

Academy of Medical Sciences: Medical Information Survey



April 2016

Methodology

ComRes interviewed 2,041 members of the British public online between 18 and 20 March 2016 in the UK, and 1,013 GPs online between 16 and 26 March 2016. General public data are weighted to be nationally representative of all British adults aged 18+, by age, gender, region and socioeconomic group. GPs data are representative by former SHA region.

Throughout the asterisks (*) denotes a value that is less than 0.5%

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- The company conducting the research (ComRes)
- The client commissioning the survey
- Dates of interviewing
- Method of obtaining the interviews (e.g. in-person, post, telephone, internet)
- The universe effectively represented (all adults, voters etc.)
- The percentages upon which conclusions are based
- Size of the sample and geographic coverage.

Published references (such as a press release) should also show a web address where full data tables may be viewed, and they should also show the complete wording of questions upon which any data that has entered the public domain are based.

All press releases or other publications must be checked with ComRes before use. ComRes requires 48 hours to check a press release unless otherwise agreed.

Executive Summary

PUBLIC TRUST AND CONFIDENCE IN USING MEDICAL EVIDENCE

- Three quarters of Britons (74%) believe that forensic evidence is a trustworthy source of information, making it the most trustworthy source of information tested.
- Fewer than four in ten (37%) say they would trust data from medical trials, placing it in the middle of the types of evidence tested, although only 6% rate it as not trustworthy, suggesting that there may be some uncertainty here rather than absolute mistrust.
- When thinking about the long term prescription of medicine, 90% of British adults agree that they would feel confident asking their doctor for more information if they needed it, and 82% agree that they would trust their doctor to decide on the best medicine for them. This suggests, on the whole, a positive patient–doctor relationship.
- However, in an apparently contradictory statement, 71% also agree that they would want to read up on the medicine and make their own decision about whether they want to take it – suggesting that stated trust in their doctor to decide what’s best is somewhat mitigated by a wish to be informed.

FACTORS INFLUENCING TRUST IN MEDICAL EVIDENCE

- The most influential factor Britons take into account when trusting a clinical trial is the reputation of the organisation which led the trial (20%) – although only 9% of GPs say the same. This is followed by the qualifications of the researchers and whether other people have run the same trial and got the same results (both 17%).
- Almost half of GPs (46%) rank the methodology used for a clinical trial as the most influential factor when it comes to trusting the trial – a factor not tested among the public.
- 82% of GPs and 67% of British adults agree that clinical trials research funded by the pharmaceutical industry are often biased to produce a positive outcome. Moreover, both audiences are split when asked whether clinical trials methodologies effectively protect against any potential bias introduced by the source of the funding or the researchers themselves (47% of the public agree and 27% disagree, compared to 45% and 44% of GPs).
- However, this may well be mitigated by the peer review process in the eyes of both audiences – four in five GPs (79%) and seven in ten of the British public (69%) agree that

publication of clinical trials in peer reviewed journals ensures that the evidence is of a high quality.

TRUSTED VOICES ON MEDICAL EVIDENCE

- Almost one in three (29%) British adults trust healthcare professionals to provide an independent and impartial assessment of medical evidence ‘to a great extent’, rating it 5 on a 0–5 scale. In line with this, when asked to rank their assessment of medical evidence, almost half of British adults (46%) believe healthcare professionals are the most trustworthy assessor of medical evidence, followed by academics or researchers (19%).
- Whilst the national media was ranked joint bottom for trust (3%), medical journals enjoy a high level of trust among GPs, with 37% ranking these as the most trustworthy assessor tested, and 85% ranking them in their top 3.
- Unsurprisingly, GPs are more trusting of government evidence than the public; 40% of GPs choose assessments of medical evidence carried out by government agencies as the most trustworthy, compared to only 12% of British adults who say the same. Interestingly, however, it does suggest that healthcare professionals may have some reservations about quality of the evidence produced by NICE and the MHRA.

