



Vol. 11, N°1, January 1997

NEWSLETTER

Welcome to new members!



The following bulletins received full membership. For those bulletins that can afford to send free copies abroad, please contact the new members directly to offer them an exchange.

■ *Informasi Obat*

Direktoraat Pengawasan Obat POM
Dr. Niniek Soedijani Anwar
Dra. Lucky S. Slamet
Jl. Percetakan Negara No. 23
Jakarta 10560
Indonesia

■ *Farmakoterapeutické informace*

Blanka Pospisilova
State Institute for drug control
Srobarova 48
10041 Praha 10
Czech republic

■ *Drug and Therapeutics letter*

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■ *FOCUS*

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c/o Instituto do Farmacologia
Servisio di Farmacologia medica
Policlinico B. go Roma
37134 Verona
Italy
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■ *Farmacologia. Medicina*

Dr Emilio J. Sanz
Universidad de la Laguna
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INDEPENDENCE MORE THAN A SLOGAN

Article 5.1.1. of the ISDB constitution stipulates that full membership status is incompatible with inclusion of advertisements 'relating to therapeutic or diagnostic activities' in the bulletins. This does not mean that drug bulletins that carry ads cannot participate in ISDB activities. Provided they have editorial independence they can obtain corresponding membership status. Corresponding members do not have voting rights, cannot stand for office and carry the ISDB logo but they are very welcome to actively take part in all ISDB activities including the ISDB meetings.

Independence from pharmaceutical companies is a fundamental part of our policy. Readers of a bulletin that carries the ISDB logo can be confident that the information they receive is free from commercial influence.

It is a concern that a few full ISDB members have accepted drug adver-

tisements in recent issues. The ISDB Committee has written to these bulletins to remind them of our requirements not to take advertising and to establish why they felt it was necessary. Often financial problems lead to accepting advertising or other types of industry funding and we acknowledge that it is very difficult for bulletins to maintain financial independence. Whenever possible ISDB will try to help these bulletins.

Freedom from the pharmaceutical company influence is not the only prerequisite for independent assessment of medicines. Carrying advertisement does not necessarily mean losing editorial quality; many recognised correspondents carry advertisements and still produce high quality, critical articles. Many ISDB bulletins are funded by governments or health insurance organisations who could potentially influence editorial policy, sometimes through self-censorship. Conflict of interest ►►

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Pay your membership fee!

You have received the call for membership fee for 1997.
Please pay as soon as possible. ISDB's activities depend on your contribution.



FROM THE COORDINATOR



A lot has happened since the last newsletter reached you. ISDB is growing. Thanks to those of you who sent me the addresses of potential candidates for ISDB membership, I have been able to contact potential new members and invite them to apply for membership. Please continue to send me useful contacts.

Over the last few months ISDB has built, strengthened or renewed relationships with other organisations such as WHO, the European Society of Clinical Pharmacists, INRUD, Health Action International, the International Society of Technology Assessment in Health Care and the European Medicines Evaluation Agency. In this and the coming Newsletter you will find reports of meetings and activities relating to these organisations.

We now have an updated ISDB membership list. The latest version will be sent to you soon. Please make sure you pass on any corrections to the coordinating office.

The shelves of the ISDB library are a little too empty for an organisation whose members publish drug bulletins. Some of you send me bulletins, but a large number of ISDB members and correspondents do not. Please make sure that the ISDB office is on your mailing list.

Many thanks to those of you who have sent me information for the newsletter. For the next issue send me your contributions (around 300 words per item) by e-mail or on diskette by the end of August.

Ellen 't Hoen
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► between producing a bulletin and being responsible for regulatory or governmental decisions on pharmaceutical matters could also jeopardise independence.

Independence of ISDB bulletins is more than a slogan. To maintain independence, we need to be aware

of the pressures editors can be subjected to. Ultimately it ensures that the information we provide will help health professionals to make decisions in the best interest of the patient.

