Pfizer Shareholder Meeting Question
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I'm Jeff Stier, director of the Risk Analysis Division of the National Center for Public Policy Research, a company shareholder. Thank you for taking my question.

I am asking about one in particular of the many ways government is increasingly involved in the delivery of health care, specifically, "academic detailing."

In academic detailing, as you know, the federal government, through a new "Agency for Healthcare Research and Quality" arising from President Obama's 2009 stimulus, has been disbursing millions of dollars in taxpayer funds to public relations agencies, who then send representatives, called "academic detailers," to doctors' offices to advise doctors as to what drugs they should prescribe, and for what purposes.

This is somewhat like when firms like ours send "drug detailers" to speak with doctors about our products, with a very major difference: Our company is strictly regulated by the FDA in terms of what we can and cannot say.

The federal government is not only not regulated, but it refuses to be transparent about the advice its academic detailers are giving. Yet the government has a huge conflict of interest, in that it wants health care costs to be as low as possible.

We all want to keep health care costs as low as possible, but many classes of drugs -- among them statins, anti-hypertensives, analgesics and antipsychotic medicines -- the selection of the appropriate drug among many possibilities requires a delicate balancing of effectiveness and acceptable side effects in each unique patient. Are government-funded detailers taking such phenomena into account? Do they explain these nuances to doctors, or do they simply advise them to prescribe the least expensive medicines even if they don't work well for some patients?

We don't know. What we do know is that the initial academic detailing grants are intended to disseminate the findings of comparative effectiveness research, which evaluates treatment outcomes derived from large-population -- as opposed to patient-specific -- data. This approach can be harmful to patients who don't respond to medicine in the same way as a majority of patients.

Another thing we don't know is whether the government's academic detailers are being paid a straight salary, or if they are paid according to their success in getting doctors to prescribe cheaper therapies.

Our think-tank believes Congress should revisit the issue of using tax dollars to hire public relations firms to give medical advice to doctors, especially as the sums the government expects to spend doing this is expected to rise sharply. But at a very minimum, we believe Congress should change the law to require full transparency, so the government's agents a required to abide by the same degree of scientific oversight and transparency standards demanded of others.

My question to you is, what is Pfizer's position on this matter, and, if you agree with us that the government's lack of transparency is potentially dangerous to American patients, to what extent do you expect the pharmaceutical industry to urge Congress to defund this academic detailing program, or, at the very least, to require it to demand transparency, so the American people will know exactly what the government is doing?

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