MEDICINE USAGE IN SOCIAL CONTEXT

- British adults appear to acknowledge that they often put healthcare professionals under pressure to prescribe medicines which may not be appropriate; 70% of Britons agree with this statement, along with 88% of GPs who agree the same.
- This apparent pressure that British adults put on GPs is in contrast to the overwhelming agreement that, if possible, doctors should prescribe lifestyle changes first before offering medication to patients. 80% of British adults agree with this, along with 93% of GPs.
- Over-medication is seen to be an issue for a majority among both audiences – 77% of British adults, and 84% of GPs agree that people currently take too many types of medication. However, a significant minority suggest that under-medication is also a social problem – over one third (31%) of Britons believe that people are too reluctant to take medicines when they are unwell, as do 19% of GPs.

Results

Public trust and confidence in using medical evidence

- Three quarters of Britons (74%) believe that forensic evidence is a trustworthy source of information, making it the most trustworthy source of information tested.
- This is comparable to fewer than four in ten (37%) who say they would trust data from medical trials, placing it in the middle of the types of information tested. A similar proportion of British adults (36%) rate data from medical trials as ‘3’ on a 0–5 scale, and only 6% rate it 0 or 1, suggesting that this form of data is not mistrusted per se, but rather that the public are more uncertain about whether or not the data is trustworthy.
- This level of trust extends to other sources of medical information – for example, 38% say that they would trust medical professionals commenting in the national media.

Q. To what extent, if at all, would you say that you would trust each of the following types of information? Please give your answer on a scale of 0–5, where 5 means that you would trust it to a great extent and 0 means that you would not trust it at all.

	NET: Trust (rating 4 or 5)	NET: Don't trust (rating 0 or 1)
Forensic evidence (e.g. crime scene, legally admissible)	74%	2%
The experiences of your friends and family	65%	2%
Office of National Statistics survey data	39%	7%
Medical professionals commenting in the national media (e.g on the TV, radio, or in a newspaper)	38%	7%
Data from medical trials	37%	6%
Online reviews of products or services, e.g. TripAdvisor	28%	13%
Stories from members of the public in the national media (e.g on the TV, radio, or in a newspaper)	9%	29%

Base: All GB adults (n=2,041)

- The two sources of information perceived to be least trustworthy are both based on personal experience, rather than ‘hard’ data – three in ten (30%) British adults do not

trust stories from members of the public in the national media, and 13% do not trust online reviews of products or services. This demonstrates how important factual information is to the British public when deciding which sources are trustworthy or not.

- However, the fact that 65% state that the experiences of their friends and family are a trustworthy source of information demonstrates that British adults may nonetheless be heavily influenced by anecdotal evidence from people in their social network.
- **When thinking about the long term prescription of medicine, 90% of British adults say they would feel confident asking their doctor for more information if they needed it, and 82% agree that they would trust their doctor to decide on the best medicine for them. This suggests, on the whole, a positive patient–doctor relationship.**
- **However, in an apparently contradictory statement, 71% also agree that they would want to read up on the medicine and make their own decision about whether they want to take it – suggesting that stated trust in their doctor to decide what’s best is somewhat mitigated by a wish to be informed.**

Q. Imagine that your doctor prescribes you a medicine which you would need to take for several years. To what extent do you agree or disagree with each of the following statements?

	NET: Agree	NET: Disagree	Don't know
I would feel confident asking my doctor for more information about medicine if I wanted it	90%	8%	2%
I would trust my doctor to decide on the best medicine for me	82%	14%	3%
I would want to read up on that medicine and make my own decision about whether I want to take it	71%	25%	5%
I would not know how to interpret specific reports on clinical trials of that medicine	48%	42%	10%
If I read any negative media coverage of that medicine, this would stop me from taking it	38%	44%	19%
I would not feel confident looking for additional evidence about that medicine beyond what my doctor had given me	25%	69%	6%

Base: All GB adults (n=2,041)

- Almost half (48%) of British adults agree that they would not know how to interpret specific reports on clinical trials of the medicine they were being prescribed. Over half (55%) of 55–64 year olds, and those aged 65+ (51%), agree with this statement, compared to 44% of 18–24 year olds.
- A quarter (25%) of British adults would not feel confident looking for additional evidence about their medicine beyond what their doctor has given them. This sentiment is consistent across age, socioeconomic group and region. This consistency, especially across social grades AB (24%), C1 (23%), C2 (28%) and DE (26%), suggests that individual confidence in looking for additional evidence is not overly influenced by demographic factors.

