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3. DALYs and QALYs (V1) COMPREHENSIVE PHARMACY  
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This report is based on an exhaustive review of the published literature on the definitions, measurements, epidemiology, economics and interventions applied to nine chronic conditions and risk factors.

Written by renowned wound care experts Sharon Baranoski and Elizabeth Ayello, in collaboration with



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an interdisciplinary team of experts, this handbook covers all aspects of wound assessment, treatment, and care.

Pharmaceutical Medicine and Translational Clinical Research covers clinical testing of medicines and the translation of pharmaceutical drug research into new medicines, also focusing on the need to understand the safety profile of medicine and the benefit-risk balance. Pharmacoeconomics and the social impact of healthcare on patients and public health are also featured. It is written in a clear and straightforward manner to enable rapid review and assimilation of complex information and contains reader-friendly

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features. As a greater understanding of these aspects is critical for students in the areas of pharmaceutical medicine, clinical research, pharmacology and pharmacy, as well as professionals working in the pharmaceutical industry, this book is an ideal resource. Includes detailed coverage of current trends and key topics in pharmaceutical medicine, including biosimilars, biobetters, super generics, and Provides a comprehensive look at current and important aspects of the science and regulation of drug and biologics discovery

Clinical trials are an important part of medicine and healthcare today, deciding which treatments we use

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to treat patients. Anyone involved in healthcare today must know the basics of running and interpreting clinical trial data. Written in an easy-to-understand style by authors who have considerable expertise and experience in both academia and industry, Principles and Practice of Clinical Trial Medicine covers all of the basics of clinical trials, from legal and ethical issues to statistics, to patient recruitment and reporting results. Jargon-free writing style enables those with less experience to run their own clinical trials and interpret data Book contains an ideal mix of theory and practice so researchers will understand both the rationale and logistics to clinical trial medicine Expert authorship whose experience includes running clinical

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trials in an academic as well as industry settings  
Numerous illustrations reinforce and elucidate key  
concepts and add to the book's overall pedagogy

Clinical Pharmacy Education, Practice and Research offers readers a solid foundation in clinical pharmacy and related sciences through contributions by 83 leading experts in the field from 25 countries. This book stresses educational approaches that empower pharmacists with patient care and research competencies. The learning objectives and writing style of the book focus on clarifying the concepts comprehensively for a pharmacist, from regular patient counseling to pharmacogenomics practice. It

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covers all interesting topics a pharmacist should know. This book serves as a basis to standardize and coordinate learning to practice, explaining basics and using self-learning strategies through online resources or other advanced texts. With an educational approach, it guides pharmacy students and pharmacists to learn quickly and apply. Clinical Pharmacy Education, Practice and Research provides an essential foundation for pharmacy students and pharmacists globally. Covers the core information needed for pharmacy practice courses Includes multiple case studies and practical situations with 70% focused on practical clinical pharmacology knowledge Designed for educational settings, but also

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useful as a refresher for advanced students and researchers

This book contains the summaries of the "Innovation in Pharmacy: Advances and Perspectives" that took place in Salamanca (Spain) in September 2018. The early science of chemistry and microbiology were the source of most drugs until the revolution of genetic engineering in the mid 1970s. Then biotechnology made available novel protein agents such as interferons, blood factors and monoclonal antibodies that have changed the modern pharmacy. Over the past year, a new pharmacy of oligonucleotides has emerged from the science of gene expression such as

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RNA splicing and RNA interference. The ability to design therapeutic agents from genomic sequences will transform treatment for many diseases. The science that created this advance and its future promise will be discussed. Phillip Allen Sharp is an American geneticist and molecular biologist who co-discovered RNA splicing. He shared the 1993 Nobel Prize in Physiology or Medicine with Richard J. Roberts for “the discovery that genes in eukaryotes are not contiguous strings but contain introns, and that the splicing of messenger RNA to delete those introns can occur in different ways, yielding different proteins from the same DNA sequence. He works in Institute Professor Koch Institute for Integrative Cancer

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Research, Massachusetts Institute of Technology (MIT), Cambridge, MA, US. Este libro recoge los resúmenes de la «Innovation in Pharmacy: Advances and Perspectives» que tuvo lugar en Salamanca (España) en septiembre de 2018. La ciencia primitiva de la química y la microbiología fue la fuente de la mayoría de las drogas hasta la revolución de la ingeniería genética a mediados de la década de 1970. Luego, la biotecnología puso a disposición agentes proteínicos novedosos como interferones, factores sanguíneos y anticuerpos monoclonales que han cambiado la farmacia moderna. Durante el año pasado, surgió una nueva farmacia de oligonucleótidos a partir de la ciencia de la expresión