CHRISTOPHE KOPP
CHAIRMAN

Godfrey Obiaga editor of Pharmacy Bulletin in Nigeria wrote us a letter in response to the report of the 4th ISDB Annual meeting in Granada in which he addresses the issue of commercial funding of drug bulletins as follows: *"It is interesting to note that the problems being faced in publishing drug bulletins by those of us in developing countries are also common with those in developed countries. The most important is the question of funding. I have practically run the "Pharmacy Bulletin" from personal funds since 1979 when it was first published. Drug companies agreed to sponsor, say, one year's publication provided I advertised their products. I always resisted that and I am glad that the "Pharmacy Bulletin" has been and continues to be independent."*

Godfrey O. Obiaga, Pharmacy Bulletin, P.O. 370, NNEWI, Anambra State, Nigeria.
Tel: + 234 046 463 657, fax: + 234 046 124 (Nnewi), fax: + 234 1 617 632 (Lagos).

UPDATE ON TRANSPARENCY

Medicines Agencies

The Fourth Conference of Medicines Agencies was held in the Hague 21-22 April 1997. The meeting was attended by 70 regulators from 27 countries and 400 representatives from the pharmaceutical industry. ISDB was represented by Wil Toenders and Ellen 't Hoen. Transparency and accountability in drug regulation was one of the main themes of the meeting. Catherine Hodgkin from HAI-Europe outlined in her presentation the principles laid down in the Uppsala Statement. She argued that in drug regulation as in any public service "Openness should be the rule and secrecy the exception". Unexpected support for the call for more openness came from Dr Lekkerkerker, the chairman of the Dutch Medicines Evaluation Board. He



said in his presentation: "Regulators have to realise that regulatory authorities are established by governments to protect the public. It is their duty to take care that medicines are safe, efficacious and of good quality. From that point of view, it seems to be logic that regulatory authorities have to give

account of their activities and of their decisions... I can hardly imagine that the industry fears that more openness will influence doctors negatively in prescribing drugs. Further information is more likely to promote the safe use of medicines. Certainly safe use is in the interest of the industry. Will openness have a negative influence on the policy of other governmental authorities or on decisions affecting reimbursement? I don't think so. So what is the industry afraid of?" The Dutch Medicines

Evaluation Board has asked the minister of justice whether it is possible under the present law to increase the openness and to provide more information than it has done in the past.

EMEA consultation

In April the EMEA circulated a consultation paper outlining its proposed policy on transparency and access to documentation from the EMEA. ISDB has sent detailed comments on this consultation paper. In this paper we stressed that access to information from the EMEA is not only essential to the work of EU based drug bulletins but also for bulletins outside the EU. In the ISDB response we gave suggestions how the EMEA can improve its information policy. The full text of the consultation paper and the ISDB response is available from the coordinating office.

On June 19th a group of European bulletins will meet with representatives of the EMEA to plan a workshop on drug information in

the fall (The exact date for the workshop is not set yet).

Access to information in France

In April *La revue Prescrire* has asked politicians and the head of the French Medicines Agency to explain the high level of secrecy that is practised by the French Medicines Agency. *Prescrire* has asked the French government and the French Agency to act upon the recommendations of the "Uppsala declaration" (Statement of the International Working Group In transparency and accountability in drug regulation published by HAI-Europe and the Dag Hammarskjöld Foundation). The full text of the French translation of the Declaration is published in the April issue of *La revue Prescrire* (no 172).

Italy

The Italian ISDB member *Informazioni sui Farmaci* published the Italian translation of the "Uppsala declaration" in their February 1997 issue.

information about drugs and therapeutics;

c. to engage in whatever ancillary activities the Council considers desirable for the furtherance of these primary purposes.

The main criteria for membership of ISDB are editorial and financial independence and the quality of the published articles. Applicants for ISDB membership must fulfil these criteria including.

Institutions or individuals sympathetic to the aims of ISDB, but not qualified to be members, may obtain the status of Recognised Correspondent of ISDB.

