

p4 opinion

OPINION

Honesty is the best policy

Key opinion leaders will work with pharma, as long as they know what's expected

Industry critics think that in paying a healthcare professional to get involved in activities such as a clinical trial or an advisory board, the pharmaceutical company is somehow buying prescriptions.

What they are actually buying, of course, is the professional's time, expertise and valued opinions.

There will always be people who find any relationship between a pharmaceutical company and an opinion leader unacceptable and nothing we do or say will appease them. However, by making the nature of the relationship explicit, we can not only be more effective in our opinion leader activities, but we can offset a lot of the suspicion about these relationships.

"Many assumed that discussions about commercial matters would be unacceptable"

I recently contacted an international opinion leader to invite him to participate in a global advisory board and I told him that the fee would be \$1,500 – I like to be upfront about these things so that there is no misunderstanding. He said he would be delighted to attend but his fee was \$3,000.

He was, he explained, part of a cartel of 'international opinion leaders' who had set going rates for specific types of work.

On that occasion I chose not to accept his offer, but I thought his response to me was very interesting.

Firstly, it shows that opinion leaders have now started thinking of themselves as such. Secondly, it indicates how the relationship between doctors and the pharmaceutical industry is changing to one of much more openness in commercial dealings. This, in my opinion, can only be a good thing.

Up front and personal

The debate about the honesty of relationships between the pharmaceutical industry and healthcare professionals is going on around Europe. In the UK, the government's Health Select Committee is looking at current practice.

To a certain extent the industry has fuelled this suspicion by being guarded, even secretive, about its dealings. Too often, for example, firms select opinion leaders to work with based on who they happen to know in a particular therapeutic area, rather than adopting a more rational approach with overt criteria for choosing Professor A over Professor B.

Adopting a more systematic and transparent approach to KOL selection can help preserve relationships and protect pharma firms and healthcare professionals from wasting both time and money.

For a long time, many in the industry assumed that discussions with opinion leaders about commercial matters would be unacceptable and this miscommunication can start even at the trial level. Triallists I have spoken to feel their relationship with sponsoring companies is good, but they hate the lack of honesty about the nature of trials. They don't mind if the primary aim of a trial is registration, or even to set up a

marketing proposition, as long as they are not told something else.

Another example is sponsoring doctors to attend international congresses. The industry spends huge amounts of money on this and it's probably fair to say that most of those sponsored wouldn't otherwise be able to attend. Yet, companies often ask for nothing in return – or at least nothing specific.

There is generally an implicit requirement for the sponsored delegates to attend the company's satellite symposium and to spend the majority of their free time being looked after by the company with a view to building relationships. Not a very onerous requirement for the doctors, nor one that reflects the investment.

"In this way the company gets some work out of the doctor for the sponsorship"

A fairer reflection of the company's investment would be to make doctors' obligations more explicit. For example, delegates could commit to specific activities such as speaking at a number of primary care meetings on their return.

In this way, the company gets some work out of the doctor for the sponsorship and the doctor knows what is expected of him.

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