LETTERS

Information Technology: Privacy an Issue



Your article provided lots of great insight from pharmaceutical industry leaders about their individual quests to achieve a return on their I'm curious to hear everyone's perspective on the HIPAA subject and how they plan to utilize

IT solutions to address it.

- Andrew Weissberg

that the industry will continue to embrace IT solutions that address key priorities like accelerating and enhancing R&D efforts, increasing the sales pipeline, and fostering better relationships with physicians and providers. One of the issues that is going to "rock" the healthcare industry is HIPAA, particularly the physicians and providers that deliver the care, as well as the retail pharmacies. This is very much an IT issue.

Physicians and providers will need to achieve compliance before the end of 2002, or they will face strict penalties, and none of the contributors to the article shed light on how they plan to assist physicians and providers with tacking the complexities and challenges of HIPAA compliance. Perhaps some of their IT investments should be focused in this area to help their customers and supply chain participants to achieve HIPAA compliance? Recently, it was made public that a major pharmaceutical company inadvertently released the e-mails of more than 600 patients taking an anti-depres-

sant medication. By exposing the names of the subscribing users, people are able to trace their real names and other private information about them, including medical history. The Federal Trade Commission is now in the process of investigating the pharmaceutical company's Internet privacy policy. When it comes to IT, security and privacy are paramount priorities and I'm curious to hear everyone's perspective on the HIPAA subject and how they plan to utilize IT solutions to address it.

Andrew Weissberg

VP OF BUSINESS DEVELOPMENT AND CHIEF TECHNOLOGY OFFICER **CPRI COMMUNICATIONS**

Medical Privacy: At What Cost?

I am concerned that HIPAA, the Health Insurance Portability and Accountability Act, with all of its cost-creating complexity, does not seem to address the real fact that there are occassions — for example, clinical trials where a significant majority of patients may not even know what their options are for addressing their illnesses.

Preventing the free exchange of data in such circumstances, as HIPAA does, effectively robs patients of knowledge that could benefit their decision-making process.

John Hollway

CHIEF PRIVACY OFFICER AND SENIOR VP OF MARKETING ACURIAN INC.

iterest is Up

ıst got my copy of PharmaVoice and I have to say, each issue is getting better and better. The November/December issue really looks great! I see some interesting and provocative things popping up.

Beth Porteous

VP, CORPORATE **COMMUNICATIONS COMMONHEALTH**

investments in IT solutions. It is quite clear

What's Your Opinion?

Should the FDA collect special user fees from pharmaceutical manufacturers to analyze and disseminate data regarding the real-life performance of new drugs and biologics after they are released into the general population? Special fees are currently collected only for the purpose of supporting an infrastructure within FDA to speed the drug approval process. The legislation authorizing the collection of these fees, known as the Prescription User Fee Drug Act (PDUFA), is set to expire at the end of September 2002

According to some industry experts, the impact of this improved process is most assuredly a boon for U.S. citizens, but at the same time it requires that the pharmaceutical industry perform greater surveillance once those drugs are in non-clinical trial use. Should postmarket surveillance continue to be an essential programmatic function for the FDA? Or should the industry become its own watchdog?

Judith A. Cahill, executive director of the Academy (Pharmacy, provides four proposals: A new user fee impo manufacturers to be added to PDUFA for the purpose postmarket surveillance; an aggressive educational carr paign targeted at providers stressing the importance reporting adverse drug effects; an audit of current noti cation systems; and, finally, consideration of an alterna tive: the creation of a new, separate agency to focus on post-market surveillance.

WHAT'S YOUR OPINION? Please e-mail your comments to feedback@pharmalinx.com.

