

## PLENARY SPEAKERS BIOGRAPHIES AND SUMMARIES

### **Philip Newland-Jones**

Philip Newland-Jones is a Consultant Pharmacist in Diabetes and Endocrinology and is the Clinical Director of the Diabetes and Endocrine service at University Hospitals Southampton NHS Foundation Trust. He is a member of the UKCPA Diabetes and Endocrinology Committee, the Joint British Diabetes Societies (JBDS-IP) Committee, and the Centre of Perioperative Care (CPOC) diabetes working group. He is also currently part of the “Defining the Future of Endocrinology” working group for the Society for Endocrinology. At Southampton he is the clinical lead for type 1 diabetes and has an interest in severe insulin resistance.



At a national level he is the lead pharmacist for NHS England Diabetes and Endocrinology Clinical Reference Group, and a member of the Diabetes UK professional council. He is an editorial board member of “Diabetes in Primary Care”, “Practical Diabetes” and “Medicine Matters diabetes”. He is also a specialist advisor to the CQC for diabetes/endocrinology in secondary and intermediate care services. In 2015 he was awarded the National Leadership in Pharmacy award by the Royal Pharmaceutical Society and in 2021 was voted as “diabetes healthcare professional of the year” at the QIC awards. In 2021 he was designated as a Fellow of the Royal Pharmaceutical Society.

Philip leads a large dynamic team and is responsible for the direction of inpatient and outpatient diabetes and endocrine care at University Hospital Southampton. He works in a Consultant practitioner prescribing Pharmacist role on a day to day basis reviewing inpatients and outpatients with diabetes and endocrine issues. His dedication to education ensures the rest of his time is taken up educating doctors, nurses, allied healthcare professionals and students within secondary care, primary care and university settings. He is an Honorary Senior Clinical Lecturer at the Faculty of Medicine at the University of Southampton is the MSc module lead for “Modern Management of Diabetes, Nutrition and Pharmacotherapy” at the University of Southampton.

At the ESCP workshop conference in Antwerp he will give a plenary lecture entitled: **“New evidence and emerging data in diabetes therapy: from research innovation to latest guidelines”**.

### **Abstract of the lecture**

The aim of the session will be to discuss the future and forefront of type 2 diabetes management to optimize care and reduce future risk of microvascular, and macrovascular complications.

### **Alia Gilani**

Alia is a Senior Diabetes Clinical Pharmacist whose interests lie in ethnic inequalities and diabetes. She helped establish and run a bi-lingual medication review service in NHS Glasgow in 2002. This was the “MELT” service (Minority Ethnic Long Term medicines Service) which operated for over a decade. The MELT was an open referral medication review service which allowed referrals to be received from both primary and secondary care. She has received several awards for her work in which the service has been recognised both locally and nationally. She has chaired the NHS Glasgow Diabetes Ethnicity and Inequalities Group in the past.

She has also been running outreach clinics for South Asian diabetics for over a decade in various locations e.g. mosques, elderly centres. She was a member for 13 years of the diabetes working group for the South Asian Health Foundation and had the role of Regional lead and CEO for 2 years. She was the first pharmacist on the Primary Care Diabetes Society and a committee member for 7 years.



She has hosted several diabetes awareness days in community venues promoting SAHF and NHS services. She is on the editorial board of Diabetes in Primary Care Journal. She contributes to several journals by writing articles on diabetes related topics. She is involved in healthcare professional's education by delivering lectures both locally and nationally on topics from managing diabetes during Ramadan to tackling health and ethnic inequalities. She was involved in delivering a lecture at the first joint RCGP and RPS diabetes conference and lectured at the European Society of Clinical Pharmacy in 2017 on how pharmacists can tackle inequalities. In May 2017 she spoke at the Scottish parliamentary diabetes cross party group on issues pertaining to diabetes amongst the BME population in Scotland. Currently she works part time as a Senior Diabetes Clinical Pharmacist for Primary Care Sheffield in a large general practice in an area with high deprivation and ethnic inequalities managing those with diabetes. The role entails managing complex high risk patients and mentoring and upskilling the primary care multi-disciplinary team. She has also completed a NHS and Pharma joint working project in Diabetes for Sheffield. The project involved targeting 6 practices which had a high South Asian population and mentored those healthcare professionals in the frontline who manage diabetes. Outcomes measured were: clinical outcomes and the views of both patients and healthcare professional on the impact of the service. Recommendations from the project have been disseminated to commissioners and clinical directors with a view to potentially reconfigure diabetes service models.

