Session 1. 
Drug and Therapeutics Committee—Overview

Trainer’s Guide
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RPM Plus works in more than 20 developing and transitional countries to provide technical assistance to strengthen pharmaceutical and health commodity management systems. The program offers technical guidance and assists in strategy development and program implementation both in improving the availability of health commodities—pharmaceuticals, vaccines, supplies, and basic medical equipment—of assured quality for maternal and child health, HIV/AIDS, infectious diseases, and family planning, and in promoting the appropriate use of health commodities in the public and private sectors.

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Developed in Collaboration with the
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# ABBREVIATIONS AND ACRONYMS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>ADR</td>
<td>adverse drug reaction</td>
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<tr>
<td>DTC</td>
<td>Drug and Therapeutics Committee</td>
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<tr>
<td>PHC</td>
<td>public health care</td>
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<tr>
<td>VA</td>
<td>visual aid</td>
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<td>WHO</td>
<td>World Health Organization</td>
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SESSION 1. DRUG AND THERAPEUTICS COMMITTEE—OVERVIEW

Purpose and Content

The Drug and Therapeutics Committee (DTC) is an essential component of a health care organization’s medicine selection, use, and distribution program. This committee has many different functions that will contribute to the goal of improving medicine selection and rational use of medicines. This session provides an overview of the role and functions of a DTC and describes all aspects of this important committee.

This training series is intended for practitioners who serve on a DTC. The emphasis of this session and of the entire training series is on the technical aspects of a DTC, including medicine selection for the formulary, identification of medicine use problems, and the promotion of interventions to improve medicine use. Participants are referred to the “Further Readings” section for information on the establishment and implementation of a new DTC. The World Health Organization (WHO) publication Drug and Therapeutics Committee: A Practical Guide provides step-by-step procedures for starting a new DTC.

Objectives

After attending this session, participants will be able to—

- Understand the role of the DTC
- Understand DTC structure and organization and its relationship to other hospital committees
- Understand the functions of a DTC, including advisory responsibilities, development of policies and procedures, formulary management, identification of medicine use problems, and promotion of strategies to improve medicine use and medicine safety.
- Discuss the importance of the DTC in promoting rational use of medicines, especially antimicrobial use and injections

Outline

- Key Definitions
- Introduction
- Role and Functions of the DTC
- Organization and Structure of the DTC
• Activity 1. Review of participants’ DTCs and discussion of the issues and challenges to starting and maintaining a DTC

• Summary

**Preparation and Materials**

• Read the Trainer’s Guide and the Participants’ Guide, and review the visual aids (VAs).

• Instruct participants to read the Participants’ Guide the evening before the session presentation.

• For the first session, instruct participants to bring the following to show what is available in their countries. These materials should also be given to the course facilitators who will then analyze this information for later use in the course.

  o Drug and Therapeutic Committee policies and procedures
  o Drug formularies and standard treatment guidelines
  o Hospital procurement and pharmaceutical use data (preferably electronic copies), including—
     ▪ Formulary list of all medicines
     ▪ Acquisition cost of each formulary item
     ▪ Quantity purchased in past 12 months
     ▪ Acquisition cost and quantity purchased over past 12 months for each medicine in the following categories—
       — Nonsteroidal anti-inflammatory drugs
       — Third-generation cephalosporins

**Further Readings**


**Visual Aid Listing**

1. Title slide
2. Objectives
3. Outline
4. Key Definitions (1)
5. Key Definitions (2)
6. Introduction: Why DTCs Are Important
7. 30–60% of PHC Patients Receive Antibiotics
8. 6–90 % of Patients Receive Inappropriate Antibiotics in Teaching Hospitals
9. Variation in Outpatient Antibiotic Use in 26 European Countries in 2002
10. Treatment of ARI by Prescriber Type
11. Treatment of Diarrhea in Private and Public Sectors
12. Percentage Compliance with Clinical Guidelines over Time by Region
13. 5–50% of PHC Patients Receive Injections
14. Adverse Drug Reactions (ADRs)
15. Role of the DTC
16. Functions of a DTC
17. DTC Advisory Functions
18. Drug Policies and Procedures
19. Evaluating and Selecting Medicines for the Formulary
20. Identifying Medicine Use Problems (1)
21. Identifying Medicine Use Problems (2)
22. Promoting Interventions to Improve Pharmaceutical Use
23. Managing ADRs and Medication Errors
24. DTC: Structure and Organization (1)
25. DTC: Structure and Organization (2)
26. Antimicrobial Subcommittee
27. Infection Control Committee
28. Liaison between Committees
29. DTCs: Guiding Principles
30. Factors Critical to Success
31. Monitoring DTC Performance: Process Indicators
32. Monitoring DTC Performance: Impact and Outcome Indicators
33. Activity 1
34. Summary (1)
35. Summary (2)
36. Summary (3)
Organization of the Session

