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The news that the Slovak Republic is proposing a law that will make lobbying a legal business activity (page 10) is to be welcomed. As are the array of reports that have come out of Europe on the effectiveness of lobbying in Brussels.

Burson-Marsteller's report from Brussels (page 9) challenges the widely held opinion that industry lobbyists are far more powerful than non-governmental organisations (NGOs) but also finds that industry is more effective on a sector-by-sector basis, including in the healthcare/pharmaceutical arena.

In contrast, a report by a Viennese academic says that lobbyists in Brussels have very limited impact on the decision-making process. The report (page 8) says, somewhat cruelly, as if to be kind, that lobbying will only work if the cause is in line with the political will or if the decision-makers are indifferent to the outcome.

Despite this, Corporate Observatory Europe (CEO), an organisation that monitors the lobbying activities of big business in Brussels, is unlikely to abandon its campaign for stricter requirements for the registration of lobbyists. Indeed, its campaign is now in full swing (page 9) and has the support of 90 civic society groups and certainly the interest of EU Commissioner Siim Kallas.

Quite why CEO is targeting Brussels lobbyists so keenly is not too clear. The biggest scandal to have occurred in Brussels was in 1999 and did not

involve lobbyists. It was when all the European Commissioners agreed to step down to quell concerns about nepotism, among other alleged practices within the Commission.

Concerns about lobbyist behaviour continue in the United States. According to the Washington Post, the number of registered lobbyists in Washington DC has more than doubled since 2000 to more than 34,000 (compared with Brussels' 15,000) and the amount that lobbyists charge has increased by 100%.

The lobbying growth has, apparently, been caused by three factors: rapid growth in government, Republican control both of the White House and Congress, and wide acceptance among corporations that they need to hire a professional lobbyist to secure their share of federal benefits. This is particularly true, it seems, in the growth areas of healthcare and home building.

Finally, returning to Europe, our story on page 10 tells of how the French are endeavouring to come up to speed on lobbying tactics. A French political consultant explains how his country has always targeted the top ministers instead of the more humble civil servants. ■

Peter Rixon (Editor)

US

Computer giant pushes healthcare reform

International Business Machines (IBM), one of the world's leading supplier of computer products and services, has been pushing for reform of the healthcare system in the United States. On July 1st, the company drew attention, through Ketchum public relations company, to a bill introduced into Congress which will seek to replace a paper-based American healthcare system with one based on IT solutions.

The Bill, introduced by Senators Charles Grassley, Max Baucus, Michael Enzi and Edward Kennedy, takes a three-pronged approach. It will set up public-private partnerships to establish national technical standards for health IT; provide three new funding mechanisms to help doctors and hospitals acquire the health technology they need for their patients; and help healthcare providers enhance their use of IT by, among other things, setting up a "Best Practices Center" and helpline for answers to technical questions.

The Senators believe that, through utilising modern healthcare technology, the quality, safety and efficiency of the healthcare system will be improved. "We have a moral responsibility to make the miracles of modern medicine available to every American – but we have failed to meet that responsibility," said Edward Kennedy on the introduction of the legislation. "Costs are crushing our healthcare system. Premiums are going through the roof. The ranks of the uninsured grow every day. Families are having to choose between healthcare and groceries, rent and college tuition. That's not the American dream. We can –

we must – find a better way."

Information technology alone will not solve these problems, Senator Kennedy said, but electronic medical records, software to warn if a treatment could harm a patient and computerized prescribing could save lives and dramatically cut costs, he said.

IBM clearly welcomes public-private partnerships as an approach to healthcare reform and the company, along with others, have taken steps to address the technical and financial barriers of the current healthcare system.

In May, IBM, alongside the Governor of Pennsylvania and the University of Pittsburgh Medical Center (UPMC), launched an eight-year, \$402 million partnership to develop a radical new regional healthcare system. Addressing issues such as electronic patient records, biosecurity and information-based medicine, IBM and the UPMC intend to commercialise the solutions they develop.

IBM has also launched the Healthcare Collaborative Network, which is a pilot programme aimed at demonstrating the feasibility and benefits of electronically linking hospitals with federal and state health agencies. By exchanging data over the Internet, IBM argues that patient care and safety can be enhanced, medical errors will be reduced and authorities can respond quicker to infectious disease outbreaks and bioterrorism.

Congress has seen many bills on health IT introduced, and a consensus has developed that there should be a public-private partnership to establish technical standards and that providers need financial assistance to enhance their use of IT. ■

Actress speaks at Senate vaccine hearing

Celebrities can be as effective on the political stage as they are on the theatrical one. Hollywood actress Ashley Judd addressed a US Senate committee in June to call for action on "cross generational sex" in southern Africa.

Ms Judd, speaking as a member of the board of directors of Population Services International (PSI), told the Senate foreign relations committee that a culture had developed which saw young women having an older "sponsor" and sexual partner as an acceptable way to meet basic needs.

Young women were exchanging their bodies for modest financial support – a lunch, a cell phone, plastic shoes, of half a litre of fuel – from men who are a generation or more older than them, Ms Judd said. These cross generational relationships are fuelling the AIDS epidemic among young women when they might otherwise have stayed free of the disease.

Chaired by Senator Richard Lugar, the hearing was actually on the development of an AIDS vaccine. Opening the session, Senator Lugar said: "An effective HIV vaccine is the world's best chance to stop this pandemic. But the search for an HIV vaccine must not come at the expense of our immediate, lifesaving response. Let me stress that we are not limited to an either/or choice between vaccine research and HIV/AIDS treatment."

The Senator said he favoured an "all of the above" approach which included vaccine research, education and prevention programmes, and treatment efforts to provide a

truly comprehensive response to the AIDS epidemic.

Ms Judd's issue seemed to fit in well with the Senator's approach of tackling the disease using different approaches.

At one point in her speech, Ms Judd, referring to the Senators as "honourable members of this distinguished committee", paused and asked them: "Are we really doing everything we can to protect young girls from AIDS?" So little is being done, she said, because the problem of cross-generational sex was so deeply rooted and so long-standing that "we simply don't know where or how to start".

She added: "Having an AIDS vaccine would be of great benefit to women of all ages because it could reduce their chances of becoming infected. As there can be no vaccine to prevent the abuse of women, however, there is nothing more important in the struggle against this disease than reversing destructive social norms that endanger women across Africa and in other developing countries."

Large-scale effort

Congressman Peter J Visclosky told the committee that, given the scientific complexity of developing an HIV vaccine, only a large-scale, coordinated effort could effectively accomplish this. He pointed out that only 1% of spending on HIV-related programmes worldwide went towards vaccine research.

Congressman Visclosky also pointed out that "while this epidemic is worse in other parts of the world than it is here at home, we cannot ignore the ravaging effect that HIV is having in our own country." ■

US

They take no prisoners, or offence

One organisation in Washington has received qualified praise for its lobbying efforts – from its opponent.

The pharmacy benefit management industry, under its umbrella group (Pharmaceutical Care Management Association) PCMA, has led a “ferocious and sustained lobbying and legal campaign whenever its interests are deemed threatened in state houses, the courts or on Capitol Hill”.

The quote is lifted from *Drug Store News*, the newspaper for chain drugstores and independent pharmacies, which is in the thick of battles across the US with the PCMA “Under the PCMA’s umbrella, the pharmacy benefit management industry has earned an unenviable reputation for a pugnacious, take-no-prisoners approach to public relations vis-à-vis the retail

pharmacy community”, the *Drug Store News* article said.

What seems to have particularly annoyed the independent pharmacies is how the PCMA has described these pharmacies as hiding behind a “mom and pop” image whilst they enrich themselves through special protections to the cost of consumers and taxpayers.

“It’s an ugly and misleading set of accusations,” James Frederick, author of the article said.

Not offended

Phil Blando, the PCMA’s vice president of public affairs, was pleased rather than offended by criticism of his organisation.

“The article highlights PCMA’s lobbying, public relations and research strategy and demonstrates PCMA’s effectiveness in helping to make the case for PBMs and hitting back at our opponents at retail he said.” ■

US ambulance providers step up lobbying

The American Ambulance Association (AAA) is stepping up its lobbying efforts in Washington DC, retaining leading law firm Patton Boggs for support.

One of the key concerns facing the AAA is the possible loss of rural ambulance services. Reimbursement rates under the Medicare ambulance fee schedule are 27% below the national average cost of providing ambulance services to patients. But the cost of providing an ambulance and the Medicare reimbursement “is

even greater for rural ambulance providers, which have low transport volumes”, the AAA said. All ambulance providers depend heavily on Medicare reimbursement with Medicare patients accounting for about 50% of the call volume of an ambulance operation. The AAA is calling on its supporters to urge their Congressmen to cosponsor the Medicare Ambulance Payment Reform and Rural Equity Act which would reimburse ambulance service providers closer to the cost of providing the service. ■

Senator puts on slide show for staff



Tom Coburn

US senator Tom Coburn, a practicing physician, hosted a “safe sex” slide show for Capitol Hill members, staff and interns to demonstrate the effects of sexually transmitted diseases (STDs).

The Republican Senator, who says he has “treated virtually every sexually transmitted disease”, told his audience how, in many cases, STDs lurk undetected in the body for months or years “before unleashing their terrible effects”.

“For example, 5,000 women in this country die every year from cervical cancer, which is

caused by HPV, the human papillomavirus. HPV is the most common sexually transmitted disease but, like many STDs, its effects are not widely understood”, Dr Coburn said.

Prime target

A prime target for healthcare lobbyists, Senator Coburn is one of only two physicians in the Senate, the other being Senator Bill Frist. Senator Frist recently joked with members of the American Medical Association that with only two doctors in the Senate next to 58 lawyers, he was a “pilgrim in an unholly land”. ■

PhRMA deplors ED vote

Ken Johnson, the senior vice president of the Pharmaceutical Research and Manufacturers Association (PhRMA), has said the US House of Representatives is treating Medicare and Medicaid patients like “second class citizens” where erectile dysfunction is concerned.

