



## Reflections

### Trick or treating in Orlando

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**M**y 10-year-old daughter Laura picks up another pen and drops it into her tote bag. “This is just like Halloween!” she exclaims.

Indeed. We are in the exhibit hall at the annual meeting of the American Association of Family Physicians in Orlando, Fla. I have brought Laura along this morning to give her some experience of Orlando other than the Magic Kingdom, and it has become apparent that we have really just entered another theme park. The room is the size of a football field and is filled with booths representing more than 1000 organizations, most of which are drug companies. All of them have something to give out for the price of listening to a brief presentation or completing a survey.

Accustomed to the somewhat more regulated pharmaceutical industry in my own country, my innocent Canadian eyes have never seen anything like this before. Aside from the usual assortment of pens and tote bags, they are giving away cappuccinos, smoothies, and chocolate crepes. There are massages (interestingly, for an incontinence drug), Zagat restaurant guides, flash memory cards, and wall clocks. At one booth, Laura has her picture taken with characters dressed as lipid molecules; 20 minutes later she picks it up printed on a mouse pad. And, “Check out that climbing wall, Dad!” Not surprisingly, the longer the pitch, the bigger the gift.

Upon our return to Winnipeg, Man, we unload our suitcases and nearly cover the dining room table with our bounty. After some quick calculations, we are surprised to find that in 2 hours of being detailed, we have acquired about \$250 worth of items, not including food and drinks. What kind of message was this giving Laura?

To gain some perspective, I send an e-mail to Dr Allan Ronald, an infectious disease specialist from the University of Manitoba who is well known for his work with AIDS victims in Africa. My question: how much would it cost to provide antiretroviral medication to one infected African for a year? His answer confirms my suspicions: \$240.

The priorities seem obvious, but the problem that I think many of us share is that we *like* these perks. A nice dinner here, a golf game there; if it means sitting through a talk, we are willing to do it. And to be fair to the pharmaceutical industry, these talks can be informative and useful, as long as we are prepared to appraise objectively the information that is being presented.

But I want to demonstrate to Laura that we could have fun “trick or treating” and also put our work to good use. In my correspondence with Dr Ronald, I ask if anyone among his contacts in Africa could use any of our materials. I am pleased to say that an orphanage in Uganda will soon be receiving a package of pens, notepads, tote bags, and clocks!

What did I learn from this? There may be creative, ethical, and beneficial solutions to family physicians’ interactions with the pharmaceutical industry that go beyond the implementation of more stringent regulations. It is something I hope to explore further. As for Laura, Dr Ronald has promised to send her photographs of the tote bags in the hands of their new owners. The smoothies were good, but I know she is really going to appreciate those pictures. ❁

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