Factors influencing trust in medical evidence

- The most influential factor Britons take into account when trusting a clinical trial is the reputation of the organisation which led the trial (20%), followed by the qualifications of the researchers and whether the trial has been repeated by others with the same results (both 17%).

Q. The list below shows a number of different factors which might influence how much you trust a clinical trial. Please rank each of the following factors from 1 to 8 in order of how much influence they would have on your level of trust, where 1 means the most influential, 2 means the second most influential, through to 8 which means the least influential.

	Most influential (#1)
The reputation of the organisation which led the trial	20%
The qualifications of the researchers who conducted the trial	17%
Whether other people have run the same trial and got the same results	17%
Who funded the trial (e.g. a Research Council, the pharmaceutical industry, a charity etc.)	12%
Where you heard about the trial (e.g. through your doctor, in the news, from the Government)	10%
How many people took part in the trial	10%
Whether written analysis of the trial has been published or not	7%
Whether raw data from the trial has been published or not	7%

Base: All GB adults (n=2,041)

- Nearly three in ten (28%) of British adults consider where they heard about the trial as the least influential factor on their trust in a clinical trial.
- Only 7% of British adults believe that the most influential factors when trusting a clinical trial are whether written analysis of the trial has been published or not, or whether raw data from the trial has been published or not. This suggests, that with regards to trusting a clinical trial, the public are more concerned with who is involved than the publication of the results – this may indicate a low level of understanding of the peer review process.

- Almost half of GPs (46%) rank the methodology used for a clinical trial as the most influential factor when it comes to trusting the trial – a factor not tested among the public.
- Whereas 20% of Britons believe that the reputation of the organisation who led the trial is the most influential factor in trusting a clinical trial, only 9% of GPs say the same.

Q. The list below shows a number of different factors which might influence how much you trust a clinical trial. Please rank each of the following factors from 1 to 9 in order of how much influence they would have on your level of trust, where 1 means the most influential, 2 means the second most influential, through to 9 which means the least influential.

	Most influential (#1)
The methodology used for the trial (e.g. randomised, double/triple blind etc.)	46%
Whether other people have run the same trial and got the same results	10%
Who funded the trial (e.g. a Research Council, pharmaceutical organisation, charity etc.)	9%
The reputation of the organisation which led the trial	9%
How many people took part in the trial	8%
Whether written analysis of the trial has been published or not	7%
Where you heard about the trial (e.g. from peers, industry reps, medical journals etc.)	6%
Whether raw data from the trial has been published or not	5%
The qualifications of the researchers who conducted the trial	1%

Base: All GPs (n=1,013)

- The largest proportion of both British adults (28%) and GPs (32%) rank where they heard about the clinical trial as the least influential factor they consider when trusting the trial.
- Only 1% of GPs believe the qualifications of the researchers who conducted the trial to be the most influential factor when it comes to trusting a clinical trial, compared to 17% of British adults who thought the same. This, combined with the difference in opinion over whether or not the reputation of the organisation who led the trial is the most important factor in trusting a clinical trial (20% of British adults, 9% of GPs), suggests

that GPs and British adults differ in their understanding of the significance of different factors within a clinical trial.

- 82% of GPs, and 67% of British adults agree that clinical trials research funded by the pharmaceutical industry are often biased to produce a positive outcome. Moreover, both audiences are split when asked whether clinical trials methodologies effectively protect against any potential bias introduced by the source of the funding or the researchers themselves (47% of the public agree and 27% disagree, compared to 45% and 44% of GPs).
- However, this may well be mitigated by the peer review process in the eyes of both audiences – over two thirds of both GPs (79%) and the public (69%) agree that publication of clinical trials in peer reviewed journals ensures that the evidence is of a high quality.

Q. Thinking about the independence of clinical trials and medical evidence, to what extent do you agree or disagree with each of the following statements?

