

*Looking beyond 2010:
A Regional report on
Practice*

*Lita Chew ST
Head, Pharmacy, National Cancer Centre Singapore
Assistant Professor, National University of Singapore*

www.asia-safehandling.org

Who are we?

- The SIG was formed in 2004
 - In response to our pharmacists' concerns over the safe handling of cytotoxic drugs in their workplaces.
 - The need for a common platform for us to share experience and 'best practices'.



Singapore



Thailand



Hong Kong



Malaysia



South Korea

Lita Chew, Peter Yap, Kamonsak Reungjarearnrung, Suphat Subongkot, Keith So, Florence Kwan, Harbans Kaur Dhillon, Birinder Kaur, Jung-Tae Kim, Ae-Ryoung Park

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Mission and Vision

- To serve as platform to provide evidence-based guidelines on safe handling procedures for all those working with cytotoxic drugs in Asia and subsequently to **raise the practice standard** in our country.
- To help our colleagues to acquire the **knowledge and skills** in the safe handling of cytotoxics

Remembering a time when... Pharmacy Services

- Supply and Distribution





...our Past practices - Preparation



Changes in Practice Norms

- From an open 'table-top' preparation in uncontrolled environment to enclosed 'cabinet' preparation in controlled environment

Changes in Practice Norms

- From ‘unprotected’ personnel handling preparation to fully-gowned, masked and gloved personnel

Changes in Practice Norms


- From ‘**behind-counter**’ service to ‘**direct patient care**’
- From ‘**dispensing a drug accurately**’ to ‘**helping a patient make the best use of medicine**’

Changes in Practice Norms

- New opportunities...
 - **Investigational treatments**
 - **Training and education**

Take home message...

- No one individual accomplishes anything on his or her own
- Benefited from professional friendships, guidance, encouragement and support
- Continue to ignite the ‘fire’ within to improve and promote oncology pharmacy practice




Hospital Pharmacy Practice - Milestones in Advancements

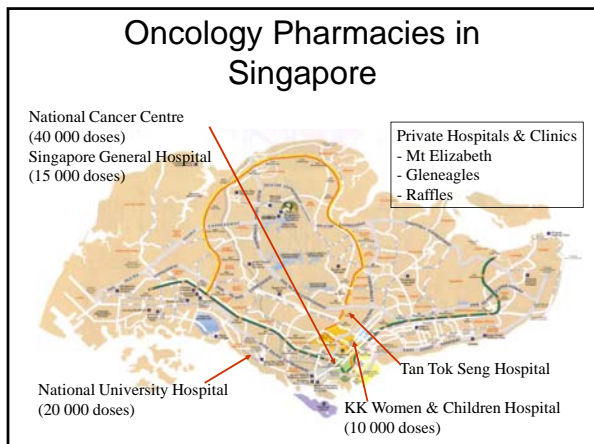
- 1980 – Labeling of dispensed medicines
- 1981 – Preparation of enteral nutrition & TPN
- 1982 – Introduction of PIL
- 1985 – Ward Pharmacy services (chart review, unit dose dispensing, discharge medication counseling)
 - Cytotoxic drug reconstitution
 - 24-hours dispensing service
- 1987 – Clinical ward rounds with medical team
- 1988 – Oncology Pharmacy Services**
- 1989 – Computerised dispensing
- 1991 – Disease specific medication counseling (asthma, cardiac)
- 1992 – Centralised DIS
- 1999 – Speciality Practice (TDM, ICU pharmacist, Oncology pharmacist)
 - Anti-coagulant clinic Pharmacy Services

Oncology Pharmacy Practice in Singapore

- Started in 1988 at NUH, then in 1989 at SGH
- Year 1999 marked a new beginning for Oncology practitioners

-> birth of a National Cancer Centre





What it means to us... Our Practice Scope - Missions

- To create a pharmacy practice dedicated to the pharmaceutical needs of cancer patients
- To provide safe, efficient, and cost-conscious pharmaceutical needs to our patients



Technical concerns & challenges


1. The 3 **P**s (People, Place, Product)
 - None is left out → safe handling
2. Skills
 - Standardisation – OJT manual
 - Validation & Audit
3. Knowledge
 - Co-operative theory-based program to address knowledge gaps
4. IT & Automation
 - IT in medication-use-process
 - Automation for risk management

Sterile Compounding in Pharmacy

- Sterile compounding in hospital and ambulatory care
 - In a designated room/cleanroom
 - In a BSC/Isolator
 - Laminar flow technology has been around for >20 years
 - Barrier-isolation technology started in Y2000
 - Trained staff
 - Established P&P
 -Complemented by CPOE system