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génica, como el empalme de ARN y la interferencia de ARN. La capacidad de diseñar agentes terapéuticos a partir de secuencias genómicas transformará el tratamiento de muchas enfermedades. La ciencia que creó este avance y su promesa futura será discutida. Phillip Allen Sharp es un genetista y biólogo molecular estadounidense que co-descubrió el empalme de ARN. Compartió el Premio Nobel de 1993 en Fisiología o Medicina con Richard J. Roberts por "el descubrimiento de que los genes en eucariotas no son cadenas contiguas, sino que contienen intrones, y que el empalme del ARN mensajero para eliminar esos intrones puede ocurrir de diferentes maneras, produciendo diferentes proteínas de la misma

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secuencia de ADN. Trabaja en el Instituto Profesor Koch Institute for Integrative Cancer Research, Instituto Tecnológico de Massachusetts (MIT), Cambridge, MA, EE. UU.

Hepatitis B and C cause most cases of hepatitis in the United States and the world. The two diseases account for about a million deaths a year and 78 percent of world's hepatocellular carcinoma and more than half of all fatal cirrhosis. In 2013 viral hepatitis, of which hepatitis B virus (HBV) and hepatitis C virus (HCV) are the most common types, surpassed HIV and AIDS to become the seventh leading cause of death worldwide. The world now has the tools to prevent

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hepatitis B and cure hepatitis C. Perfect vaccination could eradicate HBV, but it would take two generations at least. In the meantime, there is no cure for the millions of people already infected. Conversely, there is no vaccine for HCV, but new direct-acting antivirals can cure 95 percent of chronic infections, though these drugs are unlikely to reach all chronically-infected people anytime soon. This report, the first of two, examines the feasibility of hepatitis B and C elimination in the United States and identifies critical success factors. The phase two report will outline a strategy for meeting the elimination goals discussed in this report.

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The health care system in Canada is much-touted in the international sphere, but often overlooked when it comes to an examination of its actual administration and regulation. Health Systems in Transition: Canada provides an objective description and analysis of the public, private, and mixed components that make up health care in Canada today. Published in co-operation with the World Health Organization Regional Office for Europe on behalf of the European Observatory on Health Systems and Policies, Gregory P. Marchildon's study offers a statistical and visual description of the many facets of Canadian health care financing, administration, and service delivery. This study's most distinctive feature is a comparative

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description and analysis. For international comparison, five other countries have been selected: The United States, Australia, the United Kingdom, France, and Sweden. Because public health care administration and delivery is highly decentralized in Canada, Marchildon also analyzes the important health status and health care features within Canada by province and territory, and describes in some detail the unique constitutional, jurisdictional, and financial features of the Canadian system. Balancing careful assessment, summary, and illustration, *Health Systems in Transition: Canada* is a thorough and illuminating look at one of the nation's most complex institutions.

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This report presents the recommendations of the WHO Expert Committee responsible for updating the WHO Model List of Essential Medicines. The first part contains a progress report on the new procedures for updating the Model List and the development of the WHO Essential Medicines Library. It continues with a section on changes made in revising the Model List followed by a review of some sections such as hypertensive medicines and fast track procedures for deleting items. Annexes include the 13th version of the Model List and items on the list sorted according to their 5-level Anatomical Therapeutic Chemical classification codes.

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Since its publication in 1987, *Methods for the economic evaluation of health care programmes* has become the standard textbook in this field world-wide. Over the past ten years, the field of economic evaluation in health care has expanded considerably, with a rapid rise in the number of published studies, and wider recognition of their use in health care decision-making. Developments in economic evaluation have also led to the publication of several guidelines for study methodology, most recently those proposed by the United States Public Health Services Panel. The new edition of *Methods for the economic evaluation of health care programmes*

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follows the same basic structure as the first edition. The key methodological principles are outlined using a critical appraisal checklist that can be applied to any published study. The methodological features of the basic forms of analysis (cost analysis, cost-effectiveness analysis, cost-utility analysis, and cost-benefit analysis) are then explained in more detail. The book has been greatly revised and enlarged, especially with respect to cost-utility and cost-benefit analysis, where major methodological developments have taken place. New to this edition are chapters on collecting and analysing data, and presenting and using economic evaluation results. The new edition will be required reading for anyone commissioning,



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undertaking, or using economic evaluations in health care, and will be popular with health service professionals, health economists, and health-care decision makers. Reviews of the first edition: 'An important contribution to studies on the economic evaluation of medical care...' (British Medical Journal) 'This is essential reading. Only if all managers are aware of the powers of economic techniques will they be used sensibly' (The Health Service Journal (UK)) 'The methodological chapters on cost analysis and cost utility analysis are gems... should become the standard text on the subject at the intermediate level at which it is aimed.' (Medical Decision Making) 'It leaves nothing important in economic evaluation

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