Abstract

Medical communication publications are designed to raise awareness of medicines, cosmetics, and technology. These publications ensure that doctors are informed about the role of new and existing medicines and the literature concerning appropriate prescription for specific patient groups. With the increasing choice of medicines available today, practical guidelines and recommendations are increasingly needed to help practicing clinicians to choose the most appropriate product for their patients. Advisory boards, consisting of clinicians, with a solid experience in a specific therapeutic domain, are well placed to provide this advice. The pharmaceutical industry often supports independent advisory boards to consider current issues in patient care and communicate their opinions on how to best deal with these problems. Medical writers are well placed to be involved in advisory board management. They ensure the quality of this type of communication as they have a solid understanding of science and the ethics, standards, and regulations required for medical publications.

Keywords: Medical communications, Advisory boards, Product lifestyle management, Publications

Medical communications publications are peer-reviewed articles meant to communicate specific clinical experience and recommendations about the use of different medicines, cosmetics, medical techniques, or technologies. Once the registration studies are published and a product or technology is launched on the market, many sponsors continue to publish studies and guidelines to support their product throughout its ‘life cycle’.

These publications are one of many tools used to implement medical communication (medical marketing) strategies. The publication may be promotional, or it may seek to change prescribing habits or improve clinical management for patients. For example, a sponsor may wish to support the use of their product in a combined treatment regimen. An advisory board publication may extend what is provided in the clinical trial publications and may suggest the use of a product or technique in a specific clinical setting or patient population.

Communicating recommendations or guidelines can also be a useful tool for changing prescribing habits and improving treatment practices when newer more effective products exist or when different products or practices vary between countries or regions. Patient outcomes can also be improved by harmonising the treatment of specific patient groups or the appropriate use of different products, techniques, and local practices. Medical communication publications thereby add clinical experience to the bank of clinical or epidemiological data in a given field.

Advisory boards

An advisory board is composed of a group of experts in a given field from one or several countries. These experts are also often referred to as key opinion leaders (KOLs). KOLs are usually practicing clinicians with a significant level of research experience who like trying new ideas, techniques, or technologies to improve the treatment of their patients. Therefore, KOLs are often involved in international trials and regularly attend and speak during international conferences. In their country or region, KOLs are seen as leaders. They willingly share new ideas or their experience within their own hospital but also are called upon to speak locally or internationally.

Advisory board publications

Manuscripts produced by advisory boards are often sponsored by industry. Although their primary objective is to communicate a given scientific or medical opinion about a product or therapeutic class, they may also have an element of promotion or be related to a particular stage in a product’s lifecycle. Following registration, a board may be asked to discuss their local experience or to suggest appropriate use in a multiproduct regimen with locally registered products, which may differ between
countries. Later in the product lifecycle, an advisory board may be asked to discuss their ‘off label’ experiences and suggest further studies for other patient groups or the combined use of a given product with other marketed products. Often, advisory board members have had considerable experience with a given treatment and may be asked to reflect upon better or different ways of using these products. In some cases, they may even go as far as suggesting that an older therapeutic class or practice be stopped or replaced by more effective treatments. Sometimes an advisory board may be asked to consider the management of known side-effects associated with a therapeutic class. Also, they might be interested in sharing specific local knowledge or practice with the international community.

**The role of the medical writer in preparing advisory board publications**

Medical writing for advisory board publications requires not only solid knowledge about the clinical trial process but also a feeling for pharmaceutical marketing strategy and product lifecycle management. Therefore, medical writers who do this kind of work must keep up to date with competitors in a field and must constantly be on the lookout for partnerships and positioning opportunities for their clients. In addition to professional medical writing skills, the medical writer must be comfortable communicating with KOLs and with medical and marketing managers from pharmaceutical companies. They also need to be good public speakers because they may be called upon to lead a group through an agenda to reach a consensus or to work with the board to define the most appropriate kind of publication to meet their needs.

Although advisory board meetings are often industry-sponsored, the board members’ opinion should always remain *objective* and be based, where possible, on the published literature or solid clinical experience. Should there be a lack of data in a particular area, it is acceptable to make reference to the consensus based upon the group’s experience. The medical writer or the medical communications team will need to communicate with both medical experts and the sponsoring client to produce a fair and balanced manuscript, fit for a peer-reviewed publication. The medical writer must also ensure that the manuscript is produced in line with good publication practices.