At the ESCP workshop conference in Antwerp she will give a plenary lecture entitled: **“Advanced pharmaceutical care in diabetes”**.

#### **Abstract of the lecture**

The prevalence of diabetes is rising at an alarming rate. Every two minutes someone is diagnosed with the condition; there are currently approximately 4.9 million people in the UK with diabetes, with this figure projected to rise to 5.5 million by 2030.<sup>1</sup>

The pharmacist's role has evolved from the traditional dispensing role to a more proactive role in chronic disease management. With the introduction of the independent prescriber qualification there is an opportunity to have greater clinical autonomy in diabetes management. Overall pharmacists can play an important role in the management of people with Type 2 diabetes. With the recent COVID-19 pandemic people with diabetes have disproportionately affected in terms of a backlog in care management in primary care. The current climate provides ample opportunity for pharmacists to support nurses and Doctors in managing this backlog and have a tangible impact in patient care. In general practice people with diabetes could be reviewed by a pharmacist as part of their annual review. Indeed, pharmacists could be considered for the front line in terms of diabetes management.

This lecture explores the evolving role of the pharmacist and showcases how they can work in primary care and develop a specialist service for people with Type 2 Diabetes. This example is in a UK general practice setting within an area of high deprivation and diversity. By working closely with the multi-disciplinary and social care team a pharmacist was able to develop an innovative service and access hard to reach communities at a grassroots level and impact on their diabetes care.

<sup>1</sup> Diabetes UK. Available at: <https://www.diabetes.org.uk/professionals/position-statements-reports/statistics>

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## **Prof. Dr. Frederik H. Verbrugge**

Prof. Dr. Frederik H. Verbrugge is a Cardiologist and Intensive Care physician with a dedicated interest in heart failure, (exercise) hemodynamics and cardiorenal physiology. He graduated as a medical doctor in 2010 (KU Leuven, Belgium), obtained his Ph.D. degree in 2015 (Hasselt University, Belgium) and received an M.Sc. in Clinical Trials in 2022 (Oxford University, UK). He is currently employed as Clinic Head/Clinical Professor at University Hospital Brussels/Vrije Universiteit Brussel (Belgium), where he cares for patients with heart failure, attends the cardiac intensive care unit, and runs the exercise physiology lab. For his research, Prof. Verbrugge is affiliated with the Department of Cardiovascular Diseases of the Mayo Clinic (Rochester, MN, US).



Prof. Verbrugge has published over 130 Pubmed-cited articles in the field of cardiology and heart failure. He authored a book chapter in "Heart Failure: A companion to Braunwald's heart disease" (3rd edition, Elsevier, 2015) and has edited the book "Cardiorenal Syndrome in Heart Failure" (Springer Nature Switzerland AG, 2019). He currently serves as the Deputy Editor for the European Heart Journal: Acute Cardiovascular Care and is an Editorial Consultant for JACC: Heart Failure. Prof. Verbrugge is alumnus of the Research Foundation Flanders (F.W.O.) and the Belgian American Educational Foundation.

At the ESCP workshop conference in Antwerp he will give a plenary lecture entitled: **“Updates in cardiovascular co-morbidities prevention”**.

### **Abstract of the lecture**

Smoking remains the most important reason for loss of quality adjusted life years, with a major adverse impact on atherosclerotic cardiovascular diseases and cancer risk as well. Therefore, smoking cessation always remains a priority in any patient. Treatment of hypertension has an even greater impact on the general cardiovascular health in developed countries. Recent studies suggest that a more stringent blood pressure target of 130/80 mmHg is appropriate, especially in younger people without established atherosclerosis. On a population level, limiting salt intake remains a priority and some intriguing data warn against overzealous use of sodium rich effervescent tablets in vulnerable patients.

While pharmacological treatment options for hypertension have remained relatively unchanged, there have been many new drugs among the lipid lowering therapies lately. With bempedoic acid and different proprotein convertase subtilisin/kexin type 9 (PCSK9) inhibitors on top of statins, stringent low-density lipoprotein (LDL) cholesterol targets <55 mg/dL have become achievable in almost every patient with established atherosclerosis. This goal should be pursued as there is a clear linear relationship between LDL cholesterol and cardiovascular risk reduction up to these levels.

