# An Ethical Framework for Clinician/Industry Interactions

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- 1. Which of the following statements regarding the pharmaceutical industry is <u>not</u> true?
  - a. Drugs represent about 10% of healthcare costs
  - b. Over 15% of total pharmaceutical costs are expended on research and development
  - c. Drug costs have risen 10-15% per year over the past 10 years
  - d. Profit margins in the pharmaceutical industry tend to be high
  - e. Nearly 35% of drug sales are expended on sales and drug promotion

- 2. Typical contract services physicians provide to industry include participation in:
  - a. Speakers bureaus
  - b. National advisory boards
  - c. Formulary committees
  - d. Regional advisory boards
  - e. CME presentations

- 3. Drug marketing may reasonably include all of the following except:
  - a. Notice that a drug has just received a new indication from the FDA
  - b. Industry sponsored clinical trials data
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  - d. Information on common off-label uses of the drug
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- 4. Gifts to physicians:
  - Are appropriate recognition for increased prescription of a drug
  - b. Rarely have any impact on clinical decisions
  - c. Are prohibited by AMA guidelines
  - d. Are limited in value by PhARMA guidelines
  - e. Are regulated by the FDA

#### 5. FDA Regulations:

- a. Prohibit "off-label" prescription of medications
- b. Limit what physicians can say in marketing talks
- c. Prohibit physicians from accepting gifts
- d. Prohibit pharmaceutical companies from conducting clinical studies involving competitors' drugs
- e. Require companies to make public all information they have on drug trials

## **Major Teaching Points**

- Residents will become familiar with APA guidelines for physician-industry contacts
- Residents will understand the basic functions of the pharmaceutical industry
- Residents will be able to characterize the various types of interactions between physicians and the pharmaceutical industry
- Residents will discuss an ethical framework in which to evaluate physician interactions with industry

## Readings

- Lexchin J. Interactions between physicians and the pharmaceutical industry: What does the literature say? Can Med Assoc J 149:1401-07; 1993
- Rosner F. Pharmaceutical industry support for continuing medical education programs: A review of current ethical guidelines. Mt. Sinai J Med 62:427-63; 1995
- Wazana A. Physicians and the pharmaceutical industry: Is a gift ever just a gift? JAMA 283:373-80; 2000

#### Outline

- Background
  - Economic issues in development and marketing of drugs
  - Reasons for physician interactions with drug companies
- Ethical framework for interactions
  - Goals and practices of clinical and academic medicine and industry
  - Types of interactions with industry
  - Legitimate and illegitimate marketing factors
  - Dangers of inappropriate interactions
- Practical applications
  - AMA, PhARMA, FDA, and ACCME guidelines and regulations
  - Recommendations
  - Case scenarios

# Clinician-Industry Interaction

# Background

#### Pharmaceutical Sales and Costs (2004)

- \$243.8 billion total sales
- \$38.8 billion (15.9% of total sales) spent on research and development
- Drugs represent 10.7% of total US healthcare costs
- Drug costs have risen at a rate of 10-15% per year for the past 10 years

#### Promotional Costs (2001)

- \$15.7 billion = 12.9% of sales (PhRMA)
  vs
- \$27 billion = 22% of sales (No free lunch.com)

Why the difference?

Unrestricted education grants are tax-deductible charitable contributions, not promotion costs

## Are Medicines Too Expensive?

- Research and development costs are high
- A single lawsuit can be catastrophic
- Patent protection is time-limited

## Are Medicines Too Expensive?

but

 Pharmaceutical stocks are considered among the most profitable and consistent investments available

## Are Medicines Too Expensive?

but

 High profitability is essential for the maintenance of an aggressive research and development program

## Why Do We Do It?

## Contacts with industry are unavoidable

- Physician Desk Reference
- Prescription of proprietary drugs
- Sponsorship of professional meetings
- Advertisements in professional journals
- Response to academic activity

## Why Do We Do It?

## Contacts with industry are desirable

- Sponsorship of educational programs
- Sponsorship of professional organizations
- Sponsorship of research
- Notification of product availability
- Exposure to proprietary information
- Academic input into research and marketing

#### But...

Industry's priorities differ from those of clinical and academic medicine

Is it possible to benefit from industry contacts without compromising the integrity of clinical and academic medicine?

