

Continuing education for general practice and the role of the pharmaceutical industry

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SUMMARY. A survey of the involvement in and attitudes towards continuing medical education of 101 general practitioners achieved a 95% response rate. Ninety per cent of the 96 doctors worked in practices which held meetings the content of which was organized by representatives of pharmaceutical companies but only 46% worked in practices which organized their own educational meetings. Seventy six per cent attended meetings away from their practice which were organized by drug companies and 75% had attended at some time continuing medical education activities organized by a local postgraduate centre.

The promotional aspects of the drug company organized meetings were disliked by a majority of respondents (58%); more of the trainers (62%) and more of those who had entered general practice within the last seven years (71%) disliked this aspect. Nonetheless the educational content of both meetings held in the practice and those held elsewhere was the aspect most liked by over half of the respondents (59% and 53% respectively).

Only 16% of all respondents thought that visits by representatives from pharmaceutical companies were educationally valuable and 37% thought that educational events organized by these companies were of value. Surprisingly 60% of those who worked in practices which held meetings organized by drug company representatives thought them to be of little or no educational value.

There is clearly a need for practice based continuing medical education but the current level of dependence on drug companies for organizing these meetings must be questioned. Alternative strategies for the provision of independent non-sponsored educational activities should be sought.

Introduction

THE relationship between the medical profession and the pharmaceutical industry has always been a source of comment and some concern. Nevertheless, to quote from the introduction to the report of a working party of the Royal College of Physicians 'There needs to be a close and constructive relationship between the medical profession, which prescribes drugs for patients and the pharmaceutical industry, which produces and markets them'.¹ The main worry about the involvement of the pharmaceutical industry in continuing medical education has been the blurring of the distinction between pro-

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Submitted: 21 December 1989; accepted: 20 June 1990.

© *British Journal of General Practice*, 1990, 40, 510-512.

motion of the industry's products and the provision of impartial information and instruction. When hospitality becomes excessive or the information provided at a meeting which purports to be educational is promotional hyperbole then the position is clear, but it is with the more typical meeting which depends upon pharmaceutical support that the issue becomes clouded.

A number of sources have provided guidance about the relationship between the pharmaceutical industry and the medical profession in educational and other matters,^{2,3} but little information is available about the amount of drug company organized events which general practitioners attend and their attitudes towards these meetings. This paper reports the responses to questions about these issues in a survey of general practice continuing education.

Method

An invitation from the authors to take part in the survey was posted to a random sample of 45% of the general practitioners on a family practitioner committee list. Individual doctors were initially approached on the telephone by interviewers employed by an independent research company and then interviewed in person. Those practitioners who were not willing to take part were offered the opportunity to be interviewed by a fellow general practitioner.

The questionnaire was prepared and analysed within the Department of Postgraduate Studies but anonymity was observed throughout. A semi-structured questionnaire was used and was piloted among general practitioners from outside the study area. The questionnaire contained questions about the type and amount of continuing medical education undertaken, the respondents' attitudes to the continuing medical education available and their perceived needs for their future continuing medical education. Open-ended questions and attitudinal statements were included. The general practitioners were asked to indicate on a five point scale ('very valuable' to 'no value') their opinion of the value in educational terms of visits by the representatives of pharmaceutical companies and of educational events organized by these companies. No attempt was made to measure the actual educational value of any activity, only the attitudes of those who took part.

The data were analysed using SPSS-X.

Results

Completed questionnaires were obtained from 96 of the 101 general practitioners in the sample, giving a response rate of 95%. Twenty six of the respondents were women and 33 were trainers. Five had qualified outside the United Kingdom. Thirty five had been a principal for less than eight years and 28 had been a principal for over 21 years.