Following a recent vote on a bill that restricts funding for erectile dysfunction prescription medicines for Medicare and Medicaid beneficiaries, Mr Johnson said: “The real losers are the hundreds of thousands of disadvantaged, low-income and senior men in America who suffer from prostate cancer, heart disease and depression.” Erectile dysfunction, Mr Johnson said, is often the consequence of these diseases. “Unfortunately, the House is telling these men:

tough luck, you’re on your own.”

Mr Johnson said he now hoped that the Senate will “view this important health issue with a little more compassion.”

Another of PhRMA’s battles, to prevent any legislation that would allow for cheaper, patented pharmaceuticals to be reimported into the United States from Canada, received indirect support from the Canadian government on June 29th.

Protecting Canadians

Health minister Ujjal Dosanjh said he would bring forward legislation that would “prohibit the bulk export of prescription and other needed drugs when it is necessary to protect the health of Canadians”. ■

US

Bill signing in Texas attracts 1,000

After several years of campaigning, Joe Pojman, a former aerospace engineer at NASA, was able to stand behind Texan Governor Rick Perry and watch the Governor sign into law a bill requiring parental consent for a minor's abortion.

Attended by about 1,000 people, the signing was a moment Mr Pojman could savour because it represented a small, yet significant victory for his cause. Prior to the signing, Mr Pojman, his NASA days behind him and now executive director of Texas Alliance for Life, had already been celebrating the Texas Senate's vote in favour of the bill.

"The parental consent measure goes a long way towards restoring the rights of parents taken away by the Supreme Court in its tragic Roe vs Wade decision," Mr Pojman said after the Senate voted 25 to 6 on the draft law, Bill 419.

Roe vs Wade refers to the 1973 US Supreme Court decision that legalised abortion and that pro-life groups have been avidly chipping away at ever since (25 other states now have a parental consent for abortion law, most recently Arkansas).

In Texas, over 3,500 abortions were performed on girls under 18 in 2003, according to the state health department. Clinics were required to notify parents prior to performing an abortion, but not seek their consent. The Governor's signature has now changed this.

So how did Texas Alliance for Life achieve this? The typical citizen is not politically well-informed, it seems. "In many cases they don't know they have a state Senator," Mr Pojman said. The Texas legislature has 31

state Senators and 150 state representatives who meet once every two years for 140 days between January and May.

But Texas has many layers of Government – municipal governments, different boards for taxing authorities and hospital districts. Not a lot of people can keep track of what is going on. "My goal is to find people who are like-minded and get them educated. People just need to be empowered. We give them the bill number, who they need to contact and when," Mr Pojman explains.

Texas Alliance for Life asks its members to thank legislators when a victory, like the parental consent bill, is achieved.

"It is a citizen's legislature. They are not full-time. They all have other jobs, as teachers, physicians, insurance salesmen. They work among everyone else and they especially appreciate being thanked by their own constituents. And it makes them know that they are held accountable. Too few times we thank people," Mr Pojman said.

In the latest issue of the alliance's newsletter, *Write for Life*, members were urged to "Thank Governor Rick Perry for Strong Pro-Life Stand". This was not for signing the bill, but for making it clear, four months earlier at a rally in Austin, that he was strongly in favour of the bill.

At the rally, which marked the "32nd anniversary" of the Roe vs Wade ruling, Governor Perry said: "Five years ago, we passed a bill requiring parental consent for a child to get her ears pierced. I think it's time that we applied that rationale and that same rational standard to abortions performed on minors."

"That really was a goal we have been working on for several years and we reached our goal late in the session," Mr Pojman said. "In this particular case, the Governor knew that this issue was very popular."

With the end of the Texas legislative session, the alliance's attention now shifts to the federal government.

As well as its *Write for Life* newsletter, which is distributed to about 1,000 "legislatively-minded" members, the alliance also sends out 14,000 general "email-blasts" as needed. "We are finding that a lot of people respond to emails who are not

responding to US mail. They receive it on their computer and they open it and we have their attention straight away."

The debate over whether to use embryonic stem cells for research into diseases such as Parkinson's and Alzheimer's, rages at the federal and state level and is a key issue for the alliance.

Again, they appear to have the support of the Texas Governor. The legislature ended with no action taken on the stem cell issue and with Governor Perry saying that it was "fine with me" if another state took the lead role in the research. ■

New York decides on morning after pill

Just two days before the end of the legislative session, New York state Senate approved a bill that will make emergency contraceptive pills available over the counter (OTC) in the state's pharmacies.

The vote realises Barr Pharmaceuticals hopes for an approval of OTC status for the pills prior to the end of the session. Barr manufactures Plan B which has not been given federal approval and has left the company with the task of lobbying state-by-state to get its product onto the market across America.

The issue with Plan B is that some politicians have been told

that it is akin to the so-called abortion pill, RU 486. However, Barr has gone to considerable lengths to explain that Plan B is simply birth control.

Hold up

US Senator for New York, Hillary Rodham Clinton, was among the Senators who protested at the FDA's decision not to approve Plan B for OTC use. Senator Clinton and Washington Senator Patty Murray have both said they will block President Bush's nominee for the position of new FDA Commissioner, Lester Crawford, in protest at the Plan B hold-up. ■

Stem cell battle in Louisiana

Supporters of a bill which would ban human cloning were licking their wounds this month after they tried and failed to force a bill to the Louisiana Senate floor.

The bill had previously been approved by the House but

rejected by the Senate in a vote that was shrouded in controversy.

Dorinda Bordlee, of the Bioethics Defense Fund, which has given vigorous support for the bill, has greater hopes for the bill at the next legislature in March 2006. ■

US/Canada

Canada's lobby Act to be amended

Canada's Lobbyists Registration Act, which is the framework for those who lobby the government as paid consultants or employees of businesses or non-profit organisations, is to be amended as of June 20th. The new regulations contain a number of important changes, the most significant of which is the change in the definition of lobbying.

Where previously lobbying was an attempt to influence someone in public office, lobbying will now be "any oral or written communication made to a public office holder". Excluded from the definition are communications made to public office holders for information only.

The amendments to the act are intended to make the registration process more transparent and provide clear and up-to-date information about who lobbyists are and what they do.

The amendments also bring the various types of lobbyists into line. The registration of those working for commercial operations will now be similar

to that of those working for non-profit organisations. The senior corporate officer of the company will have to ensure the company is registered if time spent by its employees on lobbying collectively equals or exceeds 20 percent of one employee's time. Also, when registering, they will have to list all of the corporation's senior employees who communicate with public office holders, as well as those who spend 20 percent of their time lobbying. This information will have to be updated every six months.

Consultant lobbyists – those who are paid on a contract basis to lobby on behalf of their clients – will also have to update their respective registrations every six months.

The amendments to the Act widen the scope in terms of what lobbying is, and avoids the hazy area of what constitutes "attempting to influence", while ensuring that data held on lobbyists is accurate and up-to-date. The three categories of lobbyist – consultant, corporate and lobbyists for non-profit organizations – remain unchanged. ■

Minnesota needs healthcare "makeover"

Minnesota Attorney General Mike Hatch has said Minnesota's and the United States' healthcare systems need an "extreme makeover". In a paper titled "Healthcare: making the best of a bad bargain", Mr Hatch argues for change, citing statistics that show that Minnesotans spend \$19 billion

each year on healthcare and the average Minnesota household spends \$11,000 per year on premiums, out-of-pocket costs and taxes for healthcare.

"Do we get our money's worth?" the attorney general asks. "The United States ranks behind 47 other countries in life expectancy and behind 41 other countries in infant mortality". ■

Florida gives birth to "religious left" movement

A new, political organisation has been set up with the goal of "reclaiming Christianity from the Religious Right".

The Christian Alliance for Progress, launched at the end of June, said that sustained efforts by a handful of preachers over the past 30 years has allowed evangelical Christianity to merge with the conservative political agenda. As a result, it says, Christianity in the United States has moved away from its foundations of compassion and justice.

"As a pastor I have been horrified and saddened to watch opportunistic religious leaders meld Christianity with extreme conservatism," said the Reverend Timothy Simpson, a pastor of the Presbyterian Church USA and the alliance's director of religious affairs.

"The religious right has been extremely successful at taking control of the language of our faith and using it to promote an extreme and divisive political agenda. This is fuelling incredible polarisation in our politics."

The alliance appears to have been born out of the 2004 presidential elections which, with a win for George W Bush and the Republican party, emboldened the religious right to dominate certain issues, it says. Examples given by the alliance where this has happened include the use of the "filibuster" as a tool in Congress, the high profile involvement in the Terri Schiavo case, and the expulsion from a North Carolina church of people who voted for the failed Democratic presidential candidate John Kerry.

The alliance itself, effectively the "religious left", says it is

standing for issues such as "responsible environmental stewardship; equality for gays and lesbians; honouring the sanctity of childbearing decisions through effective prevention, not criminalisation of abortion; seeking peace not war; and achieving healthcare for all Americans".

The alliance chose Jacksonville, Florida as the venue for its launch because it sees in particular the First Baptist Church in Jacksonville as an organisation that needs to be counter-balanced by the Christian Alliance for Progress.

"As everyone in the city of Jacksonville knows, the First Baptist Church is part of the Southern Baptist Convention, and as everybody in the country knows, the Southern Baptist Convention is right now calling many of the shots as part of the religious right in the Republican Party," Reverend Simpson said. Patrick Mrotek, a Jacksonville businessman who founded the alliance, said: "For the average American Jill or Joe, when it comes to politics, being a Christian has come to mean being a so-called values voter, and it almost always means voting Republican. In fact, leaders of the religious right widely use the language of Christianity to promote only one political viewpoint."

