in Europe: a literature review and case studies. *Expert Rev Pharmacoecon Outcomes Res.* 2011 Dec;11(6):729-37.
- 4: Simoens S. Developing competitive and sustainable Polish generic medicines market. *Croat Med J.* 2009 Oct;50(5):440-8.
- 5: Simoens S. Health economics of market access for biopharmaceuticals and biosimilars. *J Med Econ.* 2009 Sep;12(3):211-8.
- 6: Van Paesschen W, Hauman H, Lagae L. The use of generic medication in epilepsy: a review of potential issues and challenges. *Eur J Paediatr Neurol.* 2009 Mar;13(2):87-92.
- 7: Declerck PJ. Biotherapeutics in the era of biosimilars: what really matters is patient safety. *Drug Saf.* 2007;30(12):1087-92.
- 8: Simoens S. International comparison of generic medicine prices. *Curr Med Res Opin.* 2007 Nov;23(11):2647-54.
- 9: Simoens S, De Bruyn K, Bogaert M, Laekeman G. Pharmaceutical policy regarding generic drugs in Belgium. *Pharmacoeconomics.* 2005;23(8):755-66.



Ejemplo (I)

generic vs. brand pricing

- 1: Puig-Junoy J. Do higher-priced generic medicines enjoy a competitive advantage under reference pricing? *Appl Health Econ Health Policy.* 2012 Nov 1;10(6):441-51.
- 2: Puig-Junoy J, Moreno-Torres I. Do generic firms and the Spanish public purchaser respond to consumer price differences of generics under reference pricing? *Health Policy.* 2010 Dec;98(2-3):186-94.
- 3: Puig-Junoy J. Impact of European pharmaceutical price regulation on generic price competition: a review. *Pharmacoeconomics.* 2010;28(8):649-63.
- 4: Puig-Junoy J. [Policies encouraging price competition in the generic drug market: Lessons from the European experience]. *Gac Sanit.* 2010 May-Jun;24(3):193-9.
- 5: Puig-Junoy J. [Comment. Substitution at pharmacies and generic market]. *Gac Sanit.* 2007 Sep-Oct;21(5):407.
- 6: Puig-Junoy J. The impact of generic reference pricing interventions in the statin market. *Health Policy.* 2007 Nov;84(1):14-29.
- 7: Puig-Junoy J. Incentives and pharmaceutical reimbursement reforms in Spain. *Health Policy.* 2004 Feb;67(2):149-65.
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Academic Unit of the Barcelona GSE

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Ejemplo (II)

Efficacy of clinical medication review

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Ejemplo (II)

Efficacy of clinical medication review

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Ejemplo (II)

Efficacy of clinical medication review



Room for review

A guide to medication review: the agenda for patients, practitioners and managers

Task Force on Medicines Partnership and
The National Collaborative Medicines Management
Services Programme

The team on this guide

Room for review was produced by:

Joanne Shaw, Director, Medicines Partnership

Richard Seal, Project Manager, Medicines Management Services

Mark Pilling, Development Manager, Medicines Management Services

Web based tools were developed by a team from the Pharmacy Practice Group at the University of Leeds: Theo Raynor, Duncan Petty, Catherine Lowe, Jacky Nunney, Arnold Zermansky.

Pharmacy Practice and Medicines Management Group

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Ejemplo (III)

The Australian case study

The screenshot shows the homepage of the 5th Community Pharmacy Agreement (5CPA) website. At the top, there is a decorative banner with yellow and grey squares and a small image of a person holding a stethoscope. To the right is a search bar. Below the banner, there are logos for the 5th CPA, the Australian Government Department of Health and Ageing, and The Pharmacy Guild of Australia. A navigation menu at the bottom of the banner includes links for "The 5CPA", "Initiatives & Programs", "Pharmacy Registration", "Resources", "Useful Contacts", "News and Events", and "The Guild".

The main content area shows the "Medication Management Programs" page. The page title is "Medication Management Programs" and features a "5th CPA" logo. The text on the page states:

The Department of Human Services (DHS) are experiencing some delays in claims processing for a range of Medication Management Review programs. As a result, some payments for claims may be affected.

DHS are making every effort to ensure claims submitted in accordance with the monthly payment cycle are paid in the regular payment periods.

