A day in the life of a pharmaceutical physician

Imran Shafi Kausar, medical adviser at Pfizer, says what he and colleagues get up to

Imran Kausar: medical adviser

"I often check my diary the night before to remind myself of the next day's meetings. It can be quite normal to have a morning meeting with marketing colleagues and then move onto discussing how to plan the next multicentre clinical trial on a teleconference with colleagues in Paris and New York. I will often meet with other company scientists and physicians to discuss regulatory issues affecting our work. In the afternoon I may attend a meeting with NICE [National Institute for Health and Clinical Excellence] to discuss health technology assessments and then take time to respond to calls or emails from physicians who have asked about specific matters relating to a drug or its side effects. It is quite normal to travel to participate in advisory boards with consultants to discuss the future of a disease area or the life cycle of a product. Often meetings take place abroad and conferences can provide a valuable venue to meet and learn with people at the forefront of medical research. I may attend an evening meeting of market research with a group of general practitioners to gauge their views on a new drug. Each day provides new learning experiences in an effort to improve patient care."

Ian Mills: clinical research physician

"During medical student and clinical training, I thrived in research environments and found clinical and basic science research invigorating and rewarding. As a specialist registrar I gravitated towards posts in academic units but found the limited time and resources to engage in meaningful research frustrating. I also became aware that much ground-breaking research was performed within the drug industry and, as I investigated further, found myself increasingly attracted to a career in clinical research and development. Six years ago I joined Pfizer as a clinical research physician.

Clinical research physicians get involved in all phases of drug development, providing clinical input to the overall strategy, designing and running the clinical trials in collaboration with worldwide investigators, responding to and investigating emerging safety and efficacy signals, and meeting with regulatory agencies, external academics, and clinical experts to discuss our understanding of a drug's profile and future clinical trials as it progresses through development. We also design and contribute to the running of clinical trials to (i) help understand disease processes and thus help to guide future drug discovery, and (ii) develop and validate disease biomarkers to assist with diagnosis and demonstration of relevant clinical effects in small exploratory trials.

When I started as a clinical research physician, I worked on a single drug development project but have taken on progressively more over the years. I now head the clinical research and development group supporting a therapeutic area (genitourinary—which includes urology, gynaecology, nephrology, and sexual health). This allows me to cover a broad range of projects. I also have the opportunity to review data on drugs developed outside Pfizer as we seek to collaborate with other companies. This facilitates sharing of resources and expertise, enhancing the development of individual drugs.

I am pleased that I continue to find my job challenging, intellectually stimulating, and rewarding and feel privileged to contribute to the development of new medicines."

Ian Hudson: regulatory physician

"I left full time clinical medicine in 1988, and then, after spending 18 months as a research fellow, spent 11 years in the pharmaceutical industry before joining the Medicines Control Agency, now the Medicines and Healthcare Products Regulatory Agency (MHRA) six years ago. I don't think I've had a typical day since. I start the week with a meeting with my team to discuss hot topics and the week ahead. I may then have a meeting with a company concerning an ongoing application, or providing scientific advice on their development plans. There will usually be some internal MHRA issues to deal with, then perhaps I look at some European centralised applications and ensure the United Kingdom has either assessed or reviewed and commented on another member state's assessment. Then there might be a meeting with an industry trade association or perhaps a discussion on a new regulation covering some novel technology, or a new procedure the agency is putting in place. I may then start to prepare for the next Committee for Human Medicinal Products meeting at the European Medicines Agency, or perhaps look at the papers going to the next Commission for Human Medicines meeting. There may also be a need to talk to others in the main Department of Health over medicine supply issues, or perhaps discuss a new policy development. Sometimes the press office will call, wanting a response to a question posed by a journalist. During the day I may need to speak to my European counterparts about a new procedure, or a new application we are assessing, or provide some advice to someone who wants to develop a new medicine and isn't sure how to access the regulatory processes."

