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I have recently returned from attending two international conferences in China: the International Conference of Pharmacogenetics (IUPHAR & PRACP) held in Changsha from 28<sup>th</sup>-30<sup>th</sup> of June; and the 15<sup>th</sup> World Congress of Pharmacology (IUPHAR) 2006 held in Beijing from 2<sup>nd</sup>-7<sup>th</sup> of July.

The International Conference on Pharmacogenetics was a landmark conference held as a satellite meeting to IUPHAR which focussed largely on the translation of pharmacogenomics from research to the clinic. As such topics presented by the 80 invited speakers highlighted the problems faced during the process of individualising medicines including: racial / ethnic diversity and admixture; variability in the influence of pharmacogenomics on inter-individual differences in drug response, ie addressing the question of for which drugs is patient genetics important for determining response and perhaps more importantly toxicity; and new technologies that can be utilised at the drug development / clinical trial levels to determine the potential impact of genetics on drug response. Also of interest was the presentation from the regulatory agency perspective (Lawrence Lesko) which highlighted the impact of pharmacogenomic research on drug labelling and prescribing practices, such that genetic testing is now recommended on the product information sheet prior to the administration of some drugs. This conference gave a well-balanced summary of the strengths and also the weaknesses that need to be addressed as we move into the future of pharmacogenomics and individualised medicine in order to improve clinical outcomes.

The World Congress of Pharmacology (IUPHAR) 2006 was a much larger meeting with many distinguished international speakers discussing many varied aspects of pharmacology. As with any large meeting, many sessions contained presentations that if not closely related to, covered issues of importance for my research. These included plenary lectures and symposium on: transporters and adverse effects of drugs; pharmacogenomics; addiction; novel aspects of cytochrome P450; drug glucuronidation; ethnicity, genetics and tailored pharmacotherapy; and computational and in vitro approaches for predicting drug metabolism.

At both conferences I presented our work investigating the influence of donor and recipient *ABCB1* genetic variability on renal transplant outcomes in a cohort of patients from the Queen Elizabeth Hospital. It was a perfect opportunity to speak with other researchers investigating the genetic variability of drug transporter genes and allowed discussion of our work in comparison to previous studies and about problems in our area, especially the need to combine single variant information into haplotypes in order to perform meaningful analysis. In particular Prof Weinshilboum (USA), Prof Eichelbaum (Germany), Dr Eap (Switzerland) and Dr Verstuyft (France) provided valuable feedback and future considerations which will lead to improvement of our ongoing research in this patient cohort.

My sincere thanks goes to ASCEPT for the financial support that allowed me the opportunity to travel to China for these conferences.