The organisation is using the mission statement "Take Back our Faith" which is being prominently displayed on all placards promoting the new group. The alliance has also sent an open letter, called the "Jacksonville Declaration", to political and church leaders on the religious right challenging them to return to "the values that Jesus passionately taught and lived". ■

Europe

Europe's parallel traders play transatlantic role



Heinz Kobelt

The association representing European parallel traders, the scourge of big pharmaceutical companies, has a new secretary general who, like his predecessor, comes from a big pharma background.

Heinz Kobelt took over earlier this year as head of the EAEPC (European Association of Euro-Pharmaceutical Companies) from Don MacArthur, a vocal and insistent advocate for the association's members for a number of years. Mr Kobelt, a Swiss citizen, is certainly well-qualified for his new position, having previously handled EU government affairs for Novartis.

Members of his organisation exploit the price differences among EU member states by re-exporting a patented product from, for example, Greece, back to the UK, where the price is considerably higher for the trader to make a profit.

EU legislation allows, or rather does not prevent, parallel traders from doing this and the traders argue that it provides cost-savings to the governments who pay less for a parallel-traded product. Once the patent runs out, and the generic versions of the product appear, the parallel trade is generally wiped out because generic medicines are considerably cheaper.

Mr Kobelt's priorities as the political leader of the parallel traders are twofold. He wants to bring transparency into the business to provide the evidence to show that parallel-traded products are safe. He also wants to be able to demonstrate that the trade still provides savings to those who pay and is a dynamic

element to improving competition within the European Union.

In the US, the EAEPC has come to the attention of Senators who, facing pressure from effective lobbyists like the AARP, which represent seniors, are seeking ways to reduce the cost of patented pharmaceuticals for American citizens.

In April, Mr Kobelt responded to a request from Senator Olympia Snowe to provide information to a Senate hearing on parallel trade. The Senate is currently considering a bill that would make reimportation of patented pharmaceuticals from Canada legal.

Under current international patent law, it does not seem possible to parallel import patented products from Europe at the present time, without the consent of the manufacturer. Also, although Mr Kobelt is happy to provide information on parallel trade to the Senate, he cannot openly enthuse about it. This is because if the EAEPC's members were able to supply the US with cheaper, patented pharmaceuticals, there would not be enough left over for EU member states. Being unable to supply the EU states would pull the rug from under the feet of the EAEPC's argument that its trade is beneficial to Europe's patients, and not just to the traders' pockets.

PhRMA, the organisation that represents research-based pharmaceutical companies in the US, is clearly determined to make sure that the EAEPC does

not face such a dilemma. It successfully prevented a re-importation bill going through the previous Congress and is campaigning heavily to prevent the current one making any progress (see page 2).

Mr Kobelt, in his submission to Senator Snowe, stressed that parallel-traded products were highly regulated and separate from the distribution of counterfeit medicines which is "the manufacture and distribution of illicit products by unscrupulous businessmen". He made this point to counteract claims by the research-based industry that parallel trade could be a potentially weak link in the distribution chain that would allow counterfeits to enter into the market.

In terms of the savings that parallel imports can bring, Mr Kobelt quoted figures from a

study commissioned by the EAEPC which found a maximum of Euro 342 million government savings in any one member state through the trade. Mr Kobelt pointed out that a subsequent study, sponsored by Johnson & Johnson, minimised savings from parallel trade.

The European Commission has heard all these arguments before, as have national and EU-level judges who have, sometimes at great pains, endeavoured to give clear judgements for parallel traders and the pharmaceutical industry on the matter.

For the US Congress, the arguments are not familiar, but they probably soon will be. Quite how this situation will develop further is not clear, but it will certainly keep the lobbyists very busy for the foreseeable future. ■

Health First Europe promotes innovation

The message from Health First Europe's three day exhibition inside the European Parliament in June drew support from policy makers.

EU health commissioner Markos Kyprianou welcomed the contribution of Health First Europe to the discussion on access to medical technology and MEP Karl von Wogau told the exhibition: "Health First Europe is right when it refers to healthcare as an important economic factor. The European Union should invest more in applied research and development and to boost innovation and healthcare delivery." A healthy European population, Mr von Wogau said, is the foundation of a healthy European economy.

Health First Europe, an alliance of industry, patient groups and 30 medical associations, sought to raise

awareness at their exhibition of the divergent healthcare systems in the European Union which leads to inequitable access to modern healthcare technology.

The organisation's chairperson, former MEP Mel Read, emphasised Health First Europe's message before an audience of MEPs at the launch of the exhibition. "Healthcare in Europe," she said, "is currently a major societal challenge, because of the continuing enlargement of the EU and major demographic shifts. Innovation in medical technology is key to enable patients to live longer, more satisfying and more productive lives without disability." Ms Read said that innovation should be the priority of the new (7th) EU research programme and equitable access to medical innovation should be the cornerstone of any European health policy. ■

Europe

Think-tanks, their influence and the NHS



Helen Disney

The Stockholm Network, an umbrella group of more than 100

European think-tanks, has produced a report describing Britain's National Health Service (NHS) as being "no better than former communist health systems".

The report, called Poles Apart, is based on the results of two surveys conducted in Poland, Hungary, Slovakia and the Czech Republic which looked at performance indicators such as waiting times, choice, convenience and the use of latest medicines and medical devices.

Britain, the network says, performs no better than the average of these four former communist countries, now part of the European Union.

Performance

Measuring the performance of think-tanks, in terms of their influence on governments, is harder to quantify. "They do definitely have an influence," says Helen Disney, lead author of Poles Apart and the Stockholm Network's director. "We organised a lecture tour of Europe for a Wisconsin man who had helped design a welfare-to-work scheme for former New York Mayor, Rudy Guiliani," Ms Disney said. "As a result of the tour, the German state of Hesse piloted the scheme and the current opposition party in the federal government, the CDU, has incorporated it into its policy."

With an election in Germany scheduled for September, and the CDU looking likely to win, the Stockholm Network may find itself pulling off a lobbying

coup in Germany.

Sharing market-oriented policy ideas around Europe is one of the network's functions, but direct influence is its ultimate aim. "If you don't influence government policy then nothing will happen", Ms Disney said.

The Adam Smith Institute, a member of the Stockholm Network, also issued a report on the NHS in June with the intention of steering the organisation towards more competitive practices.

The Institute wants the NHS to continue to pay for healthcare but no longer provide it. Under the think-tank's plan, NHS hospitals and clinics would compete for state funding as independent and self-managed private companies, while the government would no longer employ its own doctors and nurses. These healthcare professionals would, instead, work for the newly independent hospital or private agencies, the institute says.

Adam Smith

Dr Eamonn Butler, director of the Adam Smith Institute, says that such ideas can filter into and influence political debate. "We come out with ideas and put these into the public debate and other people look at these ideas, take bits out and put other bits in and eventually you end up with something that was not cut and dried your idea. But you may have been instrumental in starting the debate or you were a voice in the chorus."

Dr Butler sees the dangers of

being in the pockets of sponsors of think-tank studies.

Sponsorship of the Adam Smith Institute comes from a diversity of sources to prevent unhealthy dependencies, Dr Butler says.

Borrowed

The idea of a network of European think-tanks was borrowed from an American concept where grass roots activists share ideas across a wider geographical space, such

as the State Policy Network, rather than being concentrating in a capital. However, there is a key difference in Europe. "In Europe, the think-tanks are working in a much more difficult environment. It is harder for them to fundraise. There is not the same culture of corporate giving or individual giving. A lot of the time they are working on a smaller budget," Ms Disney said. ■

Europe must "destigmatise painkillers"

An organisation called Opioids and Pain European Network of Minds (OPEN Minds) is seeking to destigmatise strong opioids among European legislators and promote their use as a much-needed strong pain killer. Brussels-based Interel Public Relations and Public Affairs is working with OPEN Minds on the issue.

A white paper published by OPEN Minds in June explains how prescriptions for opioids - morphine, oxycodone, hydromorphone, buprenorphine, fentanyl must be filled out differently from other medications, in every country in Europe.

Triplicate

"In some cases, complicated triplicate forms must be filled in," the White Paper, presented to the European Parliament, says. "In many countries, doctors must travel in person to regional offices to obtain the forms needed to prescribe strong opioids, and in some cases even pay for these forms themselves."

Opioids are often associated with addiction and with imminent death. But OPEN Minds says that people can live perfectly normally on a stable dose of strong opioids.

The prescription regulations only serve to reinforce the

"outdated viewpoint", despite considerable evidence showing the efficacy of opioids' use in managing chronic pain, OPEN Minds said.

The OPEN Minds group has a number of academics supporting its approach to the EU. "Chronic pain is a major European healthcare issue," said Professor Margarita Puig of Spain's Hospital Universitario del Mar.

"The White Paper illustrates the extent to which legal, regulatory, cultural and economic factors impede upon the treatment of chronic pain across Europe. Most importantly, the research illustrates a fundamental misunderstanding of the impact of pain and the important role that strong opioids play in the management of chronic pains," she said.

Terminology

OPEN Minds, in its White Paper, attacked the language and terminology used to describe these medicines. In Germany, all narcotics, including opioids, are referred to as "Betaeubungsmitteln", which literally translates as "the means to knock you out". In Austria, prescription forms are known as "Suchgiftrezepte", which translates as "addictive poison prescription forms". ■

Europe

Why lobbying works, and fails

Lobbying strategies in Brussels can only be successful when the lobbying is in line with the initial political will of the governmental actors, or when the decision-makers are indifferent to the outcome of the legislation.

These two conditions, according to a Viennese professor, are the only ones that can be proven to be decisive to the outcome of a lobbying campaign, but they are not necessarily the only ones required to succeed.

The study, called EU Lobbying Principals, Agents and Targets, by Irina Michalowitz, assistant professor at the Institute for Advanced Studies, paints a picture of EU lobbyists as professionals who have very limited impact.

