Drug promotion

what we know, what we have yet to learn

Reviews of materials in the WHO/HAI database on drug promotion

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Acknowledgements

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Particular thanks are due to Margaret Ewen (HAI Europe), and Richard Laing and Hans Hogerzeil (WHO Department of Essential Drugs and Medicines Policy) for their contributions to setting up the database and to this manual. Zulham Hamdan at the WHO Collaborating Centre at Universiti Sains Malaysia designed and maintains the web site.

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Drug Promotion Database URL: http://www.drugpromo.info/

Contents

Execu	tive summaryvi	i
Introd	uction	1
Back	ground to the project	2
Dev	elopment of the drug promotion database	3
	base entries	
Pote	ntial data users	4
Revi	ews of database material	5
Metl	nodology	6
Revie	w 1. What attitudes do professional and lay people have to promotion?	7
1.1	Attitudes do not necessarily match behaviour	7
1.2	Studies of the prevalence of different attitudes to promotion (excluding direct-to consumer advertising)	
1.3	Do trainers and trainees think that sales representatives should be banned during medical training?	$\overline{}$
1.4	Do doctors think they have enough training to deal with sales representatives?	
1.5	Do doctors think that sales representatives have a valuable role in medical education?	9
1.6	What do health professionals think about the quality of the information provided	
	by sales representatives and advertisements about drugs?	
1.7	What do other groups of people think of promotional information? 1	
1.8	What are doctors' views of pharmaceutical company support of conferences and	
	speakers?1	2
1.9	Do trainee doctors plan to see sales representatives in their future practice? 1	2
1.10	What are professionals' and patients' attitudes to the appropriateness of gifts?. 1	3
1.11	Do health professionals feel that discussions with sales representatives affect	
	prescribing?1	4
1.12	Do people feel that accepting gifts influences prescribing?	5
1.13	Ethics and promotion	6
1.14	Attitudes to direct-to-consumer advertising of prescription drugs1	7
1.15	Studies of differences in attitudes to promotion (excluding DTCA)2	0
Sum	mary of conclusions2	2
Dire	ctions for future research2	3
Revie	w 2. What impact does pharmaceutical promotion have on attitudes and	
know	ledge? 2	5
2.1	Reported use of promotion as a source of drug information2	6
2.2	Reported use of promotion as a source of information in adopting new medicines2	.7
2.3	Impact of promotion on self-reported attitudes and knowledge2	8
2.4	Research designs that aim to avoid the limitations of self-report data3	0
	mary of conclusions3	
Dire	ctions for future research3	2

Revie	w 3. What impact does pharmaceutical promotion have on behaviour? .	33
3.1	Impact of promotion on individual prescribing practices	.33
3.2	Self-reported reasons for prescribing changes	.34
3.3	Prescribing by those who rely on commercial information	.36
3.4	Prescribing and exposure to promotion	.38
3.5	Exploring the impact of samples on prescribing	.41
Sum	mary	.41
3.6	Impact of promotion on overall sales	
3.7	Impact of promotion and industry funding on requests for formulary additions	s 45
3.8	DTCA and consumers' decisions	.46
3.9	Impact of sponsorship on content of continuing medical education courses	.48
3.10	Impact of industry funding on research	.48
3.11	Does funding affect the research agenda?	.54
3.12	Do authors reveal funding sources?	.54
Sum	mary of conclusions	.54
	w 4. What interventions have been tried to counter promotional ies, and with what results?	57
4.1	Guidelines, codes and regulations for printed and broadcast material	
4.2.	The 'Fair balance' requirement	
4.3	Guidelines for sales representatives	
4.4	Guidelines for post-marketing surveillance	
4.5	Guidelines on conflict of interest in research	
4.6	Guidelines for package inserts and compendia	
4.7	Guidelines about gifts	
4.8	Guidelines for trainee doctors and for hospitals	
4.9	Knowledge of these guidelines and their effect on attitudes	
4.10	Education about promotion	
4.11	Monitoring/countering promotion	
	Research as an intervention	
	mary of conclusions	
	ctions for future research	
Dift		•,,
Final o	conclusions	73
	ences	

Executive summary

Pharmaceutical manufacturers spend vast sums of money on promotion, including sales representatives, samples, advertisements in broadcast and print media, and sponsorship of educational events and conferences. In the USA alone, almost US\$21 billion was spent on promotion in 2002. In developing countries sales representatives are frequently the only source of drug information.

This report is part of a project on drug promotion being carried out by WHO and HAI Europe. This stage of the project involved collecting and analysing existing information on promotion. A database (http://www.drugpromo.info) including over 2700 journal articles, books and other material has been developed. Research studies from the database were analysed and these form the basis of this report.

What attitudes do professional and lay people have to promotion?

Research suggests that doctors' attitudes to promotion vary, and do not necessarily match their behaviour. Their opinions differ on the value of sales representatives, on whether they should be banned during medical training, and on whether doctors are adequately trained to interact with them. Most doctors think information from pharmaceutical companies is biased, but many think it is useful. Health professionals find small gifts from drug companies acceptable. Doctors who report relying on promotion tend to be older, and more likely to be general practitioners. Opinions about direct-to-consumer advertising of prescription medicines (DTCA) are mixed. Most companies, the advertising industry and the media favour it, while doctors generally oppose it. Consumers and patients are divided on the issue.

Studies on people's attitudes to promotion rely too much on quantitative surveys, on the use of convenient, accessible samples, and on describing the prevalence of attitudes rather than relationships between attitudes and other characteristics. Qualitative studies are needed in this area.

What impact does pharmaceutical promotion have on attitudes and knowledge?

Doctors themselves report that they often use promotion as a source of information about new drugs. Doctors in private practice, or who graduated long ago report the highest use of promotion as a source of drug information. Promotion influences attitudes more than doctors realise.

There is no research in the database on the impact of promotion on the attitudes of other groups, such as consumers, pharmacists, nurses or drug-store staff, all of whom are important decision-makers about medicines. Such research would be useful for developing interventions for these groups.

What impact does pharmaceutical promotion have on behaviour?

This is the most important and most difficult area to research. People may not be aware how much promotion influences them, and/or they may be unwilling to report this.

Research clearly shows that doctors who report relying more on promotion tend to prescribe less appropriately, prescribe more often and adopt new drugs more quickly. Samples appear to influence prescribing, but more research is needed on this issue. Studies which look at the impact of promotion on overall sales usually show increased sales after promotional activities. Pharmaceutical funding for doctors, such as research funding, increases request for medicines made by these companies to be added to hospital formularies. DTCA is associated with increased requests from patients for advertised medicines. Sponsorship may affect the content of continuing medical education.

The pharmaceutical industry has become a much more significant source of funding for academic research. Industry funding tends to be associated with influence over the choice of topic, secrecy, delayed publication and conflicts of interest. Pharmaceutical company funded research is more likely to show results favourable to the product being studied than research funded from other sources.

More research is needed on the public health consequences of drug promotion. For example, this might explore causal relationships between promotion and prescribing of drugs which have little or no place in rational prescribing, or which have serious adverse consequences when over-prescribed, such as antibiotics. More research is needed on the effect of promotion in developing countries.

What interventions have been tried to counter promotional activities,

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