Turin, 14 May 2015 – What will the pharmacotherapy scene be like in twenty years? What drugs will we use? Will treatment be available to everyone? These are some of the questions that will be discussed by international experts meeting in Turin between 14 and 16 May at the conference entitled “Contrasts in pharmacology 2.0”, organised by the Department of Pharmaceutical Science of the University of Eastern Piedmont of Novara and promoted by the Fondazione Internazionale Menarini. “These issues are often addressed at highly technical and sectorial conferences. Instead, we are trying to find a common language among all the various professional figures”, explains Armando Genazzani, lecturer of Pharmacology of the University of Eastern Piedmont of Novara and co-chairman of the conference. “We have invited historians, physicians, basic researchers, statisticians and ethicists to take part in this meeting because only by understanding the extended problem will we be able to find rational solutions to the individual problems. Current issues such as the use of citizens' personal data, our ability to read individual futures in the genome in an increasingly more in-depth manner, the choice of diseases in which to invest in research, the ability to ensure equal access to treatment and the need to conduct ethical clinical, and at the same time informative studies must be addressed in a bipartisan manner and the elements for decision-making must be as ample as possible”. For example, even though numerous studies that give rise to the registration of drugs are carried out in Eastern European countries, very few people in those countries have access to new drugs once they are approved and become available. Another current issue concerns how governments, social security and insurance institutions, and other public or private organisations will be able to access “big data”, personal information about each one of us which are available on internet, social networks, and via smartphones. Information able to reveal the presence of diseases, which drugs are taken, and those who could have an increased risk of disease.
The technological evolution goes hand in hand with clinical evolution. People who work in the medical field have noticed that throughout their careers there has been ongoing progress in the development and use of drugs. “For example, in the 1950s there were practically no drugs at all for high blood pressure. It is sufficient to observe the constant increase in the number of pages of pharmacological texts to see the evolution that has occurred over the last seventy years”, comments Pier Luigi Canonico, Director of the
Department of Pharmaceutical Science of the University of Eastern Piedmont of Novara and co-chairman of the convention. “The availability of a greater number of therapeutic options which are increasingly more effective, is without doubt positive, however it can also disorientate the clinician and the pharmacologist. In addition, scientific progress raises ethical, deontological and pharmaco-economic questions of comparison: for example, should we concentrate on the more widespread diseases at a local level or instead broaden our vision to consider global health as well? Should the fact that a new drug is available mean that it is immediately accessible to patients, and if so, which ones? Should we pay more attention to real-life data, assessing the actual benefit of treatments in the reference populations?” Questions to which everyone, not just pharmacologists, are trying to find the answers in an attempt to provide the population with the best possible therapeutic options as well as equal access to treatment by everyone.

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