



## Promotional Tools in Pharmaceutical Marketing

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**Abstract:** Medicine are a core part of health-care services and their use has grown enormously during the last century with the advent of effective Antibiotics, Anesthetics, Analgesics, Anti-retroviral and many other medicines, they can cure diseases, relieve symptoms and prevent future ill health. Appropriate medicine use means providing the right medicine at the right dose, when it is needed and avoiding medicine that are unnecessary or are unlikely to result in health benefits it means choosing the treatment with the best effectiveness and safety profile among available alternatives and the least costly of equivalent treatments.

The international pharmaceutical industry plays an important role in the development, production and distribution of medicines. In many countries it has also become the major funder of continuing medical education (CME) and research. However, a tension exists between pressure to expand products sales within a competitive market and patient care. The World Health Organization (WHO) describe "an inherent conflict of interest between the legitimate business goals of manufacturers and the social, medical and economic needs of providers and the public to select and use drugs in the most rational way"( WHO Europe 1993)<sup>1</sup>

### The Global Medicine Market

In 2007, global pharmaceutical sales amounted to US \$ 712 billion (IMS 2008)<sup>2</sup>

The top product in term of sales, was the cholesterol lowering medicine, Lipitor (Atorvastatin), which had sales of US \$ 13.6 billion (scrip.2007)<sup>3</sup> This is more than the gross national income of over half of the world's countries (World Bank ,2008)<sup>4</sup>

The effects of promotion in fueling sales of specific brands should not be underestimated e.g. sales of Lipitor (Atorvastatin) were higher than sales of simvastatin and Pravastatin, two medicine in the same class that have similar effectiveness and are less costly (Preserire,2006) <sup>5</sup>

### Newer Medicine are not necessarily better

To get a new medicine to market, a company must provide evidence of effectiveness, safety and manufacturing quality. Effectiveness and safety evidence includes laboratory animal and clinical studies. The largest are phase III randomized controlled trials in patient with the disease the medicine aims to treat. Most of these studies compare a new medicine to a placebo. Many people are unaware that manufacturers do not need to show that a new medicine is better than existing compound with placebo and be acceptably safe. To test the medicine 's efficacy, the manufacturers carried out the randomized, controlled trials involving patients with the condition to be treated by the new medicine. These are usually relatively short-term studies and many last a few weeks to a few months, even when the treatment for a chronic disease. For some serious disease for which placebo treatment would be unethical, a new medicine is compared with existing treatments. However, these studies aim to show that a new medicine is as effective as alternatives, or no less effective, it does not need to be better, when a new medicine comes to the market.it has only been tested on highly selected groups of clinical trials participants. e.g. the elderly and those with co-morbid, chronic conditions are

usually excluded. To few people have been exposed to asses' rare harmful effects, generally 3,000 to 5,000 peoples. Because of this inevitably incomplete safety assessment, there is a rational from a public health perspective and an individual patient Care perspective for a slow, cautious approach to the introduction of new medicines.

**Keywords:** Pharmaceutical, Pharmaceutical Marketing, Pharmaceutical Promotion, Pharmaceutical industry Marketing strategies.

## INTRODUCTION

The pharmaceutical industry's marketing activities are successful achieving sales because they are able to influence the decision-making process of Health professional and Patient and therefore, the prescribing and dispensing of medicines. Health professional often have a limited awareness of the influence of promotion and promotion is more effective than many realize. It is common for health professional to believe that promotion does not affect me' As one family physician put it' " just because I have a pen with the name of drug on it, doesn't mean I am going to prescribe it:(Prosser et.al) 6.

Often, However, professional have less confidence in the abilities of their colleague to resist misleading persuasion (zip kin stein man, 2005) 7

### Widespread Influence

Link between the health professions and the pharmaceutical industry has grown enormously in the late 20th and early 21st centuries, leading to a call from physicians' educators for strong' firewalls' to protect the independence of academic medical centers (Brennan,2006)8. In a large US survey (Campbell, 2007) 9 over 90% of physicians reported some type of relationship with the pharmaceutical industry.

