Intern Spotlight: Brian Tielrooij

[vc_row][vc_column width="2/3"][vc_column_text]*November is 'Intern Spotlight Month' here at Health Action International, when we shine a light on the interns who make tremendous contributions to our team and the work we do with their fresh perspectives, new ideas, intellect and vivacious spirit. Each week throughout the month of November, we're introducing you to one of our interns from the past year who'll explain the research they conducted during their internship, as well as what they gained from it. This week, allow us to introduce you to Brian Tielrooij, from the Netherlands.*

During his time at Health Action International (HAI), Brian Tielrooij completed a report about how medicine and pharmacology faculties adress pharmaceutical promotion, as a requirement to obtain his Master's degree from the Vrije Universiteit in Amsterdam. As part of HAI's background research on pharmaceutical promotion, Brian interviewed deans, education coordinators and pharmacologists to determine how marketing tactics used by the pharmaceutical industry are addressed within Dutch universities' medical and pharmacist programmes

Why were you interested in your chosen topic?
When I first learned about the sheer volume of annual pharmaceutical promotion materials, I was shocked. Pharmaceutical promotion directly targeting pharmacists and medical practitioners can influence treatment choices, which can lead to less-than-optimal medication choices, sometimes to the detriment of patient health. Despite the fact that a substantial amount of pharmaceutical companies' annual expenditure is spent on pharmaceutical promotion directly targeting healthcare professionals, medicine and pharmacology faculties have often been found to fail in preparing students for this reality.

What did you discover in your research?
The deans, education coordinators and pharmacologists which I interviewed all recognised the risks of exposing health professionals to pharmaceutical promotion without prior training. At pharmacology faculties, it was fully covered in curricula, but at medical faculties, there was little or no training provided at all. Although medical faculty leaders and opinion leaders acknowledged the biasing effects of pharmaceutical promotion, they did not consider teaching about it to be a priority. Instead, principles such as scientific rigour and reliance on evidence-based data were thought to provide medical students with a sufficiently critical stance towards pharmaceutical promotion. Their disinterest in the topic could be explained by a limited knowledge of how severe the biasing effects caused by pharmaceutical promotion may be.

Which was your most interesting finding?
At one academic medical centre, they were currently developing a new minor programme focusing on medicines. The programme coordinators were negotiating with Eli Lilly & Co. to obtain access to their e-learning course 'Making Medicines'. Since we contacted them, the programme coordinators have chosen a different path. Instead of using pharmaceutical

promotion for their study materials, the centre is now collaborating with HAI to educate students about pharmaceutical promotion.

Why did you want to do your internship at HAI, and what did you gain from it?
I first stumbled upon HAI while browsing the University of Copenhagen's internship page. I was considering taking the opportunity to conduct my second internship abroad, but learning about HAI's projects caused me to reconsider. My interest in pharmaceutical promotion proved to be a good match with HAI's current needs and aims, and I really enjoyed the opportunity to learn more. During my time at HAI, I was able to both improve my research and writing skills, and meet influential and interesting professionals. This is something I really appreciated, and I would definitely recommend HAI to other students looking for an internship placement.

An abstract from Brian's research findings are presented below. More information on HAI internships is available here.[/vc_column_text][/vc_column][vc_column width="1/3″][vc_single_image img_size="full" image="id^11833|url^http://haiweb.org/wp-content/uploads/2016/11/Brian-4.jpg|caption^?|alt^null|title^brian|description^null" css=".vc_custom_1478536125789{border-radius: 2px !important;}"][/vc_column][/vc_row][vc_row][vc_column width="1/4″][/vc_column][vc_column width="3/4″][vc_custom_heading text="Abstract" font_container="tag:h2|font_size:27|text_align:left|color:%232a5c75″ use_theme_fonts="yes"][vc_separator color="custom" accent_color="#2a5c75″][vc_column_text css=".vc_custom_1478532156836{margin-top: -30px !important;}"]**Background**
A substantial amount of pharmaceutical companies' expenditure is spend on the promotion of their pharmaceuticals in order to increase sales, with a variety of potentially negative effects. Healthcare professionals require an understanding of promotional techniques and the skills to respond appropriately, but it seems that the issue is rarely included in education. This study aimed to identify aspects of pharmaceutical promotion (PP) that were addressed in medical and pharmacist training either explicitly or implicitly. On top of that, faculty's readiness – divided in motivational and capability factors – to integrate it in the formal curriculum was explored. Furthermore, the influence of the informal and the hidden curriculum on students' knowledge and skills, attitudes and behaviour was assessed.

Methods
A qualitative approach was chosen using semi-structured interviews with deans, education coordinators and faculty in pharmacology/pharmacotherapy from all Dutch medical faculties (N=8) and pharmacist training (N=2). Potential respondents were identified from the universities' websites and the network of HAI and the researcher. A total of 18 interviews were conducted with medical (N=14) and pharmacy (N=4) deans (N=2), education coordinators/directors (N=7), and pharmacologists/pharmacotherapists (N=13). Interviews were recorded, transcribed verbatim and open and closed coding was performed on the data.

Results
Aspects of the effects of pharmaceutical promotion are well covered in the curricula of

pharmacist training in the Netherlands. In medical education, the issue is generally only limitedly addressed explicitly. Quite a lot is achieved via implicit education, including evidence based medicine training and the instilling of a critical attitude. Faculty did consider it important and appropriate to address pharmaceutical promotion and associated techniques explicitly. The main barrier for addressing PP in the curriculum was a lack of prioritization in an overly full curriculum. Motivational factors that impeded readiness to change were a lack of time, naivety of faculty, difficulty in addressing transcending subjects, simply forgetting the issue or laziness. Expertise to educate about PP was generally present, although it was considered difficult to give the finesses (subtlety). In case expertise was considered an impeding factor, external professionals, such as HAI, may be needed to complement education. Resources were available, although not knowing whether suitable education material was available or considering the available material too extensive could impede integration in the curriculum.
Policies limiting commercial influence on education were absent at many of the medical faculties. The same accounted for conflict of interest policies that require faculty transparency on ancillary positions. Respondents did indicate that commercial influence on education is rare and believed there are no structural shortcomings. Faculty attitudes towards industry's salesmen were dismissive. Role models were aware of pharmaceutical promotion but did not communicate this explicitly.

Conclusion

Large differences were observed between medical and pharmacy education. Pharmaceutical promotion is rarely and not structurally addressed in the formal curriculum of medical schools, and large differences were observed between medical faculties as to which aspects were addressed. Although most universities try to raise students critically and teach evidence based medicine, it is important that university's integrate the issue in the curricula structurally and address PP just-in-time. Document analysis should be conducted to reveal shortcomings in universities' policies and act on these.[/vc_column_text][/vc_column][/vc_row][vc_row][vc_column][vc_empty_space][/vc_column][/vc_row]