

Medical Schools Just Say No to Drug Reps' Gifts

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SACRAMENTO — Another medical school has joined what could be a growing movement to ban faculty and residents from accepting gifts from drug company representatives.

The University of California, Davis, Health System decided in late November to forbid its medical staff to accept gifts from drug salesmen, including drug samples, pens, mugs, and meals, however small they might be. Earlier, the school had banned drug company representatives from walking into the clinical areas on a preceptorship.

By taking this action, the school joins a cadre of institutions that includes Yale University, which implemented its policy in 2005, the University of Pennsylvania, which did so in July 2006, and Stanford University, which implemented its policy in October 2006. At UC Davis, the policy goes into effect in July 2007.

The new prohibition "picks off the low-lying fruit" in an attempt by the institution to create a greater distance between its clinical practice and the pharmaceutical industry, said Dr. Timothy E. Albertson, the university system's executive director of clinical care.

The school has plans to look at the issue of conflict of interest in further detail, particularly in regard to relationships with and practices of other vendors. "We're certainly not trying to change capitalism, but we are trying to redefine the ethics of this type of involvement," he said.

The efforts at UC Davis and the other schools were spurred in part by an article in the *Journal of the American Medical Association* (2006;295:429-33).

The article noted that many authoritative bodies, including the Pharmaceutical Research and Manufacturers of America and government agencies, have made attempts to curtail practices that constitute a conflict of interest for physicians. But the article also said those actions have largely failed to change the current climate. Thus, the 11 authors of the paper urged academic medical centers to take the lead by, among other things, banning the acceptance of gifts, samples, and payment for time spent at meetings.

Academic medical centers need to adopt such policies because the medical profession looks to them for leadership, and because academic medical centers shape the ethics of the profession, the proposal said.

The article noted that 90% of the marketing dollars spent by the pharmaceutical industry were directed at doctors, despite the increase in money spent on direct-to-consumer marketing in recent years.

According to IMS Health, a pharmaceutical information and consulting company, drug companies spent \$27 billion on product promotion in 2004, of which \$16 billion was for free drug samples and \$7.3 billion, including gifts and meals, went to sales representative contacts.

The pharmaceutical industry, which

adopted strict guidelines on gift giving in 2002, says that limiting the practices and access of their sales representatives will deprive physicians of the best expertise on their medicines. But gifts, however insignificant, establish an unspoken quid pro quo between physicians and pharmaceutical companies. If gifts did not serve this purpose, companies would not give them, the JAMA authors said. They noted that the research bears this out.

According to a 2003 survey of more than 1,000 third-year medical students, an average third-year student receives one gift or attends one company-sponsored activity a week (JAMA 2005;294:1034-42). That is precisely the point of the no-gift policies proposed by the JAMA article, said one of its authors, Dr. Jerome P. Kassirer, former editor-in-chief of the *New England Journal of Medicine*.

"These meals and gifts give residents and trainees the idea that pharmaceutical largesse is all right and the way things work, but it taints the profession," Dr. Kassirer said in an interview. "They wouldn't pass out these gifts if it didn't matter."

"I think the academic medical centers needed a little nudge," he added, noting the impact the article appears to be having. "It's a beginning."

At the academic medical centers, free meals appear to be the biggest issue impeding acceptance among staff. The free meals allow physicians to attend midday meetings they otherwise would not have time to attend, and they are a big ticket item. At the UC Davis Cancer Center alone, it is estimated that companies spend \$70,000 a year on free lunches. The center will now pick up those costs, and other departments may have to do the same.

At the University of Pennsylvania Health System, the adoption of its policy caused some grumbling at first, along with the loss of some legitimate educational programs that were sponsored. For the most part, however, physicians and other staff members have adjusted, said Dr. Patrick J. Brennan, the chief medical officer of the university health system.

He said there is "much less evidence" of sales representatives around the clinics and school. At one suburban clinic run by the university, sales reps turned in their identification badges in protest; but, he believes, the sales force may have adjusted. He has lately seen an increasing number of medical education programs offered to faculty and staff sponsored by a third party hired by a drug company.