Total time: 2.5 hours

Session 1 introduces the whole course and the concept of DTCs. During the session, the trainer will need to learn about the participants’ DTCs to fully understand how to present this and other DTC sessions. Activity 1 is designed to obtain information about the DTCs in the participants’ home countries. This information can be used to tailor subsequent sessions to participants’ needs both in terms of content and level of detail.

Since this first session usually is taught immediately after the introduction of experts and perhaps an opening ceremony, it often gets cut short. Abridging this session is not a good idea because not only does it set the tone for the whole course, it is also an opportunity for the trainers to find out what experience participants have had with DTCs and what they expect from the course. Ideally, the session should be highly interactive; however, the degree of interaction will depend on the amount of time available.

First component: 30 minutes
VAs 1–6: Introduction

This component introduces DTCs and covers terminology and definitions. Ask the participants about their DTC experiences—what they are and what they do. Some participants do not have committees specifically called Drug and Therapeutic Committees, Pharmacy and Therapeutic Committees, or Medicines and Therapeutic Committees but do have a committee that manages the formulary or implements rational use of medicines programs. For example, in Laos and Cambodia such committees are called Technical Committees. Everyone should understand the functions of a DTC are what is important, not the title. Therefore, if their committees have different names but perform the functions of a DTC, they, in fact, have DTCs.

Second component: 15 minutes
VAs 7–14: Medicine Use Problems and the Need for a DTC

This component briefly reviews the different types and scale of medicine use problems and the consequences of inappropriate use. These slides clearly show the overuse of antimicrobials in respiratory tract infections and in the treatment of diarrhea. They also illustrate the lack of compliance with treatment guidelines in many countries. You can introduce the component by asking the participants what medicine use problems they have encountered in their own institutions.
Third component: 30 minutes  
VAs 15–23: Role and Functions of a DTC

This component explains the different functions of the DTC. Each of these functions will be discussed in greater detail in separate sessions later in the course. To make the session interactive and bring out important functions of the DTC, good questions to ask include the following—

- Who selects new medicines for the formulary and how?
- What interventions have your institutions used to promote rational use of medicines?
- Do you monitor ADRs?

Highlight the point that undertaking DTC activities is often difficult and conflicts of interest may arise, particularly concerning pharmaceutical selection for the formulary. Time control is very important in this component because active participant discussion can cause you to run over time.

Fourth component: 30 minutes  
VAs 24–32: Organization of a DTC

This component covers structure and organization of DTCs and issues of ethics and authority. Ask the participants, “In your health care setting, who is responsible for quality of care?”—it may be the hospital director, senior medical staff committee, or individual directors. Point out that a DTC needs authority to undertake many of its functions and that this authority must be given by the most senior body. Also emphasize that the DTC requires a strong chairperson and certain guiding principles and factors (VAs 30 and 31) for success. Point out that a DTC committee must work with other committees to undertake certain functions (e.g., with the Infection Control Committee when forming antimicrobial medicine policies).

Fifth component: 15–30 minutes  
VA 33: Activity

Ask the participants to fill out the questionnaire and collect it immediately afterward. Explain that these questionnaires will be analyzed to tailor the course to the needs of the participants and also to identify problems for a problem-solving group session (session 14, “Getting Started”). If you have enough time, hold a plenary discussion. Start by asking again who has a DTC and who does not. Then ask—

- One or two people who have DTCs to state what their DTCs have achieved and what the difficulties have been.
- One or two people who do not have DTCs how formulary lists are decided and who undertakes rational medicine use programs.

The questionnaire will have sensitized participants to important DTC functions. The resulting discussion will help participants and facilitators see the differences in DTCs that currently exist in other countries.
Sixth component: 5–15 minutes
VA 34–36: Summary

Summarize the key points of the session.