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# Gifts, Meals and Entertainment

*The Prescription Project promotes evidence-based prescribing and works to eliminate conflicts of interest in medicine due to pharmaceutical marketing to physicians.*

*It is promoting policy change by working with*

- *State and Federal Policymakers*
- *Academic Medical Centers*
- *Professional Medical Societies*
- *Private Payers*

*Created with The Pew Charitable Trusts, the Project is led by Community Catalyst in partnership with the Institute on Medicine as a Profession.*

## A Toolkit for Academic Medical Centers

### I. Introduction

The pharmaceutical and medical device industries give gifts to medical professionals to cultivate goodwill and influence prescribing behavior. Gifts may include items of nominal value (such as pens and notepads), textbooks, travel support, meals, entertainment, and other items of value. Pharmaceutical and device manufacturers do not disclose what they spend on gifts and meals, but one study estimates that industry-sponsored lunches alone total as much as \$1 billion a year (of an estimated \$7.2 billion for marketing to physicians, excluding samples).<sup>1, 2</sup> The vast majority of U.S. physicians (94 percent) report having accepted food, drug samples, or other reimbursements and payments from the industry.<sup>3</sup>

Gifting influences prescriber behavior. Even small gifts such as pens and mugs have an effect.<sup>4, 5</sup> Although physicians and medical students often underestimate the influence of industry interactions on their own prescribing behavior,<sup>6, 7</sup> social science research indicates that individuals may not be able to assess their own bias, particularly when that bias provides them with financial benefit.<sup>8</sup> Industry's widespread use of the free-meal incentive is also a proven method: Individuals tend to be more receptive to information when it is received while eating enjoyable food, thus making it "the most commonly used technique to derail the judgment aspect of decision making."<sup>9</sup>

Psychologically, gift-giving is always tied to a feeling of indebtedness and expected reciprocation from the recipient.<sup>10</sup> For drug companies, this reciprocation (subconscious or not) is increased prescribing of their drugs, which can mean compromised decision-making by the doctor and reduced quality of care for the patient.

*This toolkit is one in series prepared by the Prescription Project to assist medical schools and teaching hospitals developing new policies to address the conflicts of interest that arise from pharmaceutical and medical device industry marketing. For further assistance or more information, please email [policy@prescriptionproject.org](mailto:policy@prescriptionproject.org).*

A systematic review of medical literature on the subject of gifting in the *Journal of the American Medical Association* found that such interactions resulted in undesirable effects, including: <sup>11</sup>

- Reduced generic prescribing
- Increase overall prescription rates
- Quick uptake of the newest, most expensive drugs including those of only marginal benefit over existing options with real-world safety records
- Formulary request for drugs with few if any advantages over existing drug.

Marketing spending, including money spent on gifts, also drives up the costs of prescription drugs – costs borne by patients and taxpayers. Biases in prescription-writing and the increased cost of drugs are both harmful to the patient. As such, patients' awareness of gifting can seriously damage the trust essential to the patient-doctor relationship. Gifting remains (financially) beneficial only to the physician and the industry, and thus there is no rationale to allow it to continue in face of the harm it can cause.

Medical residents may rightly conclude that the acceptance of gifts by their superiors and peers constitutes implicit approval of such, thus reinforcing gifting as a social norm.<sup>12</sup> Worse, gifts from industry representatives may become for medical students an item of social status: perceived industry respect representing career success.<sup>13</sup> This further compounds the potential for conflict of interest. Therefore, elimination of gifting in academic medical centers is a crucial component to eliminating conflict of interest within the wider profession.

## II. Policy Considerations

Numerous health care organizations and academic medical centers (AMCs) have adopted no-gifts, no-meals policies.

