

TRUTH & TRANSPARENCY

UK broadsheet lifts the lid on potential conflicts of interest between industry and two medicines management pharmacists

When reporters from *The Telegraph* went undercover to investigate the relationship between drug companies and NHS staff in July, the resulting headlines were enough to make some in the pharmaceutical industry and the NHS alike feel pretty uncomfortable.

"Revealed: The NHS officials paid, wined and dined on spa trip"

The investigation focused on two medicines management pharmacists and discussed fees from pharmaceutical companies for arranging overseas advisory boards. The report raised questions about "potential conflict of interest" and "the impartiality of public sector staff who control budgets worth millions of pounds".

"Senior NHS staff are being paid thousands of pounds and taken on expensive trips by drug companies lobbying to get their products used by the health service"

One pharmacist has resigned and the other has been suspended, pending an investigation by NHS Protect. The Prescription Medicines Code of Practice Authority (PMCPA), the body that administers the pharma industry's Code of Practice, has confirmed it has contacted the newspaper for the names of the alleged companies so that formal complaints can be taken up.

While repercussions are inevitable, this is an opportunity for the industry to reaffirm its commitment to the Code around consultancy arrangements with health professionals, declarations and advisory boards.

Consultancy Arrangements

Pharma firms can legitimately engage the services of, and pay, individual health professionals, but this consultancy must comply with strict criteria. These include a genuine need for the service, documented in a written agreement, engaging an appropriately qualified consultant and the fee being reasonable and 'fair market value' for the service.

Declaration requirements

The Code requires agreements between pharmaceutical companies and consultants to include provisions obligating consultants to declare that they have provided a service to the company. New disclosure rules extend beyond this and mean that unless a consultant has withheld their consent for their individual details to be disclosed, details relating to individual consultancies will be made public on a central, searchable database.

If individual health professionals set up their own limited companies to handle consultancy services, such limited companies would not be considered a 'healthcare organisation', for the purposes of disclosure.

Advisory boards

Under the Code, UK companies are responsible for the activities of their overseas parent either in the UK, or with UK health professionals abroad. This means that if UK health professionals attend a pharmaceutical company advisory board meeting overseas, the arrangements (such as venue, accommodation, travel and subsistence) should be certified by UK signatories. If they noted any issue – disguised promotion, lavish hospitality, inappropriate advisor selection, unacceptable payments etc...

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they would not be able to approve the attendance of UK health professionals.

Until the investigations are over and the consequences are known, headlines matter. The increasing focus on the nature of the relationship between the pharmaceutical industry and health professionals, and the need for transparency will mean that, now more than ever, both sides will need to be comfortable that any transactions for services provided do not create a conflict of interest with the health professionals' clinical, budgetary or management role. ○