

Selected references from *Prescrire's* literature search.

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3- European Commission - Health and Consumers Directorate-General "General report on experience acquired as a result of the application of the Paediatric Regulation (Article 50(2) of Regulation (EC) No 1901/2006). "Experience acquired" and "lessons learnt" submitted for public consultation - Deadline for public consultation 28 November 2012" 18 September 2012: 13 pages.

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Translated from *Rev Prescrire* June 2013; **33** (356): 455

## The powerful influence of pharmaceutical sales representatives

It has long been established that visits by pharmaceutical sales representatives have a detrimental effect on the quality and cost of prescriptions (1,2). It is best not to underestimate their influence, while the pharmaceutical industry and French Ministry of Health continue to legitimise these visits through the "Sales Visit Charter", a code of conduct establishing norms for sales visits (3).

**A survey of 179 doctors in Brittany (France).** A study conducted in Brittany in 2009-2010 provides a concrete example of the influence that pharmaceutical representative visits have on doctors (4). Through telephone interviews, a profile was drawn up of 179 doctors selected at random from the 2950 general practitioners in Brittany. Information was collected on the frequency of meetings with pharmaceutical sales representatives, continuing education habits, type of medical practice and relationships with pharmaceutical companies. These doctors were then divided into 6 groups, based on the frequency of meetings with pharmaceutical sales representatives (4).

The Rennes regional state health insurance office (CRAM) then supplied aggregated data for the 6 groups, which were used to analyse their prescribing behaviour, including: the cost and number of prescriptions, and the drugs they tended to prescribe within certain pharmacotherapeutic groups (4).

### Measurable industry influence.

According to this study, the doctors who met most frequently with pharmaceutical sales representatives conducted shorter consultations with their patients and more consultations per day. They had been in practice longer, were more likely to read free medical journals and less likely to read medical journals requiring a subscription (4).

These doctors prescribed more angiotensin II receptor blockers, glitazones, gliptins (dipeptidyl peptidase-4 inhibitors) and certain antibiotics such as *moxifloxacin*, *levofloxacin* and *telithromycin* within their respective therapeutic classes (4). All of these drugs are promoted by pharmaceutical sales representatives at the expense of better evaluated, safer or cheaper alternatives.

This study also showed a statistically significant correlation between the fre-

quency of meetings with pharmaceutical sales representatives, and the number and cost of their prescriptions (4).

### Refuse to see pharmaceutical sales representatives in the interest of better patient care.

The harmful effects of presentations by pharmaceutical sales representatives sidetrack healthcare professionals from a fundamental goal, which is to offer patients the most appropriate treatments. This is yet another reason to follow the example of the 17% of general practitioners surveyed who refuse to see pharmaceutical sales representatives (4).

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