GIRP

the vital link in healthcare

ANNUAL REPORT 2014•15

QUALITY • EXCELLENCE • SAFETY

ANNUAL REPORT 2014•15

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STEADY VALUES IN AN EVOLVING WORLD

Whatever else may be changing in Europe's health systems, one thing at least remains certain: the medicines that come out of a factory are of no use unless they can reach patients - safely, and in perfect condition. And this is why we, wholesalers, are still an essential element in the healthcare landscape. The full-line pharmaceutical wholesalers that we represent in GIRP are a cornerstone of health systems in delivering value to patients.

But some of the changes are definitely impacting wholesalers as much as other components of the supply chain. The continuous pressure for price reductions and other cost-containment measures are squeezing the margins that have been the lifeblood of wholesalers. Ever resourceful, wholesalers have responded by increasing efficiency in our existing services, and by developing other types of services – generating revenue with innovative offerings to manufacturers, pharmacists and patients.

This shift is more than commercial opportunism. It reflects our deeper realisation that the pharmaceutical industry is an important client, and that the wholesale and manufacturing sectors working together can create constructive and valuable partnerships that pay dividends all round.

It also reflects our recognition that there are under-exploited synergies with pharmacies too, particularly as pharmacies themselves begin to move beyond the classic client profile and introduce patient-oriented services. Here too, we, in the wholesale sector, can collaborate constructively in support.

GIRP too continues to evolve, in line with the evolution of our membership. We offer a growing range of platforms for delivering service to our members, and for strengthening links between wholesalers and other supply chain partners in the interest of patients.

The legislative context also continues to evolve, and our work in GIRP is of increasing importance in arguing for regulation that is proportionate and that will contribute to, rather than hinder, the delivery of patient benefit. We have been engaged in intensive discussions with EU authorities over the implementing rules for the Falsified Medicines Directive, and over new rules for distribution of medical devices. And we have played a central role in creating the cross-sector consortium to meet the obligations created by the falsified medicines rules. We were one of the signatories, in February 2015, to the founding of an organisation to systemise the required verification procedures, and we will continue to ensure that GIRP members have a prominent and clear voice as the new rules come into force.

This annual report highlights some of the key achievements - and key challenges - of the year that has passed. It also demonstrates how we in GIRP, and our members, are increasingly well-equipped to take on the challenges of the years ahead.

A YEAR OF PATIENT PROTECTION:
2014 / 2015 IN REVIEW

Our members are more than merely conveyor belts and delivery vans. The "raison d'être" is of course to ensure medicines get from the manufacturer to the pharmacist. But the fundamental consideration in everything our members do is protection of the patient. That is why they operate to such demanding standards - in terms both of meeting legislative obligations and of their own attachment to professionalism. Much of our activities during the year has been linked to protecting patients - and particularly through a range of actions geared to ensuring that the medicines that patients receive are genuine.

Falsified medicines are a public health threat as they put patients and the general public at risk. If patients are exposed to fake medicines, they will have no way of knowing in advance - so the responsibility for protecting patients lies with the operators in the supply chain, and with the public authorities. Without that care, patients may believe they are receiving genuine treatment when they are in fact getting potentially dangerous products that could increase resistance to real treatments, and cause further illness, disability or even death. Falsified medicines undermine patients' trust in health systems, their governments, health care providers and manufacturers of genuine medicines. 2014 has seen numerous examples of action taken by the authorities and by the supply chain to provide attention for the ultimate benefit of the patient.

SEEKING IMPLEMENTATION THAT MAKES SENSE

The European Commission has been working on the Delegated Act that will provide detailed implementation instructions for the EU's new falsified medicine rules. At GIRP, we have been lobbying to ensure the best possible outcome on wholesaler requirements from the Delegated Act. Effective and efficient detailed rules on risk based checking of the medicine packs will ensure wholesalers play their full part in protecting patients.

Among the issues to be resolved by the Delegated Act are the options that will be acceptable for the unique identifier that must be affixed to each product, for access to repository systems containing product data, and for verification procedures of the safety features products will carry, as well as the definition of the products that will have to carry the safety features.

