

21 The pharmaceutical industry and the profession

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Prescribing
Research
Summary

Doctors interact with the pharmaceutical industry in a number of ways. The most obvious and most frequent is when a doctor writes a prescription for a drug. Doctors are also involved in the design and execution of clinical drug trials for pharmaceutical companies, with research in facilities funded by the industry, or as recipients of benefits of one kind or another which enables them to work in a particular area. They also act as advisers to the industry.

Prescribing

The process of considering which chemotherapeutic agent to use precedes the writing of a prescription and involves a synthesis in the mind of the doctor of what is known about the diagnosis, the natural history of the disease, the available options for altering this natural history to the benefit of the patient, and finally the choice of an appropriate drug, or nondrug therapy. It is this last step that the pharmaceutical industry has an intense interest in influencing. Pharmaceutical companies are commercial entities and need to stay in business. To do this they need to sell their products. In the most affluent countries in the world prescribing pharmaceuticals is tightly regulated and the “sales” are determined almost exclusively by the medical profession. Commercial realities dictate that a pharmaceutical company will do considerable work to persuade doctors that

- a chemotherapeutic agent is superior to nondrug therapies, and
- a particular agent (theirs) is superior to all other agents.

Changing doctors' prescribing behaviour is not easy. Pharmaceutical companies' marketing research has shown them that a great deal of effort and expenditure on a number of fronts and sustained over time is necessary to effect change. Thus there are advertisements in medical journals, and other publications, direct to doctor mailings, incentives offered to doctors to prescribe specific agents, easy access offered to GPs to specialists who will endorse prescriptions for restricted drugs, gifts to doctors, detailing by company representatives, sponsored medical education sessions, and sponsorship of medical conferences. If a doctor fails to manage successfully the inherent conflicts of interest which arise from these interactions with the industry, then patient care can be compromised.

This will occur if

- He allows his relationship with a pharmaceutical company to influence his prescribing when there is evidence that the *pharmaceutical company influenced prescription* is not the best treatment for the patient's condition, or
- He becomes nondiscriminating about the quality of the clinical trial data the pharmaceutical company has presented to him, and
- He allows poor quality trial data to influence his prescribing adversely.
- Many doctors claim their relationships with the pharmaceutical industry do not influence their prescribing at all. However, there is a well recognised risk, that relationships between health care professionals and industry can lead to confusion about goals and clouding of judgment in particular settings about what is an appropriate course of action (see the Council's statement "Responsibilities in any relationships between doctors and health related commercial organisations", 2003).

There is evidence that both health care decision making and the conduct of research are profoundly affected by all the influences, in ways that are not beneficial to the wider community of patients. There are a number of objective studies that show that the pharmaceutical industry is successful in influencing individual doctor's prescribing. In addition, pharmaceutical companies themselves track sales figures (prescriptions written) regionally. From these data most pharmaceutical companies can demonstrate the effectiveness of a particular sales representative over other sales representatives, and the relationship between sales (prescriptions written) and the currency of the most recent visit by a representative to a group of medical practices in a particular location.

Drug promotion is a sophisticated applied science with the intention of overtly and covertly altering doctors' thinking. Considering the level of investment and cost it takes for a new drug to be brought to market, it is not surprising that pharmaceutical companies promote their products with the most effective marketing tools available. Doctors need to recognise that, like other consumers, they are susceptible to marketing and keep their personal relationships with the industry at an appropriate distance so that patient care is never compromised.

Research

This is a more complex issue because

- Doctors who are researchers can have a direct financial interest in the design or the conduct or the outcome of a clinical trial
- Individual researchers are increasingly becoming involved with the commercialisation of their own work
- Individual researchers sometimes retain the intellectual property to their own work
- Financial compensation for doctors who are investigators in clinical trials sometimes appears to be at a level that is not commensurate with the work performed
- Researchers sometimes stand to gain in nonprofit ways from the results of clinical drug trials

- Researchers sometimes have to make a decision about whether to publish unfavorable results, as a result of which future financial rewards, and future employment with the pharmaceutical company may be lost.

Doctors who are researchers should be aware that, unless these risks are managed properly, then the results of their research will be seen as neither reliable nor impartial, and there will be a suspicion that patient care will be compromised by the implementation of the results of the research. At the trial design stage, the doctor must consider whether the proposed study sets out to answer questions which are sufficiently important to justify the study, whether the risks to which the patients are exposed are reasonable, considering the likely benefits, whether the study design is appropriate, and whether patients will be able to consent freely with appropriate levels of informed consent.

When a doctor is involved in research he must declare apparent conflicts of interest to the ethics committee which is involved in approving the trial. He must allow others to determine whether the apparent conflicts are potential or real. He must take steps to separate the conflicts by withdrawing from or curtailing certain activities and by delegating these functions to others. He must communicate these decisions to fellow researchers and to the participants in the research. He should not take part in research when the sponsoring company controls the release of results.

Summary

In spite of widely held notions by doctors of immunity to their influences, the activities of the pharmaceutical industry do affect the behaviour of doctors in ways that are not always conducive to providing the best patient care. Unless these risks are managed appropriately doctors will be breaching ethical and sometimes legal boundaries. The Health and Disability Commissioner's Code of patient rights makes specific reference to patients who are subject to research (Right 9). When considering whether or not to interact with the pharmaceutical industry doctors should ask themselves on each occasion "Might there arise a conflict of interest in this activity which could compromise my ability to provide impartial and best quality patient care?"

References

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