- 1) 8 out of 10 received gift, usually free food at their working place
- 2) 8 out of 10 received free medicine samples
- 3) 4 out of 10 had their expenses paid to attend meetings and conferences
- 4) 3 out of 10 were paid consultant, on a company speaker bureau or advisory board

Surveys in wealthy, Industrialized countries have found that physicians see an average of one Medical Representative a week (Wezana, 2000)10. In Turkey, however, more than half of urban physicians in the third largest city, Izmir, saw at least one Medical Representative each day and one third spent more than 30 minutes a day with a Medical Representative did not influence their prescribing, most said that they used advertisements and brochures as on Information source.

### Spending on Pharmaceutical Promotion

Advertising in professional journal is a small part of spending only 2% in terms of direct company expenses, the largest promotional category is ' Detailing to Doctors' ' Detailing is a North American term for one -to -one Medical Representative visits. Medical Representatives also distribute samples during sales visits so these types of promotion are strongly linked.

The US is unusual industrialized countries in allowing direct to consumer advertising (DTCA) of prescription medicine on Television, Magazines and billboards, in 2004, spending on DTCA reached US\$4 billion (Gagnon, Lexchin, 2008)11

According to IMS approximately 30% of spending on ' unmonitored promotion' what types of activities are covered? In part, this includes a range of non- traditional promotional activities described in the pharmaceutical marketing literature and in court cases about pharmaceutical promotion (Steinman, 2006)12

### Non-Traditional Form of Marketing

Industry sponsored continuing medical and pharmacy education

Funding of key Physician' Opinion Leaders'

Ghost writing of Journal articles

Funding of diagnostic and treatment guidelines development

Public relations campaign including unbranded disease - oriented advertising

Funding of patient groups and medical societies

Market seeding research (phase IV studies without clear scientific objective)

Internet advertising

Journal supplement and free Journals

Pharmacy discount linked to sales volume.

Key Opinion Leaders

The number of pharmaceutical companies sponsored meeting and presentation by a physician who is sponsored by a company may not look like direct advertising to the audience and this may increase their effectiveness. Document from (Vioxx)'manufacturer Merck, cited in the wall street Journal, stated that physicians attending lectures by a sponsored physician wrote, an average, an additional US\$ 624 worth of prescriptions during the following year compared to doctors who had not attended such presentations (Hensley,2005)<sup>13</sup>. In contrast, meetings with sales representatives generated an increase of US \$ 166. These internal documents suggest that sponsored talks were an integrated part of Merck's marketing strategy (caplovitz, 2006)<sup>14</sup>.

Pharmaceutical marketers refers to paid health professional spokes people as " Key Opinion Leaders" " An awful lot of the doctors in the audience are naive about the fact that these are really sales talks" comments Jerry Avon of Harvard Medical school, US ( Hensley, 2005) <sup>15</sup> In one US state, Minnesota, over one year more than 20% of Physicians received payment from pharmaceutical companies, and over 100% physicians received more than US\$ 100,000( spurgeon,2007)<sup>16</sup>

Continuing Medical Education (CME)

Between1998 and 2003, financing of CME by pharmaceutical companies nearly tripled in the US, from US \$ 302 to \$ 971 million, and most CME is funded by the pharmaceutical industry (Stein brook, 2005)<sup>17</sup>. The standard governing commercial support does not prevent sponsors from discussing content with academic providers and suggesting topics or speakers.

Free Samples

Many physicians view free samples positively and stock them to provide to patients who would otherwise have to pay for medicine and cannot afford them. A key reason that many physicians see sales representatives is to obtain free samples. one study compared prescribing decisions before and after a family practice outpatient clinic brought in a policy prohibiting free samples (Boltri,2002) <sup>18</sup> If promotion of medicine did not affect treatment decisions, pharmaceutical companies pour billions of dollars into marketing targeting professionals each year. Given companies need to show a healthy profit to their shareholders, this seems unlikely. Market research companies calculated the average return, In increased sales, per dollar invested in pharmaceutical promotion in 2004 at US\$ 8.34. (Arnold, 2005) <sup>19</sup>. Fortune 500 rating also consistently rank the pharmaceutical industry as having among the highest return on investment of any industry. In 2006 it ranked second, after the oil industry, with a 19.6 % rate of profit as a percentage of total revenues (Fortune, 2006)<sup>20</sup>. The research evidence confirms the fact that promotion does affect professional practice.

