

How to speak to patients



A Q&A with Patrick Massad Deputy Commissioner, The PAAB

Q:

With patients being more active on the web, what information is acceptable to place on the web?



A:

Information which is deemed acceptable in print would also be considered acceptable on the web (provided an effective mechanism is in place to limit access to patients rather than being open to the general public).

- ▶ Regardless of whether content is on the web or on traditional print media, patient information should be **non-promotional**.
- ▶ Only the **prescribed drug** should be discussed and all content relating to that drug should be limited to part III of the product monograph.
- ▶ Disease information should be limited to that **relating to the indicated condition** (e.g. rather than its consequences) and it should be sourced from **standard setting organizations**.
- ▶ PAAB review is required if healthcare professionals are intended to be **involved in sending traffic** to the site (e.g. if promoting the site's existence to HCPs).
- ▶ If your web platform includes functionality for **collecting information about the patients**, it is important to ensure that the site complies with **provincial and Federal privacy law**.
- ▶ If the web platform includes functionality for **user generated content**, it is important to **monitor** that content on an ongoing basis for misleading & off-label messages and for adverse drug reaction monitoring.

Q:

How can pharma talk to patients currently on prescription of their product?



A:

Pharma has a credible role to play in informing HCPs and a credible role in informing patients. However, I've heard from several stakeholders that pharma should be careful to avoid activities which can be construed as interfering with HCP-patient relationship (e.g. targeting name/price/quantity ads to patients on competitor products). See the answer above for more details.

Q:

What can be said to consumers not yet on prescription?



A:

In Canada, very little can be said to individuals until a decision has been made by the HCP to initiate that therapy.

- ▶ For **prescription drugs**, that content is limited to name, price, and quantity per C.01.044 in the Food and Drug Regulations.
- ▶ Consumer **brochure websites** and **Help Seeking Announcement websites** are also possible if they meet all the provisions listed in the Health Canada policy document "The Distinction Between Advertising and Other Activities". Note that Consumer Brochures and Help Seeking Announcements should not be used in a branded context.

Q:

Can pharma talk to patients about patient programs or LOE (co-pay) programs?



A:

Yes and Yes. But the guidance in questions 1 and 2 apply and PAAB review is required if distributed through and HCP.

Q:

Patients support programs... what is acceptable and not?



A:

It is important to ensure that both the messaging and the activity are aligned with the regulations. In addition to what we've already said above, make sure you refer to the Rx&D code in addition to the PAAB code.

Q:

What advice would PAAB give to pharma communicating with patients?



A:

I'd say get to the patient through the HCP. I've been informed that patients are more likely to consume and trust pharma content if it is provided to them through the hands of their HCP. Educating HCPs about your patient programs (i.e. through PAABed APS) is a big part of this. This is in addition to the regulatory pointers presented above.



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