## Changes Through Time



The Pharmaceutical Advertising Advisory Board

## **REVIEW**

Ray Chepesiuk, Commissioner



"They say that time changes things, but you actually have to change them yourself."

## - Andy Warhol

T he PAAB strives to be progressive, move at the pace of its clients and be adaptive to the marketplace as needed. From time to time we change things.

Changes are taking place in the pharmaceutical industry. These changes present new challenges and it made me think about how the PAAB has adapted over the years. I took some time to reflect on the many changes I have seen during my 22 years at the PAAB. The PAAB, despite not having changed its name or acronym, has been a dynamic organization.

Since 1986 the Board has expanded to 14 voting members and still includes Health Canada as an Ex-Officio member. The Association des médecins du langue français, Advertising Standards Canada and the Consumers Association of Canada have left the PAAB. We added the Association of Medical Advertising Agencies, Canada's Association for the Fifty Plus, Best Medicines Coalition, the Fédération des médecins spécialistes du Québec and the Association of Faculties of Medicine of Canada. Since 1985, the PAAB has had three persons as chair: Dr. John Godden, Dr. Reg Perkin and Dr. Walter Rosser (who joined the PAAB in 2007). These gentlemen have provided leadership and stability amidst all of the change. During 2008, the board will review the by-laws and governance of the PAAB.

In 1977, only journal ads required review. The second year included direct mail and service-oriented vehicles. In the late 1980s the review of detail aids became part of the Code. We often sent written monitoring notices and used telephone calls to persuade new companies that preclearance review was a good thing for them if everybody did it. In the late 1990s, Rx&D made it mandatory for member companies to abide by the PAAB Code as a condition of membership in Rx&D. The Code has always covered prescription and non-prescription drug products. At one time, it covered infant formula products. We have added natural health and homeopathic products to the scope.

Health professionals have always been the target of advertising within the PAAB Code. In 2004, the PAAB added the service of advising on direct-to-consumer advertising of prescription drugs to its scope. We see electronic media advertising/promotion systems these days. The PAAB is also looking at funding research in advertising issues.



The PAAB Code of Advertising Acceptance has evolved based on changes in regulations, technology, evidence-based medicine, industry marketing practices and societal values. The first major review of the PAAB Code took from 1989 to 1992. We met monthly and sifted through piles of paper and suggestions for changes to the Code. We introduced the "Explanatory Notes" side of the Code to help reviewers and clients be more consistent. For the 2004 Code revision we used electronic surveys to gather opinions and suggestions. This proved to be more efficient and we had a Code revision implemented one year after we started asking for suggestions, including a new section on electronic media promotion.

We have seen changes in what goes into product monographs, evidence requirements and the types of advertising materials and media, resulting in a thicker Code. By being easier for a selfregulatory system to be flexible in meeting changing requirements than a legal system, changing the Code over the years has offset the need for legislative changes.

When I arrived at the PAAB I was the first person to hold the "reviewer" position. At the time there was a commissioner, one full time and one part time administrative assistant in a small office just down the street from where the PAAB office is now located. When I became Commissioner in 1999 we had seven full-time employees (FTEs). Today the PAAB office has 14 FTEs with a Commissioner, two Managers, eight Reviewers and three Administrative Assistants.

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The PAAB has had a total of four Commissioners in 32 years: the late Arnold Raison, Murray Shantz, Mark McElwain and myself. We also have hired a Human Resources consultant to survey the staff on wants and needs and also advise the Commissioner on legislative requirements and best practices. During the 1990s, the average lifespan of a PAAB reviewer was three to four years. Since 2000, we have not lost a full-time Reviewer and some have been at the PAAB for over 10 years. One Administrative person has retired during that time. The PAAB is fortunate to have an experienced staff and the board directors have been very supportive of and responsive to management's requests on their behalf.

In 1986, we handwrote letters for a secretary who typed a letter with carbon copy on an IBM Selectric and then we had to review the letter for accuracy. Then it went out of the PAAB office by Canada Post to be received by the client at least three days later. We had a fax machine before many of our agency clients had one and we moved to having the secretary type the letters on a computer and then fax them. We looked at electronic document management systems for the first time in 1992. We finally implemented eFiles in 2008.

Back in 1986 the review volume was around 1,600 to 1,800 new files per year, which does not sound like much today but keep in mind only two people reviewed and the Commissioner was one of them. By 2000, we were reviewing 2,000 files per year and we had to hire a second Reviewer. Throughout the six years prior to 2007, we had increases in the number of reviews and some of the review files got larger over time. Today, eight Reviewers handle a total volume of around 5,000 first reviews. In 2007, all of the new files were reviewed within the 10 working day maximum allowed by the Code, a fine record.

So, those are a few of the changes that have happened at the PAAB in the past 22 years. As part of the advertising self-regulation process in Canada, we look forward to serving the industry and Health Canada in an effective, efficient and progressive manner. We will keep changing to be able to do that.