

Keep pharmaceutical promotion out of doctors' electronic tools

JUN 16, 2021

Tanya Albert Henry

Contributing News Writer

The good news: It's uncommon for physicians to be targeted with pharmaceutical marketing when they are using electronic health record (EHR) systems and there is no evidence that avenue to reach prescribers is gaining in popularity, says an AMA Board of Trustees report adopted at the June 2021 AMA Special Meeting.

The top five EHR systems—which account for 85% of the market share—do not appear to have advertisements featured on the platforms, according the board report. A small portion of the other 15% may generate revenue through ads, but only a handful offer partnerships with pharmaceutical companies. Still, that means some EHRs and e-prescribing programs may present opportunities for advertisers to reach doctors at that crucial point of care—and that shouldn't be allowed to happen.

Research cited in the AMA board report shows that exposure to physician-directed advertising is associated with less effective, lower-quality prescribing decisions and that exposure to pharmaceutical company-provided information leads to higher prescribing frequency and higher costs.

In one instance, Practice Fusion, a company Allscripts purchased in 2018, used an ad-supported revenue model. After a federal investigation, Practice Fusion admitted to soliciting and receiving kickbacks from opioid manufacturer Purdue Pharma in exchange for clinical decision support (CDS) alerts promoting unnecessary opioids at the point of prescribing in their EHR system, the report notes. The Pain CDS in Practice Fusion's EHR displayed alerts more than 230 million times between 2016 and 2019. Those who received the alerts prescribed extended-release opioids at a higher rate than those that didn't.

“This activity by Practice Fusion demonstrates how the EHR can present opportunities for stakeholders to abuse the system, inappropriately influence physicians' decisions and put patients at risk,” the board report says.

To combat this sort of inappropriate promotional effort, the AMA House of Delegates amended existing policy to “oppose direct-to-prescriber pharmaceutical and promotional content in EHRs.” They also moved to oppose such content “in medical reference and e-prescribing software” unless it complies with the AMA’s guidelines on direct-to-consumer advertising.

The amended policy also encourages studying “the effects of direct-to-prescriber advertising at the point of care, including advertising in EHRs on physicians prescribing, patient safety, data privacy, health care costs and EHR access for physician practices.”

With the new policy, the AMA also:

- | Opposes the preferential placement of brand-name medications in e-prescription search results or listings.
- | Will encourage e-prescribing and EHR companies to ensure that the generic medication name will appear first in e-prescription search results and listings.

Read about the other highlights from the June 2021 AMA Special Meeting.