AIM
Gather complementary perceptions of current overall global drug teaching to physician by pharmacists in hospital settings
⇒ To improve and rethink this crucial activity

CONTEXTE
Healthcare workers must be long-life learners. Hospital pharmacists should participate in their training. As Swiss pharmacists are only rarely in wards, physicians must be knowledgeable drug experts to ensure their appropriate, safe and efficient use.

METHODS
2 mirror surveys (length = 1 month; 1 reminder) were emailed to a closed sample of participants working in Swiss hospitals where the Medical Director/Chief-Pharmacist had allowed the study:
• Survey 1: Physicians currently working in French-speaking hospitals
• Survey 2: French-speaking hospital pharmacists

RESULTS
14/18 Medical Directors and 16/16 Chief-Pharmacists gave permission for the study. 244 (11%) physicians answered survey 1 and 115 (74%) pharmacists answered survey 2.

CONCLUSIONS
• Training by pharmacists in hospital settings is a major expectation of physicians, and currently underestimated by pharmacists. A
• Pharmacists think that they offer more to physicians’ training than physicians do. A, B
• Training is often carried out implicitly, throughout activities with various other aims, and lacks definition. It needs to be better defined and formalized C: How and when training occurs B, choice of training topics D, preferred pedagogical forms E, etc.
• Many divergences between pharmacist and physicians seem to exist where training is concerned (survey 1 vs 2). This may reflect a true divergence of opinions, or be an illustration of the lack of definition and formalization of this pharmaceutical activity.
• Although 65% physicians report having acquired knowledge thanks to hospital pharmacists A, no data is available to confirm the actual impact of most pharmaceutical benefits on physicians’ knowledge.

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REFERENCES