To maximise efficiency and minimise unnecessary tasks, we have been pressing for a risk-based approach to scanning of products that bear the safety features. Wholesalers' obligations should be targeted. They should verify the authenticity of the unique identifier of medicines that have been returned from pharmacies, other wholesalers, or other authorised outlets and professionals. But there should be no requirement for systematic verification of all products received: this would be an unnecessary duplication when supplies come from duly authorised sources such as the manufacturers or their mandated distributor (pre-wholesaler).

In line with this logic, we have been arguing that wholesalers should not be required to conduct verification of medicines acquired from pre-wholesalers - which in many member states are the intermediary between manufacturers and wholesalers. Without this exemption, wholesalers could be obliged to scan individually as much as 90% of their medicines in some countries. However, to ensure security, wholesalers and pharmacies and all pre-wholesalers authorised by pharmaceutical manufacturers should be listed in the national-level repositories.

FIGHTING COUNTERFEITING

In parallel to the preparations for complying with the EU's falsified medicines rules, we signed up in April 2014 to a European Commission Memorandum of Understanding on the sale of counterfeit goods via the Internet.

We also joined the Alliance for Safe Online Pharmacy EU, a coalition of patient groups, companies, organisations and individuals campaigning to make the internet a safer place to obtain medicines where it is legal to do so.

FIGHT THE FAKES

SPEAK UP ABOUT FAKE MEDICINES

And we joined the Fight the Fakes campaign, which is supported by healthcare professionals, disease- and product-specific organizations, research institutes, pharmacists, and the research-based pharmaceutical industry. Fight the Fakes partners are engaged in the

ASOP EU

work of the WHO Member States Mechanism on substandard / spurious / falsely-labelled / falsified / counterfeit medical products.

Tackling fake medicines requires strong policies, legislation and penalties for those producing fake products. Robust coordination among international organisations is vital to ensure this problem is correctly tackled.

NEW EU RULES ON VETERINARY MEDICINES

In September 2014 the European Commission proposed new rules on veterinary medicinal products and medicated feed, to improve the health and wellbeing of animals, to tackle antimicrobial resistance in the EU, and to foster innovation. Our members will come under new obligations as a result, since the existing obligation to record batch numbers on livestock products is to be extended to all veterinary medicinal products. We have pointed out that batch numbers will have to be available in machine-readable form on packaging as a prerequisite for wholesale distributors to meet this obligation.

FROM ESM TO EMVO

A major element in assuring patient integrity is the work to put into effect the EU's new and upcoming rules on falsified medicines. The historic common venture forged for this purpose among partners in the supply chain moved towards a new and concrete shape in 2014. Already we, in GIRP, have been instrumental in the development of the European Stakeholder Model (ESM), in which European pharmacists, branded and generic medicine manufacturers and parallel distributors are working together on a stakeholder-led approach to putting the new rules into effect. The stakeholder-led system is designed to provide a guarantee that no medicine would be dispensed anywhere in Europe without a prior check of its authenticity.

In February 2015, we became one of the founding members of the governing body of the European Medicines Verification Organisation (EMVO), the governance body set up by the partners - PGEU (the European pharmacist grouping), GIRP (the European pharmaceutical wholesalers association), EFPIA (the European research-based pharmaceutical industry association), EGA (the European generic pharmaceutical industry association) and EAEPC (European parallel distributors) - to make the system fully operational. EMVO will operate a central hub, which will provide the necessary link between national verification systems throughout Europe. The hub – in essence a sophisticated data exchange interface – will allow end-to-end verification of individual medicine packs from the point of manufacture right into pharmacies, where a check on each pack as it is dispensed will ensure that the medicine is genuine.

