

**LETTERS**

# Don't look now, but the Ivory Tower's a bit mud splattered!

Damn the torpedoes from our critics. Let's get on with the kind of government-industry-academic collaboration that spawns innovation in patient care.—*John Kamp*, EXECUTIVE DIRECTOR, THE COALITION FOR HEALTHCARE COMMUNICATION

## Damn the Torpedoes, Full Speed Ahead

Recent calls from academic ivory towers to end pharmaceutical and device company collaboration with doctors and medical centers are stupefying and potentially dangerous.

Stupefying because pharmaceutical companies are often a patient's best ally against pain, disease, and premature death.

It's the drug companies that create the innovations that enable better health, and it's their marketing communications partners that help assure that doctors safely and effectively translate those innovations into good practice.

This call to action is dangerous because this kind of academic rhetoric fuels the politics of intimidation against pharmaceutical companies brought to us by the likes of Senator Charles Grassley, the editorial pages of major newspapers, and the creative lawyers working on behalf of the Department of Justice and plaintiff attorneys across our country.

It's time for drug companies and their allies to stand up and shout out against such diatribes.

The pharmaceutical industry and its companies bring products and ideas of real value to the American people.

Meanwhile, it's time for some of the politicians, lawyers, and academic medical center leaders to take a reality test on some of their goofy, self-righteous, and counter-productive ideas.

Consider the January 25th "Special Communication" from several medical academicians essentially calling for a ban on physician-industry collaboration, including drug detailing, drug samples, and academic consulting and research arrangements. Yes, they still want the research and education grants, but would refuse any collaboration with the grantors.

Are these folks living on another planet?

Sure, all these things create potential conflicts of interests and, as such, need to be aggressively managed, but we shouldn't confuse management of a problem with killing some of the most effective, efficient information programs in any field.

And, while we are talking about thorny ethical conflicts in the medical-care delivery business, let's put some others on the table.

For example, healthcare institutions operate in a market world, the same as the regulated industries.

We should take a look at some of the conflicts created by a hospital's need to fill beds, pay for new programs, equipment, and faculty salaries.

Let's put all the potential conflicts on the table and let the institutions and their members continue to the struggle for best ethical and patient practices.

But let's also give credit to the serious ethical codes created in the past several years by the AMA, ACCME, PhRMA, AdvaMed, AAMC, and other associations and guidance committees.

Meanwhile, it is our responsibility to do a better job of setting the public record straight by promoting the value proposition of medical innovation and the value of company sponsored communications.

Sure, our industry deserves criticisms for some past practices, and goodness knows we're getting them. But it doesn't deserve to become a 'whipping boy' for an impotent body politic that can't seem to fix the health financing problem on its own.

Damn the torpedoes from our critics. We need to get on with the kind of government-industry-academic collaboration that spawns innovation in patient care.

We need to keep proudly focused on new pharmaceuticals, new uses for existing drugs, and better communications to clinicians and patients.

And we cannot be afraid to hose down the Ivory Tower when it's called for.

*John Kamp*  
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## What's Your Opinion?

### EVOLVING BUSINESS MODELS

Alternatives to the integrated pharmaceutical company business model are taking hold as smaller players contribute to the industry's value chain. Some of these newer players are focusing on specific areas, such as development, while others are creating hybrid models. Is the era of the do-all-things pharmaceutical company coming to an end? Or will multinational, multidimensional companies continue to dominate the landscape?

### WHAT'S YOUR OPINION?

Please e-mail your comments to [feedback@pharmavoices.com](mailto:feedback@pharmavoices.com).