British Public	NET: Agree	NET: Disagree	NET: Agree	NET: Disagree	GPs
Researchers with a declared conflict of interest cannot be trusted to conduct clinical trials research in an independent and unbiased manner	71%	16%	46%	44%	Researchers with a declared conflict of interest, even when effectively managed, cannot be trusted to conduct clinical trials research in an independent and unbiased manner
Publication of clinical trials in peer reviewed journals ensures that the evidence is of a high quality	69%	15%	79%	15%	Publication of clinical trials in peer reviewed journals ensures that the evidence is of a high quality
Clinical trials research funded by the pharmaceutical industry is often biased to produce a positive outcome	67%	17%	82%	12%	Clinical trials research funded by the pharmaceutical industry is often biased to produce a positive outcome
I would not trust a healthcare professional who worked with the pharmaceutical industry to give me unbiased advice on clinical trials data	58%	29%	–	–	<i>Statement not tested</i>

Funding from the pharmaceutical industry is the only way in which society can afford to develop new and innovative drugs	52%	33%	–	–	<i>Statement not tested</i>
Clinical trials methodologies effectively protect against any potential bias introduced by the source of the funding or the researchers themselves	47%	27%	45%	44%	Clinical trials methodologies effectively protect against any individual bias introduced by the source of the funding or the researchers themselves

Base: All GB adults (n=2,041); All GPs (n=1,013)

- 71% of British adults agree that researchers with a declared conflict of interest cannot be trusted to conduct clinical trials research in an independent and unbiased manner, compared to less than half of GPs (46%) who think the same. This may be a factor of the addition of “even when effectively managed” to the statement shown to GPs, but may also suggest that GPs may have a more nuanced understanding of how conflicts of interest are managed in the process.
- The pharmaceutical industry is not viewed in a positive light by British adults in relation to clinical trials. 58% of Britons agree that they would not trust a healthcare professional who worked with the pharmaceutical industry to give me unbiased advice on clinical trials data.
- However, despite this, over half of the public (52%) agree that funding from the pharmaceutical industry is the only way in which society can afford to develop new and innovative drugs.

Trusted voices on medical evidence

- Almost one in three (29%) British adults trust healthcare professionals to provide an independent and impartial assessment of medical evidence ‘to a great extent’, rating it 5 on a 0–5 scale.

Q. Overall, how much would you trust each of the following to provide an independent and impartial assessment of medical evidence? Please give your answer on a scale of 0–5, where 5 means that you would trust them to a great extent and 0 means that you would not trust them at all.

	Trust to a great extent (rating 5 on a 0–5 scale)
Healthcare professionals (e.g. GPs, hospital doctors)	29%
Academics / researchers working on clinical trials	12%
Government agencies (e.g. National Institute for health and Care Excellence (NICE), Medicines and Healthcare products Regulatory Agency (MHRA))	10%
Medical charities and patient organisations, including those that fund research	10%
People sharing personal experiences on social media	4%
The pharmaceutical industry	3%
National newspapers, television or radio	1%

Base: All GB adults (n=2,041)

- British adults between 55–64 years old (34%) and 65+ (34%), are more likely than their younger counterparts (25–34 year olds at 23%, and 35–44 year olds at 24%), to say that they trust healthcare professionals ‘to a great extent’ to produce an independent and impartial assessment of medical information.
- 15% of British adults state they would not trust national newspapers at all to deliver an independent and impartial assessment of medical information – rating it as ‘0’ on a 0–5

scale – and 13% of British adults say the same about people sharing experiences on social media.

- In line with overall trust, when asked to rank these sources of evidence almost half of British adults (46%) believe healthcare professionals are the most trustworthy assessor of medical evidence, followed by academics or researchers (19%).

Q. There are a number of different people and organisations who might be involved in speaking about the reliability of medical evidence. Please rank each of the following from 1 to 7 in order of how much you would trust their assessment of medical evidence, where 1 means the most trustworthy, 2 means the second most trustworthy, through to 7 which means the least trustworthy

	Most trustworthy (#1)	Top three most trustworthy
Healthcare professionals (e.g. GPs, hospital doctors)	46%	80%
Academics / researchers working on clinical trials	19%	62%
Government agencies (e.g. National Institute for health and Care Excellence (NICE), Medicines and Healthcare products Regulatory Agency (MHRA))	12%	50%
Medical charities and patient organisations, including those that fund research	9%	51%
People sharing personal experiences on social media	7%	21%
The pharmaceutical industry	3%	26%
National newspapers, television or radio	3%	10%

Base: All GB adults (n=2,041)

- Although overall, 46% of British adults who believe healthcare professionals are the most trustworthy source of information in their assessment of medical evidence, those aged 18–34 years old were less likely to say this than those aged 45+; 40% of those aged 18–24 and 39% of those aged 25–34, in comparison to 50% of those aged 45–54 and 55–64, and 48% of those aged 65+.
- Only 3% of British adults would rank the assessment of medical evidence by the pharmaceutical industry, or the assessment of medical evidence by national newspapers, television or radio, as the most trustworthy source of information. However, while only 10% rank the national media in their top three, 26% do the same for the pharmaceutical industry, suggesting that the industry may have a role to play as a secondary voice.