Dr Michalowitz held 106 interviews with Brussels lobbyists, their clients and decision-makers in the course of her work and concluded that the strategy used for lobbying has no traceable influence on the lobbying success. The strategies, she said, "maybe only weakly related" to the outcome of the legislative act.

In order to assess influence, Dr Michalowitz looked at the initial aims of the lobbying targets (the decision-makers) and compared them with the interests of the analysed private actors.

Secondly, other lobbying activities or impacts relevant in the case were analysed. Thirdly, the interrelations between lobbying actors, agents and lobbying targets were assessed, as was the connection of these interrelations to position shifts or non-shifts of the lobbying targets.

Finally the satisfaction with the outcome of the lobbyists in the study was assessed and connected to their lobbying activities, as well as to those of other actors or agents involved in the case.

At least in the examined cases, Dr Michalowitz said that the presence of a political will determined the outcome of a policy decision. "EU lobbying influence may only reach as far as the political elite wants it to", she said.

Division of labour

Dr Michalowitz also points out that the way lobbyists

are used actually constitutes a strategy.

Lobbyists are used for four main purposes: providing contacts; providing information; supporting the lobbying; and direct lobbying.

Two groups of lobbying agents can be distinguished form among these four functions: The first group are those who have a pure mediator or advisory role such as political consultants and, to some extent, regional offices.

The second group consists of those who carry out functions

for members of employers and are at the same time accepted as actors in their own right because they identify with the interest they represent, ie in-house lobbyists and European associations.

"Clients use agents according to their strengths, and especially, they use agents simultaneously in order for them to cross-control each other," Dr Michalowitz said. "The purpose is to ensure the greatest possible effort in the client's interest, and to gain sufficient information in order to switch agents in time when unsuccessful." ■

Respiratory society boosts Brussels presence

The European Respiratory Society is seeking to employ an EU advocacy officer for its Brussels office to help boost its lobbying efforts there. Set up in 1990, the ERS has over 7,000 members from 100 countries and is actively involved in lobbying governments, granting agencies and political bodies for better lung health in Europe.

One of the society's major campaign topics is tobacco control and it has been active in pushing countries to sign and ratify the World Health Organisation's Framework Convention on Tobacco

Control, which entered into force in February 2005 after the 40th country, Peru, ratified it.

As a member of the Framework Convention Alliance, a coalition of more than 180 NGOs and networks working to counter the influence of the tobacco industry, the ERS supported key aspects of the treaty such as a ban on misleading descriptions such as "mild" and "light" on cigarette packs, a reinforcement of warning labels on cigarette packs and the implementation of a more secure distribution system to cut illegal trade. ■



Europe

Alliance calls for “transparency in lobbying”

An organisation called Corporate Europe Observatory (CEO) has brought together 90 civil society groups to campaign for lobbying transparency among the organisations that lobby the European Union institutions.

More than 15,000 lobbyists now operate in Brussels and a large majority of them represent business interests, CEO says. The organisation is concerned that the European Commission “has developed a tradition of awarding privileged access to corporate interests” and that corporate spending to influence the political process is “ever-increasing”.

“The enormous influence of corporate lobbyists undermines democracy and all too frequently results in postponing, weakening or blocking urgently needed progress in EU social, environmental and consumer protections,” CEO says.

A document signed by the 90 groups, including a handful of US organisations, calls on the European Commission to introduce EU lobbying disclosure legislation and an improved code of conduct for European Commission officials.

Under the legislation, the alliance wants a mandatory,

searchable system of electronic registration and reporting for all lobbyists with a significant annual lobbying budget and enforceable ethics rules for lobbyists, such as a ban on the employment of public officials and their relatives for lobbying purposes.

The code of conduct for officials should be improved through “the recording of formal and informal meetings between Commission officials and lobbyists” and the logging of correspondence, CEO states. Its article also wants an extended “cooling off” period before Commissioners and senior officials can start working for lobby groups or lobbying advisory firms.

Finally, the European Commission should “terminate cases of privileged access and undue influence granted to corporate lobbyists”, such as joint taskforces in which corporate interests are represented while public NGOs are not, CEO says.

The European Commission, through Commissioner Siim Kallas, has already said it will be examining lobbying disclosure possibilities under its European Transparency Initiative launched in March 2005. ■

“NGOs and industry are equally effective lobbyists”

A report published by Burson-Marsteller, based on interviews with 150 senior EU officials, has found that industry and NGOs are equally effective lobbyists.

“This is important”, said Jeremy Galbraith, CEO of

Burson-Marsteller Brussels, “because it challenges the assumption among many NGOs and politicians that it is difficult to counter-balance industry lobbying. And it challenges the view in some industry sectors that NGO lobbying is always

more effective than their own.” However, on sector by sector comparisons, industry comes out on top, although it only enjoys a “small advantage” in the healthcare and pharmaceuticals sector.

Across the EU institutions, the financial services and healthcare/pharmaceutical sectors stand out among interviewed Commission officials for effective industry lobbying.

Burson-Marsteller asked the officials why lobbying fails in some cases. The officials said that the lobbying was sometimes too early or too late in the process, inappropriate briefing materials were presented, or, in the case of NGOs, emotion rather than facts were used to advance their case.

“An important lesson for an industry or NGO seeking to lobby the EU is contained in the report’s finding that decision-makers look first to their staff for help not to the lobbyist who has just left the room,” the report says.

Casual lobbying

For an EU decision-maker, a face-to-face meeting is the most important way in which he or she can receive information. But in the mind of the decision-maker, exhibitions, receptions and other forms of what are sometimes seen as casual lobbying play a different role.

“Receptions are for social contact and interaction. Meetings, written briefings, conferences, seminars, workshops and site visits are for work,” the report says.

Lobbying Brussels is important because this is where significant political power has shifted in the 21st Century, the report states.

It says that the interconnections between different EU institutions are important for understanding how decisions are made, and how they can be influenced.

“Our study confirms that member state governments and

EU institutions themselves have a crucial impact on decision-makers in the other EU institutions. For all three institutions, member state governments and other EU institutions score more highly for effective lobbying than industry and NGOs but with Parliament slightly more immune from influence by these sources”.

Third countries

According to the report, the lowest effectiveness of lobbying is achieved by third country governments. “This is an important finding: governments outside the EU cannot be relied upon to articulate a case effectively.”

In terms of language, the vast majority of men and women at the top of the EU speak English as their second language. No less than 85% of those questioned cited English as their preferred choice if their own language was not available.

The report was based on interviews with 50 MEPs, 50 Commission officials and 50 representatives from Member States’ permanent representations to the EU.

Financial Times

Among the other questions asked was how they rank the different media sources in terms of importance.

The Financial Times was regarded as the most important, followed by officials’ own national newspapers, followed by the *Economist* and the BBC, Agence Europe and *Le Monde*. Three US media outlets are high up on the officials’ list: *International Herald Tribune*, *Wall Street Journal* and CNN.

Whilst the *Financial Times* is rated as the best source of information on industry for decision-makers in the Commission and the Council, MEPs opted first for their own national newspapers.

“Our findings underscore how parliamentarians tend to look first to their constituency or national and regional base,” the report said. ■

Europe

French change their lobbying tactics

The French way of lobbying – influencing senior ministers towards the end of the legislative process is changing in favour of influencing civil servants at the beginning.

French lobbyists must give in-depth presentations, lobby all nationalities in the EU and not rely so much on connections in high places, a conference at the European Parliament in Brussels heard.

The expansion of the European Union to embrace 25 countries and the recent “No” votes in France and the Netherlands to a constitution for Europe means that France is looking to embrace the Anglo-Saxon lobbying model to retain influence.

According to Stephane Dessales, managing director of public affairs firm Athenora Consulting, the French have only been working with France’s permanent representation in Brussels and a few French MEPs. This situation is now changing, he says, but

very gradually.

“Companies used to take a very formal and diplomatic approach. Now they are trying to send professional people who know about public affairs so there is a new generation of people going to Brussels.

“They are applying the Anglo-Saxon way of lobbying, giving concrete facts and figures, meeting all the nationalities and not just working with the French permanent representation and some French MEPs.

“It was too limited before. We are trying to change the way that French people think about lobbying. France is still full of networks which are not completely transparent and politics is still at the high-level where the minister decides.”

Mr Dessales said that in Paris, there is a lacking EU culture. “The French in Brussels know all about the EU. At the conference we said that we should be doing the lobbying of the EU from France.” ■

German device firms prepare for election

BVMed, the association representing medical device manufacturers in Germany, has presented the country’s political parties with an “agenda for innovation in medical technology”, ahead of the general election in September 2005. The association wants the hospital reimbursement system to remain open to new treatment methods, and the federal committee which assesses new technology to be quicker and

more transparent. “The use of medical technologies leads to a reduction in recovery times as well as a speedier return to work, which thereby results in economic profit that should not be neglected,” BVMed director general Joachim M Schmitt said. “The political conditions allowing for medical technology to occupy a leading position in terms of international competition must now be created.” ■

Slovaks propose law to make lobbying legal

The government of the Slovak Republic has proposed a law that would make lobbying a legal business activity in the former Communist country. Currently there is no regulation governing lobbying in the republic and the proposed law is possibly the first official legislation on lobbying in Eastern Europe.

The bill sets out the duties and sanctions for lobbyists, including a SK500,000 € fine for illegal lobbying. No lobbyist will be able to promise or give any favour or gift. Two types of lobbyists are described: those who lobby based on a trade

licence and those who only perform lobbying occasionally. Individuals in the second group will be required to register.

According to TSAR, the Slovak news agency, unregistered people, as well as professional organisations, labour unions or non-governmental organisations will also be able to lobby on their own behalf, providing that they announce their lobbying contact within five days to the government’s Higher Territorial Unit (VUC) or Parliament Office. If the law is approved by Parliament, it should come into effect on January 1st, 2006. ■

Patients push for children’s medicines

Eleven patient groups emailed all the members of a European Parliament committee a few days before the committee was to examine the EU’s proposed regulation on promoting more therapies for children, which the group supports.

