

HEALTH & MEDICINE

Q & A In The Field Of Public Relations, Drug Firms Could Use Some Elixir; Rule No. 1: Act Quickly; PR exec says companies err when they wait too long to mitigate damage

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875 words

25 April 2005

Investor's Business Daily

NATIONAL

A12

English

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Vioxx, Bextra, Tysabri. They sound like characters from a science-fiction comic book.

But anyone who's been on Earth for the last eight months knows they're drugs pulled off the market by their makers after a handful of deaths and adverse reactions.

For Merck, yanking painkiller Vioxx on Sept. 30 sparked a 24% stock slide.

When multiple-sclerosis drug Tysabri was pulled off the market on Feb. 28, shares of marketing partners Biogen Idec and Elan fell 38% and 70%, respectively.

Pfizer got lucky. Its shares stayed in their slump, but didn't fall, when the firm withdrew painkiller Bextra on April 7.

Such cases are public relations nightmares. And the drug firms played their hands badly, says Mike **Sitrick**, head of **Sitrick** and Company, a PR firm known for crisis management.

He recently spoke to IBD.

IBD: How should big drug firms respond when their products are shown to be unsafe.

Sitrick: First, the pharmaceutical companies should announce that, although they believe they have the policies, procedures and systems in place to ensure that each case was the exception, not the rule, they are undertaking a deep, sharply focused review -- calling in outside experts -- of policies and procedures used to test a drug in

the first place.

They must continue to monitor a drug's effects after it goes on the market. This is the "outside commission" approach.

They should announce that they are adopting a higher standard for themselves than the Food and Drug Administration sets, announce what the standard is, and live up to it.

Second, they need to develop and implement a public relations strategy to deal with the lawsuits that are sure to come.

Plaintiffs lawyers -- at least some of them -- are very good with the media. You don't want to win the battle in court, only to lose it in the court of public opinion.

Third, they need to undertake a campaign talking about the advances and advantages their products provide in terms of quality of life.

Fourth, they should probably work for legislative changes to deal with this sort of pharma liability.

The argument could be that once the FDA approves a drug, those who sell it should be protected to some degree from tort action, assuming no unacceptable degree of negligence is found. Otherwise, from a public policy standpoint, we will not see new drugs being introduced.

IBD: When should the drug makers have put this strategy in place.

Sitrick: The easy answer is when the news first emerged that the FDA was looking at the suspect drugs. From the outside, it appears the drug companies have been slow to respond, and appear to have underestimated the public reaction on their reputations and shareholder values.

I'm a big believer in pre-emptive actions or acting as quickly as possible to mitigate the damage. Now is better than later or never.

IBD: Let's go back to the lawsuit issue. What PR strategy should drug makers use to respond to class-action suits.

Sitrick: The PR strategy must augment the legal strategy. While it is tempting to attack the class action lawyers as greedy, the real question is whether what they are alleging is true and whether the allegations in their lawsuit

have merit.

It's a noble goal to take the position of, "We are not going to litigate this case in the press." But (it's) a naïve one.

The goal of the PR strategy is to ensure that the pharmaceutical companies get their side of the story across -- to ensure that they win in the court of public opinion as well as the court of law.

IBD: What's the likelihood of permanent damage to the reputations of drug firms whose products must be pulled.

Sitrick: "Permanent damage" is a relative term. We are witnessing a paradigm shift. For decades, the public has comfortably believed that a paternalistic science and regulatory system was watching out for their interests. That confidence is evaporating.

People are showing concern now about drug company quality control, openness, and willingness to do the right thing.

Once that kind of confidence in a system is gone, it doesn't come back. The drug companies must act now . . . Quality and reputation is more and more becoming a differentiating factor.

IBD: How short is the public memory.

Sitrick: On some things public memory is short. The safety of drugs -- particularly drugs that have been so widely used as some of the painkillers now in question -- is not something that people will forget about soon. There will be a question in patients' minds every time a drug they've never heard of is prescribed for them.

It's worth keeping in mind, however, that people still have a high degree of confidence, as they should, in the remarkable advances in medicine and science that have enabled them and their families to live longer. That's a pretty good prevailing wind for pharma companies if they persuade consumers they've genuinely changed.