Diabetes confers one of the strongest risks for development of cardiovascular diseases (both atherosclerotic cardiovascular disease and heart failure). Moreover, in contrast to other cardiovascular risk factors, its prevalence has been rising due to the obesity pandemic. The last decade has brought 2 important drug classes that have proven to reduce cardiovascular risk in patients with diabetes: sodium glucose co transporter 2 (SGLT 2) inhibitors and glucagon like peptide 1 (GLP 1) receptor agonists. These drugs have been established as first line treatments after and even before metformin. SGLT 2 inhibitors are a real game changer, not only to treat diabetes, but also heart failure (irrespective of the ejection fraction) and chronic kidney disease due to its inherent nephron protective effects. Additionally, the powerful weight losing abilities of GLP 1 agonists are promising in the combat against obesity. With late generation drugs, a weight loss similar as with bariatric surgery can be achieved. Finally, iron deficiency, irrespective of the presence of anaemia, has emerged as an important treatable condition in heart failure, where iron repletion has a clear impact on quality of life and heart failure readmissions.

## **Goos Laverman**

### **4. prof. dr. G.D. Laverman**

Doctor Laverman is an internist with specialization in the field of diabetes and the field of kidney disease. He has been working since 2011 in the ZGT hospital in the Twente region in the Netherlands in combination with a faculty position at the University Medical Center Groningen. Since 2020, he also has a position as professor at the University of Twente. He is principal investigator of several clinical studies in the field of Nephrology and Diabetes. His main research interests include to develop and study tailor-made optimization of drug treatment, as well as optimization of lifestyle management for his patients with the aim to improve the long-term outcomes in patients with diabetes and/or chronic kidney disease. He leads the Diabetes and Lifestyle Cohort Trial (DIALECT) and has created a unique network that brings together researchers from diverse fields as Internal Medicine, Nutritional Science, Technological Science, Behavioral Science and Pharmacological science.



At the ESCP workshop conference in Antwerp he will give a plenary lecture entitled: “**Integrated approach to reach the treatment targets in persons with type 2 diabetes**”.

### **Abstract of the lecture**

Cardiovascular risk management is a central issue in the treatment of type 2 diabetes mellitus. Although pharmacological therapy as well as lifestyle management are important in this respect, both approaches are often studied as separate entities. In the Diabetes and Lifestyle Cohort Twente (DIALECT), however, integrated assessments have been performed providing interesting insight in the respective contribution of both pharmacotherapy and nutritional management in reaching treatment targets such as blood pressure, LDL cholesterol and glycemetic control.

DIALECT is a real-world, observational study in T2DM patients in a well-defined region in The Netherlands, and uses validated and detailed data on nutritional habits, pharmacological treatment, and current clinical condition. To obtain non-biased data on individual nutrient intake, 24-hour urine collections were used in addition to food frequency questionnaires.

The integrated assessment of pharmacological and nutritional management has provided valuable lessons that will help to improve the long-term outcomes of our patients.

## **WORKSHOP DESCRIPTIONS**

**All four workshops have a first part before lunch and a second part after lunch. All workshops are repeated the next day. Each participant is asked to choose one workshop on Thursday and another one on Friday.**

**Sign up for the Thursday workshops at the ESCP booth on Thursday morning before 10:00 AM**

**Sign up for the Friday workshops at the ESCP booth on Friday morning before 10:00 AM**

### **Workshop 1: Safe use of injectables and devices in diabetes patient**

Moderator:

**Prof. Annemie Somers, PharmD, Ph.D.**

Ghent University Hospital, Belgium: head of the clinical pharmacy department. Back-office and front-office clinical pharmacy, medication safety and seamless pharmaceutical care.

Faculty of Pharmacy, Ghent University, Belgium: guest professor Courses in pharmaceutical care, for graduate and postgraduate pharmacy students.

Supervision of MPharm and postgraduate hospital pharmacy dissertations.

Research area: clinical pharmacy activities for older hospitalized patients, main interest for appropriate prescribing and seamless pharmaceutical care for older



persons.

Publications: <https://biblio.ugent.be/person/801001127681>

### **Workshop Abstract**

This workshop is prepared for clinical pharmacists and researchers interested in obtaining more knowledge about injectable antidiabetic drugs. Different aspects regarding these medicines will be covered namely pharmacotherapeutic, practical and safety issues.

During the first part of the workshop, the different types of injectable antidiabetic drugs will be discussed, within the whole of antidiabetic therapy. The focus will lie on insulins and GLP1-analogues. Also, glucometers will be demonstrated. The participants will have the opportunity to practice with demo materials.

The second part of the workshop will focus on the safe use of injectable antidiabetic drugs, with strategies to prevent medication errors at the different levels of the drug process (prescribing, pharmaceutical validation, administration). Especially insulin is considered as high-risk medication and tools should be used to ensure appropriate use. Cases of diabetic patients with comorbidities will be presented and discussed in an interactive way, and tools and guidelines will be suggested and exchanged.

