

MEMORANDUM

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
FOOD AND DRUG ADMINISTRATION

TO : Director, Division of Drug Experience/HFD-210 DATE: Feb. 5, 1980

FROM : Psychologist/HFD-107

SUBJECT: Lilly Quarterly Report on Darvon

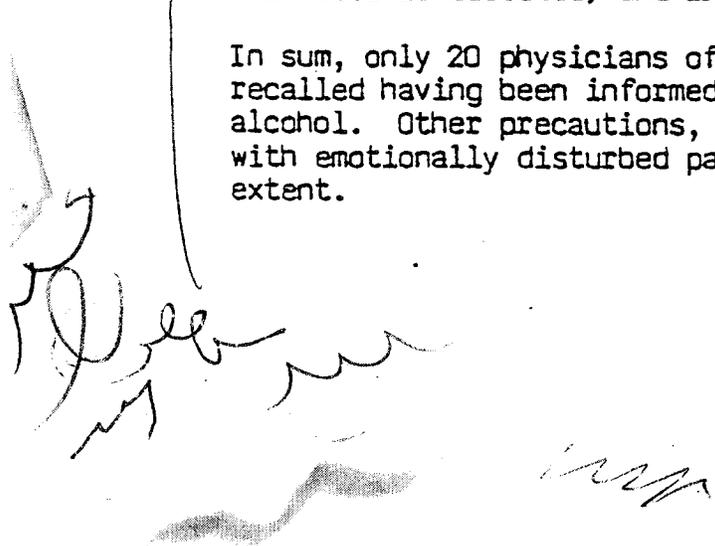
Per your request, I have reviewed the Lilly survey of physicians regarding their awareness of precautionary information on Darvon. Three hundred physicians, chosen by quota sample to represent five specialties, were surveyed. Eli Lilly provided the physician listing to the research contractor. Only physicians contacted by mail or by personal visit (detail) as part of the Lilly educational campaign were questioned.

Although all 300 physicians were personally visited or mailed some literature only 62% said they were aware of new information relating to oral analgesics. The detail seemed to have had a greater impact on physician awareness than the mailing (67% compared to 57%).

The survey suggests that about two-thirds of these physicians remember that they were contacted. However, there is little memory for the content of message being delivered. Only 22 to 30% spontaneously recalled that they received information about Darvon and only 55% of those saying they were contacted remembered the Darvon contact when specifically asked.

Of the physicians who remember receiving information on Darvon, 46% could not spontaneously recall the delivered message. Of those that could recall a message, only 61% recalled that the message had to do with a caution about the dangers of using Darvon, 26% recalled a message promoting the efficacy or safe use of the drug (i.e., safe when used as directed) and 13% recalled some other information.

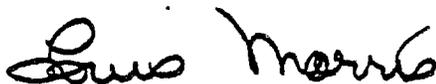
In sum, only 20 physicians of the 300 surveyed (7%) spontaneously recalled having been informed about the dangers of using Darvon with alcohol. Other precautions, such as use with other depressants or with emotionally disturbed patients were recalled to an even lesser extent.



The above analysis corresponds to unaided recall. When physicians were directly asked questions such as; "Are you aware that caution should be used when (Darvon is) taken with alcohol?", over 90% signified yes. It is difficult to conceive that any physician would answer no to this question, even for a drug that had not been shown to have problems related to its use.

The tremendous differential in response between aided and unaided recall was also evident in questions related to the types of patients where care should be exercised when presenting Darvon. Twenty to 32% spontaneously mentioned some patient group (e.g., emotionally disturbed), but over 90% signified that greater prescribing caution was needed when any patient type was specifically mentioned.

Overall, my interpretation differs significantly from Lilly's where they state that "...physicians have a very high awareness level of precautions applicable to the prescribing of Darvon products...made aware...primarily by...mailings or by the sales representatives." I would interpret these results to suggest that the Darvon educational campaign has not been shown to have had an important impact into physician decision-making. Although the probed recall questions show a high rate of physicians agreeing that caution is needed when prescribing Darvon, the unaided recall questions suggest that this information is not part of the physicians active repertoire of information utilized when making prescribing decisions.



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