Cor Oosterwijk, of the Dutch Genetic Alliance, is helping to co-ordinate the lobbying on this piece of draft legislation. The email shot, to the Committee on Environment, Public Health and Food Safety, would have been well-timed had the committee not had to suspend its meeting, on June 13th and 14th, for an unrelated reason. Speaking of the passage of the regulation, Mr Oosterwijk said that “there will be other moments in this decision-making process in which we can influence it, but this (targeting of the committee) is one of the

first things we can do for now.”

Among the patient groups who signed a joint declaration to the committee on the regulation were the European Haemophilia Consortium, the European Dystonia Federation and the European Cystic Fibrosis Policy Network.

French groups

A number of French groups are also appealing to the European Parliament to support the children’s medicines regulation, including the French association representing pharmaceutical manufacturers (LEEM) and the French paediatrics society.

By offering incentives to pharmaceutical companies, linked to legal responsibilities, the French groups believe the proposed regulation will encourage the development of paediatric drugs. ■

Europe

UK told to wake up to overweight and obesity crisis

Obesity in men is being addressed in the UK by a group called the Men's Health Forum, which has successfully brought together MPs and healthcare groups to look at ways of slimming down the nation's males.

The Men's Health Forum joined with 32 other organisations in June to call upon the government to develop a national strategy on "overweight and obesity", taking into account the differences between the sexes to benefit both men and women.

A statement to this effect was presented at the Men's Health Forum's Hazardous Waist conference on June 13th, which was addressed by Dr Gina Radford of the department of health who spoke on behalf of public health minister Caroline Flint.

Deadline 2010

The statement called for immediate action to prevent an expected 75% of the male population from becoming overweight or obese by 2010.

Peter Baker, director of the Men's Health Forum, described the present situation as "nothing less than a public health emergency". "The country simply cannot afford to allow this to happen," he said. "Politicians, health practitioners and all decision-makers must wake up to the problem before it is too late."

In terms of lobbying, Mr Baker said the forum had "very good means" of raising issues in Parliament and within the department of health. For example, the forum provides the secretariat for the All Party Parliamentary Group on Men's Health.

Mr Baker said that male

health issues, such as prostate cancer, were now being taken more seriously by MPs than they were a few years ago.

He said the forum has a "great ally" in its patron, MP Howard Stoate, who supported the calls for concerted action on the statement's demands.

Dr Stoate told Parliament in June: "The consensus statement on men and weight, Three Quarters is Too Many, notes that men who are overweight or obese are significantly more likely to suffer from coronary heart disease, stroke, type two diabetes, cancer and a range of other health problems and calls for concerted action to halt the rise in weight now so that the wholly undesirable milestone of three-quarters of men overweight or obese by 2010 is never reached."

Currently, about 65% of men in the UK are overweight, compared to 55% of women. Projections for 2010, based on present trends, show that 75% of men will be overweight compared to 64% of women.

Male issue

Politicians now had to recognise that weight is a male issue and not predominantly a female issue, Mr Baker said. Alan White, Professor of men's health at Leeds Metropolitan University, and chairman of the Men's Health Forum, said that unlike women, many men strive for a bigger physique, which represents masculinity and power.

"Men," he said, "don't tend to go to their GP about being overweight as they do not see it as a problem. GPs also often don't see men as being overweight." ■

UK stalled on assisted dying

A bill which would legalise assisted dying for terminally ill people failed to make any significant progress in the UK Parliament before the Parliament closed in the run-up to the national election in May.

Supported by Lord Joffe, the bill, which seeks to legalise medically assisted dying and voluntary euthanasia, has come under criticism from several groups, including the Royal College of Nursing (RCN), the Disability Rights Commission and CARE.

Roger Smith, head of public policy at CARE, said: "The trouble is, no-one anywhere has been able to formulate a law that stays within the boundaries that are intended." Mr Smith was referring to the "slippery slope" which the Vatican has also warned of when an assisted dying law broadens to include other people who are terminally ill, such as children, who are not necessarily in a position to give their consent.

Supporters for the bill, including the British Humanist Association (BHA) and the Voluntary Euthanasia Society (VES), agree with the bill's approach to personal autonomy. BHA executive director Hanne Stinson said: "The key issue for me is that we should have the right to make decisions about our own lives, and our own deaths." In this way, it takes the responsibility away from the patient's families to break to law if a request is made for suicide, he said.

The BHA believes it to be unfair that patients can currently refuse treatment that may prolong their lives, whilst terminally ill patients suffering are not allowed the freedom of choice to end their lives.

The bill was first introduced on 8th January 2004 and proposes that patients who are terminally ill and 'suffering unbearably' should be allowed medical assistance in suicide, or if they are unable to administer such medication themselves, to be given the option of voluntary euthanasia.

For this choice to be available, the patient has to be aged 18 or over and mentally competent to make such a decision. They would need to be assessed by two physicians to confirm they have a terminal illness that would lead to death within a few months. Also they need to request and sign a written declaration of intent. If this declaration is not withdrawn within 14 days of the initial request, assisted suicide can go ahead.

Even though the Bill provides a number of safeguards for patients and medical staff, including the option for patients to discuss palliative care, the RCN says that high quality palliative care should be available to all who need it. RCN deputy president Maura Buchanan said: "We firmly believe that with proper pain control and psychological care, patients are unlikely to ask for clinical help to die. We are also concerned about the position of the most vulnerable who may feel they should ask to die in order to avoid being a burden to their families".

According to CARE, legalisation of the bill "would weaken society's prohibition of intentional killing, threaten safeguard against non-voluntary euthanasia, affect patients' ability to trust doctors and the health care system and lead to a fundamental change in the ethos of medical care". ■

World

Indigenous people to train as lobbyists



Luke Nicholas

Canadian government relations firm Leonard Domino and Associates has introduced a new internship for members of the Aboriginal community. Mr Domino believes that the Aboriginal community "is abundant with young human resources that will lead the way to sustainability and self-government for the Aboriginal Nations of Canada."

To this end, the intern will be trained in effective government negotiations and lobbying, managing client relationships, attending, planning, and arranging meetings with government and stakeholders and pre-meeting research. Luke Nicholas of the Oneida Nation of the Thames First Nation is the first student recruited to this programme. The company will again hire a new Aboriginal student in April 2006.

Mental health funding for indigenous people

In the United States and Australia, the American Psychiatric Association (APA) and the Australian Medical Association (AMA) are endeavouring to increase funding for the mental health services for indigenous people in their respective countries.

The US Congress' subcommittee on interior, environment and related agencies heard from a representative of the APA how suicide has been the second leading cause of death among North America's indigenous people for the past 20 years.

APA's representative, Dr Brian Benton, a psychiatrist of Cherokee descent, presented a testimony to the committee to

urge Congress to help improve mental health services of American Indians.

The suicide rate for 15 to 24 year old American Indians and Alaskan Natives is 37.4 per 100,000, as compared to a rate of 11.4 per 100,000 for all races in this age group in the US population, Dr Benton said. Alcohol and substance abuse, Dr Benton said, has been identified as the most significant health problems, and one of the causes of suicide.

The committee members heard how the "twin problems" of alcohol and suicide were most tragically illustrated when 16-year-old American Indian Jeff Weise killed his classmates and then himself at Red Lake High School in Minnesota. Press reports described how Jeff was deeply disturbed with depression from years of abuse and neglect from parents who had suffered from mental and substance abuse problems.

Jeff infrequently attended High School in the last year, which is not untypical for teenagers from reservations. A third of teenagers do not regularly attend school and are unemployed and not looking for work, Dr Benton said.

In Australia, Dr Bill Glasson, the AMA's president, has told the government that it has failed to respond to the health needs of indigenous Australians and to tackle mental illness affecting their communities. He said that more money should have been allocated in this year's 2005/2006 budget to Aboriginal and Torres Strait Islander communities for healthcare programmes.

"With a big budget surplus of around \$9 billion, the time was right for the Government to show indigenous Australians that they really care by improving their health services and quality of life. What we

needed to see was the start of the building of an overarching health infrastructure that covered physical and mental health, housing, sanitation, clean water and education in indigenous communities." ■

WHO acts "like a lobbyist"

The World Health Organisation's (WHO's) allocation of \$198 million to cultivate support for its agenda of comprehensive health planning "suggests the (WHO's) image of a lobbyist", a report by the International Policy Network (IPN) says.

The United Nations is facing growing criticism from organisations that favour liberal, market-oriented policies as solutions to global problems. The WHO refused to comment on the IPN report, other than to say that they viewed it "more as an opinion piece".

The \$198 million, allocated for "WHO's core presence in countries", is listed in its 2006-2007 budget and is the third largest item after "HIV/AIDS" (\$261 million) and "immunisation and vaccine development" (\$381 million).

Richard E Wagner, author of the report, said these funds goes

towards, among other things, the tripling of the number of countries "that have an updated WHO Country Cooperation Strategy".

"The other listed objectives within this [budget] item are likewise aimed at polishing the WHO's image in individual countries," Mr Wagner writes.

The report, called *The World Health Organisation A Time for Re-Constitution*, argues for fundamental reform of the WHO's constitution and its purpose.

"The greatest proportion of the WHO's resources are spent on issues which are neither trans-boundary nor of primary concern to the poor, such as road safety and obesity.

"These activities are seemingly intended to satisfy the political demands of the WHO's funders predominantly wealthy countries and to sustain its own bureaucracy," the report says. ■

Abstinence is failsafe way to stop AIDS, says Pope

Pope Benedict XVI has told a conference of African Bishops that the Catholic Church's teaching on sexual abstinence before marriage "has proven to be the only failsafe way" to prevent the spread of HIV/AIDS.