Learning Objectives of the workshop are:

- To understand the different types of insulins and other injectable antidiabetic drugs through pharmacotherapy wrap-up and experience with demo medication and glucometers
- To work with patient cases of realistic situations where drug related problems can arise
- To apply tools and protocols to minimise the risk for medication errors in diabetic patients with comorbidity.

### **Workshop 2: Lifestyle and personalized diabetes treatment in primary care**

Moderators:

#### **Anne Margreeth Krijger**

Anne-Margreeth Krijger-Dijkema studied at the University of Groningen and has been working as a community pharmacist in the Netherlands for 25 years (at Academic Pharmacy Stevenshof and at the SIR Institute for Pharmacy Practice and Policy in Leiden). She is specialized in the field of diabetes and lifestyle. In these areas she provides education and participates in guideline development. In 2019, she carried out a project in primary health care - in collaboration with TNO - in the field of diabetes subtyping, for which she was awarded 'lifestyle professional of the year' 2020 by the Association of Arts and Lifestyle in the Netherlands. She is also chair of the 'lifestyle interventions' working group of the Dutch Diabetes Federation (NDF), chair of the Special Interest Group Diabetes of the KNMP and member of the scientific advisory board of the Diabetes Fund.



#### **Charlotte Verrue**

Pharmaceutical Care Manager at Multipharma SC.

Graduated as a pharmacist at Ghent University (Belgium) in 2004.

Graduated as a Master in Economy & Business Administration at Ghent University in 2005.

Was certified as Clinical Pharmacist at the Catholic University of Louvain (Belgium) in 2006.

Got a PhD in pharmaceutical sciences at Ghent University) in 2010 with the dissertation: "Optimization of medication use in nursing homes: the role of the pharmacist".

Working for Multipharma SC, a group of +/- 250 cooperative pharmacies all over Belgium, since 2010 as a Pharmaceutical Care Manager, with a brief intermezzo as Category Manager OTC in 2017-2018. Being a pharmaceutical care manager englobes scientific support for the pharmacists, project management for pharmaceutical care related projects, (pharmacotherapeutic) training of the pharmacy teams, etc.

Representative of Multipharma SC and/or OPHACO in different working groups and committees, e.g: sector taskforce medication review and sector taskforce vaccination; jury member at the consensus meeting of National Institute for Health and Disability Insurance (on the themes: COPD, type 2 diabetes, birth control, lipid-lowering drugs, calcium/vitamin D, hypertension, opioids and non-opioids in chronic pain, hypothyroidy).

Since June 2022, president of the Pharmaceutical Care Center of Expertise at OPHACO (Office des Pharmacies Coopératives).



### **Workshop Abstract**

The diagnosis of diabetes is made as soon as a threshold of elevated blood glucose is exceeded. It is in fact the diagnosis of a symptom and the treatment focuses mainly on the prevention and reduction of complaints and damage as a result of elevated blood glucose. More than 90% of the diagnoses concern type 2 diabetes, in which a combination of insulin resistance and impaired insulin secretion plays a causal role, which differs per individual. In this workshop we will show you that DM2 is a very heterogeneous disease and that it is possible - by means of phenotyping (diabetes subtyping) - to gain a better insight into the extent to which insulin deficiency and insulin resistance play a role in each individual. This can help the caregivers to offer their patients a more personalized treatment, such as (intensive) lifestyle intervention for insulin resistance and a timely start with insulin for insulin deficiency. A diabetes typing can also be helpful in making the right choice in the range of glucose-lowering medication. We will also introduce you to the support programs for diabetes patients that already exist in the various European countries and how they are financed. Finally, attention is paid to responsible deprescribing of blood glucose-lowering medication when starting a lifestyle intervention and to the possible negative influence of co-medication on the success of this intervention.

### **Workshop 3: Tackling Inequalities**

Moderator:

**Alia Giliani**

Bio: see description in Speakers section

### **Workshop Abstract**

Health Inequalities are defined as differences in the status of people's health. Health inequities are avoidable inequalities therefore arguably a social justice issue. Population trends indicate that diversity is increasing, and this may mean that there will be widening gaps in the health needs for different groups, leading to further challenges for healthcare providers. Cultural differences can be a barrier to delivering effective patient care in practice. Providing culturally and linguistically sensitive services in practice can ensure improved patient outcomes. In terms of diabetes South Asian and Black people are 2-4 times more likely to develop Type 2 diabetes than white people. Overall in the UK health inequalities have increased or deteriorated. Within the NHS more than 90% of patient contacts are undertaken in General Practice thus is an ideal setting to target those with health and ethnic inequalities.