- **Gifts should be banned in their entirety, regardless of nature or value.**

A complete and unqualified ban on gifting is helpful to doctors as well as patients. It facilitates compliance by eliminating all gray areas, and removes the burden of decision from the doctors who otherwise must determine appropriateness individually.<sup>14</sup>

Leaders from several academic medical centers (AMCs) said they initially discussed setting a *de minimis* amount for gifts, but ultimately decided that: (1) research shows that gifts are problematic no matter the size;<sup>15</sup> and (2) restricting gifts based on size is infeasible; only an outright ban is workable in practice. Several straightforward policy statements are presented below. In general, there should be no conditional allowances for gifts under a certain amount, or gifts limited to an unspecified "modest" value, or gifts restricted to "educational" purposes or "primarily for the benefit of the patient."

- **Industry-sponsored meals and snacks should be banned in their entirety within the institution.**  
Meals provided to physicians and hospital staff by industry are potent gifts that are used to gain access to physicians, resident and nurses. Industry will often provide food for physicians and their entire staff. AMCs who have eliminated meals from their hospitals have noted that fewer physicians are willing to sit through a sales pitch if food is not provided. Eliminating meals will ensure that physicians see industry representatives only if they truly believe that the interaction is worthwhile, not for a free meal.

Leadership should discourage physicians from attending dinners and meals with pharmaceutical vendors off campus. Many AMCs with policies banning meals have acknowledged limits on their ability to restrict what physicians do on their off-time. However, others have developed policies that cover meals both on and off

campus. At a minimum, hospitals and AMCs should educate physicians on the ethical and professional implications of those interactions.

- **Enforcement Strategies**

Many AMCs with policies banning gifts focused enforcement on vendors, not hospital staff. Hospitals and academic medical centers adopting new policies banning gifts should apprise vendors of new policies and outline repercussions for violating the standards. AMC leadership should inform hospital staff of the policy, and ask that staff report vendors violating the policy. If physicians or other staff members violate the policy by accepting a gift or a meal, the AMC leadership overseeing the policy should speak to them and explain the policy. At some AMCs, continued violations may result in more serious consequences, including fines, loss of privileges and even termination.

- **Acceptance and Implementation**

Leaders at many of the AMCs stress the importance of a consultative process to establish physician and staff support for new policies that greatly change the day-to-day life of hospital staff. Initial pushback is often strong. Several leaders noted that educational presentations on the literature demonstrating the affect of marketing on prescribing behavior were effective. It is also important to allow feedback and commentary on the policy, from all levels, before it is put in place. It is helpful that the policy not be a surprise to employees when the implementation date arrives. Meetings with departmental chairs, committee leaders, medical boards and administrative leadership are also crucial. Comments are often helpful to ensure that the policy is clear. All policies we have reviewed have undergone numerous iterations to incorporate such comments. While time consuming, many leaders we spoke to emphasized that this initial work allows for a relatively smooth transition once the policy was enacted.

It is important that resources are available to answer questions or concerns during discussion and after policies are finalized. Such mechanisms may include FAQ sheets and web-based resources. Both the University of Pittsburgh and UMass Memorial Medical Center have developed web-based resources to provide background materials, resources and assist in the interpretation of policies.

Because many hospitals rely on meals provided by industry to feed house staff during meetings, administrators should be prepared for particularly strong resistance to giving up meals. During the transition phase at some AMCs, department chairs predicted that residents would not attend meetings if meals were not provided. While leaders at most AMCs noted that there was no discernable drop in attendance, chairs at one school did note an initial drop in attendance. However, they found that by changing the meeting times to the morning before rounds, providing lunches occasionally, or making attendance mandatory, residents could be enticed to return to meetings.

Some departments have budgeted to replace industry-funded meals,<sup>\*</sup> while others require that medical residents and staff purchase their own meals.<sup>†</sup>

Another worry was that nurses and physicians would not have time to stand in line in the cafeteria for lunch. One AMC created an express line for physicians in their cafeteria, and began offering prepackaged lunches that would provide quicker service.

<sup>\*</sup> For example, food costs for the Boston Medical Center Department of Medicine increased by more than \$80,000/year.

