

Sophie Hibburd

From: Roger Stone
Sent: Friday, 13 September 2013 2:21 PM
To: Sophie Hibburd
Subject: Re "unethical" drug samples

I am writing in defense of continuing drug samples in General Practice.

Medication samples serve two very important roles in General Practice:

1) There are many circumstances where one wants to try a medication from a certain certain drug group,
or the circumstance may require the use of a particular medication for just a few days,
or one may prefer to ensure medication is used for a restricted period eg sometimes in the elderly.

Not only is it useful for the Dr and the patient but it can save the patient significant amounts of money. Do not underestimate the importance of this for many patients.
Using samples, in some circumstances, ensures that patient's do not use medication longer than the Dr wishes and does not have half a bottle of pills left over. This is again particularly useful in the elderly.

2) Judicious use of samples also saves the Government and therefore the tax payer significant sums of money in fees to Pharmacists and drug companies and reduces wastage.

I note the proposal that doctors should no longer receive samples is from the College of Physicians. With the greatest respect to my many Physian colleagues and friends, Speciaists have no idea about the day to day functioning in General Practice and I suggest they have no idea on how GPs use samples.

I am approaching the end of my long career in General Practice. I cannot imagine how much money I have saved patients and the Government by the use of medication samples. I cannot impress enough how useful it is to have access to samples in managing patient care.
The past 4 years I have worked in a Practice where samples are very limited and it is a retrograde step , in my view.

If the Physicians find samples corrupt their Specialty, then make it unethical for Specialist Physicians to have them , but don't inflict it on General Practice.
Unethical or corrupt people will always find a way to be unethical and corrupt -- it doesn't mean we always have to lower everything to the lowest common denominator.
Restrict narcotic and semi-narcotic samples if you must but otherwise leave well alone.

Finally, make sure the "Committe" making the final decision has representatives who are non-academic, preferably full-time practising GPs who can inform colleagues about life at the coal face.

It seems to me that if we now have a Profession that can be influenced by the gift of a pen, for goodness sake, or medication samples then perhaps it is time to review the selection process.

Yous faithfully,
Roger D Stone
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