This workshop explores a pharmacist approach to tackling health and ethnic inequalities in diabetes in hard-to-reach groups. This includes development of a bespoke culturally and linguistically sensitive diabetes service for people with Type 2 Diabetes in areas of deprivation in Glasgow and Sheffield, England.

**Key Learning Points:**

- How to develop a diabetes service for hard-to-reach groups
- The pharmacist's role in tackling health and ethnic inequalities
- Pharmacists: a role that is more than medication management
- Working with a diverse population

**Workshop 4: Management of diabetes in patients with multimorbidity and medication review (pharmacology and other "tips")**

Moderator:

**Philip Newland-Jones**

Bio: see description in Speakers section

**Workshop Abstract**

The aim of this workshop is to help attendees understand how type 2 diabetes management could be improved to achieve better cardiovascular, renal and metabolic outcomes. It will cover aspects of the EASD/ADA diabetes management guidelines and the impact of these recommendations on the management of type 2 diabetes. Attendees will review the pathophysiology of type 2 diabetes, understand the methods and criteria for diagnosing type 2 diabetes and explore the impact of clinical inertia on patient outcomes and the importance of early treatment optimisation through a case based approach.

**Workshop 5: Management of diabetes in patients with multimorbidity and medication review (pharmacology and other "tips")". (Same subject as WS IV; other Moderators)**

Moderators:

**Anneleen Robberechts**

Anneleen Robberechts graduated as a pharmacist at the University of Antwerp (Belgium) in 2014. Since 2015, she is working for KAVA, the Royal Pharmacists Association of Antwerp and is focusing on medication review (MR) since 2016. First, Anneleen followed the extended MR training in the Netherlands, then translated it to the Flemish setting and since 2017 she trains pharmacists in medication review and is the representative of KAVA on the sector taskforce for medication review. Anneleen Robberechts started a PhD at University of Antwerp and Vrije Universiteit Brussel (VUB) in 2018 on the implementation of medication review (type 3) in Flanders and is still combining it with training pharmacists on MR. Currently she is finishing the final year of her PhD.



**Manon de Montigny**

Manon de Montigny is a GP since October 2022. She works part-time in a multidisciplinary primary care center in Brussels (Belgium). She also started a doctoral thesis at the academic center for general medicine of the UCLouvain since October 2022. She is studying the management of drug



treatments for patients with polymedication in primary care and more specifically multidisciplinary medication reviews. She is currently focusing on the inclusion of the GP in medication reviews conducted by community pharmacists for patients with more than five chronic daily medications. She is also an academic assistant and supervises some training activities for medical students and trainee physicians.

About her academic background, she first studied medicine in l'UNamur and then obtained her master's degree in medicine at UCLouvain with great distinction in June 2019.

She then specialised in general medicine at UCLouvain and graduated with highest distinction in October 2022.

### **Workshop Abstract**

#### **Background:**

Increasing prevalence of type 2 diabetes is due to an aging population and an increase in type 2 diabetes risk. Type 2 diabetes accounts for 90% of diabetes cases worldwide, leading to numerous health complications and chronic medications. Diabetes control can be disrupted by these complications as well. It has become increasingly important to collaborate with other caregivers to treat complicated diabetic patients, particularly in primary care. Having access to interesting data (OTC, treatment adherence, etc.) and pharmacological expertise make the pharmacist an important player in managing these patients. Implementing medication reviews is an interesting approach to reducing adverse effects and improving treatment of this disease. Despite this, MR can be challenging to conduct in practice due to the large number of drugs present and the limited clinical information available. Therefore, pharmacists need to adopt a systematic approach and be willing to collaborate with other caregivers (nurse, GP).

#### **Aim:**

To develop a more systematic and collaborative approach in solving problems in this complex population. Our intended audience are community and clinical pharmacists who want to start from the patient's difficulties and expectations to improve their care.

#### **Methods:**

In this workshop, after a brief presentation of the basic concepts of diabetes and the complex field of medication reviews in this context, we will work in small groups. Based on clinical cases, a team training in solving concrete problems encountered in practice will be developed. A discussion with the whole group about clinical cases and a piece of advice in MR management will conclude the workshop.

#### **Outcome:**

Participants will have expanded their knowledge of medication review and will have received practical advice ("tips & tricks") on how to manage medication treatment of diabetic patients with multimorbidity.