Since the Granada meeting ISDB has put more emphasis on the development of regional activities. The regional coordinators play an active role in stimulating activities and expanding ISDB. Members of the Committee who have a regional coordination responsibility have been chosen for the next three years, until 2000. For a complete list see the previous Newsletter. They will work closely with Ellen 't Hoen, the ISDB coordinator. A number of activities have taken place: a new newsletter has been set up; ISDB has been represented at international meetings; a small working group on independent drug information in Eastern and Central Europe met in June in Amsterdam; the first regional Asia-Pacific meeting is scheduled to take place in September this year in Malaysia. ►►

EFFORTS TO IMPROVE AND EXPAND ISDB

Although our society has existed informally for over a decade, it is 10 years since ISDB became a formal organisation. In the April 1987 issue of the ISDB Newsletter the ISDB constitution was presented. At the annual meeting in Granada in September 1996 the participants confirmed the constitution and developed plans to achieve more of our aims.

To refresh the memory of old members and help potential new members to understand the importance of ISDB, here are some

articles from our constitution:

The purpose of the Society shall be:

a. to encourage and further the development of independent drug bulletins;

b. to promote international exchange of good-quality infor-

NEW ISDB FEE STRUCTURE

Annual budget (in US dollars)	ISDB membership fee (invoice will be in UK pounds)
\$25-8.000	1 rate \$5 - 100 (£ 5 - 60)
\$ 8.000-30.000	2nd \$ 250 (£ 150)
\$ 30.000 and above	3rd \$1.000 (£ 600)

►The Committee has revised a new membership application form and asks all ISDB members to help to distribute it to potential members. The new procedure includes a new fee structure to make sure that there are no longer financial barriers for those who want to join and to enable all members to contribute to the ISDB budget. (see the box for details)

You should already have received a bill from our treasurer Cathy Picton for this year's membership fee. Until this year the fee was £ 70 a year for everybody. The Committee has introduced a more flexible system with three fee levels. Members pay according to their budget.

Major donations will, of course, be gratefully accepted. The principle that financial barriers should not prevent membership still applies. Bulletins that have difficulties paying the membership fee are invited to contact the coordinator.

The new application form for ISDB membership forms are available from the coordinating office.

We hope that you will continue to contribute to the growth of ISDB.

BOZIDAR VRHOVAC

Pay your membership fee!

You have received the call for membership fee for 1997. Please pay as soon as possible. ISDB's activities depend on your contribution.



WEB NEWS

ISDB members on Internet

The Swiss Pharma Kritik was the first ISDB-bulletin on the Internet and The Australian Prescriber has followed recently. Pharma Kritik's home page can be found at <http://www.infomed.org> and contains the full texts of the articles since 1995, an evaluation of the 100 most important drugs and many links to other interesting medical sites, like Medline. A test shows you which of the many Medline-sites are the best and which are still free of charge.

The Australian Prescriber's home page can be found at <http://www.medfac.unimelb.eud.au/ap> and provides the full texts of the articles since 1995 and many links to other interesting sites.

Public Citizen Health Research Group's web site is up and running at <http://www.citizen.org/hrg>.

South African Drug Policy on the WEB

Key documents relating to South Africa's drug policy and essential drugs programme have been converted into electronic format to improve the accessibility of these documents. This has been done by HealthLink, a project of the Health Systems Trust established to help meet the communication and information needs of health workers in South Africa, in collaboration with the South African Drug Action Programme (SADAP) and the Department of Health. The documents are available on the HealthLink WWW site at: <http://www.healthlink.org.za>



[healthlink.org.za](http://www.healthlink.org.za) under "Info Resources" or alternatively (if your browser does not support frames): <http://www.healthlink.org.za/hst/edl/edlinfo.htm> (Essential Drugs List) <http://www.healthlink.org.za/hst/ndp/a.htm> (National Drug Policy)

The EDL is also available in Adobe portable document format (PDF), which is suitable for off-line use i.e. for those without internet access. HealthLink is also a South African mirror site for the WHO Guide to Good Prescribing (also under Info Resources).