At UC Davis and some of the other institutions, efforts are being made to help patients who previously might have received free drug samples or devices; these items have been very helpful, especially for lower-income patients, Dr. Albertson noted. The university is going to try to purchase some of the equipment that has been donated in the past, such as training inhalers for asthma patients and supplies for those with diabetes. "We're going to make every effort to buy them" for use by lower-income patients, he added. ■

POLICY & PRACTICE

VA Underspent on Mental Health

Officials at the Department of Veterans Affairs failed to spend all of the funds planned for expanding mental health services to veterans in 2005 and 2006, according to a report from the Government Accountability Office. In the report, GAO officials call on VA leadership to improve how it tracks resources for the agency's mental health strategic plan initiatives. The report, which was requested by Democrats on the House Veterans Affairs Committee, found that VA failed to spend \$12 million of \$100 million planned for expanding mental health services in fiscal year 2005 and failed to spend approximately \$42 million out of \$200 million in planned funding in fiscal year 2006. The GAO report also found that the agency's tracking of funds for the plan was "inadequate." While VA officials did not comment on the findings, the report's conclusions have drawn criticism on Capitol Hill. "This report reinforces the need for the VA to present a real plan for how they intend to care for the thousands of new veterans returning home with mental health needs," Sen. Patty Murray (D-Wash.) said in a statement. "The VA plan must address the need to increase spending to meet demand, the need to fully disperse current funding, and the need to ensure that mental health funding is being spent on mental health initiatives."

Underage Drinking Legislation

Congress has passed legislation aimed at curbing teen drinking and better coordinating the efforts of federal agencies in this area. The legislation, the Sober Truth on Preventing (STOP) Underage Drinking Act (H.R. 864), was expected to be signed by the President at press time. The bill authorizes grants to prevent binge drinking by college students and calls for research on the scope of underage drinking. The legislation enjoys support from both the medical community and the alcohol industry. The National Beer Wholesalers Association said the bill provides federal, state, and local governments with the tools they need to help prevent underage drinking. And the American Medical Association praised Congress for passing the first national underage drinking prevention legislation. "Alcohol is the number one drug of choice for young people, and the age of initiation keeps getting younger. Alcohol causes memory and learning impairment, possibly irreversible in the adolescent brain," AMA president-elect Dr. Ronald M. Davis said in a statement.

Support for the Drug Czar

Members of Congress signaled their support for the White House Office of National Drug Policy by voting to authorize the office for another 5 years. The legislation, H.R. 6344, also reauthorizes the National Youth Anti-Drug Media Campaign and authorizes increased funding for a program to coordinate federal, state, and local efforts to reduce drug trafficking and produc-

tion. Having a national "drug czar" at the cabinet level is essential to coordinate federal drug policy, said Sen. Joseph R. Biden, Jr. (D-Del.). "Today, we must continue to make drug policy a priority," he said in a statement. "This legislation retains as its central goal that every administration and every president be held accountable when it comes to drug policy."

Mental Health Research Grants

A mental health research funding organization awarded a total of \$19 million to support studies on the causes, treatment, and prevention of severe mental illnesses in 2006. NARSAD: The Mental Health Research Association awarded grants to 273 scientists from around the world last year. The various research projects include studies to identify the genes associated with schizophrenia, bipolar disorder, anxiety, attention-deficit hyperactivity disorder, autism, and depression; to explore the role of stress in the development of mental illnesses; and to examine the effects of antidepressant use during pregnancy. The organization, which is supported by donor funds, has distributed more than \$199 million in grants since 1987. "This group of scientists will extend the research potential for mental health," Constance E. Lieber, president of NARSAD, said in a statement. "Their work will continue to accelerate progress in the study of all areas of psychiatric disorders."

Von Eschenbach Confirmed for FDA

Almost 9 months after he was first nominated to be commissioner of the Food and Drug Administration, Dr. Andrew von Eschenbach was finally confirmed by the Senate by an 80-11 vote in the wee hours of the 109th Congress. Confirmation came after an 89-6 vote to limit debate on his nomination. The naysayers included Sen. Chuck Grassley (R-Iowa), who voted against invoking cloture and against confirmation. Sen. Grassley has been one of Dr. von Eschenbach's most vocal critics. As chairman of the Finance Committee, he and his staff have been investigating what they call an inappropriate approval of Ketek (telithromycin). Sen. Grassley maintains that Dr. von Eschenbach has stonewalled committee investigators, and in an agitated floor statement during the nomination vote, he accused the nominee of hiding documents and intimidating FDA employees who dissented. With Democrats' taking control of Congress, Sen. Grassley will lose his Finance Committee chairmanship. But he warned his colleagues across the aisle that Dr. von Eschenbach was a prime illustration of concerns about the lack of Senate oversight of the Bush administration. "I believe we need to send a message to the executive branch that it's not okay to impede congressional investigations. It's not okay to limit the Senate's access to documents, information, and employees of the executive branch," the senator said.

—Mary Ellen Schneider