- In comparison to the national media tested among the public, which was ranked bottom for trust, medical journals enjoy a high level of trust among GPs, with 37% ranking these as the most trustworthy assessor tested, and 85% ranking them in their top 3.
- Unsurprisingly, GPs are more trusting of government evidence than the public – 40% of GPs choose assessments of medical evidence carried out by government agencies as the most trustworthy, compared to only 12% of British adults who say the same. Interestingly, however, it does suggest that healthcare professionals may have some reservations about quality of the evidence produced by NICE and the MHRA.

Q. There are a number of different people and organisations who might be involved in speaking about the reliability of medical evidence. Please rank each of the following from 1 to 7 in order of how much you would trust their assessment of medical evidence, where 1 means the most trustworthy, 2 means the second most trustworthy, through to 7 which means the least trustworthy

	Most trustworthy (#1)	Top three most trustworthy
Government agencies (e.g. National Institute for health and Care Excellence (NICE), Medicines and Healthcare products Regulatory Agency (MHRA))	40%	79%
Medical journals (e.g. BMJ)	37%	85%
Local specialists/consultants	15%	73%
GPs providing educational sessions or resources	8%	51%
Medical charities and patient organisations, including those that fund research	*	9%
Pharmaceutical industry reps	*	2%
People sharing personal experiences on social media	*	2%

Base: All GPs (n=1,013)

- Less than one in ten GPs (8%) would rate fellow GPs, who are providing educational sessions or resources, as the most trustworthy source of information.

- Less than 0.5% of GPs would rank assessments of medical evidence provided by pharmaceutical industry reps as the most trustworthy source, with 23% of GPs ranking this as the least trustworthy.

Medicine usage in social context

- 80% of British adults, and 93% of GPs believe that if possible, doctors should prescribe lifestyle changes first before offering medication to patients.

Q. Thinking about the place of medicines and medication in UK society, to what extent do you agree or disagree with each of the following statements?

GB Adults	NET: Agree	NET: Disagree	NET: Agree	NET: Disagree	GPs
If possible, doctors should prescribe lifestyle changes first before offering medication to patients	80%	12%	93%	5%	If possible, doctors should prescribe lifestyle changes first before offering medication to patients
People take too many different types of medication these days	77%	12%	84%	12%	People take too many different types of medication these days
Financial pressures on the NHS mean that healthcare professionals are often reluctant to prescribe the most effective drugs	72%	16%	45%	52%	Financial pressures on the NHS mean that healthcare professionals are often reluctant to prescribe the most effective drugs
Members of the public often put healthcare professionals under pressure to prescribe medicines which may not be appropriate	70%	16%	88%	10%	Members of the public often put healthcare professionals under pressure to prescribe medicines which may not be appropriate
Where possible, doctors should prescribe medicines which may prevent people from getting ill, even if these have moderate side effects	47%	37%	34%	56%	Where possible, doctors should prescribe medicines which may prevent people from getting ill, even if these have moderate side effects
People are too reluctant to take medicines when they are unwell	31%	57%	19%	76%	People are too reluctant to take medicines when they are unwell

Base: All GB adults (n=2,041); All GPs (n=1,013)

- British adults appear to acknowledge that they often put healthcare professionals under pressure to prescribe medicines which may not be appropriate; 70% of Britons agree with this statement, along with 88% of GPs who agree that this is the case.

- This apparent pressure that British adults put on GPs is in contrast to the overwhelming agreement that, if possible, doctors should prescribe lifestyle changes first before offering medication to patients. 80% of British adults agree with this, along with 93% of GPs.
- Over-medication is seen to be an issue for a majority among both audiences – 77% of British adults, and 84% of GPs agree that people currently take too many types of medication. However, a significant minority suggest that under-medication is also a social problem – over one third (31%) of Britons believe that people are too reluctant to take medicines when they are unwell, as do 19% of GPs.

Further Information

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