HealthLink invites you to send any information / documentation regarding health or drug policy to them for wider distribution. They can disseminate information via the Internet, and to nearly 600 health workers throughout South Africa via email.

For further information please contact **Candy Day, Information Manager**. E-mail: candy@healthlink.org.za

Tel: +27 31 3072954

<http://www.healthlink.org.za>

Fax: +27 31 3040775

WEBLESS, then what ???...

For some time the European Medicines Evaluation Agency (EMEA) has provided the European Public Assessment Reports (EPARs) on the internet. The web-site address of the EMEA is: <http://www.eudra.org/emea.html>

If you do not have access to the Internet you can also ask the ISDB coordinating office for hard copies of the EPARs.

NEW CONTACTS IN THE CENTRAL EASTERN EUROPEAN

Visitor from Moldova

On 26 March Ms. Natalia Chebotorenco, president of the Moldovan association "Drugs", visited ISDB and Prescrire. The association "Drugs" is committed to providing independent good quality information about medicines to health professionals and the public. The association was founded in 1995 and is now acknowledged as a leader in the field of medicine by the ministry of health in Moldova. The ministry increasingly consults the centre on pharmaceutical issues.

After a long period of financial insecurity the association has received a one year grant from the Soros Foundation which will enable them to start an independent drug bulletin and to plan fundraising for the future.

During a period of severe financial difficulties Natalia Chebotorenco received two offers from drug companies to fund her activities. To maintain the independence of the centre she refused these offers. The association plans to apply for ISDB membership.

The association "Drugs" would like to receive bulletins from other ISDB members. Please send your bulletins to:

*Association "DRUGS"
Pharmacological Information Centre
90 Moscow Ave. 13/3 Chisinau
Moldova 2068
phone: (37 32) 73 83 48
fax: (37 32) 73 83 30
e-mail: natalie@drugs.moldova.su*

Georgian drug policy and drug information

Georgian drug policy is regulated by Drug Law. This law was

developed with support of the advisers of WHO Regional Office for Europe and is under approval process in our Parliament. The Pharmacological Committee of the Ministry of Health regulates the following aspects of drug policy in our republic : drug registration, drug information, the essential drug list, the national formulary, the state drug register and draft drug legislation, organisation of clinical trials, pre-clinical investigations, drug utilisation researches, recommendations for reimbursement of the costs of drugs, rational drug use, standard treatment guidelines.

Recent political, economic and social changes during the transitional period in Georgia, had a great impact on the health care system. It has become clear that Georgia needs to address the issues of pharmacological education and rational drug use. The rapid introduction of hundreds of western products for therapeutic use after the collapse of the separate eastern pharmaceutical market has confused doctors. Doctors and pharmacists are confronted with many drugs that they have not been taught to use and know little about. At the same time, obsolete, ineffective and unnecessary products are still available on our market. Large parts of the population still do not have access to effective, safe and inexpensive drugs. Doctors often lack the motivation to take the responsibilities to prescribe rationally. Medical schools should teach the principles of good prescription practice. Rational prescribing is dependent upon the avail-

ability of clear, accurate, impartial, comparative information about medicines. Dissemination of primary pharmacological information is likely to be particularly cost-effective.

We, specialists of the Pharmacological Committee, have edited the Georgian National Pharmacological Formulary, International Drugs Reference Book, Georgian State Register of Drugs, drug information Bulletin «DRUGS TODAY» with information on generic and brand names, essential drugs, principles of good clinical and good prescription practice, news of pharmacovigilance, pharmacoepidemiology and pharmaco-economy and most of all rational use of drugs. Most important is information about how to make decisions on rational drug use, taking financial limitations into consideration. We are willing to offer a high-quality drug information service and to try to conduct drug registrations based on principles of objective scientific evaluation, but lack of financial resources forms an obstacle. The first steps have been taken in collaboration with the Drug Monitoring National Centre of Pharmacovigilance to organise post-marketing surveillance.

If you know of any opportunities for collaboration and training, please contact the Georgian Pharmacological Committee.

I would not wish to end this report without expressing my sincere thanks to all members of ISDB for your interest in our country.

