

Industry & Us

What Are We Going To Do?

- **1) An Example of Interactions**
- **2) Methods of INFLUENCE**
- **3) Some Arguments**
- **4) Some Guidelines**
- **5) Some Interaction**
- **6) What can we do?**

Part 1: An Example

- You want to upgrade your current transport
- You want safe, affordable, practical
- You don't know cars, so you contract "Joe" to help.
- After weighing your needs, he picks a Lexus Sedan.

Two months later you find out Joe,...

- Joe was treated to a nice restaurant for lecture on seat-belt safety in Toyota's
- Joe regularly goes golfing with the Lexus Salesman (paid)
- Joe was given a "club" and some other stuff from the Lexus Dealership
- Joe gets liberal use of trial cars specifically from Lexus/Toyota.
- Joe went to Japan for auto manufacturers conference (Paid by Toyota)

Doctor-Patient

- Physicians choose a consumer product for their patient & patients live with the cost & consequence
- Patients trust that the choice was based on their specific needs including: safety, effectiveness & cost

Why do physicians/medical professionals Interact with Industry?

- Being Polite.
- Meals
- Gifts
 - Related: pregnancy wheels, calculators, etc
 - Peripheral: Backpacks, water bottles, etc
- Textbooks
- Education
- Travel

**Why does Industry
Interact with Trainees ?**

- Provide Education
- Increase Prescribing of a product
- Get a product added to a formulary
- Increase their market share

- At Universities, maybe at the request of a teacher or the school!

**Part 2:
How does industry
influence us?**

Some Methods of Influence

- Drug detailing (reps)
- Advertising (journals)
- Direct to Consumer
- Product Gifts
- Dinners/Entertainment
- Samples
- Surveys
- Guidelines
- Formularies
- Specialist
- Influence our educators
 - Conferences (Subtle & overt)
 - Texts
- Research

The Rep (some techniques)

- Reps know your prescribing habits (so called: “Data mining”)
 - IMS buys prescribing patterns from pharmacies
 - IMS compiles the data & sells it to industry
 - Industry then distributes it to reps
- Saturation: 48,000 rep visits for Vioxx in 2000 alone (with over a million samples given)

Zoutman. CMAJ 2000;163(9):1146-8. Square (news) CMAJ 2003; 168(7): 884.

Sample = Simple

- Saturation: In 2000, >million samples of Vioxx were given to Canadian generalists)¹
- Gifts to Doctors, Gifts to Patients,
- Samples
 - increase prescribing of newer drugs,

IMS 2001 data.

Reps (the effect)

- **Interactions associated with**
 - **Changes in Practice,**
 - **Rapid prescriptions of new drugs**
 - **Increase Prescribing costs,**
 - **Decreased generic prescribing**
 - **Less rational prescribing over all.**

Caudill et al Arch Fam Med 1996; 5:201-6. Lurie et al J Gen Intern Med 1990;5:240-3. Peay & Peay Soc Sci Med 1988; 26:1183-9. Bower & Burkett J Fam Pract 1987;24:612-6. Haayer Soc Sci Med 1982;16:2017-23.

Criteria for Causality and Industry-Physician Interaction

	Consistency*	Strength	Specificity‡	Dose-response	Temporal relationship	Experiment
Interaction with PR	Yes	Yes	Yes	Yes	Yes	Yes
Gifts	Yes	Yes	--	Yes	--	Yes
Samples	Yes	Yes	--	Yes	--	--
Industry-paid meals	Yes	Yes	--	Yes	--	--
PR speakers	Yes	Yes	--	--	Yes	--
CME funding	Yes	Yes	--	--	Yes	--
Conference travel	Yes	Yes	Yes	Yes	Yes	--
Honoraria	Yes	Yes	Yes	Yes	--	--
Research funding	Yes	Yes	Yes	Yes	--	--

*More than one study found effect for interaction; ‡Only one study examined specificity and defined it as increased likelihood of choosing sponsor's product
Wazana. From JAMA 2000;283:373-80

Our Thinking around Gifts

- **“I am not influenced”**
- **More gifts = more likely (and more strongly) we believe statement #1.**
- **“Others are probably more influenced”**

- **Residents would not wear industry logo (87%),...**
- **but 97% carry industry products with logos**
- **Medical Students: Is “Blank” gift inappropriate?**
 - **85% yes if given to a politician but only 46% when given to a doctor**

CMAJ 1995 Sep 1;153(5):553-9; JAMA 2000 Jan 19;283(3) :373-80; JAMA 2001:286: 1019-25; JAMA 2002; 287: 612-17. CMAJ 1996; 155(9):1243-48. J Gen Intern Med 2005; 20:777–786; MJA 2002; 176: 118-21.

