PhD project: Factors ensuring effective Direct to Healthcare Professional Communication of Risk Minimization Initiatives

How do we keep doctors up-to-date on drug risks?

When medicinal products are approved for consumption only a limited number of side-effects is known. This means that the so-called benefit-risk profile of the drug needs to be surveyed and updated throughout its life cycle. In this way, healthcare professionals can make up-to-date, informed decisions when they prescribe drugs. In some cases, healthcare professionals need to be informed of crucial new drug risks with particular drugs as soon as they emerge. In such cases, the drug manufacturer will inform all relevant healthcare professionals by sending either a letter describing the new risk and what to do about it (a so-called Direct to Healthcare Professional Communication (DHPC)) or educational materials that explain a substitute procedure or drug.

But how do the prescribing physicians read and act when they receive this kind of communication? Does it help to reduce drug risk? Risk minimization measures like these are a part of the EU’s pharmacovigilance legislation, but it remains unclear how they affect the “real world” of clinical medicine and what we could do to improve that practice.

Understand and improve drug safety communication

This PhD project aims to identify and understand the factors that determine the effectiveness of drug safety communication such as Direct to Healthcare Professional Communication and educational materials. In addition, it sets out to present suggestions on how to improve the existing communication process. We will work very closely with the national medical authorities in Denmark and industry representatives to get as deep an understanding of this as possible and to make the suggestions for improvements as relevant and feasible as possible.

Rhetorical workshops and focus group interviews with GPs

We will work with general practitioners in a series of focus groups and rhetorical workshops to understand how the communication is received. General practitioners receive copious amounts of information about drugs every day. Therefore, it is crucial to understand if and how drug safety communication like DHPCs enter their field of attention. We need to understand which communication channels are the most important for them and which barriers may stand in the way of them adopting the recommendations in the communication. To learn how general practitioners work with information in their practice we will engage them in so-called rhetorical workshops. Here physicians will discuss what they need from the
communication to make better prescription decisions, and they will actively help design a more effective communication process based on their experiences and preferences.

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