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NEWS FROM ISDB MEMBERS

DTB

In March, Drug and Therapeutics Bulletin (DTB) launched a CD ROM containing all the articles published from January 1993 to March 1997. The electronic DTB is designed to complement the printed version of the Bulletin. Subscribers to electronic DTB will receive a new disk that includes the latest issues every 6 months. To enable quick and efficient searching, the electronic DTB has word search, index and contents facilities which take the user directly to the article of interest. Users will be able to print out single sections, whole articles or entire issues of the Bulletin as well as adding bookmarks and their own annotations.

Electronic DTB has linked with the electronic British National Formulary (eBNF), so combining two publications which provide clear, practical, unbiased advice. This represents an important step forward in the provision of independent and reliable prescribing information. As they use the same software and there are direct links from DTB articles to BNF sections, getting around both is straightforward.

ISDB members with a CD ROM can obtain a free copy of the electronic DTB from: *Cathy Picton, Drug & Therapeutics Bulletin, 2 Marylebone Road, London NW1 4DF, United Kingdom. Tel.: (+44) 171 830 7541, fax: (+44) 171 830 7665, email: pictonc@which.co.uk.*

LA REVUE PRESCRIRE

Monitoring drug reps. Since 1991, an anonymous network of

general practitioners and a small number of hospital pharmacists, all readers of the independent French drug bulletin *La revue Prescrire* has been monitoring the behaviour of medical representatives of pharmaceutical companies. The network has been looking at the accuracy of the claims made for their drugs and the type of information they provide.

After each visit by a medical representative, members of the network fill in a standard report form, noting if the information given orally on indications and dose regimen of the drug differ from the official data sheet. They also report whether the representative spontaneously mentioned side-effects, contra-indications and interactions, as well as the arguments used to encourage prescribing of the drug (including gifts and paid participation in clinical trials)

An assessment of the results from 1991 - February 1997 show the following. Overall, the drugs' indications were extended or changed in about 27 % of the visits,

and dose regimens quoted were not in line with the data sheet in 15 %. More seriously, side-effects, contraindications and interactions were not mentioned in 76 % of the visits. Qualitative evaluation showed that off-licence information was based on either premature claims, analogies with other drugs, or pure promotional fantasy.

For those of you who would like to receive English language copies of the forms that are used by the participants of the network, please contact Ellen 't Hoen at *Prescrire*.

Gold for old. Each year *Prescrire* looks for candidates for the Golden Pill Award. This award was established in 1981 and is given for new medicines that come on to the French market that provide a real therapeutic advance in an area where previously no treatment was available.

The 1996 Golden Pill went to Boehringer Mannheim for Digidot (digoxin-specific antibody fragments). It is indicated for the treat-

Findings of the network monitoring forms from 1991 to 1997 (a)

		90-91	91-92	92-93	93-94	94-95	95-96	96-97
• Do the indications match those on the data sheet?	yes	77	65	64	69	79	84	75
	no	23	35	36	31	21	16	25
• Does the dose regimen match that on the data sheet?	yes	88	74	79	87	89	93	87
	no	12	26	21	13	11	7	13
• Did the representative spontaneously mention side effects?	yes		23	31	29	34	27	25
	no		77	69	71	66	73	75
• Did the representative spontaneously mention contraindications?	yes		19	25	22	30	21	20
	no		81	75	78	70	79	80
• Did the representative spontaneously mention drug interactions?	yes		17	20	18	23	21	18
	no		83	80	82	77	79	82
• Given the type of drug, do you think the representative should have mentioned the above information? (b)	yes		65	79	83	73	73	75
	no		35	21	17	27	27	25
• Was the representative willing to answer your questions? (b)	yes		80	73	69	71	70	66
	no		20	27	31	29	30	34
• Did you find the representative convincing?	yes		18	20	17	28	30	31
	no		82	80	83	72	70	69
• Were there strong inducements to prescribe the drug?	yes		24	19	15	18	20	33
	no		76	81	85	82	80	67

a- Percentage

b- Editor's note: questions relating to side effects, contraindications and drug interactions.

ment of life-threatening digitalis intoxication, a severe condition for which no effective treatment was available in France. Digoxin-specific antibody fragments have been available for many years in other countries, including Austria, Australia, Belgium, Canada, Germany, Sweden, Switzerland, the United Kingdom and the USA (since 1986). Still the introduction of this life saving drug in France deserves applause.

