

Ethical Standards in Healthcare
promotion
National Department of Health
Perceptive

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Background

- Ethical standards refer to a set of values and principles used in decision making.
- Why is this so important in health care
 - Information asymmetry
 - One party to a transaction has relevant information whereas the other(s) do not
 - Can result in adverse selection

Background (2)

- It is unethical to advertise products or services with claims that are:
 - Not evidence based,
 - Inflate the effect size, or
 - omit information, such as important safety information.

Background (3)

- In order to implement an ethical marketing campaign, any healthcare institution or provider should answer the following questions.
 - What is the purpose of the marketing campaign?
 - How much does it benefit the community as a whole?
 - Is the information provided in the campaign completely truthful, or is it biased or misleading?
 - Can the amount of money spent on the campaign be justified as against its use for treatment for those who cannot afford it?

Current perspective



National Drug Policy (NDP)

- **1996 Advertising and marketing of drugs**
- Objective ensure that advertising and marketing is in compliance with
 - National regulations
 - Voluntary industry standards.
- All promotion-making claims shall be reliable,
 - accurate,
 - truthful,
 - informative, balanced,
 - up-to-date,
 - capable of substantiation and
 - in good taste.

National Drug Policy (NDP) - 2

- Promotion should **not**:
 - Contain misleading or unverifiable statements or omissions.
 - Be designed to disguise its real nature.
 - Offer financial or material benefits.that are likely to induce medically unjustifiable drug use or to give rise to undue risks
- International benchmarking
 - Ethical Criteria for Medicinal Drug Promotion adopted by the World Health Assembly (WHA) and
 - Pharmaceutical Manufacturers Association (PMA) Codes of Marketing
- Health care professional should receive training on:
 - Issues related to pharmaceutical promotion and
 - comparative independent sources of drug information

Door has been shut in the USA

- IOM 2009 report “Conflict of Interest in Medical Research, Education, and Practice”
- Physician Payments Sunshine Act
 - From 1st quarter in 2008 suppliers must disclose all payments over \$25 in value made to "to a physician, or to an entity that a physician is employed by, has tenure with, or has an ownership interest in."
 - Penalties range from range from \$10,000 to \$100,000 for each violation, and can go up to \$1 million.

Rising tide of Comment in the literature

- BMJ
 - June 2008 article exposed the role that Key opinion Leaders or KOLs play in the development and marketing of medicines - *R Moynihan et al BMJ 2008(336)*.
 - 2011 article reviewed STG development for hyperlipidaemia or diabetes
 - 5 of 14 STGs published between 2000 and 2010 did not have disclosure.
 - 52% of panel members had declared conflict of interests and 12 of those members who had not declared interests were identified as having such.
 - Government sponsored guidelines were less likely to have conflict of interest concerns than non-government sources.
 - *J Neuman, D Korenstein, JS Ross, and S Keyhani. Prevalence of financial conflicts of interest among panel members producing clinical practice guidelines in Canada and United States: cross sectional study. BMJ 2011;343:d5621*

Rising tide of Comment in the literature (2)

- PloS 2011 review on conflict of interest in clinical guideline development identified that reporting had improved however financial conflicts had a high prevalence among guideline developers

• Norris SL, Holmer HK, Ogden LA, Burda BU (2011) Conflict of Interest in Clinical Practice Guideline Development: A Systematic Review. PLoS ONE 6(10): e25153. doi:10.1371/journal.pone.0025153

Rising tide of Comment in the literature (3)

- JAMA - Interest: A Policy Proposal for Academic Medical Health Industry Practices That Create Conflicts of Centers. *Troyen A. Brennan; David J. Rothman; Linda Blank; et al. JAMA. 2006;295(4):429-433 (doi:10.1001/jama.295.4.429).*
- More stringent regulation is necessary, including the elimination or modification of
 - small gifts,
 - pharmaceutical samples,
 - continuing medical education,
 - funds for physician travel,
 - speakers bureaus,
 - ghostwriting, and
 - consulting and research contracts

Leaving the emerging markets vulnerable

- IMS 2005 Pharmerging concept
 - Little growth in OECD countries.
 - Emerging markets were predicted to grow from 12% of the global market in 2005 to 28% by 2015.
 - South Africa is classified as a tier 3 country