



Study Shows **GENDER, RACIAL DISPARITIES AMONG CLINICAL INVESTIGATORS**



Dr. Ken Getz
More than 70% of all physicians, regardless of race or gender, tell us they have a strong desire to participate in clinical research, but a number of factors are dissuading them from doing so, says Ken Getz, Ph.D., Director, Tufts Center for the Study of Drug Development.

Although the overwhelming majority of physicians in the United States have a high interest in participating in clinical-research studies, the actual participation rate of minority and female physicians is relatively low, according to a study by the Tufts Center for the Study of Drug Development.

The study, which investigated minority and gender disparities among clinical-research investigators, found that about 17% of white physicians participate as principal investigators in clinical studies, compared with an estimated 14% of black physicians, 11% of Hispanic physicians, and 9.6% of Asian physicians.

When the study results are examined by gender, only 11% of female physicians participate as principal investigators, compared with 17% of male physicians.

Moreover, minority and female clinical investigators initiate far fewer clinical trials annually than do their white or male counterparts.

Time constraints and lack of infrastructure, such as dedicated personnel and office space, are key barriers that minority physi-

Minority physicians are less likely to refer their patients into clinical studies than white physicians.

cians say prevent them from participating as investigators at the same level as white physicians. Female physicians cited time constraints and infrastructure needs as major obstacles to their participation.

The Tufts Center study, which was based on surveys of almost 1,400 physicians who self-reported their race using choices consistent with U.S. Census Bureau classifications, also reported:

- More than half of black (51%) and Hispanic (57%) physicians consider a physician's race an important factor in influencing minority patient participation in clinical research, compared with white (9%) and Asian (21%) physicians.
- Minority physicians are less likely to refer their patients into clinical studies than white physicians (38% vs. 47%, respectively). Of physicians who refer patients, white and black physicians, on average, refer twice as many patients to studies as do Asian and Hispanic physicians.
- Female investigators, who annually initiate one-third the number of studies that male investigators initiate, report that distrust of the healthcare system and child care issues are major factors limiting their patients' participation in clinical research.

SPECIALTY SALES REPS Have Greater **IMPACT ON PRESCRIBING**

Physicians believe pharmaceutical sales representatives who target a specific therapeutic area have a greater impact on their prescribing choices than representatives who focus on primary or general patient care. They perceive specialty reps as having more knowledge about products and competitors in their therapeutic area of focus.

The Verispan study, Specialty Reps 2007: An Influential Force, evaluates how physicians' perceptions of specialty reps have changed and explores the impact these changes are having on physician prescribing.

Verispan surveyed almost 4,000 physicians across 24 specialties about their interactions with sales reps and their perceptions of the differences between, and preferences for, specialty and general reps. When asked which level of impact reps had on their prescribing choices, 47% of respondents rate specialty reps in one of the top two levels, compared with 11% that rate general reps in the top two positions. Almost all respondents agree that specialty reps are more knowledgeable about their therapy area, and 87% also believe specialty reps know more about products and competitors in their therapy area than general reps.

87% of physicians believe specialty reps know more about products and competitors in their therapy area than general reps.

Medicare Part D Results in **INCREASED USE OF GENERIC DRUGS**

Generics accounted for more than half the drugs dispensed under Medicare's Part D in its first six months of availability from January through June 2006. According to Generic Drug Utilization in the Medicare Part D Program, a report from the U.S. Department of Health and Human Service's Office of Inspector General:

- Generics were dispensed 88% of the time when substitutes were available.
- 37% of prescriptions were written for drugs with no generic substitutes.
- 56% of all drugs dispensed were generics.

Under Medicare Part D, 56% of all drugs dispensed were generics.

Generic drug substitution rates were similar across Part D plans, between Medicare Advantage prescription-drug plans (MA-PDs) and stand-alone prescription drug plans (PDPs), and across specific types of MA-PDs.

The generic drug substitution rates, however, varied widely within certain therapeutic classes, such as cardiovascular and diabetes care.

Follow up

THE TUFTS CENTER FOR THE STUDY OF DRUG DEVELOPMENT AT TUFTS UNIVERSITY, Boston, provides strategic information to help drug developers, regulators, and policymakers improve the quality and efficiency of pharmaceutical development, review, and utilization. For more information, visit csdd.tufts.edu.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICE'S (HHS) OFFICE OF INSPECTOR GENERAL (OIG), Washington, D.C., serves to protect the integrity of the HHS programs, as well as the health and welfare of the beneficiaries of those programs. For more information, visit oig.hhs.gov.

VERISPAN, Yardley, Pa., a joint venture of Quintiles Transnational Corp. and McKesson Corp., provides information products and services to the healthcare industry and provides patient-centric longitudinal data. For more information, visit verispan.com.