RAVIMIINFO BÜLLETÄÄN

Recently the Ravimiinfo Bülletään distributed a questionnaire to its readers. The objective was to find out how useful the bulletin was

in everyday work of medical doctors and pharmacists. At present the bulletin is sent free of charge. In the future this may change should the government decide not to fund the bulletin. The questionnaire was based on one used by the Drug and Therapeutics Bulletin.

The results are as follows:

The majority of the people questioned were satisfied with the bulletin and its layout. The articles were found to be useful in everyday work. The concrete suggestions received will be taken into account for future planning. Topics which seem to interest the readers include pharmacokinetics of drugs in childhood, antidotes,

vaccines, immunoglobulins. The positive features of the bulletin are its suitable size, level of practical information, high standard of its content, objectivity and independence from manufacturers, easy readability, price comparison of drugs, matter-of-factness and last but not least, the fact that it is published in the Estonian language. The readers do not like the anonymity of articles. The results do not reflect the opinion of all the readers because only 30% of the questionnaires were returned.

For more information contact: *Ravimiinfo Bülletään, PO box 150, EE2400 Tartu, Estonia. Tel: + 372 7 441219, fax: + 372 7 441549, e-mail: Kristin@sam.ee*

INTERNATIONAL CONFERENCE ON IMPROVING USE OF MEDICINES (ICIUM)

The First International Conference on Improving Use of Medicines (ICIUM), held in Chiang Mai, Thailand, from April 1-4, 1997, identified progress in improving the use of medicines in developing countries over the last decade.

The Chiang Mai Conference was attended by 272 researchers, policy-makers, and health managers from 46 countries representing a range of interests including universities, ministries of health, non-governmental agencies, consumer organisations, donors, and the pharmaceutical

industry. A number of ISDB members attended the meeting and presented at the many sessions and discussion groups. Ellen 't Hoen was part of the expert panel that commented on the outcome of the meeting.

The objectives of ICIUM were to synthesise the evidence for success of different strategies to improve use of medicines, to develop policy guidelines for implementing proven strategies, and to identify important directions for future research. A full report of the meeting will be available later this year.

The first ISDB Asia Pacific regional meeting, Malaysia Sept 5-7 1997

The first regional ISDB meeting will take place in the Asia-Pacific region. ISDB members have received a registration form. Please contact the organisers for further information:

Dr. Dzulkifli Razak
National Poison Centre,
Universiti SAINS
11800 Minden
Pulau Pinang, Malaysia
Tel.: (+60) 4 6568394
Fax: (+60) 4 6568417
e-mail: dzul@usm.my

Register now !



"Well, you can never have too many NSAIDs..."

NEW PUBLICATIONS

The International Journal of Risk and Safety in Medicine.

The International Journal of Risk and Safety in Medicine (IOS Press) published an issue devoted to the problems caused by unnecessary secrecy in drug regulation. The journal's contents include information never published before on the detrimental role secrecy has played in the registration of the hypnotic triazolam (Halcion+) and the contraceptive levonorgestrel (Norplant+). The journal contains many of the papers presented at a meeting of drug policy experts co-organised by Health Action International (HAI) and the Dag Hammarskjöld Foundation, including the report on the ISDB survey of national drug regulatory agencies by Danielle Bardelay. ISDB members will receive a free copy.

International conference on National Medicinal Drug Policies - The way forward Australian Prescriber, Volume 20 Supplement 1 1997.