Meetings organized by pharmaceutical companies: practice based

Eighty six (90%) of the respondents said that their practices had ever held meetings on the practice premises for which pharmaceutical companies organized the educational content. This can be compared with 44 (46%) who said that their practices had held meetings on the premises in which the members of the practice determined the educational content. The frequency of both types of meeting are shown in Figure 1. Those general prac-

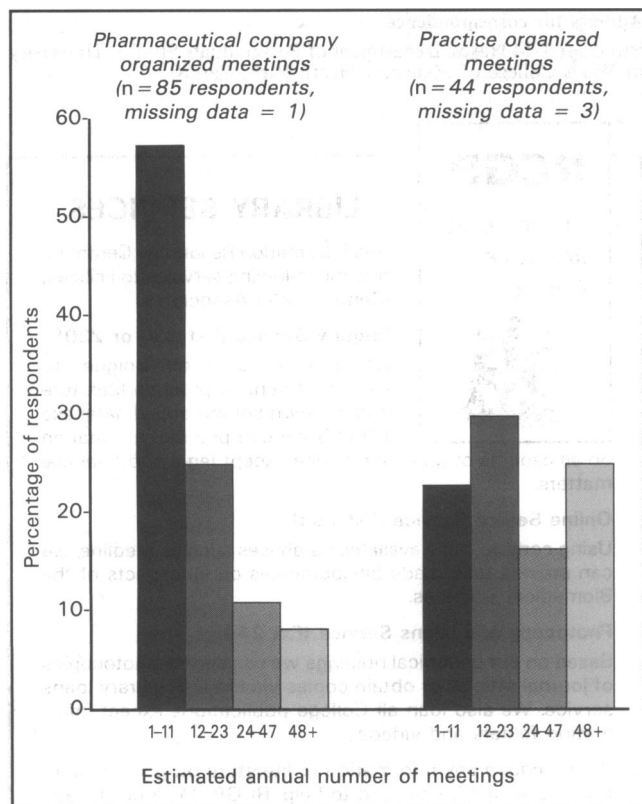


Figure 1. Frequency of meetings where the content was organized by the practice and by pharmaceutical company representatives.

tioners whose practices held their own meetings had more frequent meetings than those who reported drug company organized meetings. There was no significant difference between the percentage of trainers (29/33, 88%) and non-trainers (57/63, 91%) whose practices held drug company organized meetings; however trainers tended to report fewer meetings of this type.

Respondents volunteered the aspects of drug company organized meetings held within practices which they liked and disliked (Table 1). The aspect liked best was the content of the meeting (59% of respondents) and the aspect most disliked was the promotion of products (58%). The promotional aspects were particularly disliked by trainers (18/29, 62%) and by those who had been in practice for less than eight years (20/28, 71%).

Meetings organized by pharmaceutical companies: not practice based

In contrast to the proportion of respondents whose practices organized meetings 72 of the 96 respondents (75%) had attended at some time at least one local continuing medical education activity organized by the postgraduate centre. Seventy three (76%) said that they had attended educational events organized by the pharmaceutical industry away from their practices within the last year. Some of these events were held in hospitals (attended by 39 (53%) of 73 respondents) and some in local hotels (attended by 58 (79%)). Eighteen of the 73 general practitioners (25%) attended two or fewer such meetings a year but 33 (45%) went to six or more a year.

The content of drug company organized events outside the practice was liked by 53% of the 73 respondents attending these meetings and 47% thought that the informal contact with colleagues was beneficial. The hospitality was included in the list of things liked about such meetings by 26% of this group.

Twice as many trainers (36%) never attended these drug company events as non-trainers (18%). The length of time that general practitioners had been in practice did not influence the percentage of those who attended. Among those who attended meetings organized by drug companies there was no difference between the proportion of attenders and non-attenders at conventional continuing medical education activities at local postgraduate centres.

Attitudes towards the involvement of pharmaceutical companies in continuing medical education

Only 16% of all 96 respondents thought that visits by representatives from pharmaceutical companies were educationally valuable and 37% thought that educational events organized by pharmaceutical companies were of value (Table 2).