The Catholic Church has always been at the forefront both in the prevention and treatment of AIDS, Pope Benedict told the Bishops on

June 10th.

"The companionship, joy, happiness and peace which Christian marriage and fidelity provide, and the safeguard which chastity gives, must be continuously presented to the faithful, particularly the young," he said.

The Pope addressed bishops from South Africa, Botswana, Swaziland, Namibia and Lesotho. ■

World

Muslim countries “must do more” against AIDS/HIV epidemic

A report examining the growing HIV/AIDS crisis in the Muslim world has been published by the Seattle, US-based National Bureau of Asian Research. The report says that many governments in the Muslim world have been slow to respond to the spread of the disease and that sweeping legislative and social changes “would be helpful” in fighting AIDS/HIV.

According to the report, two characteristics of the Muslim world in particular are resulting in both a denial of the problem and a lack of pro-active organised efforts for infection control. The two factors are: the fusion of faith and statecraft in many Islamic countries and weak or absent democratic practices.

Government responses have varied, though. Some countries like Iran and Bangladesh have been relatively proactive in admitting to, and beginning work on the problem, whilst others have been much more passive.

“If leaders continue to ignore

the problem, AIDS could debilitate or even destabilize some of these societies by killing large numbers of people in the 15 to 49 year age group, thereby depriving these countries of some of their best, brightest and most economically productive members,” the report warns.

The report highlights Thailand’s successful anti-HIV campaign and contrasts it starkly with the growing crisis in South Africa which has shown reluctance to tackle the problem. These different approaches, the report says, clearly demonstrates the need for countries in the Muslim world to tackle the disease now.

“The international community can also assist by helping poorer countries establish social programmes, advising on public health infrastructure required to support successful treatment, or simply sharing experience in drug treatment and behavioural change efforts – all steps which would be most effective if tailored to local needs”, the report adds. ■

Victory in Peru for diabetes campaigners

Five years of lobbying and campaigning by the Peruvian Diabetes Association (Asociacion Peruana de Diabetes) and the Juvenile Diabetes Association of Peru (Asociacion Juvenil de Diabeticos en el Peru) has culminated in legislation

promoting the interests of people with diabetes.

The new law, passed by the national Parliament, establishes a National Diabetes Prevention and Awareness Programme and creates a National Diabetes Registry to assess the incidence and prevalence of diabetes. ■

UN hammers home AIDS crisis

United Nations special envoy James Morris, UNICEF executive director Ann Veneman and UNAIDS executive director, Peter Piot have specified that two disquieting facts on the AIDS epidemic in southern Africa have become evident: AIDS is an unprecedented global crisis and, unless it is controlled, the epidemic will continue to expand for decades, killing large numbers of people and wrecking entire societies.

Mr Piot says that the priority is for world leaders to give AIDS the same level of attention and concern they gave to global security. Nothing less than universal access to effective HIV prevention and treatment would be sufficient to keep the epidemic from engulfing the next generations, he said.

Coping strategies

Weakened by AIDS, millions of people in southern Africa are plunged deeper into destitution and desperation as their traditional coping strategies have become too frail to cope with constant threats such as armed conflict, crop failures, and natural disasters. The region suffers from high poverty rates, violent conflicts, social instability and inadequate public health infrastructures, all of which contribute to poor public health outcomes; including disease and death due to preventable causes.

Despite the earlier commitment of governments, civil society groups and the UN, life expectancy is falling and HIV/AIDS is spreading at an alarming rate among women. “The gap between need and action remains enormously wide,” Mr Piot said.

Significant progress has been made in the past three years in

the core areas of political leadership, funding, the intensity and reach of prevention programmes, and the availability of drug therapies. Up to 176,000 people are now able to access antiretroviral treatment in southern Africa.

But, efforts undertaken thus far had not been sufficiently matched with the scope of the problem, says Kofi Annan, the UN’s secretary-general. “Even though we have managed to contain HIV/AIDS here and there, the overall epidemic continues to expand. The world is still doing only a fraction of what it needs to do. We must do far more.”

Annan

Mr Annan also states that success in halting and reversing the HIV/AIDS spread by 2015 would require better and more vocal leadership at every level and in every area. Calling the HIV/AIDS epidemic his “personal priority”, the secretary-general stresses that global commitment, resources, and action is needed to end poverty and inequality, improve education, cut HIV/AIDS, safeguard the environment and protect people from violence.

Hardest hit

About 42 million people are living with HIV/AIDS. Sub-Saharan Africa remains the hardest-hit region, accounting for 64% of the world’s HIV infections and 74% of all AIDS death in 2004. The WHO/UNAIDS World Epidemic Update shows that 56% of those infected in the region are women, and that young women and girls aged between 15–24 years are 2.5 times more likely to be infected than their male peers. ■

Companies/People

UK hopes for approval of medicinal cannabis dashed

Following recent preliminary regulatory approval in Canada for the treatment of neuropathic pain in multiple sclerosis, UK-based GW Pharmaceuticals had hoped for approval for its Sativex product in the UK and, ultimately, the US.

However, these hopes were not realised when the UK regulator, the Medicines and Healthcare Products Regulatory Authority (MHRA), turned down the licence application on appeal. The MHRA is satisfied with the safety and quality of the new drug, but ruled that there was not enough evidence that the product was effective. Further trials with a larger number of patients are now necessary if the drug is to obtain approval.

Health Canada approved Sativex in April, under the notice of compliance with conditions policy, marking the world's first approval of a cannabis derived medicine.

Research on medicinal cannabis is banned in the UK under the Misuse of Drugs Act 1971 (MoDA), but, in 1998, GW Pharmaceuticals were licenced by the Home Office to conduct a pharmaceutical research and development programme. The decision to grant the licences instantly strengthened the campaign for the availability of medicinal marijuana to develop non-smoked cannabis-based prescription medicines.

In order to conduct the trials, the British company had to apply for and receive two licences: a cultivation Licence and a possession and supply for medical research licence; both subject to strict conditions.

In trials, the medication, which is administered via a spray into the mouth,

demonstrated a significantly greater pain relief and lesser pain-related sleep disturbance than the placebo.

The company has since raised £25 million from its flotation on the AiM market of the London Stock Exchange. It had been hoped that the current Phase III trials signalled the final preparation for a product licence approval. As of June, however, the company heard the outcome of an appeal to the Medicines Commission after the Committee on Safety of Medicines (CSM) had earlier suggested that a further confirmatory efficacy study in spasticity was necessary. The Medicines Commission is the senior advisory body to the MHRA.

The UK government, however, will still have the final say, even if cannabis is proven to be a safe and effective medicine. Following the reclassification of cannabis to a Class C drug in 2004, the MoDA would have to be altered to allow the prescription of a cannabis-based medicine. This is something that the UK government has indicated a willingness to undertake if GW Pharmaceuticals is granted a licence.

One country that already licences the production of cannabis for medical and scientific purposes is the Netherlands. Contrary to popular belief, the recreational use, possession and supply of cannabis for recreational purposes, exemplified in the Dutch "coffee shop" culture, remains illegal under the Opium Act of 1919 (amended 1928 & 1976). The authorities, however, take a tolerant, "blind eye" approach, claiming that the primary objective of Dutch

drug policy is health protection.

Due to the United Nations Single Convention on Narcotic Drugs 1961, the Dutch Government was obliged to establish the Office of Medicinal Cannabis (OMC). In cooperation with the International Narcotics Control Board, the Dutch office has the monopoly of the trade in cannabis, the import and export of cannabis and cannabis resin and decides the exemptions of possession of cannabis and cannabis resin.

GW Pharmaceuticals and its marketing partner, Bayer Healthcare, are likely to find greater licensing obstacles in the US. As recently as 6th June 2005, the Supreme Court ruled that the US government was within its rights to prosecute people who use marijuana under a doctor's prescription to ease the pain of multiple sclerosis and other diseases. This is in contradiction of the laws in California and nine other states which were intended to protect

patients who use marijuana for medicinal purposes, cancelling their provisions which exempt medicinal users from federal prosecution.

The Bush administration has made it known that enforcement of the marijuana laws is essential and the administration maintains that the drug had no medicinal value. This is a policy that lobbyists must surmount if licensing in the US is to be achieved.

In the UK, however, further trials are already underway to obtain the proof of efficacy necessary to satisfy the Medicines Commission. Campaigners for the availability of medicinal marijuana will be hoping that the Commission shares the view of Dr Geoffrey Guy, chairman of GW Pharmaceuticals, view that cannabis "appears to be a remarkably safe substance in comparison to most medicines prescribed today". ■

Fleishman-Hillard's political navigator

John Graham, chairman and CEO of Missouri, US-based Fleishman-Hillard, has launched his company's new healthcare business, the "Health Solutions Navigator". Mr Graham said the business will offer clients a one-stop access to strategic counsel, including regulatory and policy communications, reimbursement consulting, and government relations.

Anne Woodbury, most recently the chief health advocate for the Center for Health Transformation, will be leading the Health Solutions Navigator, along with Dr Sharad Mansukani. Dr Mansukani was previously a senior advisor and medical officer at the Center for Medicare and Medicaid Services

(CMS). Ms Woodbury said: "Sharad and I are extremely pleased to be joining Fleishman-Hillard and to be launching the Health Solutions Navigator at this critical juncture in American healthcare."

Fleishman-Hillard has also launched VOX Global Mandate, which it describes as a "new global campaign, advertising, polling, political consulting, and public affairs business that will provide the election-winning expertise of leading political consultants U.S. and international, Republican and Democrat, to corporations, candidates, political parties, democracy movements, issue advocacy campaigns, trade associations, and nonprofit causes around the world". ■

Companies/People

Superdrug launches online tax petition

UK chain pharmacy Superdrug is petitioning Patricia Hewitt, the Secretary of State for Health, to reduce the amount of value added tax (VAT) payable on condoms. The store has engaged the public in its lobbying effort by lowering the prices of its own-label condoms by 17.5% – the full rate of VAT payable on condoms – and by asking customers to sign its “sex tax” petition to Ms Hewitt.