ESM
A MEDICINES VERIFICATION SYSTEM FOR EUROPE

The board of the European Medicines Verification Organisation consists of:

- **PRESIDENT:** John Chave (PGEU)
- **VICE-PRESIDENT:** Adrian van den Hoven (EGA)
- **TREASURER:** Monika Derecque-Pois (GIRP)
- **DIRECTOR GENERAL A.I.:** Andreas Walter (EFPIA)

GIRP'S 55th ANNUAL GENERAL MEETING
VIENNA, AUSTRIA

The headline title for our 55th Annual General Meeting and Conference in 2014 - 'Innovative solutions for health: shaping the future of European healthcare' - was fully justified by the outcome. The meeting, held in Vienna, that quintessentially European city at the heart of the continent, brought together senior political figures from European and national level, along with leading industry executives.

Tonio Borg, then European Commissioner for Health, spoke about 'Fostering an innovative agenda in healthcare', and the 'European Commission's views on how European policies and legislation can – and indeed do – support innovation in healthcare and how this area of work will be evolving in the future'. The meeting was honoured by the presence of then Austrian Health Minister Alois Stöger, who described wholesalers as 'very important partners in the supply of medicines to the population', adding that 'the supply readiness of full-line wholesalers is also an important element which helps to avoid supply shortages'. He expressed pride in Austria's system to prevent medicines shortages, in which 'all stakeholders - industry, manufacturers, pharmacies and distributors - work closely together'.

Per Troein and Doug Long from IMS Health provided an overview of European and international trends in the healthcare sector, and Per Båtelson, the Chairman of the Board at Karolinska University Hospital in Stockholm, discussed megatrends in healthcare.

A country-focused session hosted by our Austrian member, PHAGO, also featuring guests from the supply chain, examined the Austrian medicines supply chain and discussed current developments and future trends.

A session on how eHealth can improve the quality and safety of healthcare for patients featured an exclusive video message from Toomas Hendrik Ilves, the President of Estonia, a strong advocate of eHealth solutions, who spoke of the benefits that IT solutions can bring in patient-oriented healthcare. The discussion was pur-

Session on Building an innovative supply chain in an era of uncertainty – working together

sued by European Commission Director Paul Timmers and Dr. Clemens Martin Auer of Austria, and the positive message was underlined by success stories from wholesalers, manufacturers and pharmacists who had used innovative methods to support eHealth and mHealth.

Nick Haggar, the Head of Western Europe, Middle-East & Africa for Sandoz, and President of the European Generics Association, introduced a discussion on building an innovative supply chain in an era of uncertainty, with examples from his company's collaborations that help patients, pharmacies, health professionals and other healthcare providers to deliver superior care. Representatives of the research-based manufacturing industry, wholesalers and pharmacy organisations offered their views on creating sustainable partnerships along the supply chain.