# An Ethical Framework

## Primary Aims

Clinical Medicine

Patient benefit

• Societal benefit

Academic Medicine

 Acquisition and dissemination of knowledge

Medical Industry

Financial gain

#### **Positive Practices**

#### Clinical Medicine

- Patient treatment
- Physician-patient relationship

#### Academic Medicine

- Research
- Education

## Medical Industry

- Development of safe and effective treatments
- Sponsorship of education
- Sponsorship of research

## Negative Practices

#### Clinical Medicine

- Paternalism
- Boundary violations
- Incompetent practice
- Financial concerns

#### Academic Medicine

Career development

## Medical Industry

- Marketing bias in research and education
- Excessive profits

## Oversight

Clinical Medicine

- Professional standards
- Moderate government regulation

Academic Medicine

- Academic standards
- Minimal government regulation

Medical Industry

• Extensive government regulation

#### **Contract Services**

- Scientific advisory boards
- Marketing advisory boards
- Speakers bureaus
- Research design, participation, and publication

#### **Contract Services**

- Promotional Talk (Speakers Bureau) \$1000-5000
- CME Talks (e.g., Grand Rounds) \$500-5000
- District Advisory Meeting \$1000-2000
- National Advisory Meeting \$1000-5000
- APA Symposium \$3500

## **Educational Programs**

- Unrestricted education/research grants
- Industry-sponsored symposia
- Patient education materials
- Journal sponsorship

## **Marketing Contacts**

- Physician detailing
- Lunch/dinner meetings and presentations
- Advertisements

# Marketing and Clinical Practice

## Factors in clinical decision-making

- Evidence-based clinical data
- Clinical experience
- Nonclinical complicating factors (self-serving bias)
  - financial reward
  - academic interest

# Marketing and Clinical Practice

## Legitimate marketing factors

- Notification of availability
- Clinical trials data
- Cumulative experience data
- Cost effectiveness data

# Marketing and Clinical Practice

## Illegitimate marketing factors

- Personal relationship with physician
- Incentives to decision-makers
- Gifts

#### **Gifts**

- Gifts of "nominal" value are permitted by AMA guidelines and FDA regulations, but not by some other entities (e.g., VA).
- It is difficult to establish an ethical basis for physicians to accept gifts
- Even gifts of minimal value have an impact on physicians, whether they recognize it or not (Wazana, 2000)

#### Confusion of Boundaries

Marketing contact

VS

Educational program

Promotional literature

VS

Research literature

Contract service

VS

Gift

# Major Dangers

- Clinical compromise
- Research bias
- Academic corruption

## Clinical Compromise

- Inaccurate or biased information
- Biased clinical judgment
  - Financial incentive
  - Receipt of gifts
  - Personal relationship with pharmaceutical representative

#### Research Bias

- Sponsorship strongly predicts outcome in industry-sponsored research
- Industry is not required to divulge all study results
- Research questions can be framed to favor a specific outcome
- Data can be framed to accentuate specific outcomes

## **Academic Corruption**

- Selective input into research
- Research driven by financial incentive
- Education biased by financial incentive
- Industry support of favorable opinions

# Clinician-Industry Interaction

# Practical Applications

#### **AMA Ethical Guidelines**

- Any gift should benefit patients
- Gifts should be of minimal value and related to the physician's work
- No gifts should be accepted with strings attached

#### **AMA Ethical Guidelines**

- Support for legitimate conferences or meetings (including faculty honoraria) is permissible
- Subsidies for individual physicians to attend meetings are not permissible
- Scholarships for residents and fellows must be assigned by the training program