To meet the increased demand and ensure claims are processed and paid as quickly as possible DHS will be continuing with additional ad-hoc payment runs:

- August ad-hoc payment run – processing to cease on 16/8 – with payments appearing in bank accounts from 21/8;
- September payment run – processing to cease on 4/9 – with payments appearing in bank accounts

On the right side of the page, there are three promotional boxes: "5CPA Help Line" with contact information, "meds check?" with a claim it right logo, and "NEW! PPI Program eLearning module".

Ejemplo (III)

MedsCheck and Diabetes MedsCheck

Funding of up to \$29.6 million is provided under the Fifth Community Pharmacy Agreement (5CPA) for the Medicines Use Review Program (known as MedsCheck) and also funding of up to \$12.2 million for the Diabetes Medication Management Service Program (known as Diabetes MedsCheck).

MedsCheck and Diabetes MedsCheck (MedsCheck services) provide for an in-pharmacy review of consumers who are taking multiple medications and/or have newly diagnosed or poorly controlled type 2 diabetes. These services are aimed at enhancing the quality use of medicines and reducing the number of adverse drug events experienced by consumers.

Home Medicines Review

Funding of up to \$52.11 million is provided under the Fifth Community Pharmacy Agreement (5CPA) for the Home Medicines Review (HMR) program. The HMR program is designed to assist individuals living at home to maximise the benefits of their medicine regimen and prevent medication related problems.

A HMR service is available to patient's living in the community whose General Practitioner (GP) determines that a HMR is clinically necessary to optimise the quality use of medicines and to address the patient's needs.

Residential Medication Management Review

Funding of up to \$70 million is provided under the Fifth Community Pharmacy Agreement (5CPA) for the Residential Medication Management Review (RMMR) program. The RMMR program aims to enhance the quality use of medicines, and reduce the number of adverse medicines events by assisting residents and their carers with their medication regimens.

An RMMR service is provided to a permanent resident of an Australian Government funded residential aged care facility, including those in flexible care arrangements (transitional care facilities), who are not eligible for a Home Medicines Review (HMR).

Ejemplo (III)

The Australian case study

- Third Agreement R&D
 - 58 proyectos
 - Priority areas for 2003
 - Quality use of medicines
 - Continuing care across the health system
 - Evaluation and further development of existing community pharmacy services and programs
 - Development of new cognitive services
 - Harm reduction for drug dependent people
 - Facilitating change processes within pharmacy practice and the health system to deliver higher quality and cost effective pharmacy professional services
 - Pharmacy workforce.

<http://www.guild.org.au/services-programs/research-and-development/archive---third-agreement>

Ejemplo (III)

The Australian case study

- 58 proyectos:
 - 16 por otras instituciones
 - 42 (72.4%) por Universidades
 - 17 University of Sydney
 - 7 University of Tasmania
 - 5 University of Queensland
 - 4 Curtin University
 - 3 University of South Australia
 - 3 Monash University
 - 1 University of Western Australia
 - 1 University of Technology, Sydney
 - 1 University of Ballarat

Ejemplo (III)

The Australian case study

42 proyectos, 29 Chief Researchers

| | |
|-----------------------------------|---------------------------------------|
| Associate Professor Allan Everett | Jeffery Hughes |
| Dr Kathy Mott | Professor Andrew Gilbert |
| Dr Julie Stokes | Dr Parisa Aslani |
| Professor Greg Peterson | Dr Susan Taylor |
| Dr Lisa Nissen | Dr Andrew McLachlan |
| Professor Chris Silagy | Dr Tim Chen |
| Professor Bruce Sunderland | Dr Libby Roughhead |
| Dr Jeffery Hughes | Professor Carol Armour |
| Con Berbatis | Professor Michael Roberts |
| Dr Tim Chen | Professor Roger Nation |
| Professor Charlie Benrimoj | Dr Tracey Bessell |
| Rebekah Moles | Dr Paula Whitehead |
| Dr Sinthia Bosnic- Anticevich | Distinguished Professor Dexter Dunphy |
| Associate Professor Ines Krass | Chris Lynton-Moll |
| Peter Tenni | |

Asociación (causalidad?)