<sup>†</sup> Including the University of Michigan, Penn, UC Davis, Stanford, University of Pittsburgh Medical Center, University of Wisconsin, UCLA, Yale, Kaiser Permanente Northern California.

### III. Example Policies

#### *UMass Memorial Medical Center*

##### I. Gifts:

1. **Recommended Policy:** gifts from vendors should be prohibited
2. **Implications of Policy:**
  - i. No gifts from any vendor of clinical supplies or services may be accepted by any clinical employee, including employed physicians, medical staff acting on behalf of UMass Memorial and house staff.
  - ii. No pens, pads, hats, candy, medical journals, textbooks, etc.

##### II. Meals and Entertainment:

1. **Recommended Policy:**
  - i. Clinical employees, employed physicians, medical staff acting on behalf of UMass Memorial (see 1.b.i above) and house staff may not accept meals or entertainment from any vendor of clinical supplies or services. Meals associated with CME activity at national meetings are acceptable.
2. **Implications of Policy:**
  - i. Clinical vendor representatives may not pay for meals of the above individuals on or off campus;
  - ii. The above individuals may not accept tickets to sporting or other entertainment events provided or paid for by clinical vendors.

#### *Boston University School of Medicine/Boston Medical Center*

##### 1. Provision of Compensation or Gifts from Industry to Clinicians

- a. Clinicians may not accept any form of personal gift from industry or its representatives.
- b. Meals directly or indirectly funded by industry may not be provided at BMC or on the BUSM campus. In addition, clinicians should use discretion in participating in industry-sponsored meals off campus. Specifically, FPP physicians should not facilitate the attendance of trainees at meals off campus sponsored by industry or at educational events off campus sponsored by industry which are not accredited by the Accreditation Council for Continuing Medical Education ("ACCME") or the American Dental Association Continuing Education Dental Recognition Program ("ADA CERP"). (<http://www.bu.edu/policies/gift/policy.html>).

#### *Stanford University School of Medicine*

Personal gifts from industry may not be accepted anywhere at the Stanford School of Medicine, Stanford Hospital and Clinics, the Lucile Packard Children's Hospital, the Menlo Clinic or off site clinical facilities such as other hospitals at which Stanford faculty practice, outreach clinics and the like.

Individuals may not accept gifts or compensation for listening to a sales talk by an industry representative.

Individuals may not accept gifts or compensation for prescribing or changing a patient's prescription.

Individuals must consciously and actively divorce clinical care decisions from any perceived or actual benefits expected from any company. It is unacceptable for patient care decisions to be influenced by the possibility of personal financial gain.

Individuals may not accept compensation, including the defraying of costs, for simply attending a CME or other activity or conference (that is, if the individual is not speaking or otherwise actively participating or presenting at the event).

***University of Pittsburgh Schools of the Health Sciences (collectively "SOHS") and the University of Pittsburgh Medical Center Policy, 2007***

SOHS and UPMC personnel shall not accept or use personal gifts (including food) from representatives of Industry, *regardless of the nature or dollar value of the gift.*

Although personal gifts of nominal value may not violate professional standards or anti-kickback laws, such gifts do not improve the quality of patient care, may subtly influence clinical decisions, and add unnecessary costs to the healthcare system. Gifts from Industry that incorporate a product or company logo on the gift (e.g., pens, notepads or office items such as clocks) introduce a commercial, marketing presence that is not appropriate to a non-profit educational and healthcare system.<sup>5</sup> Meals or other hospitality funded directly by Industry may not be offered in any facility owned and operated by the SOHS or UPMC.

SOHS and UPMC personnel may not accept meals or other hospitality funded by Industry, whether on-campus or off-campus, or accept complimentary tickets to sporting or other events or other hospitality from Industry. Modest meals provided incidental to attendance at an off-campus event that complies with the provisions of subsection 6, below, may be accepted.

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