A letter to Ms Hewitt accompanying the petition has been posted on the store’s website, with a link allowing people to sign the petition and to send it to friends.

Signed by Liz Love, a Superdrug general manager, the letter calls on Ms Hewitt to review the “condom con” which classes condoms as a

luxury item liable for the full rate of VAT.

“Did you know that every time someone practices safe sex by rolling on a condom, they also roll the Chancellor a few pennies in VAT?” Superdrug tells its customers. “The British public currently pays over €7 million in VAT on condoms each year and here at Superdrug we think this stealth tax is a rip-off.”

Superdrug sells around 40,000 own-label condoms each month. By removing the percentage of VAT from the price, customers will save 75 pence on a pack of condoms, the store says. “We are hoping that this move will encourage you to review this condom con and agree that their use is essential to the health of the nation,” Ms Love told Ms Hewitt in her letter. ■

Pharma embraces Ottawa lobby firm

Bill Dempster and Carl Baltare of Ottawa lobbying firm Global Public Affairs (GPC) have reported a surge in business from pharmaceutical firms seeking their expertise on government affairs.

Their success at attracting companies, evidenced by the number of registrations GPC has made recently, can be attributed to their backgrounds.

Ex-Pfizer

Mr Dempster joined GPC on December 6th last year from pharmaceutical giant Pfizer Canada, whilst Mr Baltare joined GPC in September last

year from Hill & Knowlton, where he had been in charge of the health and pharmaceutical division.

The pharmaceutical and medical device manufacturers they currently have on their books include Boston Scientific, Novartis, Abbott and Sanofi-Aventis.

“We’ve experienced fairly rapid growth, which we are very happy about,” Mr Baltare said. The issues that the pharmaceutical industry brings to GPC include help against attempts to weaken intellectual property of pharmaceuticals and supply shortages. ■

IT expert joins Jefferson

Katie Hirning has joined Washington DC-based Jefferson Consulting Group (JCG) as a senior vice president. Ms Hirning most recently worked at computer giant IBM where she assisted governments in prioritising their technology investments. She was also e-Government deputy director in the Clinton Administration.

Jefferson describes itself as holding a unique position in the federal market place as a “one-stop-shop” for Washington representation, offering

expertise areas such as in lobbying, federal marketing, procurement, proposal preparation, market research, and public relations.

“Katie brings remarkable experience to JCG,” said Julie Susman, the company’s president and CEO. “From federal acquisition policies and practices to a deep understanding of the IT environment, our current and future clients are going to benefit tremendously from her perspective.” ■

Lobbyist for a lighter therapy

As we went to press, David Longman was about to become a lobbyist on Wednesday, July 5th, the day of the launch of a new organisation called “Killing Cancer”. Mr Longman, a marketing man, has found himself as director of the new healthcare charity with a strong political will, because of family experiences.

Killing Cancer will promote Photodynamic Therapy (PDT), which combines a drug with a specific type of light to kill cancer cells, as a non-invasive means of removing cancers in the head and neck, mouth and skin, oesophagus and lung. Mr Longman’s father did not receive such treatment but more conventional treatment, which left him with a “patchwork quilt of skin”. Mr Longman said he was furious when he discovered PDT and how it could have prevented his father, who died two years ago, from being “maimed” by doctors. His daughter started PDT last week

for a cancer.

Mr Longman is not a happy man. “The way it (PDT) has been suppressed in the backwoods and the way no-one is interested in helping the therapy come through” has infuriated him. His goal now is to raise the therapy’s profile among the public and politicians not as an “alternative” therapy but as another treatment option to be used alongside the conventional options.

Another aim of Killing Cancer is to generate funds for the development of PDT research at the National Medical Laser Centre at University College London. Mr Longman vows to go “hell-for-leather” to promote the treatment, having used his inheritance to get this far.

But he may face an uphill struggle. He has written to health secretary Patricia Hewitt, and chief medical officer Liam Donaldson but did not receive any response. ■

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Features

Towards a new model: The rise of professional lobbying in Spain

Although the notion of lobbying is not novel, the establishment of professional lobbying firms is a relatively recent phenomenon in the Spanish context, write Paul Stanchfield and Javier Valiente of Political Intelligence in Madrid.

Professional lobbyists have increasingly played the role of amplifying the voice of Spain's countless Small and Medium Businesses (PYMES) and multinational subsidiaries while monitoring and reporting regulatory developments that could

potentially affect business interests.

The role of professionalized independent organizations dedicated to facilitating the flow of information between business interests and government officials has expanded to meet the growing demand for both transparency and accountability within the Spanish political climate.

Relatively few

Though still relatively few in numbers, international public affairs consulting firms like Political Intelligence (PI),

with offices in Madrid, Brussels and London, are poised to respond to policy developments simultaneously on multiple fronts, offering a unique service that would otherwise be prohibitively expensive or time consuming for most firms.

With offices across the European continent, coordination is advanced between national and supranational levels. In the four years since the inception of Political Intelligence-Spain, the scope of the firm has rapidly expanded from telecommunications and other high technology consulting services to sectors as diverse as the environment and healthcare. Consultancies like Political Intelligence interested in expanding the role of professional lobbying in Spain were initially, and continue to be met with, a host of challenges as their presence grows throughout the Iberian Peninsula.

Anglo-Saxon

Much of the difficulty of establishing professional consultancies in a country lacking this Anglo-Saxon lobbying tradition can be attributed to the fact that business associations and their use of long established personal contacts have traditionally played the role of lobbying government representatives.

However, new times demand novel ideas, more flexible and dynamic responses to enhance communication channels and dialogue between government and the private sector. The division of political power between the local, autonomous community (or regional), national and supranational levels has made monitoring policy developments additionally cumbersome as lobbyists encounter a vast array of political positions depending upon the administrative level examined.

Languages

Consultancies with an understanding of these

divisions and a command over various EU languages can provide vital information to multinational firms interested in penetrating the Spanish marketplace.

Political power divisions often further confound the Spanish lobbyist's ability to target specific departments. A recent example from 2004 highlights the difficult of lobbying across administrative levels.

Barcelona

In Barcelona, political competencies were divided between three political parties (Popular Party, CiU and Socialist Party) governing at distinct administrative levels (national, regional and local), each with different competencies for health, environment, education and other sectors.

Lobbyists from PI were faced with promoting a consensus policy while considering multiple demands from political parties ranging from far left to right.

The recent rise of professional lobbyists in Spain underscores the measured shift towards the Anglo-Saxon model of lobbying.

Political structure

Although the process has been gradual as an understanding of the Spanish political structure as well major EU institutions are vital to successfully lobbying, opportunities to affect public policy developments through professional channels are increasingly the norm. ■

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Features

Will BIO become PhRMA?

by Wayne Koberstein

As the US Biotechnology Industry Association (BIO) continues to grow in size and power, Wayne Koberstein asked its president, at a recent BIO meeting, if it will become a clone of its Big Pharma counterpart.

My conversation with Jim Greenwood may reassure the faithful or dismay the sceptics, but it cannot avoid the fact that the Biotechnology Industry Organisation (BIO) continues to evolve towards greater size and power along with what some industry insiders view as its bias in favour of larger company members and political lobbying.

Mr Greenwood, an ex-Republican Congressman and BIO's new president, gives somewhat tentative answers to those issues early in his new job, and it is only fair to allow him time to make his own mark on BIO. His words at least outline the general thinking and direction of his forthcoming agenda.

Like Billy Tauzin, another former Republican Congressman and now the president of the Pharmaceutical Research and Manufacturers of America (PhRMA), Mr Greenwood has spent many years in Washington's power circles as both a friend of business and an advocate of healthcare legislation.

He is in an excellent position as a lobbyist, with close associates and fellow party members now very much in charge of Congress and the Administration. Yet he remains considerably less well-known

among biotech industry constituents. Despite lacking a track record at this stage, Mr Greenwood's initial plans still reveal much about his style and perceived mission as BIO's leader.

"My first top priority is to make BIO a world-class advocacy organisation", he said.

Mr Greenwood emphasizes that BIO began primarily as a vehicle to help capitalise new and emerging companies. Now that more companies have commercial products, the organisation deals with regulatory, reimbursement, and other large issues as well.

Those concerns range across BIO's entire membership of medical, agricultural and environmental biotech companies.

However favourable the financial picture for biotech, Mr Greenwood observes that it may all prove futile if companies fail to take new products and technology through the federal regulatory and reimbursement system.

"Scientists and investors can't control that environment. They see it largely as a big black box inside the Beltway that they don't understand.

"Having spent 12 years in Congress, and 12 years before that in state legislature, I understand: I've lived in that black box for half of my life, practically."

Mr Greenwood says BIO wishes to sway Congress from "overreacting" to the incidents

by "misconstruing" them as the result of a flawed FDA approval or surveillance system.

"We spent a lot of time trying to change the culture of the FDA, and I was involved in that as a member of Congress," he says.

"I remember trying to make sure that the FDA understands that failure is not just defined as approving a product that is not safe or effective; failure also is defined as taking so long to approve products that people die waiting for them.

"And the FDA has arrived at that point where they do realise that time matters. We don't want to change the gold standard of safety and efficacy, but they do need to move these products through with some sense of

urgency, and we have to make sure that they don't backslide in that regard."

Mr Greenwood says that he is happy so far with the Administration's approach in creating a drug-safety oversight board.

He also voices relief that the FDA advisory committee decided to leave Vioxx and other Cox-2 inhibitors on the market, albeit with a strong warning.

"That's a very important event, because it sends the signal that, yes, drugs have risks, but drugs have benefits, and there's nothing you can do to take the risk out of medicine.

