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Methodological Note – 2017 Disclosure of industry payments to Healthcare Professionals in accordance with the ABPI code of practice

1. Background

The collaborative partnerships between the pharmaceutical industry and healthcare professionals (HCPs) and healthcare organisations (HCOs) has long been a positive driver for improved medicines, patient care and medical research. The types of activities HCPs and HCOs get involved with generally include medical education, giving advice in relation to research strategies and medicines use, and participation in clinical trials. These interactions are properly regulated by a clear framework which provides for HCPs and HCOs to be fairly compensated for their time and expertise. Pharmaceutical companies are also permitted to give HCOs certain types of donations, grants and benefits in kind, to assist with medical education and practice.

As part of a Europe-wide pharmaceutical industry move towards greater transparency, driven by an EU Commission initiative, companies are required to publically disclose certain such payments made directly or indirectly to HCPs and HCOs in the previous year. Payment disclosures in relation to clinical trials are anonymised in relation to payees. All other qualifying payments are publically disclosed on a named individual HCP or HCO basis - provided the individual HCP/HCO has freely given their written informed consent for such 'open' disclosure, otherwise the disclosures will be anonymised in relation to payee.

2. What types of payment has Dermal made to HCPs and HCOs during 2017?

No payments regarding Joint Working have been made by Dermal in 2017.

A number of payments have been made by Dermal during 2017 with regards to medical education events, which includes the following:

Donations or sponsorship agreements for Healthcare Organisations relating to the organisation of educational events.

Contributions towards the costs of attending educational events, including Registration Fees, Travel and Accommodation.

Payments for Consultancy Fees, such as Speaker Fees and related expenses at educational events and for Company Medical Advisor and new product development advice.

Payments for clinical trial activities.

The payments listed were made in Sterling, and represent the payments made for services provided during 2017 to the individual or organisation within the UK. Where appropriate, VAT is included within the listed payment quantity.

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3. How did Dermal manage HCP/HCO payments and consultancy agreements?

For the year of 2017, the appropriate HCPs/HCOs were required, in liaison with Dermal, to sub-divide into the specified categories any relevant payments to be made directly or indirectly to the HCP/HCO in relation to the activity/service involved. For example, in the case of HCPs attending events/conferences their registration fees were itemised separately from any agreed travel and accommodation payments, and for HCPs providing a consultancy service separate accounts were agreed for professional fees and agreed related expenses. The purpose(s) of any consultancy service were set out in a suitable written agreement including an obligation for the consultant to declare they are a consultant for Dermal whenever they write or speak in public about any issue relating to Dermal. These agreements also made it clear that Dermal is prohibited from incentivising or rewarding HCPs for their past, present or future use or support of a medicine or from influencing the outcome of any clinical trial(s) or for any other improper purpose.

4. When and how was the HCPs'/HCOs' written informed consent requested prior to public disclosure of payments?

This was asked for when the contribution towards costs, or fee for services or consultancy was commissioned by Dermal, and a written agreement was signed. Whilst 'open' disclosure is encouraged in the spirit of transparency, individual HCPs/HCOs were free to decide whether or not they wish to give their consent to named disclosure.

After the end of 2017, Dermal wrote to each HCP/HCO in receipt of a payment during 2017, with a summary of the data that was due to be submitted, either by name, or where 'open' disclosure was not consented, as an anonymous payment for publication purposes.

In March, this data was securely uploaded onto a web based platform, along with data from other companies. A specialist data management company consolidates and reconciles the records from each company to ensure the data are complete and the database has accurate search functionality. During this process, HCPs/HCOs who have given their consent for disclosure of their payments have the opportunity to raise with Dermal any queries regarding the data. At the end of June the finalised database is published via the ABPI website (www.abpi.co.uk).

The information disclosed will remain publically assessable for at least three years from the date of disclosure, and each pharmaceutical company will be required to keep their detailed records of such payments for at least 5 years after the year to which they relate.

5. Data Protection

Personal information is managed in accordance with the Data Protection Act 1998.

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