**Promotion Influence**

Despite this profitability and the numerous examples of industry influence on health care, many health professionals underestimate the effect of pharmaceutical promotion on their beliefs and professional practice. The first study to examine the contrast between beliefs about influence ,and measures of that influence, surveyed a sample of Boston area physicians about their beliefs in two '

commercial myths' that were not supported by scientific evidence (Avorn,1982) 21 these were beliefs that a) Propoxyphene ,an analgesic with poor safety profile, was more effective than aspirin and b) poor blood flow was a major cause of senile dementia. The latter supported the use of vasodilators to treat dementia, although they had not been shown to be effective. Although most of the surveyed physicians stated that they relied on scientific information sources, they also believed these non- scientific' commercial myths. More recent studies of effect of free samples and sponsored symposia on prescribing behavior have similarly found an effect on prescribing despite health professional' belief' that they were unaffected ( Adair,2005,Orlowski1992) 22.

### Promotional Activities

In a crowded marketplace with many available pharmaceutical companies have a commercial imperative to persuade professionals that their product is the best choice in order to maximize profits. This is done through a variety of influence technique that form the core to successful marketing. The aim is to persuade professionals who are initially unaware of a medicines existence to move through the following series of stages

Unawareness-Awareness-Interest-Evaluation-Trials- Use- Repeat use (Lid stone and collier,1987)23. Pharmaceutical companies use a mix of delivery methods including advertisement, pharmaceutical sales representative, sponsorship and public relations message delivered with these different methods reinforce each other, Promotional techniques can influence prescribers at different stages of this process. companies often use advertising as a cost -effective way to create awareness of a product. Sales Representative can build from this and focus on moving through subsequent stages. Use of experts or peer Key Opinion Leaders to discuss a new product can also be effective in shifting professional from unawareness to awareness and ideally (for the marketers) interest in a product. Evaluation of a new medicine is based on an impartial examination of the scientific evidence, However, even when evidence is available few busy clinicians have the time required to perform systematic reviews or to critically appraise research reports. Additionally, the available evidence may be flawed due to poor research design, In complete reporting, its funding source and publication bias or it may not be relevant to patient care decisions a clinician is focusing. Sometimes an independent research group will have carried out a systematic evaluation of treatment options, but these evaluation may not be readily available or familiar to professional.

Both marketing trials and provision of free samples are means of moving physicians past this evaluation stage to the stages of 'trial' and 'use' in other words, to get them to try out a product on their patients, with the aim of stimulating broader use and repeat use. These are forms of market seeding, Marketing trials are studies that have a commercial rather than a real scientific objective, in which doctors are generally asked to prescribe a medicines to a certain number of patients and records outcomes. usually there is no comparison group or any precise research hypothesis being tested. prescribers are usually paid to be part of these marketing trials.

### Use of Gift

The pharmaceutical industry provided many types of gifts to health professionals, from pens and meals to sponsored CME, research and travel to exotic locations. In some cases, national regulations and industry self-regulatory codes limit the types of gifts that may be provided. but generally gifts of limited value and educational or research funding are allowed.

What explain the power of even small gift to shape or manipulate behavior. self-interest is not always the only or even the main factor involved. what the pharmaceutical companies understand but health-care professional often overlook, is that much of social life is based on reciprocity .the need to return benefits for benefits, kindness for kindness, and favor for favor is a basic motivator in virtually every human society ( Schafer,2004,Sahlins 1972)24 As one researcher wrote " Each of us knows the social sanctions and ,derision applied to anyone who violates it. Every time we accept a gift, we become beholder to the person who has given it to us (Cialdini, 2000)25. Even token gifts such as coffee mugs can have a surprisingly large effect (Steinman,2001)26 Importantly, trinkets and ban bless - small gifts of all kinds- buy ' facetime and help to establish a friendly and powerful relationship between the pharmaceutical companies and the health Care professional to when they

are attempting to market their products effectively. As Katz(2003) 27 Observes , " Those who do not acknowledge the the power of small gift are the ones most likely to be influenced ,because their defenses are down" contrary to what people expect, small gifts can be as or more effective in changing attitudes than larger incentives (O ' Keefe,2002)28 Health professional who receive valuable and expensive inventive from pharmaceutical manufacturers may be more aware that the aim is to influence them than if they receive small token gifts of little value, However ,in both cases, health professional may be influenced through feelings of reciprocal obligation.

