

How can we  
make better  
decisions about  
medicines?



Millions of us take medicines every day. Scientific research has given us a greater number of treatments than ever before, and our ageing society means there are more patients with complicated health needs.

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**This guide has been produced by the Academy of Medical Sciences. We are the independent body in the UK representing the diversity of medical science.**

Our mission is to advance biomedical and health research and its translation into benefits for society.

For further information on the Academy and this project, visit: [www.acmedsci.ac.uk/evidence](http://www.acmedsci.ac.uk/evidence)

## How can patients and others be better informed when making decisions about medicines?

**The Academy of Medical Sciences has been looking at this very question following recent public debates about treatments such as statins to prevent heart disease and stroke, Tamiflu to treat influenza and hormone replacement therapy to treat the symptoms of the menopause.**

In a survey of 2,041 British adults, commissioned to inform the project, only about a third (37%) of the public said they trusted evidence from medical research, compared to approximately two-thirds (65%) who trusted the experiences of their friends and family.

We believe strongly that good scientific evidence from high-quality research should play a part in every decision that doctors, nurses, pharmacists, patients and carers take about medicines. Good scientific evidence is the only source of information about medicines that is subject to rigorous checks and balances.

With input from the public, patients, doctors, scientists, science communicators and industry, we have drawn up an action plan on how to make sure medical research is robust, relevant, trusted and that the evidence generated is useful and accessible to doctors and patients.

We are calling for patients and health professionals to be involved in the way that drugs are researched and tested – and how scientific findings are passed on to the rest of society.



## Messages for patients, doctors, nurses and pharmacists

Patients are struggling to find clear and reliable information about medicines. The information leaflets that come with medicines are often unclear and unhelpful. We want them all to be simpler and clearer so patients understand the potential benefits of medicines and their possible side effects.

We are also asking that NHS Choices becomes a 'go to' hub of clear and up-to-date information about medicines for both patients and their healthcare professionals. Indeed, many patients rely on their doctor, nurse or pharmacist for information about the benefits and harms of medicines, so it is important that they are also able to access clear and up-to-date information about the latest research findings about the benefits and harms of medicines.

We want to encourage doctors, nurses and pharmacists to involve patients more in decisions they make about medicines and treatment. We have created a set of questions that patients can take to their doctor to help them have sensible conversations about drugs. We've also developed questions for doctors to help them involve patients in decisions about their treatments.

A growing number of patients have more than one long term condition. This makes deciding which medicines are right for them particularly complicated. We believe healthcare professionals would benefit from computer software and other tools designed to help them and their patients make informed decisions about medicines and treatments.

We also think that some patients with long term conditions will need longer medical appointments, so there is time to focus on their needs and concerns and for them to make informed decisions with the support of their doctor.





## Messages for researchers

Researchers have developed effective ways of finding out the benefits and harms of medicines, and most of the evidence about medicines in scientific and medical journals is trustworthy. But there are real concerns about bias, for example the way positive results from research are more likely to be published than negative ones. We want all researchers and journals to commit to publishing the results of good quality research *whatever* the results.

Patients, carers and the public must be more closely involved in research to make sure new medicines are developed with their needs in mind. We also want scientists and doctors to consider the kind of research that they refer to when weighing up the benefits and harms of medicines – and to be open minded about robust new ways of finding and generating high-quality scientific evidence.

Drug companies that usually run the patient trials necessary to move a new treatment from the laboratory to the clinic are particularly mistrusted by the public. However, without industry involvement it is much less likely a new medicine would reach patients. So it's important that there are strong links between universities, the medical profession and pharmaceutical companies – and it's important that scientists are open about, and are able to communicate, these links. Everyone involved in researching, producing and telling people about drugs must be aware of and open about *any* interests they might have (not just links to the drug industry) and how any conflicts of interest have been managed.

We have created a set of principles to ensure that every step of the journey from initial research to a new medicine is honest, open, trustworthy and good quality. We want the research community to work together to make sure these principles are adopted.

We are also asking that the next Research Excellence Framework – the mechanism used to judge the quality of research at universities and academic institutions – takes into account the robustness of the research, the openness of scientists, and the ways research results are explained to the public, and rewards efforts to improve these features.

## Messages for communicators

We believe researchers, research funders, universities and press officers should work together to help make sure that evidence about medicines is communicated accurately. We also believe that journalists should be aware of the potential impact on the public of the way they report health stories.

Journalists could be better supported to report the results from research more accurately by clear markers – such as a traffic light system - on health press releases. Training for journalists and their editors could also help, and good practice guidelines for scientists, press officers and journalists should be drawn up or better followed where they already exist.

Scientists' involvement with industry is often used wrongly as a way to discredit scientific research. A scientist having links with industry doesn't automatically mean the work they do is poor quality or unreliable. Journalists and others should ask not whether a link exists, but whether links with industry are getting in the way of good science.



Research has given us lots of new treatments. But we will only make the most of this progress when evidence about medicines is robust, trusted and can be communicated clearly. It is the responsibility of all scientists, doctors, patients and communicators to make improvements to the way we produce, use and communicate evidence about medicines. The Academy of Medical Sciences is ready to play its part.

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