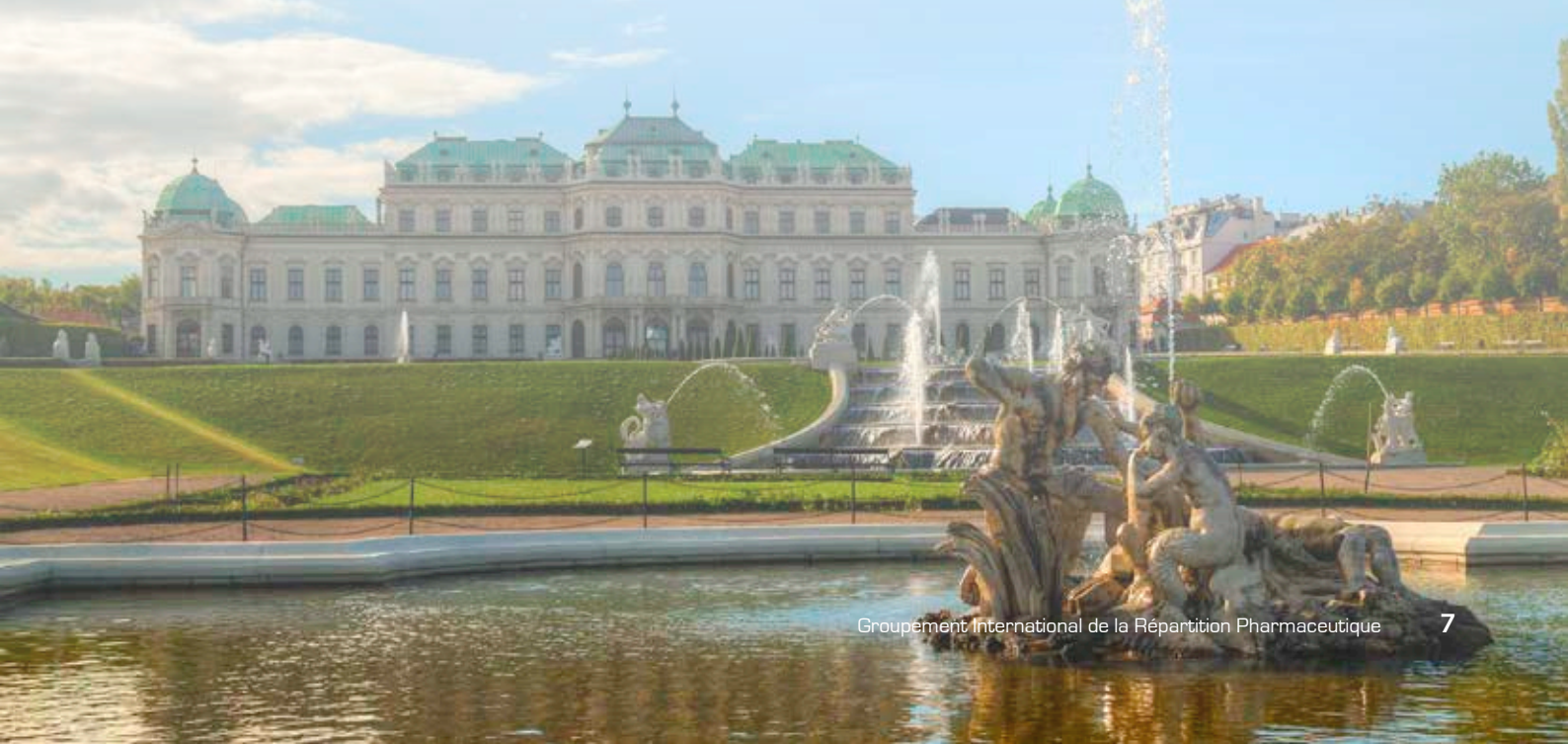
Former EU Commissioner for Health **Mr. Tonio Borg**, GIRP Director General **Ms. Monika Derecque-Pois**, former Austrian Health Minister **Mr. Alois Stöger**, and GIRP President **Mr. René Jenny**

The patient-centred focus of the meeting was completed with a keynote address from Dr. Andreas Penk, President of Oncology for Europe and Country Manager Germany for Pfizer, on 'How innovative partnerships in the EU foster patients access to cancer drugs', which he suggested might offer a model for other therapeutic areas.

Gala dinner at Palais Liechtenstein

GIRP President **Mr. René Jenny** and former Austrian Health Minister **Mr. Alois Stöger**

Former EU Commissioner for Health **Mr. Tonio Borg**



KEEPING THE SUPPLIES FLOWING

The central role of full-line wholesalers is to make sure that medicines can get from the companies that make them to the patients that need them. So anything that disrupts that process is a problem for wholesalers – and one of the problems that has still not been adequately solved in Europe is shortages of medicines. There are many reasons why shortages occur, and some of the difficulties could be resolved through closer collaboration among supply chain partners, governments and payers. At GIRP, we embrace every opportunity for increasing cooperation in the search for solutions.

Shortages can arise from manufacturing problems (such as interruptions in the supply of ingredients, many of which are now sourced from outside the EU), from commercial decisions (responding, for instance, to loss of profitability in the face of price reductions), from surges in demand (in the event of viral outbreaks, for example), from regulatory decisions or delays (relating to authorisation or pricing and reimbursement), or from a breakdown in the economics of the supply chain (such as major delays in payments). Shortages may also be caused by manufacturers setting supply quotas for markets that do not reflect market demand.

