

# When drug companies court doctors

By Jennifer Lord/Daily News staff  
GHS  
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Both doctors and patients used to complain about the drug reps who roamed the hallways at Southboro Medical Group looking for an opportunity to pitch their products.

The doctors didn't enjoy having their day interrupted by multiple pharmaceutical representatives and their free samples, pads of paper, and be-logoed pens. The patients didn't appreciate the competition for their physicians' time - or the perception that their doctors' prescriptions might be based on anything other than medical needs.

That's why Southboro Medical Group issued an edict to pharmaceutical companies: all reps may have contact with only its clinical pharmacist, and only by appointment. If he believes they have valuable information to pass on, he might allow them to set up a lunch for doctors - but only if they bring in an actual medical expert, not simply a salesman.

"It's fairly well controlled," said Joseph Nunes, administrator for Southboro Medical Group. "They can't follow a physician, they can't get into patient care areas. They have to make an appointment, no blind calls, and anyone who abuses this is banned from our facility."

A national survey of 3,167 physicians published in this week's New England Journal of Medicine found that most doctors had some type of relationship with the pharmaceutical industry, mostly involving free food in the workplace and drug samples. More than a third received reimbursement for costs associated with professional meetings or continuing medical education and more than one quarter received payments for consulting, giving lectures or enrolling patients in trials.

The article concludes that the existing, voluntary Pharmaceutical Research and Manufacturers of America Code, commonly referred to as the PhRMA Code, isn't working. Adopted in 2002, the code discourages companies from giving physicians tickets to events, goods that do not convey a primary benefit to patients or token consulting and advisory relationships.

"The fact that 94 percent of physicians have relationships with pharmaceutical companies is a clear barrier to a trusting and effective doctor-patient relationship," said David J. Rothman, associate director of the Boston-based The Prescription Project and president of the Institute on Medicine as a Profession, which funded the study.

Cardiologists were more than twice as likely as family practitioners to receive payments. Family practitioners met more frequently with industry representatives than did physicians in other specialties and physicians in solo, two-person or group practices met more frequently with industry representatives than doctors practicing in hospitals and clinics.

And cardiologists, who serve as consultants to doctors in general medicine, are the experts who are most frequently called upon for lectures, consults and medical trials, said Dr. James Alderman, an interventional cardiologist and director of the MetroWest Medical Cancer Cardiac Catheterization Lab.

"The person who takes the medicine isn't the customer - it's the doctor," Alderman said. "The doctor is the one who makes the decision on what to prescribe. And, frankly, I can't imagine any doctor prescribing a drug that is not the best one for a patient. I don't know any doctor that would settle for second best."

Alderman compared the scrutiny of doctor-industry relationships to the crackdown on lobbyist relationships with politicians.

"We are lucky in medicine. I have a medical practice - and there couldn't be a better term, a practice," Alderman said. "We in medicine are learning all the time. We like to see big, well-controlled, double-blind randomized studies that give us results. We're not going to just prescribe a drug just based on a few minutes with a pharmaceutical rep."

The Prescription Project is supporting legislative efforts across the country to limit industry gifts, including free samples. Having the drugs on hand may tempt doctors to prescribe a drug that may not be the best fit for his patients' conditions, noted Robert Restuccia, executive director of The Prescription Project.

"Research shows gifts, of whatever size, give a sense of obligation," Restuccia said.

Even something as small as a pen might influence a doctor - not necessarily because of a sense of obligation, but because the product logo may subtly reinforce the drug name, Restuccia added.

According to Nunes, Southboro Medical Group chose to regulate even the free samples handed out by visiting drug reps when they put their guidelines in place a few years ago. Only drugs that are commonly prescribed are accepted.

Drug sales representatives came under fire earlier this month when an internal AstraZeneca document was made public. In a Q&A in an oncology newsletter, Michael Zubullaga, regional sales director for the mid-Atlantic region, stated "I see it like this: there is a big bucket of money sitting in every office. Every time you go in, you reach your hand in the bucket and grab a handful. The more times you are in, the more money goes in your pocket. Every time you make a call, you are looking to make more money."

Zubullaga was fired shortly after the comments were made public on industry blogs, according to the Philadelphia Inquirer.