En España la investigación en *Pharmacy Practice* es escasa y de calidad limitada (no acorde con los indicadores de desarrollo)

En España no hay profesores universitarios exclusivamente dedicados a investigar y enseñar *Pharmacy Practice*

Otros países tienen mucha más investigación en *Pharmacy Practice*

Esos países tienen profesores universitarios exclusivamente dedicados a investigar y enseñar *Pharmacy Practice*

Una reflexión personal

- Será que la pregunta correcta es:

Departamento responsable de la enseñanza de la Atención Farmacéutica.

Plantilla docente. Situación en los diferentes países.

Fernando Fernandez-Llimos
Professor Auxiliar
Departamento de Sócio-Farmácia

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Una reflexión personal

- O deberíamos preguntarnos: es suficiente formación para un farmacéutico asistencial

| Modalidad | Hombres | Mujeres | Total | % Colegiados | % Activos |
|--------------------------------|---------|---------|--------|--------------|-----------|
| Oficina de Farmacia | 13.063 | 31.785 | 44.848 | 68,5% | 85,7% |
| Administración y Salud Pública | 224 | 684 | 908 | 1,4% | 1,7% |
| Alimentación | 2.269 | 4.995 | 7.264 | 11,1% | 13,9% |
| Análisis Clínicos | 1.039 | 1.542 | 2.581 | 3,9% | 4,9% |
| Dermofarmacia | 2.775 | 5.937 | 8.712 | 13,3% | 16,6% |
| Industria | 445 | 840 | 1.285 | 2,0% | 2,5% |
| Distribución | 303 | 516 | 819 | 1,3% | 1,6% |
| Docencia e Investigación | 131 | 226 | 357 | 0,5% | 0,7% |
| Farmacia hospitalaria | 373 | 1.272 | 1.645 | 2,5% | 3,1% |
| Óptica y acústica | 267 | 377 | 644 | 1,0% | 1,2% |
| Ortopedia | 2.097 | 4.816 | 6.913 | 10,6% | 13,2% |
| Otras Actividades | 1.480 | 3.660 | 5.140 | 7,9% | 9,8% |

Donde preparamos para...

4 major roles for pharmacists

- Role 1: Prepare, obtain, store, secure, distribute, administer, dispense and dispose of medical products
- Role 2: Provide effective medication therapy management
- Role 3: Maintain and improve professional performance
- Role 4: Contribute to improve effectiveness of the health-care system and public health



Asociación (causalidad?)

En España la investigación en *Pharmacy Practice* es escasa y de calidad limitada (no acorde con los indicadores de desarrollo)

En España no hay profesores universitarios exclusivamente dedicados a investigar y enseñar *Pharmacy Practice*

... porque no creemos que sea necesario?

Otros países tienen mucha investigación en *Pharmacy Practice*

Otros países tienen profesores universitarios exclusivamente dedicados a investigar y enseñar *Pharmacy Practice*

Asociación (causalidad?)

La implicación de las universidades en la respuesta a las demandas de la sociedad y el sistema productivo es otro de los ejes sobre los que ha girado la presente reforma. Las universidades deben perseguir una mejor formación de sus graduadas y graduados para que éstos sean capaces de adaptarse tanto a las demandas sociales, como a las demandas del sistema científico y tecnológico.

LEY ORGÁNICA 4/2007, de 12 de abril, por la que se modifica la Ley Orgánica 6/2001, de 21 de diciembre, de Universidades.

PREÁMBULO

Desde la promulgación de la Ley Orgánica 6/2001, de 21 de diciembre, de Universidades, han pasado cinco años. En este período se han detectado algunas deficiencias en su funcionamiento que aconsejan su revisión. Además, otros elementos del entorno han cambiado e inducen también a realizar modificaciones. Entre estos hechos se encuentran los acuerdos en política de educación superior en Europa y el impulso que la Unión Europea pretende dar a la investigación en todos sus países miembros. Estas circunstancias aconsejan la corrección

LEY ORGÁNICA 4/2007, de 12 de abril, por la que se modifica la Ley Orgánica 6/2001, de 21 de diciembre, de Universidades.

tural o educativa. Las universidades, además de un motor para el avance del conocimiento, deben ser un motor para el desarrollo social y económico del país. Junto a la investigación básica, la universidad deberá impulsar la transferencia al sector productivo de los resultados de su investigación en coordinación y complementariedad con los demás agentes del sistema de ciencia y tecnología. Una



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