Whatever the reason, the impact on the patient in Europe is the same: a medicine is required, but is not available. For that reason, at GIRP we are encouraging greater efforts by all supply chain partner organisations to meet their responsibilities for maintaining adequate supplies. More can be achieved if there is enhanced dialogue among policy-makers, health authorities, the pharmaceutical industry, wholesalers, pharmacists, healthcare providers, payers and patients at national and European level.

GIRP BOAR

Mr. René Jenny
GIRP President
President, Pharmalog, Switzerland

Mr. Olivier Bronchain
GIRP Vice-President
General Manager, SECOF

Mr. Rui Carrington
Vice-President, GROQUIFAR, Portugal

Mr. David Cole
GIRP Vice-President
European Affairs Director, BAPW, United Kingdom

Mr. Emmanuel Déchin
Secretary General, CSRP, France

Dr. Heinrich Jacoby
GIRP Vice-President
Vice-President, PHAGO, Austria

Mr. Lutz Geilenkirchen
Managing Director, Pharma Privat

Mr. Oliver Windholz
GIRP Vice-President
CEO, PHOENIX Group

Mr. Eero Hautaniemi
GIRP Treasurer
CEO, Oriola KD

D MEMBERS

Mr. Marc Owen
Chairman of the Management Board, Celesio AG

Mr. Juan Ignacio Güenechea
Vice-President, COFARES

Mr. Giuseppe Scrofina
External Affairs Director, ADF, Italy

Mr. Wilfried Hollmann
Chairman of the Board, NOWEDA

Dr. Roger Sorel
Member of the Board, BG Pharma, Netherlands

Mr. Lothar Jenne
Member of the Executive Board, PHAGRO, Germany

Dr. Thomas Trümper
Chairman of the Supervisory Board, Alliance Healthcare DE

Mr. Arne Øverby
President, NAPW, Norway

Mr. Miguel Valdés
Secretary General, FEDIFAR, Spain

Mr. Eric Van Nueten
President, NVGV-ANGR, Belgium

MORE THAN JUST MEDICINES

The service that our members provide extends across medical devices as well as medicines. Our members purchase, store and supply the full assortment of medical devices and in-vitro diagnostics needed in a pharmacy, ranging from low-risk products such as bandages, syringes, thermometers, or examination gloves, to higher risk categories including pregnancy tests and diagnostic test kits.

In addition to the specific EU legislation governing distributors, our members will also be subject to the new legislation on medical devices now under discussion, and they have concerns over some of the obligations proposed. As currently framed, these obligations fall into areas outside the responsibility of distributors.

The new duties envisaged relate to requiring distributors to carry out checks that are properly the domain of health authorities, and that would imply serious disruption to the activities of wholesalers. Consequently, we have suggested some rewording that would meet our members' concerns without undermining the effect of the legislation.

Several of the legislative proposals would require distributors to interfere with the outer packaging of products - an activity that is restricted, under other legislation, to holders of manufacturers' authorisations (including importers), but that is strictly prohibited for wholesalers in the area of medicines.

In addition, making distributors responsible for systematic vigilance checks on other aspects of regulatory compliance by manufacturers and importers as proposed by the legislation would prejudice product integrity: opened products cannot be returned to saleable stock.

In any case, distributors are not equipped to perform such technical inspections. It is possible to sample outer packaging visually, to verify that products are carrying a unique identifier or a CE mark. But a wholesaler cannot verify that other partners in the supply chain have met their obligations in relation to particular requirements that apply only to them.

We have been explaining to MEPs and Member State representatives in the European Council what our members do, and why they see difficulties in the current proposals, and we are now seeking support from Member States to amend the draft legislation so that it reflects the activities of distributors better. We do not wish to prevent the introduction of obligations which are aimed at increasing the safety of the supply chain. But there are distinct roles for public authorities and for distributors, and the obligations imposed by legislation must be in relation to and proportionate to wholesalers' activities.

SEEKING LEGISLATION THAT WORKS WELL

Alongside playing our role in the creation of the European Medicines Verification Organisation (EMVO) *(see page 5)*, we have been continuing to argue that the legislation to counter the access of falsified medicines to the legal supply chain should be effective and efficient. One of the priorities has been to make the case with the EU institutions that the secondary legislation under the Falsified Medicines Directive – the so-called Delegated Act – promote high-performance wholesaling operations.