"What you need to do is minimise risk and let physicians make judgements about benefit on a patient-by-patient basis, and that's what they decided to do.

"The message is: Don't try to think that we can reach a place where there is no risk. If we do that, there won't be any new drugs."

Of course, the argument sounds familiar: PhRMA has made the identical case for

years. If you want innovation, learn to live with risk by balancing it against the benefits.

Only recently has the debate shifted to a technological solution: perhaps we can reduce risk outright through personalised medicine, as Genentech has demonstrated so well with its cancer-fighting product Herceptin.

Mr Greenwood, possibly viewing that development as far into the future, advocates a "postmarketing paradigm" of ongoing risk-reduction in the entire patient population.

"We should always be gathering more and more information correlating prescriptions against outcomes," he says.

"McClellan says he wants to look at evidence on outcomes when he makes decisions about reimbursement. This is potentially a very good thing for our companies because fundamentally the evidence shows that biotech drugs reduce hospitalisation and other expensive kinds of treatment.

"But we want to monitor the process closely because if not done well, we'll have bureaucrats making decisions about whether a drug is worth the cost for Medicare perhaps because it only extends someone's life by two months."

One of Mr Greenwood's first initiatives is a high-profile survey of Congressional members on their perceptions of biotechnology.

By polling members' attitudes and views of biotech science and industry, he hopes to learn where and how to aim BIO's political influence.

"Biotechnology is a complex subject, and given that we believe it is the future of healthcare, it's important that policymakers understand it.

"I can tell you from firsthand experience that members of Congress are so busy that it's hard for them to spend much time on any issue.

"It's very important for members of Congress to



Jim Greenwood

Features

understand this field in some detail, and that they don't labour under misperceptions about it.

"Doing the survey to find out what members think of biotechnology and whether they have positive or negative attitudes about it will help us educate them."

Mr Greenwood acknowledges that many in Congress hold views heavily coloured by highly charged political issues.

After I had announced that I was leaving Congress, when I would tell members that I was going to be president of the Biotechnology Industry Organisation, they would say 'Oh, stem cells'.

"If they're advocates of stem cell research, that's good. But if they're opponents of stem cell research, then it would be problematic if the whole field of biotechnology was coloured in their mind by that one issue. "And even if they're opponents of stem cell research, my experience is that the more we tell them about stem cell research, the more likely it is that they'll actually embrace it."

Many in Congress still believe that stem cells come from aborted fetuses, he notes. That harks back to the old argument that stem cell research is an incentive to have abortions. He says those people need to know that the research has only obtained new cell lines by harvesting surplus embryos from fertility clinics.

Despite the importance of the stem cell issue, Mr Greenwood says that other matters should take the lead in BIO's agenda.

"You don't want to lead with your chin," he observes. "I want to demonstrate to members of Congress the incredible therapies that companies have created and are working on."

"When you tell someone that there might be a new, revolutionary way to deal with cancer, or Alzheimer's, or Parkinson's, they light up because every one of us has parents, and every one of us also

has children or siblings who have been exposed to these things so, I believe that's the way to lead."

Mr Greenwood holds to the idea of biotechnology as innately different from pharma, and BIO as similarly separate and unique compared to PhRMA. One major difference, he notes, is the sheer breadth of his organisation – a collection of industries within the greater industry definition of biotech.

Rather than an almost elite group of leading industry players, a la PhRMA, BIO includes companies of many sizes and types – from start-ups to leaders in biotech medicine, agriculture and environmental remediation.

"BIO is a big tent," he says. "And it's getting bigger by the day". Just the level of controversy generated in all those sectors creates a special challenge for the trade group. How can BIO practically accommodate so many different views and issues inside a single tent?

"One of the things I've learned in 24 years in politics is that when you confront a potential controversy, the first place to go is to areas of agreement."

"So when you have someone from the right or left that may have a problem with you, you start out by saying, can we agree that we'd like to cure cancer? Can we agree that we'd like to cure AIDS? We agree that we'd like to feed people? We agree that we'd like to clean our environment?"

Very well. But what would he do about the most stubborn of advocates – those who always seem to hold onto their positions no matter what?

"It's a matter of education," he answers. "Look at the controversies on the food side. When we have our annual conference in Philadelphia, there will be protestors in the street."

"They probably won't be protesting about healthcare

issues; they'll be protesting about agriculture issues. And it's because in large part, they're scared of GMOs. You sit someone down and say what's the rational basis of your fear? It's hard to find because people have been eating them for decades."

Whatever the growth curve, BIO will likely remain the same basic organisation under his direction, according to Mr Greenwood.

"We are trying to beef up our advocacy capabilities and make sure that if we have an important advocacy issue, it's important that our lobbyists are talking to Dan and his team so the communications people are involved in managing the issue of policy, people are speaking to all components of BIO, and we are functioning in a matrix."

As the industry matures, however, it is only logical that BIO will experience some change in parallel to this. Will the size and commercial stature of its member companies push it closer to the PhRMA model?

Not with the continuous creativity of the industry itself, Mr Greenwood replies. "There is no perceivable end to the new science, the new approaches, or the new emerging companies that will come out of

biotechnology.

"Every discovery raises a dozen new questions. There are no boundaries in this science. We are investigating the human organism, which took millions of years to evolve, and unraveling its mysteries."

Does that imply an ever-widening definition of biotechnology under BIO's view? Mr Greenwood gives an honest answer, based on a newcomer's first impressions.

"I know less about the definition of biotechnology today than I did when I started several weeks ago, but I've tried to get a handle on it."

"I thought it was more about small molecule/large molecule. But obviously it's not. Some people would say it's about small company versus large company. Obviously it isn't."

"But I think it really is about that frontier I just described. It's about being on the edge of the really cutting edge of science. And it's about trying to cure diseases that big pharma hasn't taken on."

Mr Koberstein is editor-in-chief of BioExecutive International. This article first appeared in BioExecutive International's June 2005 edition. ■

Greenwood lobbies for small business grants

Jim Greenwood, president of the US Biotechnology Industry Organisation (BIO), is supporting legislation introduced recently into the US Congress which would change the eligibility criteria for the award of grants to small businesses.

Presently, companies that are 51% owned by a group of venture capital firms are not eligible for Small Business Innovation Research (SBIR) grants.

The newly-introduced legislation, by Sam Graves in the House and Kit Bond in the Senate, seeks to "correct" this by changing the current interpretation of the eligibility criteria, which is made through rulings by the Small Business Administration (SBA).

Mr Greenwood is supporting the legislation because most small and emerging biotechnology companies look to the venture capital community for investments. ■

Meetings/Education

PINNACLE PUBLIC RELATIONS, a London, England-based training company, is running lobbying courses starting in July and December 2005. The courses, run by professional lobbyists, will explain how lobbying works and who should be lobbied Westminster, Brussels or the UK's regional assemblies. For details, write to enquiries@pinnaclepr.co.uk.

THE US-BASED PUBLIC AFFAIRS COUNCIL is holding a conference called "Political Involvement Legal Overview" in Las Vegas, Nevada on September 20th, 2005. The meeting is designed for people involved in government affairs who seek guidance on campaign finance, lobbying laws, gift restrictions and other legal considerations. For further details, email Sheree Anne Kelly at skelly@pac.org. The Public Affairs Council is also holding a national conference from February 12th-15th at the Doral Golf Resort and Spa in Miami, Florida. The conference, according to the PAC, will give participants the opportunity to discuss, find solutions, and share their own insights, successes and challenges with like-minded professionals. Best fundraising strategies and engaging political cynics will be subjects of discussion.

ETHICAL AND EFFECTIVE NEGOTIATION WITH GOVERNMENT takes place on September 15th, 2005 at 380, University Avenue in Toronto, Canada. The conference has been organised by government relations company Len Domino & Associates and will begin with Mr Domino talking about influence and ethics in government relations. Other speakers during the day will lead talks titled "seven principles of negotiating with government" and "when and how to use the media to enhance your negotiations". Will Molson of Deloitte and Touche will discuss negotiation in the context of dispute resolution, including the methods by which problems are solved outside of conventional or legal channels, such as through negotiation, arbitration and mediation. For further details, please refer to www.lendomino.com.

PARK UNIVERSITY in Kansas City, Missouri is running a Masters of Public Affairs degree with healthcare/health management as a primary focus area. The university says that the course is appropriate for those who aspire to professional roles from mid to senior management and for those who aspire to become CEOs of health service organisations. For more details about the course, email gradschool@park.edu.

Restaurant Review

By Suzanne McElligott, energy consultant

This cozy, homey but sophisticated spot just off the Washington D.C. epicentre of DuPont Circle bills itself as America's First Certified Organic Restaurant and despite the implied threat to your taste buds, it serves fantastic food and has an impressive wine list.

The atmosphere is calming and conducive to conversation in contrast to some of the other eateries in the area where the noise forces you to shout at your dinner partner.

It is located on a quiet block, off of the busy DuPont Circle, and surrounded by Georgian houses and art galleries. There is no dress code and the feeling is relaxed on a Saturday night as most of the patrons are wearing casual attire.

However, on a business day at lunch, suits and ties are the norm and many of Washington's power brokers frequent the restaurant.

The organic certification means that 95% or more of

all ingredients used in the restaurant come from certified organic farmers, growers and suppliers. That also means that the menu changes frequently to make the best use of whatever is in season.

The walls of the 19th century building are adorned with museum quality antique Mennonite and Amish crib quilts and some of what appears to be original stone shows over the bar. The lighting is low and intimate, but appropriately businesslike.

Nora Pouillon, the executive chef, lists her recommended meals on the menu and they are worth trying because of the eclectic mix of vegetables, legumes and meats that you would probably not find often mixed elsewhere.

All in all, Restaurant Nora is a very pleasant place to have a meal, but will put a fair dent in your expense account.

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