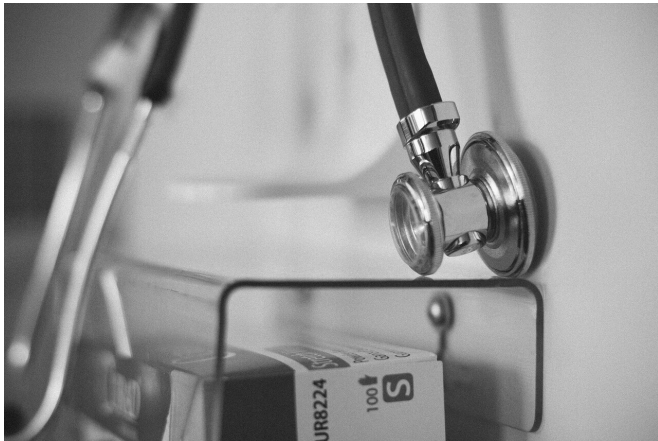


# Physicians receiving industry money are more likely to prescribe brand-name drugs

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Pay transparency and diverse representation on hiring committees are first steps to leveling the financial playing field in medicine. Credit: CC0 Public Domain

Use of a class of pain drugs called gabapentinoids has increased more than three-fold between 2002 and 2015.

Gabapentinoids treat epilepsy, burning pain and [neuropathic pain](#) associated with diabetes, fibromyalgia, anxiety and restless legs syndrome. However, the [drug](#) has also been [recently linked to suicidal behavior and overdose](#).

A study published today in *JAMA Internal Medicine* examined whether industry payments to physicians are associated with an increased prescribing trend of brand-name gabapentinoids.

The research used data from 2014 to 2016 Open Payments and Medicare Part D Prescriber databases, which are both administered by the Centers for Medicare and Medicaid Services.

A University of Minnesota researcher found that brand name versions of gabapentin—such as Lyrica, Gralise or Horizant—were nearly twice as

likely to be prescribed when physicians receive financial support from pharmaceutical companies.

"The rise in gabapentin prescribing is concerning because this drug class has the potential to be abused," said Dr. Greg Rhee, an adjunct assistant professor in the UMN College of Pharmacy and the study's lead author. "The findings also raise a concern about why physicians prescribe brand-name drugs when less-expensive generic alternatives are available in the market."

Earlier studies suggested that physicians who received payments from [pharmaceutical companies](#) were associated with a higher rate of opioid prescribing. It was considered one of the factors contributing to the opioid crisis. In a similar vein, Rhee suggests the increasing trends of gabapentinoid prescribing should be carefully monitored to prevent potential misuse or abuse.

**More information:** Taeho Greg Rhee et al. Association Between Industry Payments to Physicians and Gabapentinoid Prescribing, *JAMA Internal Medicine* (2019). [DOI: 10.1001/jamainternmed.2019.1082](#)

Provided by University of Minnesota

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