Clinical concerns & challenges

1. Expanding our roles - greater emphasis for pharmacists in patient care areas
2. Connecting with patients - provision of continuous care
 - Improving QOL
 - Promoting compliance
 - Motivating our patients towards the fulfillment of the intended treatment plans
 - Recognising drug-related problems



Highlights - Practice

- **Specialty level**
 - Pharmacists in lymphoma, breast, geriatric and palliative care teams
 - Clinical pharmacists in chemo-treatment areas
 - Making recommendation
 - Checking, Intervening and Investigating
 - Developing practice guidelines
 - Monitoring & providing feedback to and from the ground
 - Symptom management programs
 - Women Bone Health
 - Elderly patients program
 - Medication Review – 'MTM program'



Looking beyond...

- **Pharmacist Registration Act 2007**
 - Post-graduate qualification
 - Residency training or equivalent experience
 - BCOP
- **PharmD program**
- **Residency program**



Research concerns & challenges

1. Greater involvement in clinical trials - as PIs
2. More publications - in practice research - in bench-top research - in outcome research
3. Greater collaboration among pharmacy practitioners
4. More research grants for pharmacy practitioners



Leadership concern & challenges

- More to come forward to be change agents
- Accepting responsibility for the medication-use-process

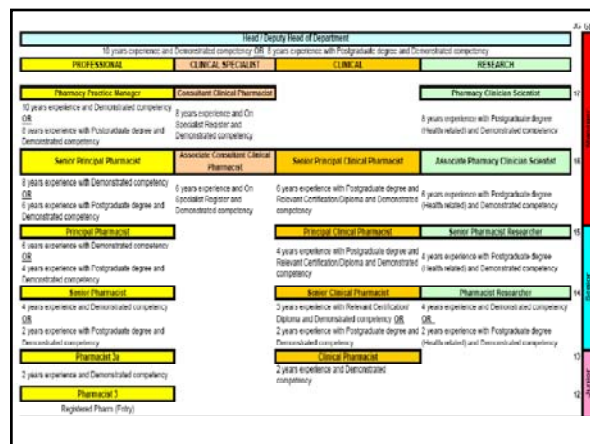
The challenges:

- Manpower
- Post-graduate training towards specialisation



Strategic action - Manpower Planning

- **Headcounts**
 - Pharmacist : Patient Ratio?
 - P:PT ratio?
 - Manpower projection?
- **Career Paths**
 - Professional (Operation)
 - Clinical
 - Research





Strategic action - Professional Development

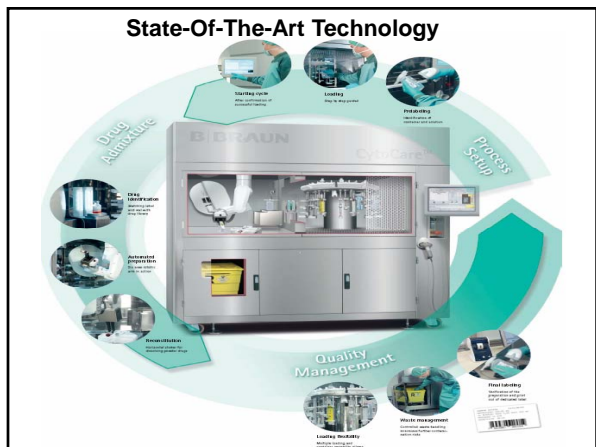
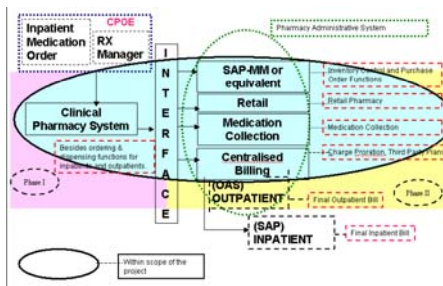
- Increase the accessibility, quality, quantity and variety of experiential and didactic learning opportunities
 - OJT
 - HMDP
 - Residency (local and overseas) partnerships to develop learning programs
 - Formal education leading to Masters or PharmD



Specialist Pharmacists

Strategic action - IT and Automation

- Advance the development and implementation of IT and Pharmacy automation to ensure the safe and effective use of medication.



In Conclusion...

The Landscape of Oncology Pharmacy Practice will continue to evolve in...
 Technical – Clinical –
 Research – Leadership



*"Coming together is a beginning.
 Keeping together is progress.
 Working together is success."*

--- **Henry Ford**