

Circle 4: How the Interface Between Physicians and Industry has Changed

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Robust and unrestricted
interchange between
industry and physicians
for many years

Changes

Pharmaceutical Representatives:

- Who can see them
- Where
- Why

Impact of those changes



Early Changes

- Separation of Marketing from Research and Development
- Use of Regional Scientific Liasons for:
 - Scientific Inquiries
 - Investigator Initiated Research



Physicians Payments Sunshine Act

- Data collection began August 2013
- Public Reporting 2014:
- Under the National Physician Payment Transparency Program of the Centers for Medicare and Medicaid Services



Financial Relationships Between-Physicians and Industry

- 2007 report: 94% of physicians had relationships
- 83% received gifts
- 28% received payment for professional services such as consulting and research participation
- 60% of those 28% were involved in medical education
- 40% of those 28% were involved in creating clinical practice guidelines

New England Journal of Medicine 2013;368:2054-57



Financial Relationships between Physicians and Industry

- By 2001 industry = major source of research and development funding
- 60% of 100 billion dollars in funding annually
- One third of all CME



Payments Requiring Reporting: The Sunshine Act

- Transactions of \$10 or more
- Transactions under \$10 if they total \$100 in a calendar year



Payments Requiring Reporting: The Sunshine Act

- Teaching hospitals must also report payments



Private Practitioners

- Can see sales representatives in their offices
- Allow lunches for physicians and staff
- Accept samples
- Can use branded pharmaceutical aids / signs / pamphlets as part of patient care



Medical School Faculty

- Most can still see representatives: some limited within the clinic to certain locations (HIPPA)
- Some can accept samples and coupons
- Some can accept lunches or snacks
- Can participate in pharmaceutical research
- Can participate in investigator initiated research



Dermatology Residents

- Some can see pharmaceutical representatives
- Some can attend industry sponsored dinners
- Challenge for residents who cannot see representatives:
 - do not learn about new (or even older) products
 - may prescribe only from a narrow formulary during training



Changes in Industry: Dermatology

- Fewer companies overall
- Greater consolidation
- Challenge to initiate research



Challenges in Daily Practice Related to Industry

- Using Brand Name Products:
 - Often third tier on pharmacy benefit plan
 - Use may impact a physician's profile on:
 - Blue Cross/ United/ Aetna/ Cigna
- Not using Brand Name Products:
 - Less than optimized outcome for patients
 - Fewer new and innovative new products in future



Challenges in Daily Practice Related to Industry

- Most patients do NOT understand their insurance policy with regard to coverage
- Most patients view the ability to prescribe a given medication totally within the physician's control



Industry: High Impact on Dermatology

- Innovations:

- Oral Retinoids
- Biologics
- Acne Medications
- Atopic Dermatitis Medications
- Antifungals



Industry: High Impact on Dermatology

- Research: expanded opportunities for basic science and clinical trials
- Industry listens to and acts on our observations:
 - 5 Fluorouracil
 - Imiquimod
 - Cyclosporin
 - Botox
 - Latisse
 - Propranolol



Industry: High Impact on Dermatology

- Changed the practice of Dermatology more than any other interface
- Improved the lives of our patients and their families



Where we can become stronger together

- Increased collaborative discussions and efforts
- View WDS as a portal for collaboration
- Consider Initiation of:
 - Research Modules
 - Leadership Opportunities



Thanks

- Special thanks to all in Industry who partner with the WDS
- WDS values these relationships
- WDS hopes to enhance and expand the value of interchange between our organization and its industry partners