Kate Lloyd: medical director

"I left clinical medicine in 1983 with little idea of what was involved in pharmaceutical medicine. I wondered if it would be interesting and whether it would be busy enough to fulfil me.

It certainly is busy. On a typical day as medical director of Pfizer in the UK I get to the office about 7 am and spend the first hour checking and responding to emails. By 8 am, meetings are beginning with individual colleagues or medical department teams including clinical research, regulatory affairs, drug safety, medical information, and medical and scientific affairs. The topics of the day will vary but include commercial issues about the UK market, the management of submissions to NICE or the Scottish Medicines Consortium on a product or a need to contact the regulatory agency.

We work closely with MHRA and the Irish Medicines Board on a number of topics, with a specific focus on good, timely reporting of adverse events.

Other interactions with regulators include registration of new medicines; renewal or variation of product labelling; emergence of new clinical data from trials or adverse events, either from trials or spontaneous reporting; pre-vetting of promotional materials for launch medicines or where there has been a significant change to the label, usually relating to safety; and investigation of possible counterfeit versions of our medicines.

When counterfeit versions of our medicines are suspected we need to assess the level of risk to patients and to work closely with MHRA to take the most

appropriate action, often a recall of a batch of our medicine, as counterfeiters sometimes use an existing company batch number and apply it to their fake products. There is a risk of major confusion for patients if this does take place. Part of these action plans will usually include briefing the media.

Often the day ends with an external meeting, for example, attending the Royal College of Physicians' teach in once a month, which Pfizer has sponsored for the past four years, allowing me to keep up to date with clinical topics.”

Anil Jina: global brand medical director

“I left clinical medicine in 2001 after six years in various rotations (predominantly anaesthesia) for a variety of reasons, both personal and professional. It was not an easy decision. I spoke to a lot of people, did a lot of research; I considered my options carefully and in the end pharmaceutical medicine seemed to be the best fit—it allowed me to maintain my medical expertise and to develop it in a new arena.

My first position in industry was as a UK regional medical adviser, which I did for about six months before being promoted to therapy area medical adviser for the UK and Ireland. After three years I was promoted to global medical director based in our New York headquarters where I've been working since.

My role is to be the company's global medical expert for a particular drug, class of drugs, or therapy area. This includes medical oversight of and input into global regulatory activities, drug safety issues, clinical trials, lifecycle strategies, marketing strategies, publication and presentation of data in relation to that drug, class of drugs, or therapy area. It also includes being the medical liaison for communications with external parties, including the medical profession and the media.

The only constant is that there's no such thing as a typical day. I generally get to the office early in the morning, answer overnight emails and voicemails and the rest of the day is spent juggling meetings, teleconferences, emails, and phone calls with colleagues around the world. An astute awareness of time zones is important and there is a lot of travel involved, for meetings and conferences.

My time in the pharmaceutical industry has been enjoyable and challenging and has enabled me to develop new skills and shape health care in a different manner to normal clinical work. I look forward to experiencing what the future holds.”

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In summary

Pharmaceutical medicine can provide dynamic and challenging careers for doctors who feel that their medical skills extend beyond patient encounters. Commercial acumen, management and leadership skills, and an ability to communicate effectively are all hallmarks of successful doctors in this industry. Our work influences many aspects of the medical profession and represents society's best hope for the development of innovations and new medicines for future health care.

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FURTHER INFORMATION

Faculty of Pharmaceutical Medicine (www.fpm.org.uk)

Two years as SHO in recognised posts required to apply for higher medical training; four years of higher medical training leading to certificate of specialist training in pharmaceutical medicine upon completion of the diploma in pharmaceutical medicine

Recruitment

- Many pharma recruitment consultancies available
- British Association of Pharmaceutical Physicians (www.brapp.org)
- Adverts commonly placed in the *BMJ* Association of the British Pharmaceutical Industry (ABPI) publication *An Insight into Careers for Doctors with the British Pharmaceutical Industry* is available at www.abpi.org.uk