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While the product information for public consumption is a must for the drug industry in the US, in India it is almost entirely a preserve of doctors and medical practitioners. The latter rarely share the information with their patients. Doctors are also drug marketers, especially for prescription drugs. It would be naïve to deny a nexus between doctors and drug manufacturers. Having tackled the issue of the release of drug safety information by industry regularly for the benefit of consumers, the US is now gearing itself up with a more stringent health care law to expose, if not to immediately control, the doctor-drug producer nexus by forcing companies to come clean on direct and indirect payments they make to doctors. The law will require the manufacturers of prescription drugs and medical devices to report physician-payment data to the government. The US Department of Health and Human Services will consolidate such data and make available on a public website.

The complete compliance of the new industry requirement starts in 2013 annual report and thereon. At least six of the US-based multinational pharma majors have already mentioned the matter in

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their half-yearly reports, this year. They include Eli Lilly & Co, Pfizer Inc, GlaxoSmithKline PLC, Merck & Co and Cephalon Inc. For the first time, Johnson & Johnson has publicly disclosed payments it made to doctors, without releasing the full data at one place, to improve transparency of its marketing practices. All these companies, along with many others, are present in India's \$10-billion plus organized-sector drugs and pharmaceuticals business, growing at 20 per cent per annum.

J&J's pharmaceuticals divisions are posting the names of physicians, who received payments from the company in the first three months of this year. The total amount paid was \$1.76 million said The Wall Street Journal, quoting Obsidian HDS LLC, which aggregates physician-payment data. J&J, like other US drug producers, pay doctors and medical practitioners handsomely to work as consultants for research, safety surveillance and other services and to speak to other doctors about uses of its products. Such practices by drug firms have, however, been receiving flak in recent years from informed critics, who fear that these gratuities may taint drug research and lead to harmful effect. The manufacturers, on the other hand, defend these practices on the ground that they help in gaining insight into drug research and clinical practices. J&J's Ortho-McNeil-Janssen unit, marketing antipsychotic Risperdal, pain killer Duragesic and Concerta for attention deficit hyperactivity disorder (ADHD), listed names of many doctors, who received several thousands of dollars each. And, a few of them received even in excess of \$ 20,000 each. 4/3/10

Among other drug firms to disclose physician-payments, this year, Pfizer said it paid \$35 million to some 4,500 health-care practitioners in the second half of 2009. Glaxo (GSK) said it paid \$14.6 million to 3,700 health-care professionals in last year's second quarter alone. Health professionals are also paid for participation in company-sponsored seminars and dialogues in support of products. Some of the companies are now preparing to be equally transparent in their dealings with health professionals by voluntarily expanding the scope of reporting to cover medical device and diagnostics, where payment could be as low as \$25-\$100 each, to express their commitment to ethical practice and transparent transactions, or, may be, to confuse the issue.

The US experience is very much relevant to India, where the drug industry is substantially controlled by MNCs as both manufacturers and suppliers of basic drugs. These MNCs are also present in the drug formulations business in a big way. Several MNCs are on the prowl to eat up successful Indian drug companies. Not many are concerned with the business or professional ethics in the absence of strong domestic laws and regulations to ensure their compliance. While the country's on-going globalization agenda and WTO declaration on patents or intellectual property rights (IPR) have considerably weakened the prospect of India's home-grown pharmaceutical sector, the domestic laws are too liberal to protect the interest of the consumers and the society against unethical practices (IPA Service).