The PRESCRIBE acronym

A tool for appraising pharmaceutical industry-sponsored presentations

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ducational presentations sponsored by the phar-Emaceutical industry remain commonplace in Canada. However, there is very little evidence in the literature of a systematic, easy-to-use tool that physicians can refer to when appraising the quality and objectivity of information presented at these events. A PubMed search done in July 2008 using the search terms pharmaceutic, present, apprais, and evaluat only found evidence of 2 such instruments, both using a written format.1,2

To enhance our instruction to residents regarding physician-pharmaceutical industry relationships, we developed the PRESCRIBE acronym. PRESCRIBE is an easy-to-remember "checklist" for physicians to use when attending a drug industry-sponsored presentation in order to gauge the degree to which they might have been influenced to prescribe the company's product—whether or not the product is truly indicated. The breakdown of the acronym is as follows:

Presenter. Who is presenting? Is it a pharmaceutical representative speaking or showing a video? Is it an "expert" invited by the drug company? Does he or she use examples based on the same types of patients you see? Did the attendees have a say in the selection of the speakers or facilitators? Do the speakers announce any conflicting interests they might have?

Relationship building. During the educational session, how much time and energy is dedicated to formal and informal rapport building between the pharmaceutical representatives and the attendees?

Evidence base. Does the presented material reflect a balanced representation of the literature on the topic? Are conclusions reached based on a rational appraisal of this literature? Are the results clinically meaningful or just statistically significant? Are references properly cited? Are the claims made justified by the kinds of people studied and types of measures used?

Samples. Do attendees receive drug samples or other company promotional materials? If so, what is their relative value (eg, pens or gestational wheels vs textbooks or electronic equipment)?

Charts and graphs. Do the visual materials present study results in a misleading fashion? (For example, is "risk reduction" presented clearly or just in a relative format?) Are the visuals developed by the speakers

themselves or are they part of a "canned" presentation developed by a sponsor?

Restrictions in funding. Did the drug company provide an unrestricted educational grant for the session? Are any content restrictions clearly stated?

Incentives. Is some kind of promotional incentive (eg, a meal, movie admission, round of golf) provided by the company to help increase attendance? As with samples, what is the incentive's relative value?

Branding. How strong is the presence of either company or product names and logos, or both, during the visual and spoken components of the session? Are products or promotional materials on display during the talk? Are brand names used for drugs instead of generic names?

Emotional response. What is your overall gut reaction during and after the talk? Do you feel manipulated in any way? Does the process feel ethical to you?

When using the acronym, apply a subjective score of 0 to 2 to each item on the checklist. A lower total score likely reflects a presentation with a higher degree of objectivity and accuracy with respect to the content presented or fewer drug company promotional strategies to influence an audience member into prescribing or using its product.

We have found the PRESCRIBE acronym to be a useful and enlightening tool at our debriefing sessions at the end of drug industry-sponsored presentations, especially when comparing the scores among pharmaceutical presentations. The acronym has also served as a springboard for discussion of broader questions surrounding pharmaceutical industry involvement in continuing medical education.

We encourage other physicians to apply the acronym to sessions they attend, and we invite their feedback.

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Competing interests

None declared

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