Advertising

- **Few studies directly show advertising in isolation**
- **Advertising pressure can mirror prescribing (despite better alternatives e.g. CCB)**
- **50% report only RRR, 41% data tables, 0 gave AR**
- **Even when referenced,**
 - **44% of claims not supported by reference (even refs from High Impact J)**
 - **Mean methodological quality and relevance scores < than min acceptable (58%, 76% & 80% respectively)**

Wang et al. Circulation 1999; 99(15): 2055-7. Villanueva et al. Lancet 2003; 361(9351): 27-32. Lexchin et al. CMAJ 1994; 151(11): 1744-5. Lexchin Can Fam Phys 1999; 45: 1213-6.

Direct to Consumer

- **DTC : More than doubles patient requests for meds.**
- **DTC: Similar conditions are 4 times more likely to get a script if patient requests.**
- **Advertising one drug in NZ for 8 months cost the Health Service \$2.7 million NZ**
- **More money is spent on DTC advertising Vioxx than Budweiser (160.8 vs 146 million)**

Mintzes, et al. CMAJ. 2003 Sep 2;169(5):405-12. Kmietowicz. BMJ. 2003 Jun 14;326(7402): 1284. Mukherjee et al. Am Heart J. 2003 Oct;146(4):563-4.

Subtle DTC

- **Just like other industry: hire a winner**
 - Promote with Stars (ED = Mike Ditka)
- **Educational Videos**
 - Hire a Respected Newscaster (Cronkite) to do infomercials
- **Pay Actors to bring up your drug**
 - On the Today Show, Lauren Bacall told a vignette about a loved ones with Macular Degen & pushed Visudyne: Paid by Novartis.

Angell, 2004, Truth about Drug Co. (pg 116-7)

Entertainment & CME

- **Meals Increase formulary request**
- **CME Events increase in prescribing**
 - 2.5-3.5 fold just for attendance
 - If industry funded, sponsors drug more prescribed (5.5-18.7%) than competitors
 - 4.5-10 fold if industry pays for the travel

Orlowski & Wateska Chest 1992;102:270-3. Wazana JAMA 2000;283:373-80.

Samples & Gifts

- **Samples result in rapid prescription of and preference for new medicines**
- **Gifts value and quantity assoc with belief that there is no influence**

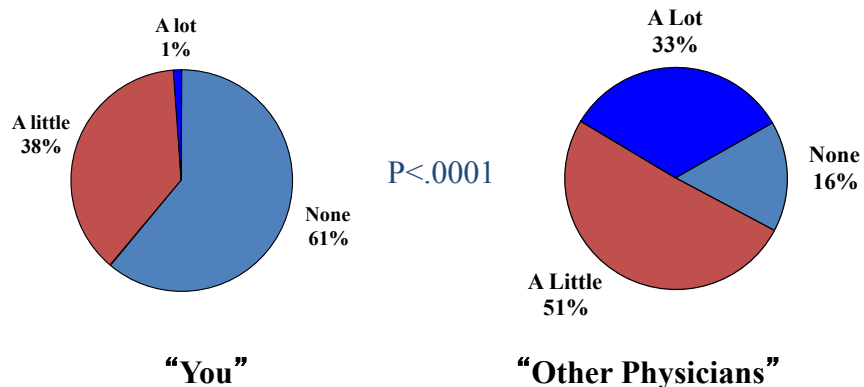
Peay & Peay Soc Sci Med 1988; 26:1183-89. Wazana JAMA 2000;283:373-80

Clinical Practice Guidelines

- **58% of experts have financial ties to industry**
- **38% serve as employees or consultants**
- **Still only 7% feel they are influenced**
- **But 19% feel others are influenced.**

Choudhry et al. JAMA 2002; 287: 612-17.

Perceived Influence of Pharmaceutical Reps on Prescribing



Am J Med 2001;110:551 (prepared by Joel Lexchin)

Formulary Requests

- Requests were “strongly and specifically associated w/ the physician’s interactions w/ the companies manufacturing the drugs”
- And “independent of the merits of the companies product”

Chren et al, JAMA 1994; 271(9): 684-89.

More Lies we tell Ourselves

- “I prescribe on best evidence” - NO
- “I consider costs to the pt” - NO
- “I can’ t even remember the name of,…”
Doesn’ t matter, seed planted
- “Aside from influence, it’ s a good source of CME” – Information wrong 11-42% & We can’ t tell

Soumerai et al. *Milbank Q.* 1989; 67:268-317. Anderson et al. *CMAJ.* 1996; 154(7): 1013-17. Allan GM et al. *Can Fam Phys*2004; 50: 263-70. Wazana *JAMA* 2000 Jan 19;283(3):373-80. Ziegler et al. *JAMA* 1995; 273: 1296-8. Stryer et al. *J Gen Intern Med* 1996; 11:575-83

Isn’ t New always better?

- Examples of Old > New¹
 - Diuretics ≥ other hypertensive agents
 - Steroids > Pimecrolimus
 - Amoxicillin, Psyllium, Benzoyl peroxide, etc.
- Of 548 new chemical entities (drugs)²
 - 10% pulled or black box warning
 - 50% of those in first 2 years!
- Costs increased rapidly.

1. *JAMA* 2002; 288: 2981-97; *Arch Dermatol* 2006;142:1138-43. 2. *JAMA* 2002;287:2215-20