

# Industry interaction with the ENT speciality

BY BEN PATTINSON

I was enormously grateful for the chance to articulate my personal thoughts on 'the industry interaction with the ENT clinical community'. To set a context, the term 'industry' refers to medical technology manufacturers and suppliers, in addition to pharmaceutical companies. As my remit is looking after the ENT portfolio within KARL STORZ Endoscopy I write mainly from the medical technology perspective.

It is only when you sit down, in anticipation of writing an article like this, analyse and consolidate your thoughts on what you do day-to-day, that you fully appreciate the benefits of a special and quite unique relationship. I am blessed by working with a group of surgical peers that possess a rare combination of innovation, collaboration and sense of community. This is epitomised by the variety of ENT networks, regular meetings and the knowledge shared. This very journal has a significant part to play in bringing together this global community! ENT surgeons are professional, warm personalities, an inclusive group of individuals with a generosity of spirit. They tend toward furthering best clinical practice, but erring toward solidarity rather than that edge of competitiveness that we sometimes see in other surgical disciplines.

I can say, in the 20 years I have worked within this community, the relationship with ENT clinicians on a human level has not changed. The willingness to further medicine has not changed, and partnership spirit still stands firm. In 1945, Dr h. c. Karl Storz himself, the founder of our organisation, put into motion one of the cornerstones of a relationship that still prevails today, innovation via collaboration and clinical relationships, alongside the ethos of upholding quality and education. I am proud to say that, from my perspective at KARL STORZ, I feel that this still thrives to this day.

Furthermore, I feel there is a sense of collective pride between the ENT clinicians and the people within the companies that work with them. More than anything, I think it is all of this that underpins the industry interaction with the ENT speciality.

Yet, the last few years have seen marked changes in interactions between industry and all persons within the healthcare systems. So, what has changed?

## Healthcare compliance

Of course, in the present day in the UK, there are clear and natural limits and parameters of discussion with clinicians. It is crucial that companies adopt a globally-communicated ethical working practice. Furthermore, this is enforced by new and improved anti-bribery legislation which is encapsulated in the Association of British Healthcare Industries (ABHI) Code of Business Practice.

To elaborate on this further, the ABHI is an industry association for the medical technology sector in the UK. Its purpose is to promote the rapid adoption of medical technologies to ensure optimum patient outcomes throughout the UK and in key global markets. ([www.abhi.org.uk](http://www.abhi.org.uk)). Their Code of Business Practice, which all member companies embrace and adhere to, sets out guidelines as to what is reasonable with regards to interactions with Healthcare Practitioners and includes (but is not limited to): day-to-day interactions with healthcare professionals, advertising and promotion, company-sponsored product training and education, support of third party educational conferences, support of healthcare professionals in continuing professional development, advertisements and demonstrations, support of educational conferences, promotional meetings, interaction with other member companies and so on.

The Bribery Act (which came

into force 2011) has characterised a modernisation of the law with respect to interaction between industry and governmental bodies or individuals. This has led to a welcome and renewed awareness over procedures and policies, and with that, the tightening of internal policing via 'healthcare compliance' departments within both commercial and healthcare settings. In other words, in addition to the organisation's own integrity, values and ethics, the letter of the law is now written with such clarity, that there is no room for subjective interpretation.

## The changing procurement landscape

With ever increasing pressure on funding, it is only natural that healthcare procurement teams are seeking improved pricing or cost savings. Unfortunately, all too often this is with an over-arching emphasis of the 'bottom line' cost, without sufficient regard for the often unspecified added value inherent within any offer, and the actual needs of the end user beyond a simple supply of goods.

There has always been that natural symbiotic relationship between responsible medical technology companies and healthcare providers. For a commercial entity that operates with integrity, and whose values are based around continual improvement

**“There has always been that natural symbiotic relationship between responsible medical technology companies and healthcare providers.”**

of patient care and furthering medical practice, this means that the relationship does not stop with equipment manufacture and supply. It continues into clinical skills training, surgical procedure development, collaborative innovation, supporting bodies which communicate standards and best practice, the sharing of knowledge and expertise globally, amongst numerous other activities. Since there appears to be depleting educational budget from the NHS for consultants and trainees, there is an increased expectation on companies to provide this. In fact, over recent years we are even seeing written into NHS tender documents 'added value' requirements, which include education, training, support and innovation, with significant weighting in the scoring parameters. Therefore NHS trusts and procurement organisations with a greater commercial awareness understand the capacity of supplier organisations to support advancing medical practice, and are asking for it as part of a supply arrangement. On the flip side, the same procurement organisations are also asking for lower prices on product. Lower prices, naturally, means lower profit, and lower profit means reduction in allocated budget for education and sponsorship of healthcare bodies.

So the conundrum is this: that there is increasing expectation for companies to invest in the healthcare system via programmes of support - versus very clear legally-bound guidelines on the form that this should take, with the additional costs of policing that, and all the while, under the pressures of squeezed budgets for such activity.

**In summary**

We have collective groups, which include non-clinical persons, significantly contributing to decisions for clinical-led individuals or groups of individuals whose primary aim revolves around patient care. Naturally, it is important that all appropriate measures are in place to ensure vigilant

investment of monies that ultimately derive from the taxpayer. Obviously, we all share a vested interest in this as taxpayers, and as customers of the healthcare system. Additionally it is crucial that both business and clinicians interact with transparency and with the utmost of integrity as to do anything other, undermines patient care. So, ultimately, we all want the same thing! However, many of us in the industry cannot help but feel that in some cases the voice of the most important person, the clinician, is diluted. It is more important than ever that the voice of the clinician is not lost, otherwise we run the risk of stagnation in terms of furthering medicine and innovation.

**“I feel confident stating that ENT Consultants choose a company or product on the basis of quality, reliability, innovation and reputation.”**



NHS Trusts and procurement organisations need to continue to develop further their commercial awareness and what is sustainable (or not sustainable) in the long term. In any walk of life, we can buy 'cheap', but this inevitably comes at a cost. The key to sustainability will come from greater understanding and collaboration.

The clinicians that work with us comprehend this. Speaking from personal experience, I feel confident stating that ENT Consultants choose a company or product on the basis of quality, reliability, innovation and reputation. Also because of a high level of local specialist service, in addition to ongoing support over their professional development, surgical skills training and

working with their hospitals in aiding the development of services. All this in turn means greater patient care, along with momentum for improvement and innovation.

All of this, of course, is what my own employer KARL STORZ represents and upholds. I very much look forward to continuing to work closely with the ENT Clinicians in order to meet their and the patient's needs, furthering their practice and supporting them in the community they uphold. Finally, but importantly, to encourage them to have their voices heard for the benefit of clinical needs, sustainability, innovation and patient care.

Of course, along the way, we should also enjoy and maintain some special and lasting friendships.

Thank you sincerely to Declan, for this invitation.



**Ben Pattinson,**

Head of Upper Endoscopy Division (ENT, Neuro, Cardiothoracic, Oculoplastic, Oral & Maxillofacial and Plastic Surgery) Karl Storz Endoscopy UK Ltd

**E: bpattinson@karlstorz-uk.com**  
**www.karlstorz.com**  
**Tel: +44 (0)1753 503500**

**Declaration of competing interests:**  
None declared