The final form of this legislation is expected to appear during 2015, and will stipulate the options for the unique identifier that must be affixed to each pack, for the data-base repositories that will hold these details, and for the methods of verification, as well as of the safety features and the products that will have to carry them. We have been urging proportionate requirements for the scanning of products bearing the safety features. In our view, the obligation should be risk-based rather than comprehensive, and should focus on returned medicines, or stocks from wholesalers that are not directly authorised by the manufacturer.

In September 2014, GIRP organised its second **Regional Meeting** in Vilnius, Lithuania.

The Regional Meeting aimed at offering a platform for GIRP members to exchange views on subjects that affect full-line wholesalers operating within the region. In total, more than 70 participants attended the 1-day conference in the Lithuanian capital. The first part of the meeting was centered on the current and future challenges of the pharmaceutical wholesale and retail markets for the Baltic states. The second topic covered was the Falsified Medicines Directive, its upcoming Delegated Act and the European Stakeholder Model. The multi-stakeholder session covered the implementation of the European Medicines Verification Project at the national level. This session focused on the impact of the Falsified Medicines Directive in terms of the new legal requirements concerning the coding and identification of medicinal products and how the system behind this new requirement is currently envisaged by the stakeholders. The three main IT providers for the National Medicines Verification Organisation (NMVO) have also presented their solutions to the attendees.

GOOD DISTRIBUTION PRACTICE GUIDELINES

The revised European Commission Guidelines for Good Distribution Practice, published at the end of 2013, are providing plenty of work for Member States, pharmaceutical wholesalers, and for us at GIRP. Member States have been updating and adapting their national legislation to match the new guidelines, but conditions differ from country to country - in terms of the legislative landscape and of specific circumstances. These all have to be taken into consideration, so the process is time-consuming, and countries are responding at different speeds.

In the countries where the guidelines have been implemented, some inspections have been carried out to verify wholesaler compliance. But there are divergences over interpretation between authorities and wholesalers, especially in relation to storage and transportation. In a bid to speed up the process, the European Commission has been gathering feedback and has published additional guidance on the implementation of the guidelines.

We are closely monitoring the process and keeping our members informed of country-specific developments. And with our members, we are working closely with the European Commission and Member States on clarification.

Also, the long-awaited guidelines GDP for active pharmaceutical ingredients (APIs) were published in 2015. The guidelines are more detailed and contains more stringent requirements than the draft. For instance, the requirements with regard to the quality assurance system of distributors of APIs demand the tracking (through recording batch numbers) and documentation of deviations and a CAPA (Corrective Action / Preventive Action) system.

The new requirements for batch-number recording are not - contrary to expectations - matched by any requirement on manufacturers to place the information on the packaging in suitable machine-readable format. Since this means that batch-number recording will have to be done manually, this will not only be slow and burdensome - it will also introduce the risk of unreliability.

OUR COMMITTEES

As the European meeting point for discussions of pharmaceutical wholesaling, we operate through a range of specialised committees and working groups that benefit from and reflect the expertise of our members.

2014 was a busy year for our committees. They met on 20 different occasions to discuss topics that included national implementation of the Good Distribution Practice guidelines, the Falsified Medicines Directive, the European Stakeholder Model and what to expect from the Delegated Act, legislation on medical devices and in vitro diagnostics, and EU health policy. They also drafted and updated our statistics and country reports, as well as an overview of the economic framework at national level. Our advisory councils focused on shaping our new industry membership category and on examples of patient services and programmes. In the area of patient compliance, our project groups looked at adherence to medical plans and contributed to four reports for the eHealth Stakeholder Group, a European Commission advisory body of which we are members.