#### Peer Review

- Publications, posters, and slide sets may be reviewed by recognized experts in the field to ensure that:
  - Appropriate scientific methods were employed
  - Defensible conclusions were reached
  - Bias is avoided in reporting results

#### PhRMA Ethical Guidelines

- Dinner programs should be limited to a "modest" meal, without guests
- CME programs should be planned and conducted by academic and clinical centers
- Consultants must provide legitimate services for reasonable fees
- Speakers' training may include reimbursement for time, travel, and expenses

# PhRMA Ethical Guidelines

- Scholarships should be for major scientific and clinical conferences, and should be awarded by the sponsoring academic institution
- Gifts should be of modest value (<\$100), and should benefit the physician's practice
- No gift, scholarship, or contract should compromise the clinician or academician's independence of decision making

# FDA Regulations

- All marketing materials must be FDA approved, and information shared during marketing contacts may not exceed the boundaries of approved packaging information
- Sponsored speakers may answer questions, but may not initiate or perpetuate discussion of "off-label" drug uses

# FDA Regulations

- Sponsored speakers may only discuss information derived from accepted research methods or recognized expert consensus opinion
- Research studies involving a competitor's drug must follow packaging guidelines for the drug

# ACCME Regulations for CME Programs

- Potential or perceived conflicts of interest regarding the topic of the presentation must be disclosed
- Presentations must include specific learning objectives
- The speaker's qualifications must be appropriate to the topic covered

# What We Can Do

- Observe AMA Guidelines regarding gifts
- Be clear about the nature of our interactions with industry
- Disclose everything
- Limit gifts and personal contacts

# What We Can Do

- Use peer review and consultation to detect diagnostic and therapeutic "drift"
- Be aware of sponsorship of research and educational programs
- There is no substitute for constant attention to personal integrity and professional rigor

During a detail visit by a pharmaceutical representative, a psychiatrist is congratulated on being the top prescriber of the company's product in that area. In recognition of this, the psychiatrist is given a gift certificate for dinner at a popular restaurant.

- What APA guidelines apply to this situation?
- What ethical issues are involved?

An academic psychiatrist with an interest in antidepressant medications is offered \$1000 to speak at a symposium on treatment of depression.

- What ethical issues must be considered if
  - a. the symposium is sponsored by an unrestricted education grant to the hosting institution?
  - b. the symposium is industry-sponsored?

A psychiatrist is invited by a pharmaceutical representative to hear a speaker at a popular restaurant. Afterward, attendees are invited to a performance of an award-winning stage production.

- What APA guidelines apply to this situation?
- What ethical issues are involved?

A psychiatrist is invited to participate in a regional advisory board for a pharmaceutical company. The meeting is for one day at a major hotel in San Francisco. The psychiatrist will be paid a \$1000 honorarium for participation.

- What APA guidelines apply to this situation?
- What ethical issues are involved?

A psychiatrist is invited to attend a CME conference in Hawaii at the expense of a pharmaceutical company. The meeting includes two hours of workshops each morning for three days.

- What APA guidelines apply to this situation?
- What ethical issues are involved?

A psychiatrist attends a dinner talk on a new antipsychotic medication with which he is unfamiliar. The next day he prescribes the medication for a newly diagnosed schizophrenic patient.

- What ethical issues are involved?
- What legitimate marketing factors may be involved?
- What illegitimate factors may by involved?

A psychiatrist with a newly opened private office evaluates a patient for depression. The psychiatrist strongly recommends psychotherapy as the superior treatment option.

- What ethical issues must be considered?
- What legitimate clinical factors should be considered in making this recommendation?
- What illegitimate factors should be avoided?

A psychiatrist is on the speakers bureau for companies A and B, which manufacture competing antidepressants. In a marketing talk for company A, she is asked for a personal recommendation regarding the drugs.

- How should she respond?
- How should she respond when speaking for company B?

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# Test Answer Key

1. e

- 2. c
- 3. d
- 4. a
- 5. b