

Providing free drug samples to patients risks harm to public health

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The tradition of American physicians handing out free drug samples to their patients "has many serious disadvantages and is as anachronistic as bloodletting and high colonic irrigations," say two academics in an essay in this week's *PLoS Medicine*.

Susan Chimonas, a researcher at the Center on Medicine as a Profession at Columbia University, New York City, USA, and Jerome Kassirer, former editor of the New England Journal of Medicine and a distinguished professor at Tufts University School of Medicine, Boston, USA, argue that giving "free" samples is "not effective in improving drug access for the indigent, does not promote rational drug use, and raises the cost of care."

Although the pharmaceutical industry has claimed that providing free samples helps financially struggling patients, Chimonas and Kassirer cite research showing that low-income uninsured patients are in fact less likely to receive free samples than patients with continuous insurance. Many samples, they say, "are appropriated by physicians for personal or family use," and in one study nearly half of pharmaceutical sales representatives surveyed reported using samples themselves or giving them to their friends and relatives. These studies, say Chimonas and Kassirer, indicate that samples often reach the wrong people and are frequently misused.

Samples are also ineffective, they say, at lowering patient costs. "Indeed, evidence shows that patients who received free samples had higher out-



of-pocket costs than their counterparts who were not given free samples." Samples raise the cost of health care, as companies recoup marketing costs through higher prices and increased sales volume.

In addition, giving free samples risks poor quality of health care. For example, when low-income patients are given a "starter pack" of samples and a prescription to fill for the remaining period of treatment, they might not be able to afford the cost of the extension, leading to discontinuity of treatment. In doctors' offices, detailed patient education regarding sample use rarely occurs, and when it does, it usually lacks information about drug interactions or instructions on how the drug should be taken. And given the lack of oversight of samples by a skilled pharmacist, there is a risk that expiration dates could be overlooked.

"It is difficult to escape the conclusion," say the authors, "that the prime motivation behind the provision of free samples is marketing." Samples have a major influence on physicians' prescribing habits, they say, and are one of the most effective ways sales representatives get their foot in the door to pitch their companies' products. The authors call for the medical profession to halt the practice of accepting samples from the pharmaceutical industry and distributing them to patients.

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