Of the 86 general practitioners who held practice based drug company visits 15 (17%) thought that these visits were valuable compared with one general practitioner (10%) out of those who did not hold drug company meetings. More of the general practitioners who were not trainers thought these visits valuable (21%) than the trainers (6%).

Events organized by pharmaceutical companies were thought to be of little or no educational value by 60% of the 86 general practitioners whose practices held meetings organized by drug companies. Similar feelings were expressed by 56% of the 73 who attended drug company sponsored meetings away from their practice. Fewer trainers (30%) compared with non-trainers (40%) thought meetings organized by drug companies were valuable or very valuable. Of the 35 who entered general practice less than eight years ago 27% (9/34) thought drug company organized meetings were valuable or very valuable compared with 57% of the 28 who had been in practice for 20 years or more.

Table 1. Aspects of practice based pharmaceutical company organized meetings which respondents liked and disliked.

	Percentage of respondents
Aspects liked by respondents (n = 85)	
Content	59
Informal social contact	31
Audiovisual aids	22
Discussion	19
Convenience	12
Aspects disliked by respondents (n = 84)	
Promotion of products	58
Content	25

n = number of respondents.

Table 2. Perceived educational value of pharmaceutical drug company activities.

	Percentage of respondents (n = 96) answering:				
	Very valuable	Valuable	Little value	No value	No view
Visits by pharmaceutical representatives	0	16	51	33	1
Educational events organized by pharmaceutical companies	2	35	53	10	1

n = number of respondents.

Discussion

The use of pharmaceutical company sponsorship to assist in postgraduate medical education is common and is welcomed as a valuable support for underfunded activities. However, the need for such a source of funding is perhaps regrettable.

In postgraduate centres well recognized guidelines about such sponsorship are used:⁴ the educational content of meetings should be under the control of the clinical tutor or other organizer; the sponsorship should be limited to reasonable support; and hospitality should be simple. In return, the pharmaceutical company should have access to those attending by means of a stand situated near where the meeting is being held. If a meeting is held at which a particular company's products are mentioned then an independent consultant in the relevant specialty must be present and able to comment. Nevertheless drug company sponsorship of courses has been shown to result in the products of the sponsoring company being preferred in subsequent prescribing.⁵

Such external control and balance cannot be maintained when a pharmaceutical company runs a meeting at which it alone decides on the content; this applies as much at a promotional meeting put on for hospital staff as in a general practitioner's surgery. These activities are common and it is notable that in this study more general practitioners worked in practices which held such meetings than in practices which arranged their own practice based continuing medical education.

Why do practices hold educational meetings organized by pharmaceutical companies? The hospitality provided cannot be sufficient reason, although the opportunity for informal social contact with colleagues may well be important. Although this survey made no attempt to measure the true educational value of sponsored meetings and concentrated rather on the perceived value of such meetings, many respondents, particularly those who had become principals less than eight years ago, did not find the content satisfactory. Yet the meetings clearly fill a perceived need. The most likely explanation is that practices wish to develop educational meetings but lack the resources and experience to do so. The offer from drug company representatives to organize a meeting, provide films, videotapes and other audiovisual aids and offer lunchtime refreshments is an attractive one. This supplies a ready-made substitute for independently organized continuing medical education.

There is a clear need to encourage and facilitate the development of independently organized, non-sponsored continuing medical education in general practice. This will require funding and practices will need to be provided with the resources to carry out such activities. If adequate funds do not become available to allow the development of non-sponsored continuing medical education then one approach would be to ensure that reasonable guidelines are developed for the use of pharmaceutical company sponsorship of meetings within general practices and that these are agreed with the pharmaceutical industry.

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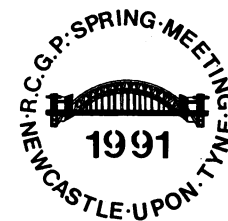
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