Whether intended or not every grant and gift from a pharmaceutical company to doctors, pharmacist or student comes with string attached - string which are often difficult to reorganize but which are nevertheless psychologically influential. Gift a giving lead to many health professionals feeling an obligation to accept visit from sales Representative and to be open to what they have to say. Gift pens with a medicines brand names on them are particularly effective because they constantly remind prescribers of the medicine name so that it will be more likely to be the first to come to mind when making a decision.

### **Advertisement in Medical Journal**

Although the pervasive presence of pharmaceutical advertisements.in medical journal may suggest otherwise, companies only spend a small fraction of each promotional dollars on advertisement. The ethical criteria for Medical Drug promotion developed by the world of information that, as a minimum should be contained in a journal advertisement (WHO, 1988)29 The aim.is to ensure that basic information needed for prescribing decision is present. The medicine's international nonproprietary name (INN) usually the generic name is a key piece of information that should always be included. Generic names help doctors and pharmacist identify which class a medicines belong to and can prevent doctors from unknowingly prescribing two medicine from the same class to a patient.

The world health organization ethical criteria recommend that the following information be included in pharmaceutical advertisements appearing in medical journals.

Name of the active ingredients using either

International nonproprietary name (INN) or the approved generic name of the medicine

Brand name

Content of active ingredients per dosage form or regimen

Approved therapeutic use

Dosage form or regimen

Side effects and major adverse medicine reaction

Precaution contraindications and warning

Major interaction

Name and address of manufacture or distributor

Preference to scientific literature as appropriate (WHO,1988)

### **Conclusion**

One of the greatest ethical challenges facing health professional is the influence of pharmaceutical promotion on professional practice interaction between the pharmaceutical industry and health professional area complex, strategies involving a combined approach are therefore likely to be needed to be aware of one's own vulnerability to influence, avoidance of conflicts of Interest and unnecessary exposure awareness and transparency. when exposure and conflict of interest are unavoidable and development of positive strategies to improve prescribing and dispensing whatever the strategy, the key goal is to ensure that good patient care come first.

In parallel to the lack of priority given to regulations Pharmaceutical promotion has received relatively little attention in medical and pharmacy education (Mintzes, 2005) 30 This lack of attention stands in dark contrast to the billion. dollars spent each year on pharmaceutical promotion. Health professionals often incorrectly believe that they are not being influenced by promotion and may have little training on how to distinguish ethical from unethical promotional practice.

Unethical promotion can affect patient Care negativity. Interaction between health professional and the pharmaceutical industry often begin early in training. Discussing these interaction can help to distinguish ethical from unethical relationships and biased from accurate information. Training in therapeutic is an important part of professional education. It is also important to understand the context in which these therapeutic decision about medicine use are made.

As a minimum, advertisement for prescription medicine should contain the key information listed in the WHO ethical criteria concerning the medicine name and manufacturer. who it is indicated for, key beneficial and harmful effects and references to scientific evidence to back treatment claims. This provides basic knowledge of a medicine's characteristics required for prescribing decisions. However, the pressure of this information does not ensure that the advertisements promote appropriate use. To critically appraise advertisement. It is important to systematically look, at all of the advertisements element date and graphs, text references and images. Often social as well as medical dimensions come in such as the portrayal of the relationship between doctors and patients or the way woman or the elderly are portrayed. Additionally, myth and emotive imagery may be used to create an impression of a brand that has little to do with evidence of the products effect and characteristics. underlying any critical appraisal of advertising.