In Europe, medical writers who are multilingual are at an advantage because, during advisory board meetings, local experience and medical culture and practices may be discussed in the local language. A multilingual medical writer can understand the discussions and later transpose the results into English for communication to the international medical community.

The activities of the medical writer may differ according to their level of experience and according to whether they work within an agency, as part of a consulting network, or independently as a freelancer. Below is an outline of some activities that a medical writer could consider when involved in writing publications for advisory boards.

**Before the meeting**

- In collaboration with the client, organise the literature review and define the search strategy, key words, and so on. Identify key references and recognised authors in the field. *It might be more important to listen to your client carefully than impose your opinion.*
- Define the consensus methodology. Some standardised methods exist for developing a consensus, such as the DELPHI process, but the group can choose or define their own voting method, as long as the decision-making process is clearly defined in the methods.
- Define the key messages and key data to be communicated in the article. *Consider why and for whom you are writing.*
- Invite the board members, book the meeting room, and discuss with the client the appropriate internal people to invite. *Try to keep the number of sponsor-related personnel in the room to a minimum to ensure that the discussion remains objective.*

**During the meeting**

- The medical writer or representative may be asked to co-chair the meeting. This can be useful to ensure that the agenda is followed, that the meeting remains on time, and that the key points are addressed and conclusions reached.
- Capture key action points for each board member and define their roles and responsibilities in the project.
- Capture key messages for the experts who wish to communicate on the topic. *Listen to the ‘story’ they want to tell. This will form the backbone of the publication. Usually advisory boards know what story they want to tell!*
- Check that there is a literature or defined ‘experience’ to support each key message.
- Suggest a draft title for the article.
- Suggest a name for the group, particularly if they will continue to publish on the same topic. *Having a name for the group makes it easier to recognise them later.*
The medical writer may also be asked to write up minutes or action items from the meeting, particularly when key action points need to be followed up.

After the meeting
- Write up the minutes or key action points. Ensure all board members know what they have to do … and when!
- Communicate with each member to follow-up on action points and timelines.
- Prepare a detailed outline with key references for each point.
- Obtain agreement for the outline from both board members and the client.
- Start writing the first draft of the publication.
- Manage the various rounds of changes and cope with the client’s opinion. Sometimes it is important to be thick-skinned and let your work be pulled apart by the client, and sometimes the client needs your lead to get the publication up to standard. It is the medical writer’s responsibility to ensure that the client and authors are aware of Good Publication Practices.
- Assist the corresponding author to ensure that all necessary documentation is available for article submission (e.g. conflict of interest forms, etc.).

Conclusion
Writing medical communication publications is a challenging and rewarding speciality. These publications, which are based on advisory board meetings, ensure that practicing clinicians around the world are kept up to date with recent medical literature combined with the benefit from years of practical experience from experts. Medical writers who do this work act as an interface between the forefront of science and talented professionals from all walks of medical science. This specialty requires creative thinking, strong professional and interpersonal skills.

Author information
Amy Whereat Having both health science and marketing qualifications, Amy Whereat has pursued a career in medical affairs and international product management for the pharmaceutical industry, first in Australia, later in France. Amy is based in Paris, where she is a medical writer and communications consultant for industry and research partners worldwide.

AIDS researcher charged with fraud
A 2010 article in *PLoS Medicine* called for guest authors of ghostwritten articles to face fraud charges. While it is uncertain whether that will ever happen, the summer of 2014 did see the arrest and prosecution of a US-based researcher for scientific fraud. Korean-born Dong-Pyou Han is alleged to have faked experiments on a new HIV vaccine at Iowa State University. The experiments, which seemed to show a strong antibody response to part of an HIV glycoprotein, raised hopes of a breakthrough in the fight against HIV infection. Though Han resigned from his university post in autumn 2013 and entered into a voluntary exclusion agreement barring him from receiving federal funding for 3 years, he denies the charges against him.

The case has provoked debate as to whether scientific fraudsters should face legal proceedings. Should perpetrators be banned from research? Should they repay any funding awarded based on fake findings? Should their institutes be held financially liable?

The answer to some of these questions would appear to be ‘Yes’. The National Institutes of Health (NIH) paid out a total of $5 million based on a grant application and progress reports that partly relied on data Han is alleged to have falsified. Of this amount, Iowa State University has agreed to repay nearly $500 000 that went towards Han’s salary.

References

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