This is the report of the Conference on National Medicinal Drug Policies which was held in Australia in October last year. This 272 page document has summaries of the presentations the role of the private market, access to medicines, rational use of drugs, quality safety and efficacy of medicines and the contribution of industry to drug policy and public health goals. The general conference recommendations are addressed to all the players in the pharmaceutical policy area and are aimed at encouraging the development of national drug policies that have the rational drug use and the health of people as a central aim.

Any individuals wanting a copy of the report should send a request to **Mr Steve Mulholland by fax:**
+ 61 6 289 8846



Health and Pharmaceuticals in Developing Countries: Towards Social Justice and Equity.

This collection of articles by Dr K Balasubramaniam, Pharmaceutical Adviser at Consumers International Regional Office for Asia-Pacific, makes a convincing case for Primary Health Care and the achievement of the goal of Health for All by developing countries. The author advocates the need for formulation and implementation of national health and drug policies based on the concepts of Primary Health Care. This 215 page book costs US\$ 15.00 and is available from:

CI ROAP, P.O. Box 1045, 10830 Penang, Malaysia. Tel.: (+60) 4 2291396, fax: (+60) 4 2286506, e-mail: ciroap@pc.jaring.my

Primary Health Care formulary, second edition.

This formulary, by Helene Möller, Steven Donohue edited by Rob Summers, is produced to meet the need for accurate, practical information used in primary health care facilities in South Africa and can be ordered from:

**Medicos Pharmacy Project
Medunsa School of Pharmacy
PO Box 218
Medunsa 0204
South Africa**

Share your news

Send your article,
300 words per item or less,
to the ISDB Newsletter
before the end of august
by e-mail
(ethoen@compuserve.com)
or on diskette.

MEETINGS COMING UP

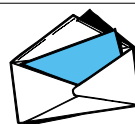
1st Asia Pacific regional meeting of the International Society of Drug Bulletins. Penang, Malaysia September 5-7 1997. For more information contact: **Dr. Dzulkipli Razak, National Poison Centre, Universiti SAINS, 11800 Minden, Pulau Pinang, Malaysia. Tel.: (+60) 4 6568394, fax: (+60) 4 6568417, e-mail: dzul@usm.my**

European Drug Utilization Research Group workshop, followed by a joint symposium with EACPT on 16-17 September 1997 in Berlin (Germany) Info: **Mrs. Dr. Marion Schaefer, Humboldt University zu Berlin, Institute for Pharmacy, Goethestrasse 54, 13086 Berlin. Tel: +49 30 96592415, fax: +49 30 9348280.**

2nd Congress European Association for Clinical Pharmacology and Therapeutics (EACPT) on 17-20 September 1997 in Berlin. Info: **FGU Berlin Fortbildungszentrum Gesundheits- und Umweltschutz Berlin e.V., Eisenacherstrasse 11, 10777 Berlin. tel: +49 30 21295 3, fax: +49 30 21295 420.**

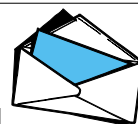
The Annual meeting of Health Action International - Europe will be held 26-28 September 1997 in Oslo Norway. A day before the meeting on 26 September a seminar on the World Bank and pharmaceutical policies will take place. The HAI-Europe meeting will be hosted by the Norwegian International Health Association in cooperation with the Institute of Pharmacotherapy and the Statens Helsetilsyn. For more information contact **Bas van der Heide, HAI-Europe, J. van Lennepkade 334T, 1053 NJ Amsterdam, The Netherlands. Tel: + 31 20 6833684, fax: + 31 20 6855002, e-mail: bas@hai.antenna.nl**

Second international Congress on Health and Ramadan in Istanbul, Turkey December 1-3 1997. For formation contact **Dr. Aadir N., Fondation Hassan II pour la recherche Scientifique et Médicale sur le Ramadan, 19, rue Tarik Bnou Ziad, Casablanca Morocco. tel: + 212 2 20 11 56, fax: + 212 2 47 12 90.**



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Picton, Wil Toenders, Bozidar Vrhovac.
Lay-out:
Sandrine Mourthé, Isabelle Hild
The ISDB Newsletter is sent free of charge to ISDB members and corresponding members.