#### REFERENCES:

1. World Health organization (1993) clinical pharmacological evaluation in drug control Copenhagen, world health organization. Regional office for Europe document reference EUR/ICP/ DSE 173
2. IMS Health market prognosis (2008) Global pharmaceutical sales 2000-2007, 28 March. <http://w.w.w.imshealth.com/portal/site/impshealth/menuitem.a46c6d4df3db4b3d88f611019418c229/?Vgnnextoid=67a89df4609e911ovgnVCM10000071812can2RCRDandcpsextcurrchannel-1>, accessed 17 April2009.
3. Scrap(2007) choix d ' une ' eprouvees quel' atorvastatin revue prescrire 26(276)692-695
4. World Bank(2008)world development indicators 2007.Total Gross National Income (GNI),Atlas method [http.site.resources.worldbank.org/DATASTATISTICS/Resources\(GNI.pdf\)](http://site.resources.worldbank.org/DATASTATISTICS/Resources/GNI.pdf).accessed17April2009)
5. Prescrire (2006) choice d ' unestatine : pravastatine et simvastatine sont mievx eprouvees quel' atorvastatine LA revue prescrire 26(276)692-695
6. Prosper H Almond S.walley T(2003) influence on GPs decision to prescribe new drugs - the importance of who says what Family practice 20(1)61-68
7. Zipkin DA, Steinman MA(2005) interaction between pharmaceutical representative and doctors in training a thematic review, Journal of General internal Medicine, June 13,20(8) 777-86
8. Brennan TA, Rothman Dj, Blank L et.al (2006) Health industry practice that create conflict of interest. A policy proposal for academic medical centers Journal of American Medical Association,295:429-433
9. Campbell EG, Gruen RL, Mountford J et.al (2007) A national survey of physicians industry relationships New England Journal of Medicine356: 1742-1750
10. WazanaA (2000) Physicians and the pharmaceutical industry, Is a gift ever just a gift ? Journal of the American Medical Association,283: 373-380
11. Gagnon MA, Lexchin J ( 2008) the cost of pushing pills: a new estimate of pharmaceutical promotion expenditures in the united states .Plos Med 5 (1): e1

12. Steinman 2006 Narrative review the promotion of gabapentine an analysis of internal industry document *Annals of internal medicine* 45: 284-293
13. Hensley S, Martinez B (2005) new treatment: To sell their drugs, companies increasingly rely on doctors. For \$ 750 and up physician tell peers about product. *wall street journal ( New York)*, 15 July, 2005 AL
14. Caplovitz A (2006) Turning medicine into snake oil : pharmaceutical marketers put patient at risk. NJPIRG law and policy center, US( [http www.njpirg.org](http://www.njpirg.org), accessed 17 April 2009)
15. Hensley S, Martinez B ,(2005) New treatment : to sell their drugs, companies increasingly rely on doctors For \$ 750 and up. Physicians tell peers about product *wall street journal ( New York)* 15 July 2005 AL
16. Spurgeon D (2007) *New York times* reveals payment to doctors by drug firms. *British Medical Journal* 334:655
17. Steinbrook R(2005) commercial support and continuing medical education *New England Journal of Medicine*, 352: 534-535
18. Boltri JM et.al (2002) Effect of antihypertensive samples on physicians prescribing pattern *family medicine journal* 34: 729-731
19. Arnold M (2005) All the talk about pharma ROI yields only diminishing returns *Medical Marketing and Media* 40(3) 9
20. Fortune 500 (2007) Top industries: most profitable industries, return on investment, 30 April [http.many.cnn.com/ magazine/ Fortune/ Fortune 500/ 2007/ performers/ industries/ return\\_on\\_revenues/ index.html](http://many.cnn.com/magazine/Fortune/Fortune_500/2007/performers/industries/return_on_revenues/index.html), accessed 17 April 2009
21. Avorn (1982) scientific verses commercial sources of influence on the prescribing behavior of physicians *American Journal of Medicine* 73: 4-9
22. Adair RF (2005) do drugs samples influence resident prescribing behavior? A randomized trials *American Journal of medicine* 118: 881-884
23. Lidstone J ,Collier T,( 1987) *Marketing planning for the pharmaceutical industry*, Aldershot ,UK Gower [http://www.malthyskepticism.org/ promotion / textbook/ market/ behavior .htm](http://www.malthyskepticism.org/promotion/textbook/market/behavior.htm)., accessed 17 April 2009
24. Schafer A (2004) Biomedical conflict of interest : a defense of the sequestration thesis *journal of Medical Ethics* 2004: 30: 8-24 p 21
25. Cialdini RB( 2000) *influence .science and practice 4 th ed* New York, Allyn & Bacon Steinman (2001) Of principles and pend attitude and practice of medicine house staff towards, industry documents. *Annals of internal Medicine* 45: 284-293
26. Katz D ,Caplan AL, Merz JF (2003) All gift large and small *American journal of Bioethics* ,3: 39- 46
27. O ' Keefe DJ (2002) *persuasion: theory and research 2nd Med thousand ca ks* California sage publications.
28. WHO(1988) *World Health Organization Ethical criteria for medicinal drug promotion* Geneva, WHO
29. Mintzes B (2005) Educational initiative for medical and pharmacy student about drug promotion. An international cross - section survey *World Health organization and Health Action International*. Document reference WHO/ PSM/ PAR/ 2005.2