

Drug company paid MN doctors \$754,127

By JANET MOORE, Star Tribune

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Minnesota doctors were paid thousands of dollars in speaker fees and other payments last year by a pharmaceutical company now implicated in a congressional investigation for its aggressive promotion of a popular antidepressant drug, according to documents filed with the state and analyzed by a nonprofit group.

Forest Laboratories Inc. paid 62 Minnesota doctors at least \$1,000 each in speakers' fees, with 28 physicians receiving payments of more than \$10,000, according to The Pew Prescription Project. All told, Forest paid Minnesota practitioners more than \$750,000 in 2008.

Minnesota was the first among a handful of states requiring drug companies to disclose payments to doctors, and the annual disclosure reports have repeatedly revealed potential conflicts of interest in the way physicians prescribe drugs or conduct clinical research, while adding fuel to a national debate about greater disclosure of the financial ties between industry and doctors.

"The analysis tells us that a lot of doctors in Minnesota have become extensions of Forest's marketing campaign," said Allan Coukell, director of The Pew Prescription Project.

The group's analysis found that 32 percent of Forest's payments went to psychiatrists and neurologists, frequent prescribers of antidepressants.

A report released by congressional investigators Tuesday highlighted how Forest marketed Lexapro, a depression drug that reaped \$2.3 billion for the New York-based company last year.

A \$100 million "marketing plan" hatched by Forest in 2004 hints at the way some pharmaceutical companies encourage doctors to prescribe their brands, even if they are more expensive than others or if a generic version is available.

Those practices include paying "key opinion leaders" in certain clinical fields, such as psychiatry, to make speeches on Lexapro's behalf using slides provided by the company, authoring bylined articles for doctors about the drug, and funding their continuing medical education classes.

A spokesman for Forest could not be reached for comment Wednesday.

Documents filed by the company with the Minnesota Board of Pharmacy in 2008 indicate the company paid Minnesota doctors \$754,127, according to the Pew Prescription Project, an organization that says it promotes consumer safety by reforming the way prescription drugs are approved, manufactured and marketed.

The project's analysis found that Forest ranked fourth in total payments to practitioners in Minnesota, even though it is ranked 18th among pharmaceutical companies in U.S. sales revenue

for 2008. Though it has just \$3.9 billion in annual revenue, Forest's physician payments fell just behind drug giants Eli Lilly & Co, Glaxo SmithKline and Pfizer, who together reported annual sales of more than \$100 billion.

Forest's median payment in Minnesota was \$8,000, while the average was \$12,000, and all were listed as either a "speaker fee" or "travel reimbursement." Often doctors speak at medical meetings on issues or trends in their field, but it's unclear from the state data what Forest paid the doctors to speak about and where the speeches took place.

But the Lexapro marketing plan, discovered by investigators for Sen. Charles Grassley, indicate many doctors were slated to become part of a "Speakers Bureau" who got a "slide kit" from the company, training prior to speeches and webcasts from company sales representatives.

Grassley, an Iowa Republican who has been investigating the financial ties between drug companies and doctors, provided the Lexapro document to the Senate's Special Committee on Aging, which held hearings in July on whether the drug industry wields influence on doctors' medical education classes.

Grassley and Sen. Herb Kohl, a Wisconsin Democrat who chairs the Aging Committee, have sponsored federal legislation to make payments to doctors by drug and medical device companies public. The requirement is now part of the House version of the health care reform bill.

Coukell said information about doctors receiving money from drug companies should prompt patients to ask why the drug they're taking is the best one for their condition, and whether a cheaper alternative exists.

"The existence of financial relationships ... should make a patient -- not second-guess a prescription -- but certainly be more cautious about the way in which prescribing decisions are made," he said.

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