COMMITTEES

- Economic and Social Affairs Committee
- Legal Affairs Committee
- Public Affairs and Policy Committee
- Technical Committee

ADVISORY COUNCILS

- Advisory Council Retail
- Advisory Council Supply Chain Solutions

PROJECT GROUPS

- eHealth
- Patient Compliance and Homecare

The **Directors of Associations** platform is a new network bringing together heads of our national associations, allowing them to exchange experience and share knowledge to boost their efficiency. The most recent meeting (co-chaired by Ms. Bernadette Sickendiek and Mr. Miguel Valdés, the directors of PHAGRO in Germany and FEDIFAR in Spain) took place on 12th September 2014 in Berlin, and discussions included working methods and structures of the national associations, increasing the impact of lobbying at national and European level, and how data collection can be valuable at national level. Heads of member national associations are looking forward to meeting next in London, in September 2015.

WIDENING GIRP'S REACH

Because pharmaceutical wholesalers know they are a link - a vital link - in a chain, they are acutely aware of the other partners in the supply of medicines. So it is unsurprising that we have now created a new class of membership that broadens our contact with our partners in the supply chain. This new category of members is designed specifically for pharmaceutical manufacturers. The aim is to strengthen collaboration with the pharmaceutical industry, making it possible to provide a more comprehensive view of the strategic issues that are shaping the future of healthcare provision.

In line with this "vital link" role, our members want to maximise the possibilities their unique position offers them to facilitate the sharing experiences among supply chain operators. With our central position in the chain, we can provide an unparalleled platform for developing partnerships that can provide new solutions with a patient-centric focus.

The new category of GIRP membership confers numerous benefits. It will allow representatives of the manufacturing industry to take part in our project committees, and to contribute to our working groups on patient adherence, e/mHealth and home care. They can also take part in our Advisory Council Supply Chain Solutions. The resulting extension of the healthcare policy network will provide insights into new partnership opportunities to jointly expand the pharmaceutical value chain.

Membership of GIRP also provides access to influential forums where public policy developments and best practices affecting the sector are debated. Bringing together manufacturers and distributors to explore their shared interests and common understanding will help improve the business environment for all.

The initiative is another aspect of the evolution of pharmaceutical full-line wholesalers, going beyond providing a full product range and extending to the provision of a full service range *(see page 18)*. The portfolio of high-value services that our members offer holds out the prospect of benefits for manufacturers, just as it does for pharmacists and other healthcare professionals. It brings benefits to patients through diverse offerings including logistic services/pre-wholesaling, market intelligence, product tracking, marketing services, quality and professional services.

Our new industry membership category has been an instant success. Several companies have already joined, and other manufacturers are expressing strong interest in joining.

GIRP MEMBERS ARE MORE THAN WHOLESALERS

The healthcare context is changing, and our members are alert to the opportunities and challenges that change presents. Pharmaceutical full-line wholesalers are expanding from providing a full product range to providing a full service range. Our members now offer a diverse portfolio of high-value services for manufacturers, pharmacists and other healthcare professionals, with the ultimate beneficiary being the patient.

LOGISTICS

state-of-the-art logistics and storage for manufacturers and highly specialised bulk deliveries of pharmaceutical, healthcare and consumer products to wholesalers, hospitals and community pharmacies.

- **Warehousing**
- **Transport**
- **Financial management**
- **Clinical trial logistics**

MARKET INTELLIGENCE

expert insight into market dynamics and data.

- **Real-time access**
- **Product data**
- **Sales reports**
- **Customised information**
- **Alerts to shortages**

PRODUCT TRACKING

track and trace services for products by order, by delivery, and live on vehicles, as well as stock status management and visibility of inventory, with serialization and aggregation from unit of sale through pallet level.

- **Serial number management**
- **Verification and aggregation**
- **Barcodes**
- **Satellite-tracking**

MARKETING SERVICES

market research, product pre-launch services, consumer-driven brand plans.

- **Mailings**
- **Database management**
- **Roll out of promotions**
- **PR profiling**
- **Awareness campaigns**

EMERGENCY SERVICES FOR PUBLIC HEALTH AUTHORITIES

support to manufacturers with sales resources and personnel, handling inquiries, complaints and adverse events.

- **National emergency stock**
- **Vaccine distribution**
- **Blood collection**
- **Crisis management**
- **Waste management**

QUALITY AND PROFESSIONAL SERVICES

support to manufacturers with sales resources and personnel, handling inquiries, complaints and adverse events.

- **Healthcare communicators**
- **Multilingual capabilities**
- **Overflow support**
- **Medical writing**
- **Pharmacovigilance**

GIRP

GIRP FULL MEMBERS

- **Austria: PHAGO** • Verband der Österreichischen Arzneimittelvollgroßhändler
- **Belgium: NVGV/ANGR** • Association Nationale des Grossistes - Répartiteurs en Spécialités Pharmaceutiques
- **Bulgaria: BATEL** • Bulgarian Association of Pharmaceutical Wholesalers
- **Croatia: PHOENIX Farmacija, Medika, Oktal Pharma**
- **Czech Republic: AVEL** • Asociace velkodistributorů léčiv/Association of Pharmaceutical Full-line Wholesalers
- **Denmark: MEGROS** • Foreningen af medecingrossister / Association of Pharmaceutical Wholesalers
- **Estonia: EHRL** • Estonian Association of Pharmaceutical Wholesalers
- **Finland: ATY** • APTEEKKITAVARATUKKUKAUPPIAAT r.y. / Association of Pharmaceutical Distributors
- **France: CSRP** • Chambre Syndicale de la Répartition Pharmaceutique
- **Germany: PHAGRO** • Bundesverband des pharmazeutischen Grosshandels
- **Greece: PAPW** • Panhellenic Association of Pharmaceutical Wholesalers and Qualified Pharmacists
- **Hungary: HAPW** • Hungarian Association of Pharmaceutical Wholesalers
- **Iceland: Distica**
- **Ireland: PDF** • Pharmaceutical Distributors Federation
- **Italy: ADF** • Associazione Distributori Farmaceutici
- **Latvia: LZLA** • Latvian Association of Pharmaceutical Wholesalers
- **Lithuania: LAPW** • Lithuanian Association of Pharmaceutical Wholesalers
- **Luxembourg:** Groupement des Grossistes Répartiteurs Luxembourgeois en Produits Pharmaceutiques
- **Netherlands: BG Pharma**
- **Norway: NAPW** • Norwegian Association of Pharmaceutical Wholesalers
- **Poland: Pelion**
- **Portugal: GROQUIFAR** • Associação de Grossistas de Produtos Químicos e Farmacêuticos
- **Romania: ADRFR** • Asociatia Distribuitorilor si Retailerilor Farmaceutici din Romania
- **Serbia: Serbian Chamber of Commerce** • Group of Pharmaceutical Wholesalers
- **Slovenia: TZS** • TZS TRGOVINSKA ZBORNICA SLOVENIJE
- **Slovakia: ADL** • Asociácia Dodávatel ov Liekov A Zdravotníckych Pomôcok
- **Spain: FEDIFAR** • Federación Nacional de Asociaciones de Mayoristas Distribuidores de Especialidades Farmacéuticas y Productos Parafarmacéuticas
- **Sweden: LDF** • Läkemedelsdistributörsföreningen/Swedish Association of Pharmaceutical Wholesalers
- **Switzerland: Pharmalog** • Swiss pharma logistics association
- **United Kingdom: BAPW** • British Association of Pharmaceutical Wholesalers

FULL MEMBER COMPANIES

Alliance Healthcare
celesio
NOWEDA
GRUPO COFARES
PHARMA PRIVAT
Näher dran. Weiter vorn.
Oriola KD
PHOENIX group
SECOF

ASSOCIATED MEMBERS

FARMALOGIST
KATPEH
EURAPHARMA
TEKB

SUPPORTING MEMBERS

imshealth
INTELLIGENCE APPLIED.
INSIGHT HEALTH
KNAPP
SSI SCHÄFER
CAPPI
COMPETENCES ASSOCIÉES EN PLASTURGIE ET PROCESS INDUSTRIELS
SENSITECH
SUPPLY CHAIN VISIBILITY

GIRP

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